2026 BENEFITS GUIDE

Northwestern | HUMAN RESOURCES

IT'S ALL ABOUT

YourBenefits2026

What's Inside

Throughout this guide, key terms appear in initial caps; definitions of these terms can be found in the glossary on pages 37–39.

The Basics

Eligibility

For details regarding eligibility guidelines for the benefit plans described in this guide, visit hr.northwestern.edu/benefits/eligibility-changes/eligibility.

FACULTY AND STAFF

For Your Health, Protection, and Well-Being

You are eligible to participate in most of the Northwestern University benefit plans in these categories if you are a

- faculty member appointed to work at least part-time (half-time or more) for the entire academic year or full-time for half the academic year.
- regular staff member scheduled to work at least 18.75 hours per week (half-time or more) for at least 12 months or 37.5 hours per week (full-time) for at least 6 months.

You are eligible to participate in University-sponsored tuition benefits if you are a full-time faculty or staff member; a service-based eligibility guideline also applies to these benefits. Tuition benefits are not available to part-time faculty and staff.

For Your Future

You are eligible to participate in the Northwestern University Retirement Plan if you are a faculty or staff member (as defined by the plan) and

- you are 21 years of age or older,
- you are scheduled to work at least 18.75 hours per week, and
- you have completed either one year of continuous service or one year of eligibility service, as defined by the Northwestern Voluntary Savings Plan and Retirement Plan Summary Plan description, as of the first anniversary of your employment start date or any subsequent anniversary of that date. **Note:** Under certain circumstances, prior employment with a tax-exempt educational or research organization or a state educational organization that ended no more than 60 days prior to your Northwestern employment date may be used to satisfy this service requirement.
- For more information, visit hr.northwestern.edu/benefits/retirement/plan.

In general, you are eligible to participate in the Voluntary Savings Plan on your first day if you are an employed faculty or staff member paid by Northwestern. However, if you are a third-party contractor or nonresident alien of the US, you may not be eligible to participate.

DEPENDENTS

You may include your benefits-eligible dependents on your medical, dental, vision, and legal services coverage, as well as on spouse and dependent life insurance. Your benefits-eligible dependents may also take advantage of certain tuition benefits. In addition, family members can access programs and services offered through Well-Being (page 32). **Throughout this guide, references to spouses may include civil union partners.**

For more information, see *Dependent Medical Coverage: Proof of Eligibility Required* on page 5.

Medical, Dental, and Vision Coverage Tiers

If you choose to participate in a medical, dental, or vision plan, you also must choose a coverage tier.

- **You Only:** coverage for yourself only
- **You + Spouse:** coverage for you and your spouse or civil union partner
- **You + Child(ren):** coverage for you and one or more children
- **You + Spouse + Child(ren):** coverage for you, your legal spouse or civil union partner, and one or more children

Remember: You can include one or more adult children under your medical, dental, vision, and legal services coverage until they turn 26, regardless of their educational, marital, tax, or work status.

Effective Date of Coverage: Health and Welfare Plans

If you

- are a **current employee** and you enroll for coverage during the annual Open Enrollment period, any new coverage options you choose will take effect on January 1, 2026.
- are a **new hire or rehire** or **newly eligible** and you enroll for coverage within 31 days of your start date, any coverage options you choose will begin on the first day of the month after your hire date (or on your date of hire if your date of hire is the first of the month), unless otherwise noted in this guide.
- request a change in coverage within 31 days of a **qualifying life event**, coverage will be effective on the date of the life event unless otherwise noted in this guide. Visit hr.northwestern.edu/benefits/eligibility-changes/benefit-changes for more information.

Premium Costs

Your cost for any coverage options you select will be deducted from your pay using pretax contributions or after-tax contributions, depending on the coverage for which the premium is being deducted. **The premium costs for 2026 are included in this guide; see the appropriate section for each benefit.** Benefits deductions related to your civil union partner or their dependent children will be after tax, and any University contributions will be added imputed income.

Within the Northwestern University benefits program, some benefits provide automatic coverage for which Northwestern pays the full cost, while others provide coverage options for which you and Northwestern share the cost (or for which you pay the full cost). Your costs will be based on the coverage options you choose.

Dependent Medical Coverage: Proof of Eligibility Required

If you include dependents on your University-sponsored medical coverage, you must submit proof of eligibility (see Acceptable Documentation below) and a Social Security number, if applicable, for each dependent.

Benefits-Eligible Dependent	Acceptable Documentation
Spouse: the person to whom you are legally married as certified by state or foreign government	• Government-issued marriage certificate or • J-2 or H-4 visa (foreign nationals only)
Partner: the person to whom you are legally joined in a civil union • Any reference in this guide to a "spouse" may also refer to a civil union partner. • Benefits provided to a civil union partner may be subject to income tax.	• Government-issued civil union certificate or • J-2 or H-4 visa (foreign nationals only)
Children: your children under age 26, regardless of educational, marital, tax, or work status; or under age 24 for tuition benefits • Biological child(ren) • Other qualified child(ren), including foster children, stepchildren, legally adopted children or grandchildren, and any child for whom you are the legal guardian, as defined by a court order	• Child's government-issued birth certificate • See requirements at hr.northwestern.edu/benefits/eligibility-changes/eligibility/verify-dependents.html

For Your Health

Medical

You can choose a medical plan based on the coverage you and your family need.

Northwestern offers four medical plans that UnitedHealthcare administers.

- **PPO:** You pay a copay for certain medical services (for example, office visits with your primary physician or a specialist). Once you meet the annual deductible, this plan provides benefits for most other covered medical services based on coinsurance. If you choose this plan, you can receive services from any provider you choose, but you will pay less out of pocket and receive more plan benefits for services received from an in-network provider.
- **HSA Plus** or **HSA Essential:** Once you meet the annual deductible, these plans provide benefits for covered medical services based on coinsurance. Refer to the chart on the next page for plan differences. If you choose one of these plans, you can receive services from any provider you choose, but you will pay less out of pocket and receive more plan benefits for services received from an in-network provider. Because both plans qualify as high-deductible health plans, you can contribute money to a health savings account (HSA) that you can use tax-free to pay for eligible health care expenses.
- **HMO:** Once you pay any applicable copay, this plan pays the full cost of covered services you receive from a provider who is a member of the HMO network; this plan will not pay any benefits toward the cost of services from an out-of-network provider except for emergency medical care.

The four medical plans differ in

- **how you and each plan share the cost of covered health care services.** Potential out-of-pocket expenses (the amounts you may pay in deductibles, coinsurance, and copays) vary by plan, and, if you choose a PPO or HSA plan, whether you receive in-network or out-of-network services.
- **how much you pay in monthly premiums.** Premiums vary by plan based on coverage tier and salary tier (see *2026 Monthly Premiums for Medical Plans*: Medical on page 8.

When enrolling in a medical plan, you should assess your needs and those of your family. You can use the Upwise decision support tool on the benefits website at hr.northwestern.edu/benefits/eligibility-changes/benefit-changes. After you complete a brief survey, Upwise provides a tailored recommendation for the benefits provided by Northwestern.

Whichever plan you choose, you can enroll in coverage just for yourself or include one or more eligible family members under your coverage (see *Medical, Dental, and Vision Coverage Tiers* on page 4). You and Northwestern share the cost of the medical coverage you choose. You pay your share through a pretax contribution, which will be automatically deducted from your paycheck. Benefit contributions related to civil union partners or their dependent children will be after tax, and any University contributions will be added imputed income.

All four Northwestern-sponsored medical plans pay 100 percent of the costs of preventive care, which will help you and your family maintain good health and treat disease and injury.

2026 Medical Plans				
Plan Feature	**PPO[1, 2]**	**HSA Plus[2, 3]**	**HSA Essential[2,3]**	**HMO[1]**
In-Network/Northwestern Medicine Providers				
Deductible (Individual/Family)	$750/$1,500	$2,000/$4,000	$4,000/$8,000	N/A
Coinsurance	20%	20%	20%	
Out-of-Pocket Maximum (Individual/Family)	$3,000/$6,000	$4,000/$8,000	$7,000/$14,000	$1,500/$3,000
Office Visit	$40 primary care physician/$55 specialist	20% coinsurance after deductible	20% coinsurance after deductible	$25 primary care physician/ $35 specialist
Emergency Room	$150 (waived if admitted) + 20% coinsurance after deductible	20% coinsurance after deductible	20% coinsurance after deductible	$150 (waived if admitted)
Out-of-Network Providers				
Deductible (Individual/Family)	$1,500/$3,000	$4,000/$8,000	$8,000/$16,000	N/A
Coinsurance	40%	40%	40%	
Out-of-Pocket Maximum (Individual/Family)	$6,000/$12,000	$8,000/$16,000	$14.000/$28,000	
Office Visit	40% coinsurance after deductible	40% coinsurance after deductible	40% coinsurance after deductible	
Emergency Room	$150 (waived if admitted) + 20% coinsurance after deductible	20% coinsurance after deductible	20% coinsurance after deductible	$150 (waived if admitted)

1 *Copays apply toward out-of-pocket maximums.*

2 *The in- and out-of-network deductibles and in- and out-of-network out-of-pocket maximums are tracked separately.*

3 *Each family member has an individual deductible within the overall family deductible. Once a member meets theirs, coinsurance begins for that person even if the full family deductible isn't met. The remaining family deductible must be met by any combination of other members before their coinsurance begins.*

4 *For You + Spouse, You + Child(ren), or You + Spouse + Child(ren) coverage the Family deductible must be met before coinsurance coverage begins for any individual member.*

5 *Each family member has an individual out-of-pocket maximum (OOPM) within the overall family OOPM. Once a member meets theirs, the plan pays 100% for that person even if the full family OOPM isn't met. The remaining family OOPM must be met by any combination of other members.*

2026 Monthly Premiums for Medical Plans								
	PPO		HSA Plus		HSA Essential		HMO	
Coverage/Salary Tier	Full-Time	Part-Time	Full-Time	Part-Time	Full-Time	Part-Time	Full-Time	Part-Time
You Only								
$42,000 and under	$63	$369	$37	$316	$27	$281	$47	$299
$42,001–$75,000	$116	$400	$81	$346	$52	$295	$105	$338
$75,001–$128,000	$197	$458	$148	$391	$117	$340	$170	$381
$128,001–$182,000	$278	$510	$222	$441	$182	$382	$248	$433
$182,001 and over	$434	$616	$345	$521	$292	$457	$393	$531
You + Spouse								
$42,000 and under	$138	$805	$83	$693	$59	$612	$102	$652
$42,001–$75,000	$254	$880	$180	$757	$115	$647	$228	$736
$75,001–$128,000	$431	$1,000	$325	$855	$257	$741	$369	$830
$128,001–$182,000	$607	$1,117	$490	$962	$404	$844	$540	$944
$182,001 and over	$950	$1,347	$762	$1,145	$645	$1,003	$852	$1,154
You + Child(ren)								
$42,000 and under	$117	$686	$71	$589	$51	$518	$88	$563
$42,001–$75,000	$216	$751	$152	$641	$97	$550	$197	$635
$75,001–$128,000	$366	$850	$272	$721	$215	$630	$319	$717
$128,001–$182,000	$516	$952	$411	$815	$338	$711	$466	$815
$182,001 and over	$807	$1,144	$639	$967	$540	$846	$736	$996
You + Spouse + Child(ren)								
$42,000 and under	$208	$1,210	$123	$1,038	$88	$917	$156	$986
$42,001–$75,000	$382	$1,326	$270	$1,137	$172	$973	$346	$1,112
$75,001–$128,000	$647	$1,503	$488	$1,282	$387	$1,117	$562	$1,256
$128,001-$182,000	$913	$1,681	$735	$1,447	$606	$1,263	$821	$1,431
$182,001 and over	$1,428	$2,024	$1,143	$1,719	$967	$1,505	$1,295	$1,748

If you're a new hire, your salary tier is determined by your initial, regular salary.

If you're a current employee, your salary tier is determined by your salary on September 1 of the year preceding the plan year (e.g., premiums starting January 1, 2026, are based on your September 1, 2025, salary).

- Midyear changes to your salary will not change your assigned salary tier unless you transition from full-time to part-time or part-time to full-time.
- When your September 1 salary crosses a salary tier due to a salary increase not associated with a change to full- or part-time status, you will pay the lower premium tier for the following year.

If you are covered by a collective bargaining agreement, consult your contract for additional employee contribution information.

Introducing Virtual Visits

UnitedHealthcare offers members options for the following:

- **Visit with a provider 24/7—whenever, wherever.** You can connect to a provider by phone or video through myuhc.com or the UnitedHealthcare app. Providers can treat a wide range of health conditions, including those seen in an emergency room or urgent care. As a UHC member, you have access to virtual specialists who may help you create a personalized care plan.
- **You can download the UnitedHealthcare app** to find the right virtual care for you.

TOBACCO SURCHARGE

Tobacco Surcharge Program for Medical Plan Participants

During initial enrollment in a Northwestern medical plan, all covered employees must certify whether they or their covered family members (including spouse or civil union partner or dependents) used tobacco products in the past six months. If you are enrolled in a Northwestern medical plan, you will be assessed a tobacco surcharge of $50 per month if you certify that you or a covered family member used tobacco products or if you do not complete the certification during enrollment. If you do not act to remove the tobacco surcharge indicator during enrollment, the $50 monthly surcharge will be applied as a after-tax deduction on your paychecks. For more information on the surcharge and waiver options, see the FAQs at hr.northwestern.edu/benefits/health-insurance/health-insurance-plans/tobacco-surcharge-program/tobacco-surcharge-program-faqs.html.

Alternative Ways to Avoid the Tobacco Surcharge

All employees, spouses or civil union partners, and family members may be able to avoid the tobacco surcharge, even those who currently use tobacco products. To learn more about UHC's tobacco cessation program and how to earn the full reward (i.e., avoid the tobacco surcharge for the full plan year), see the flyer at hr.northwestern.edu/documents/benefits/uhc_tobacco_cessation.pdf or call UHC at the 800 number on the back of your ID card.

HEALTH SAVINGS ACCOUNT (HSA PLUS AND HSA ESSENTIAL PARTICIPANTS ONLY)

If you choose coverage under the HSA Plus or HSA Essential medical plan,

- you can open a health savings account and make pretax contributions to this account.
- you can use the pretax contributions in your HSA to pay for qualified health care expenses for yourself, your spouse, or your dependents, including deductibles, copays, coinsurance, and eligible services not covered by your plan. You cannot use HSA money for civil union partners or their dependents if they are not also your tax dependents.

Any unused balance in your HSA at the end of the year will roll over to the next year. If you retire or leave Northwestern, you can take your HSA with you.

If you are enrolled in Medicare Part A or Part B, you are ineligible to contribute to an HSA.

Important! Under IRS rules, if you open an HSA, you cannot participate in a traditional Health Care Flexible Spending Account. However, you can participate in a limited-use Health Care FSA (see page 21 for details).

You can begin, modify, or stop HSA contributions at any time during the year through the myHR portal.

Contributing to an HSA

1. Your own contribution. You can make your own pretax contribution of up to

- **$3,400** if you elect You Only coverage
- **$6,750** if you elect You + Spouse, You + Child(ren), or You + Spouse + Child(ren) coverage

2. Northwestern's matching contribution. Northwestern will match your pretax contribution to your HSA up to

- **$1,000** if you elect You Only coverage
- **$2,000** if you elect You + Spouse, You + Child(ren), or You + Spouse + Child(ren) coverage

If you and Northwestern contribute the maximum allowed, the total contributions to your HSA for the year will equal the annual maximum contribution allowed under federal regulations.

3. Catch-up contribution. If you are 55 or older, you can make an annual catch-up contribution of $1,000 to your HSA each year. This contribution—over and above the maximum annual contribution—can help you accumulate more in your HSA sooner. Northwestern does not match any catch-up contributions.

HSA Plus or HSA Essential Medical Plan Coverage	Your Own Contribution	Northwestern Matching Contribution	Annual Maximum Contribution	Annual Catch-Up Contribution[4]
You Only	Up to $3,400	+ Up to $1,000	= $4,400	+ Up to $1,000
You + Spouse, You + Child(ren), or You + Spouse + Child(ren)	Up to $6,750	+ Up to $2,000	= $8,750	+ Up to $1,000

[4] *You can make catch-up contributions only if you are aged 55 or older—or will reach age 55—in 2026. Once eligible, you may continue to make catch-up contributions until the year in which you reach age 65 or become eligible for Medicare.*

Any money added to your HSA—including Northwestern matching contributions—is your money to keep.

When You Enroll in a Health Savings Account for the First Time

You must activate your HSA upon notification from Inspira. Simply go to mybenefits.inspirafinancial.com, click on "Create Profile," and follow the prompts.

During the initial setup of an HSA, the bank must fulfill certain obligations to establish and maintain a customer identification program for each HSA participant. These obligations are based on federal laws, including the USA Patriot Act, the Bank Secrecy Act, the Money Laundering Control Act, and other anti–money laundering laws, as they may apply.

As part of this process, you may receive a request from the partner bank to submit additional information, which may include a copy of your driver's license or passport or a recent utility bill. You must provide the requested information; if you don't, the bank will not be able to set up your account (and you will not be able to receive any contribution from Northwestern).

Enrolling in Medicare?

If you will be turn 65 in 2027 and will enroll in Medicare, you can choose coverage under the HSA Plus or HSA Essential medical plan, but you will not be eligible to make pretax contributions to an HSA or receive Northwestern matching contributions to an HSA after December 31, 2026. However, you may continue to use any balance you have in an HSA to pay for qualified health care expenses in 2027 and beyond (and this money will remain tax-free).

Qualified Health Care Expenses

You can use pretax money from your HSA only to pay for qualified health care expenses only. Qualified health care expenses—as defined by the IRS—include the following:

- Deductible, coinsurance, and copay amounts you pay under your medical coverage
- Prescription drugs, including over-the-counter drugs for which you have a prescription
- Acupuncture and chiropractic services
- Dental care, including orthodontia
- Vision care, including contact lenses, prescription sunglasses, and LASIK surgery
- Hearing aids, including batteries
- Premiums for eligible long-term care
- Medicare premiums and out-of-pocket expenses, including deductibles, copays, and coinsurance

You can use your HSA to pay for qualified health care expenses incurred on or after the date you open your account. You can also use it to pay qualified health care expenses incurred by your spouse and children as long as they are covered by a qualifying high-deductible health plan, even if they are not enrolled as dependents in your HSA Plus or HSA Essential medical plan.

For more information about qualified health care expenses, visit the IRS website at irs.gov.

Using Your HSA

If you participate in an HSA, you'll receive an Inspira debit card. It's all you'll need to use pretax dollars from your HSA to pay for qualified health care expenses. If you already have an unexpired Inspira debit card from prior years, you will not receive a new one until your current card expires.

Using the Inspira website—mybenefits.inspirafinancial.com—you can

- access your account information, view transactions, and check the status of claims.
- see a complete listing of qualified health care expenses.
- obtain account-related forms.

You can also use the Inspira mobile app to access account information.

Important! Be sure to save itemized receipts of all your HSA transactions, even if you use your Inspira debit card, in case you need to provide documentation supporting your use of the account for qualified health care expenses.

Over time, the balance in your HSA can grow through the contributions that you and Northwestern make to your account, rollovers of your unused account balance from year to year, and investment earnings.

Investing Your HSA Funds for Growth

Once the balance in your HSA exceeds $1,000, you can start investing the excess in one or more mutual funds managed by Bank of New York Mellon.

To learn more about available HSA investment options, visit the Inspira website at mybenefits.inspirafinancial.com.

PRESCRIPTION DRUG BENEFITS

All four Northwestern-sponsored medical plans provide benefits toward the cost of prescription drugs. CVS Caremark is the pharmacy benefit manager for all four plans. To learn more about the prescription drug plans, visit hr.northwestern.edu/benefits/health-insurance/health-plans/prescription-drug-benefits.

If you select coverage under the PPO or HMO medical plans, the amount you pay toward the cost of your prescription drugs is a specific copay. The out-of-pocket cost for prescription drugs each year is subject to an annual $1,500 maximum tracked separately for each person covered by the plan. If a person's copays reach $1,500 in a calendar year, further prescription drug copays will no longer apply to prescriptions filled during the plan year.

If you select coverage under the HSA Plus or HSA Essential medical plans, you pay the full cost of prescription drugs for you and your covered family members until you meet the plan's annual deductible, which is a combined limit for both medical and prescription costs. Once you do, you pay coinsurance toward the cost of each prescription until your share of covered expenses for the year reaches the plan's out-of-pocket maximum, also combined for both medical and prescription costs. Once you do, the plan pays the full cost of prescription drugs for you and your family for the rest of the year.

Prescription drug costs that exceed the approved dispensing limit in any given month—or that are for medications not covered by the plan—will not count toward your annual out-of-pocket expenses.

2026 Prescription Drug Benefits

Prescription Drug Plans				
Plan Feature	**PPO[1]**	**HSA Plus[2]**	**HSA Essential[2]**	**HMO[1]**
Out-of-Pocket Maximum (Individual/Family)	$1,500/ $3,000	$4,000/ $8,000	$7,000/ $14,000	$1,500/ $10,200
Prescription Drugs (Retail/Mail Order)	Copay:	Coinsurance after deductible:	Coinsurance after deductible:	Copay:
• Generic	$10/$20	20%	20%	$10/$20
• Formulary	$50/$100	20%	20%	$30/$60
• Nonformulary	$75/$150	20%	20%	$60/$120
• Specialty	$100/$200	20%	20%	$90/$180

[1] *Out-of-pocket maximums for medical and prescription costs are tracked separately. Prescription costs copays apply toward out-of-pocket maximums.*

[2] *Out-of-pocket maximums for medical and prescription costs are combined.*

Northwestern-sponsored medical plans automatically include prescription drug coverage with CVS Caremark. You do not need to take separate action to enroll in drug coverage.

Required 90-Day Supply

Prescriptions for certain long-term medications must be filled through a 90-day supply. This program—CVS Retail 90 Network—makes it convenient to order 90-day refills either through home delivery from CVS Mail Order or in person from any CVS, Walgreens, or Duane Reade pharmacy. For a list of medications that can be filled through the CVS Retail 90 Network program, visit hr.northwestern.edu/benefits/health-insurance/health-insurance-plans/prescription-drug-benefits. If you fill these prescriptions through 30-day supplies at a nonparticipating pharmacy, you could pay more for your medications than you need to.

If You Are Prescribed a Specialty Drug

Prescriptions for all specialty drugs must be filled through CVS Specialty; these prescriptions cannot be filled at a retail pharmacy. CVS Specialty fills prescriptions for specialty drugs for oral, injectable, and infused medications and provides nurse and pharmacist support for patients on these complex, expensive drugs. Once you enroll in CVS Specialty, you can have your medication delivered anywhere nationwide, even if you're on vacation. Or you can pick it up at any CVS pharmacy. Because many specialty drugs require refrigeration, CVS Specialty takes precautions to ensure product preservation, including using temperature-controlled packaging and working with patients to arrange for safe and secure package delivery.

To fill or transfer your prescription with CVS Specialty, call 800-237-2767.

PrudentRx

If you elect coverage under the PPO or HMO medical plan, CVS's PrudentRx program can help you save money on certain specialty drugs prescribed by your provider. If you elect coverage under the HSA Plus or HSA Essential medical plan, you are not eligible to use the PrudentRx program.

If you are eligible and a specialty medication you've been prescribed is included on the PrudentRx Drug list, you can receive your medications at no cost when you fill your prescription through the PrudentRx program. Otherwise, you will be responsible for 30 percent of the cost of your specialty medications, which will count toward your deductible and out-of-pocket maximums. For a list of medications that require PrudentRx, visit hr.northwestern.edu/benefits/health-insurance/health-insurance-plans/prescription-drug-benefits.

If you have any questions about the PrudentRx program and how to enroll, call 800-578-4403.

Cost Saver

Cost Saver helps you get lower costs, when available, on your prescription medications. Just present your CVS Caremark member ID card when you pick up your prescriptions at a CVS pharmacy. The price comparison will occur automatically across multiple drug discount programs, including GoodRx, and you will pay the lowest price.

Is a Generic Alternative Available?

If a brand-name drug is dispensed rather than an available chemically equivalent generic drug, an ancillary charge is applied in addition to the member's coinsurance. Ancillary charges are the responsibility of the covered person, regardless of whether the "dispense as written" box is checked by your doctor. The ancillary charge is 50 percent of the difference in cost between the brand-name and generic product. Ancillary charges do not apply toward the maximum cost per prescription or the out-of-pocket maximum. It is important to remember that this program still allows you the choice between treatment options, but not at an increased cost to the plan and its participants.

Dental

Free checkups help maintain good oral health.

You can choose coverage under one of two dental plans.

- **Delta Dental of Illinois PPO:** You and your covered family members can go to any dentist, but you will generally receive higher benefits (and pay less out of pocket) for services you receive from a dentist who is a member of the Delta Dental PPO network. The plan pays the full cost of preventive services when using an in-network dental provider.
- **Guardian Dental HMO:** You and your covered family members must choose a primary dentist who is a member of the Guardian Dental HMO network. The plan pays the full cost of preventive services. For all other services, the plan pays 100 percent of the cost after a specified copay.

Whichever plan you choose, you can choose coverage just for yourself or include one or more eligible family members (see *Medical, Dental, and Vision Coverage Tiers* on page 4).

You and Northwestern share the cost of the dental coverage you choose. You pay your share through pretax contributions, which will be automatically deducted from your paycheck. Benefit deductions related to your civil union partners or their dependent children will be after tax, and any University contributions will be added as imputed income.

Both plans pay 100 percent of the cost of preventive dental health care and will help you and your family maintain good dental health and treat gum disease and injury.

2026 Dental Plans

Plan Feature	Delta Dental PPO	Guardian Dental HMO
Annual Deductibles (Individual/Family)	$50/$150	N/A
Deductible and Preventive Services (Oral exams, x-rays, cleanings, fluoride treatments)	Plan pays 100%, no deductible	Plan pays 100%
Miscellaneous Services (Sealants, space maintainers, pulp vitality tests, palliative treatments to relieve dental pain)	Plan pays 80% of the cost after annual deductible	Plan pays 100% of the cost after specified copay
Restorative Services, Endodontic Services, Periodontal Services, Oral Surgery	Plan pays 80% of the cost after deductible	Plan pays 100% of the cost after specified copay
Crowns, Inlays, Onlays	Plan pays 50% of the cost after deductible	Plan pays 100% of the cost after specified copay
Implants	Plan pays 50% of the cost after deductible	N/A
Orthodontic Services	For dependent children under age 26, up to $3,000 lifetime maximum	For children and adults, plan pays 100% of cost after specified copay
Annual Benefit Maximum (per person)	$3,000	N/A

2026 Monthly Premiums for Dental Plans

	Delta Dental PPO		Guardian Dental HMO	
Coverage Tier	Full-Time	Part-Time	Full-Time	Part-Time
You Only	$23	$32	$6	$9
You + Spouse	$49	$70	$12	$17
You + Child(ren)	$55	$78	$13	$18
You + Spouse + Child(ren)	$78	$110	$19	$27

Are Your Medical and Dental Providers In-Network?

You can check the network status of your medical and dental providers in a few ways.

PPO, HSA Plus, or HSA Essential coverage

- Contact your providers and ask if they are in the UHC Choice Plus network.
- Access UHC's PPO Provider Finder at hr.northwestern.edu/documents/benefits/uhc-ppo-provider-finder.pdf.

HMO coverage

- Contact your provider and ask if they are an in-network provider in the UHC Navigate HMO network.
- Access UHC's HMO Provider Finder at hr.northwestern.edu/documents/benefits/uhc-hmo-provider-finder.pdf.

Delta Dental PPO

- Contact your dentist's office and ask if they are in-network for the Delta PPO network.
- Use Delta's Online Provider Finder at hr.northwestern.edu/documents/benefits/delta-ppo-provider-finder.pdf.
- Call Delta at 800-323-1743 and ask if your dental provider(s) are in-network for the Delta PPO network.

Guardian Dental HMO

- Contact your dentist's office and ask if they are in-network for the Guardian Dental HMO network.
- Call Guardian at 866-494-4542 and ask if your dental provider is in-network for the Guardian Dental HMO network.

Vision

Don't underestimate the value of regular eye exams.

If you choose coverage under the BCBSIL/EyeMed vision care plan, the plan's open access means you can see any eye care provider you choose. However, when you see a provider who is a member of the BCBSIL/EyeMed network, you will generally receive higher benefits (and pay less out of pocket) for covered eye care services.

BCBSIL/EyeMed uses a national network that offers you access to more than 35,000 providers at retail chains or in private practice. To locate a BCBSIL/EyeMed network provider near you, go to eyemedvisioncare.com (choose Members, and under Find a Provider, select the Insight Network).

You can choose BCBSIL/EyeMed vision plan coverage just for yourself or include one or more eligible family members (see *Medical, Dental, and Vision Coverage Tiers* on page 4).

If you choose BCBSIL/EyeMed vision plan coverage, you pay the full cost of this coverage through pretax contributions, which will be automatically deducted from your paycheck. For civil union partners, benefits deductions related to your partner or their dependent children will be after tax.

After a $10 copay, the plan pays 100 percent of the cost of an annual eye exam performed by a BCBSIL/EyeMed network provider for each covered person.

Before visiting a vision care store or provider, use the BCBSIL/EyeMed Know Before You Go out-of-pocket cost estimator (see hr.northwestern.edu/documents/benefits/know_before_you_go.pdf) to learn what you might pay.

2026 Vision Plan At a Glance

Frequency	
Examination	Once every calendar year
Lenses or contact lenses	Once every calendar year
Frames	Once every calendar year

Vision Care Services	**In-Network Member Cost**	**Out-of-Network Reimbursement**
Exam with dilation as necessary	$10 copay	Up to $40
Retinal imaging	$39	N/A
Contact lens fit and two follow-up visits	$10 copay for standard; $10 copay, 10% off retail price, then $55 allowance for premium	Up to $40
Frames		
Any available frame at provider location	$10 copay	Up to $65
Standard Lenses		
Single vision	$10 copay	Up to $40
Bifocal	$10 copay	Up to $60
Trifocal	$10 copay	Up to $80
Lenticular	$10 copay	Up to $80
Standard progressive lens	$75 copay up to $60	Up to $60
Premium progressive lens	$95–$120 copay	Up to $60
Lens Options		
Tint (solid and gradient)	$15	N/A
Scratch-resistant coating	$0	Up to $5
Polycarbonate lenses	$0	Up to $5
Ultraviolet coating	$15	N/A
Antireflective coating	$45 for standard; $57–$68 for premium	N/A
High-index lenses	20% off retail	N/A
Polarized lenses	20% off retail	N/A
Photochromic or transitions plastic lenses	$75	N/A

2026 Vision Plan At a Glance

Contact Lenses (in lieu of spectacle lenses)	In-Network Member Cost	Out-of-Network Reimbursement
Conventional	$0 copay, $200 allowance, 15% off balance over $200	Up to $160
Disposable	$0 copay, $200 allowance, plus balance over $200	Up to $160
Medically necessary	$0 copay	Up to $210
Other		
Laser vision correction	15% off retail price or 5% off promotional price	N/A
Additional pairs benefit	40% off purchase of complete pair of eyeglasses and 15% off conventional contact lenses once the funded benefit has been used	N/A
Amplifon hearing discount	40% off hearing exams and low price guarantee on discounted hearing aids	N/A
Additional discounts	20% off noncovered items (with certain limitations)	N/A

Eligibility: All active full-time employees. Dependent coverage is available up to age 26.

2026 Monthly Premiums for Vision Plans	
Coverage Tier	**BCBSIL/EyeMed Vision Care**
You Only	$10
You + Spouse	$20
You + Child(ren)	$23
You + Spouse + Child(ren)	$28

Health Care Flexible Spending Account

Save money on eligible health care expenses.

You can save money when you use pretax dollars from a Health Care Flexible Spending Account to pay eligible health care expenses incurred by you, your spouse, or your dependent child(ren). Civil union partners and their dependent child(ren) are not eligible for reimbursement from an FSA. Note: You do not need to be enrolled in a Northwestern-sponsored medical plan to participate in a Health Care FSA.

If you choose medical coverage under a

- Non-high-deductible health plan, such as the **PPO** and **HMO** medical plans.
- High deductible health plan, such as the **HSA Plus** or **HSA Essential** medical plans.

Whether you participate in a traditional or limited-use Health Care FSA, you can contribute up to $3,400 a year to your account. The minimum annual contribution is $240.

If you choose to contribute to a Health Care FSA:

- Once your enrollment takes effect, you will not be able to change your pretax contributions to the account until the next Open Enrollment period unless you experience a qualifying life event.
- You can be reimbursed for eligible health care expenses—up to the full value of the pretax contributions you've agreed to make for the year—from the first day of the benefit year, even before all scheduled contributions for the year have been made.
- You can use the money you contribute to a Health Care FSA each year to pay eligible expenses incurred during the calendar year as well as eligible expenses incurred from January 1 through March 15 of the following year (the grace period).
- The deadline for submitting claims is March 31 of the year following the calendar year in which the contributions are made.
- You will lose any unused contributions if they are not used by March 31 of the following year.
- Funds in your Health Care FSA are not portable if you retire or leave Northwestern.

You must renew your election to make pretax contributions to a Health Care FSA each year during Open Enrollment. If you don't, your Health Care FSA pretax contribution amount for the next year will default to $0.

Traditional Versus Limited-Use Health Care FSA: What's the Difference?

According to IRS rules, if you open a Health Savings Account—which you can do only if you choose coverage under the **HSA Plus** or **HSA Essential** medical plan—you cannot contribute to a traditional Health Care FSA. However, you can contribute to a limited-use Health Care FSA. Here's how the traditional and limited-use Health Care FSAs differ.

Traditional Health Care FSA	Limited-Use Health Care FSA
For PPO or HMO medical plan participants	For HSA Plus or HSA Essential medical plan participants
• Use pretax contributions to pay eligible health care expenses incurred during your period of coverage within the plan year or grace period.	• Use pretax contributions to pay eligible dental and vision care expenses during your period of coverage within the plan year or grace period. • Use pretax contributions to pay ALL eligible health care expenses incurred AFTER your **HSA Plus** or **HSA Essential** annual deductible has been met.

Eligible Health Care Expenses

Eligible expenses for which you can be reimbursed using tax-free dollars from a Health Care FSA include out-of-pocket expenses—deductibles, coinsurance, and copays under your medical coverage—as well as services that may not be covered by your medical, dental, and vision plans. Some examples of eligible expenses include the following:

- Acupuncture
- Chiropractic care
- Dental and orthodontic work
- Flu shots
- Laser eye surgery
- Prescription drugs
- Over-the-counter medications and items for which your doctor provides a prescription
- Vision exams, eyeglasses, and contact lenses
- Weight loss programs

You may use your contributions to a Health Care FSA for eligible expenses incurred while enrolled during the plan year, as well as those incurred from January 1 through March 15 of the following year. The deadline for submitting claims for these eligible expenses is March 31 of the following year.

For a complete list of health care services for which you may claim eligible expenses, see IRS Publication 502, available at irs.gov.

Using Your Health Care FSA

If you participate in a traditional or limited-use Health Care FSA, you'll receive an Inspira debit card. It's all you'll need to use pretax dollars from your health care FSA to pay eligible health care expenses. If you already have an unexpired Inspira debit card from prior years, you will not receive a new one until your current card expires. However, you can pay eligible health care expenses out of your own pocket and file a claim using the Express Claims feature on the Inspira website at mybenefits.inspirafinancial.com. Once your claim is processed, you will be reimbursed from your Health Care FSA up to the amount you have elected to contribute to a Health Care FSA for the year.

You can also use the Inspira website to

- Access your account information, view transactions, and check the status of claims
- Set up direct deposit
- See a complete listing of eligible health care expenses
- Obtain account-related forms, including claim forms, direct deposit forms, letters of medical necessity, enrollment forms, and other IRS publications

Important! Be sure to keep itemized receipts of all your Health Care FSA transactions, even when you use your Inspira debit card, in case you need to provide documentation supporting your use of the account for eligible health care expenses.

Remember: You can use the Inspira mobile app to access account information.

For Your Protection

Extended Sick Time

Extended sick time provides continued income if you're unable to work due to illness or injury for up to six months.

If you experience an extended illness or injury and you are approved for EST benefits, you will receive 100 percent of your hourly rate or monthly salary for up to 25 weeks, following completion of an elimination period in which you are absent from work for seven consecutive calendar days or five consecutive business days.

You do not need to enroll to be eligible to receive EST benefits. Your coverage under this program will begin automatically once you complete six months of continuous benefits-eligible service with Northwestern.

MetLife manages the EST program. To receive EST benefits, you must be absent from work for five consecutive business days, then file an EST claim with MetLife and be approved.

Northwestern pays the full cost of your coverage under this program; there is no cost to you.

To learn more about EST and how it works—and for a copy of frequently asked questions about the program—visit hr.northwestern.edu/benefits/leaves-holidays/sick-time/extended-sick-time.

Long-Term Disability

Long-term disability provides continued income if you're unable to work due to illness or injury for more than six months.

Long-term disability provides a monthly benefit if, due to illness or injury, you are unable to perform

- your regular job during the first two years of your disability.
- any reasonable job after two years of disability.

To receive LTD benefits, you must be absent from work for six months of continuous disability, then file an LTD claim.

There are two parts to the LTD plan.

- **Core plan:** This plan provides a monthly LTD benefit equal to 50 percent of your last working University salary, up to a maximum benefit of $11,500 per month. You are automatically enrolled in core LTD coverage.
- **Buy-up plan:** This plan provides a monthly LTD benefit equal to 60 percent of your last working University salary, up to a maximum benefit of $13,800 per month. It also allows for a benefit up to 70 percent from all sources, including Social Security disability income, or SSDI. You can enroll in buy-up LTD coverage during any open enrollment, but you will be required to submit a personal health application if you choose to enroll in any enrollment period other than your first enrollment opportunity as a new hire.

If you are diagnosed with or receive care for a condition within 26 weeks prior to your effective date of LTD coverage, you will not be covered by the LTD plan until you have been covered under the plan for at least 12 months.

The maximum benefit period for which LTD benefits will be paid depends on your age at the time you become disabled and your Social Security normal retirement age.

Benefits typically cease at your Social Security normal retirement age, but they may continue based on your age at disability, according to the following table.

Age at Disability	Maximum LTD Benefit Period
62 or younger	To normal retirement age or 42 months, if greater
63	To normal retirement age or 36 months, if greater
64	30 months
65	24 months
66	21 months
67	18 months
68	15 months
69 or older	12 months

MetLife manages the LTD program.

Northwestern pays the full cost of your core LTD coverage. If you elect buy-up LTD coverage, you will pay the cost of that additional 10 percent. The amount you pay will be based on your age.

2026 Annual Premiums for LTD Buy-Up Plan	
Your Age	**Rate**
Younger than 30	$0.074
30–34	$0.098
35–39	$0.111
40–44	$0.131
45–49	$0.168
50–54	$0.219
55–59	$0.256
60–64	$0.276
65 or older	$0.258

Note: *To calculate your annual premium under the buy-up plan, divide your annual salary by 100, then multiply by the rate for your age bracket.*

Life Insurance

Life insurance gives you and your family financial protection.

Northwestern provides a combination of Basic Term Life insurance for you and the opportunity to purchase additional supplemental, spouse, and dependent-child term life insurance.

MetLife provides this coverage.

Northwestern pays the cost of your basic term life insurance. You pay the cost of any supplemental, spouse, and dependent child term life insurance you elect, based on group insurance rates.

BASIC TERM LIFE INSURANCE

As a benefits-eligible Northwestern faculty or staff member, you receive basic term life insurance automatically and at no cost to you. You have the choice between basic term life insurance coverage equal to

- $50,000 or
- 2.5 times your annual salary, up to a maximum of $250,000.

If you do not make a selection, you will default to the $50,000 coverage amount.

Note: Under IRS regulations, the value of employer-paid basic term life insurance above $50,000 is considered imputed (or taxable) income. If you don't want to incur this imputed income, you may elect the $50,000 basic term life insurance option.

SUPPLEMENTAL, SPOUSE, AND DEPENDENT CHILD TERM LIFE INSURANCE

You can increase your life insurance protection by electing the following types of optional coverage.

- **Supplemental Term Life Insurance** is additional life insurance coverage for yourself in increments of your annual Northwestern salary, up to a maximum of eight times your pay or $2,000,000, whichever is less. Evidence of insurability is not required for Supplemental Term Life Insurance coverage of up to three times your annual Northwestern salary (or $1,000,000, whichever is less) at the time of hire. For Supplemental Term Life Insurance over this amount (or if adding coverage during Open Enrollment), evidence of insurability (EOI) is required and coverage will be subject to approval by MetLife. During Open Enrollment, if you're already participating in the Supplemental Life Insurance Plan, you may increase your coverage to a maximum of three times your salary, not to exceed $1 million without EOI. Any increase over 1x your annual salary during Open Enrollment would requires EOI.
- **Spouse Term Life Insurance** is life insurance for your spouse in increments of $10,000, up to a maximum equal to the value of your total basic term life insurance plus Supplemental Term Life Insurance election or $500,000, whichever is less. Evidence of insurability is not required for Spouse Term Life Insurance coverage of up to $50,000 at the time of hire; for Spouse Term Life Insurance over this amount, evidence of insurability is required and coverage will be subject to approval by MetLife. During Open Enrollment, if you're already enrolled in the Spouse Term Life Insurance plan, you may increase coverage by $10,000, not to exceed $50,000, in coverage without EOI. Any increase during Open Enrollment over $10,000 or in excess of $50,000 requires EOI.
- **Dependent-Child Term Life Insurance** is life insurance for your unmarried child(ren) who are younger than 26 and financially dependent on you, in increments of $5,000 up to a maximum of $25,000 for each child. Evidence of insurability is not required.

Does This Coverage Provide Benefits in the Event of Accidental Injury or Death?

All four types of term life insurance—basic, supplemental, spouse, and child—include accidental death and dismemberment (AD&D) insurance. This AD&D coverage provides a benefit in an amount up to the applicable life insurance if, as a result of an accident, you or your covered spouse, civil union partner, or child loses sight, hearing, or a limb; becomes paralyzed; dies; or suffers certain other losses.

Based on the nature of the loss, AD&D coverage will pay a benefit equal to all or a specified percentage of the corresponding life insurance coverage amount.

For details regarding circumstances under which AD&D benefits will be paid—as well as additional details about AD&D coverage—visit hr.northwestern.edu/documents/benefits/health-and-welfare-benefits-summary-plan-description-handbook.pdf.

2026 Monthly Premiums for Supplemental, Spouse, and Dependent Child Term Life Insurance		
Supplemental Term Life Insurance and Spouse Term Life Insurance		
Per person per $1,000	**You**	**Spouse**
Age 29 and younger	$0.021	$0.021
Age 30–34	$0.026	$0.026
Age 35–39	$0.039	$0.040
Age 40–44	$0.048	$0.049
Age 45–49	$0.075	$0.077
Age 50–54	$0.114	$0.117
Age 55–59	$0.211	$0.217
Age 60–64	$0.280	$0.288
Age 65–69	$0.432	$0.445
Age 70 and older	$0.691	$0.712
Dependent Child Term Life Insurance		
Per child per $1,000	$0.128	

Do You Know Your Beneficiaries?

Your beneficiaries are the people who will receive your basic and supplemental term life insurance benefits if you die.

You can designate anyone—and as many people—as you want as beneficiaries for your basic and supplemental term life insurance. Note: You may not name Northwestern University as a beneficiary. You must specify the percentage of the benefit to be paid to each beneficiary (up to 100 percent for all allocations).

You are automatically the beneficiary for payment of any Spouse Term Life Insurance and Child Term Life Insurance coverage you elect.

Pet Insurance

Northwestern offers MetLife pet insurance to provide benefits toward the cost of unplanned veterinary services for covered accidents or illnesses.

Benefits of MetLife pet insurance include

- exclusive discounted pricing for Northwestern faculty and staff.
- flexible product offerings with group discounts, customizable limits, and deductible savings.
- easy enrollment and a record of most claims being processed within 10 days.
- an experienced team of pet advocates and multichannel support options.
- direct billing by MetLife of coverage premiums with no payroll deductions.

Note: Enrollment and premium payments will be handled between MetLife and you. Once you enroll, you can set up automatic premium payments from your bank account or with a credit card.

To get a premium quote for MetLife pet insurance or to enroll, visit quote.metlifepetinsurance.com or call 800-GET-MET8. Note: Enrolling in pet insurance is not part of the annual Open Enrollment process; to enroll in this coverage, you must contact MetLife directly.

LegalEASE Legal Plan Benefits

Northwestern offers a legal plan benefit through LegalEASE. LegalEASE takes a personalized approach, providing a concierge attorney matching system and a dedicated member service advocate to assist with individual or family legal matters. You may enroll through myHR within your first 31 days after becoming eligible for benefits, during Open Enrollment, or within 31 days of a qualifying life event.

With the LegalEASE legal plan, you and your eligible family members—including your spouse or civil union partner, dependent child(ren), and parents—will have access to covered legal services. These services are provided by experienced attorneys specializing in areas such as estate planning, family law, elder law, and more. When using one of the more than 22,000 in-network attorneys, there will be no deductibles, copays, or claim forms. Coverage for out-of-network attorneys is also available.

You can direct questions about this legal benefit to LegalEASE at 800-248-9000 or visit hr.northwestern.edu/benefits/discounts-transit/legal-services-benefit for more information.

For Your Well-Being

Tuition Benefits

Tuition benefits offer financial assistance for you, your spouse, and your dependent child(ren) younger than 24.

Tuition benefits at Northwestern are designed to support the ongoing efforts of full-time, benefits-eligible faculty and staff—and their eligible family members—to pursue higher education. You can apply for these benefits online through the myHR Self-Service portal at **northwestern.edu/myhr**.

For Classes Taken at Northwestern

- **Employee Reduced Tuition** refers to reduced tuition for undergraduate or graduate university courses taken at Northwestern.
    - Hired before January 1, 2026: Tuition discount is 90 percent for courses that earn credit hours; maximum annual discount is $12,000.
        - If you take noncredit courses billed through CAESAR at Northwestern (such as SPS certificate courses), benefits are subject to an annual limit of $5,250; the $12,000 annual benefit limit for Employee Reduced Tuition benefits includes the $5,250 limit for noncredit courses.
    - Hired on or after January 1, 2026: Tuition discount is 90 percent for all courses; maximum annual discount is $5,250.
- **Dependent Reduced Tuition** refers to reduced tuition for undergraduate university degrees pursued at Northwestern by employees' spouses and dependent children—50 percent for all undergraduate-level courses after a five-year service period; 90 percent if hired with continuous full-time, benefits-eligible service before January 1, 2000—up to a lifetime maximum of 12 quarters per child.

For Classes Taken Outside Northwestern

- **Employee Portable Tuition** refers to tuition assistance for undergraduate or graduate university degrees pursued by employees at schools other than Northwestern, which—for those hired before January 1, 2020—may be reimbursed up to a maximum $5,250 per year.
- **Dependent Portable Tuition** refers to tuition assistance for undergraduate university degrees pursued by employees' dependent children at US-accredited schools other than Northwestern. Employees can apply for this discount after five years of full-time benefits-eligible service prior to the start of the dependent's school's term. The 2025 rate for those hired before January 1, 2026 is 50 percent of tuition; the rate is 40 percent of tuition for those hired on or after January 1, 2026. For all employees, the lifetime maximum is eight semesters or 12 quarters per child.

For more information about tuition benefits and when to apply, visit hr.northwestern.edu/benefits/tuition. Note that some employees may be able to waive their waiting period for benefits. For information on additional professional development opportunities, visit hr.northwestern.edu/talent-development/development.

Dependent Care Flexible Spending Account

You can save money when you use pretax dollars from a Dependent Care Flexible Spending Account to pay eligible dependent care expenses. Your qualified dependents may include your children under age 13 or your spouse, parents, in-laws, siblings, or child(ren) age 13 and older who are incapable of self-care. Those covered must be declared as dependents on your tax return.

If you are single or married filing taxes jointly, you may contribute up to $7,500 per household annually to a Dependent Care FSA. The minimum annual contribution is $240.

If You Choose to Contribute to a Dependent Care FSA

- Once your enrollment takes effect, you will not be able to change your contribution to that account until the next Open Enrollment unless you experience a qualifying life event.
- You can be reimbursed for eligible dependent care expenses up to your current account balance **only**. Any expenses over your current account balance will be reimbursed as additional contributions are added to your account throughout the year.
- You can use the money you contribute to a Dependent Care FSA each year to pay eligible expenses incurred during the calendar year. Additionally, Northwestern offers a grace period until March 15 of the following year, which allows participants extra time to spend their designated funds for the previous year.
- The deadline for submitting claims is March 31 of the year following the calendar year in which you make the contributions. To submit a request for reimbursement, you must complete an Inspira claim form and submit it.
- Funds in your Dependent Care FSA are not portable if you retire or leave Northwestern.

Northwestern Reimbursement

If you open and contribute to a Dependent Care FSA, Northwestern will reimburse you, via your paycheck, an amount equal to a percentage of the first $5,000 of your contribution if

- you have full-time status (100 percent full-time appointment or scheduled to work at least 37.5 hours per week),
- your spouse is working or studying full-time,
- your combined adjusted gross household income is $130,000 or less, and
- you apply in a timely fashion and are approved for the reimbursement annually.

Combined Adjusted Gross Household Income	Reimbursement Percentage Maximum[9]
Up to $60,000	80% (up to $4,000)
$60,001–$75,000	60% (up to $3,000)
$75,001–$100,000	40% (up to $2,000)
$100,001–$130,000	20% (up to $1,000)

[9] *The maximum reimbursement amount is based on a Dependent Care FSA annual contribution of $5,000. The reimbursement amount is considered taxable income.*

If you are eligible for—and want to receive—a reimbursement, you must

- complete the online dependent care employer match application available in myHR (for instructions, see the user guide) and
- provide HR with a copy of the page from your most recent US income tax Form 1040 showing your tax-filing status and adjusted gross income (line 37).

If your application is received after January 1, Northwestern's reimbursement for the year will be prorated.

Important! Enrollment in a Dependent Care FSA and timely completion of the reimbursement application are required each year to receive these funds. The Dependent Reimbursement application is separate from enrollment. More information on how to apply can be found on the Dependent Care FSA website at hr.northwestern.edu/benefits/health-insurance/spending-and-saving-accounts/dependent-care-fsa.

You must renew your election to make pretax contributions to a Dependent Care FSA each year during Open Enrollment. If you don't, your Dependent Care FSA pretax contribution amount for the next year will default to $0.

Eligible Dependent Care Expenses

Eligible dependent care expenses must be for the care of an eligible dependent so the employee can work and, if married, their spouse can work or attend school full-time. Evening sporting classes as well as camps that are focused primarily on education, such as music, dance, voice, and cooking, are not eligible.

You can reimburse expenses using pretax dollars from a Dependent Care FSA for the following:

- Day camp and camp activities
- Day care for your child(ren)
- Day care for an elderly or disabled dependent
- Nanny salary and taxes
- Summer sports day camp (evening and overnight camps are NOT eligible expenses)

You should verify with Inspira or review IRS Publication 503, available at irs.gov, if you have questions about which expenses qualify for reimbursement. When filing a claim for reimbursement with Inspira, you will be required to provide a tax ID number if a person, rather than a facility, provides eligible care services.

Using Your Dependent Care FSA

If you participate in a Dependent Care FSA, you pay for eligible dependent care expenses out of your own pocket and file a claim using the Express Claims feature on the Inspira website at mybenefits.inspirafinancial.com. Once your claim is processed, you will be reimbursed for your claim from the available funds in your Dependent Care FSA.

You can also use the Inspira website to take the following actions:

- Verify eligible expenses
- Access your account information, view transactions, and check the status of claims
- Set up direct deposit
- See a complete listing of eligible dependent care expenses
- Obtain account-related forms, including claim forms, direct deposit forms, letters of medical necessity, enrollment forms, IRS Form 2441, and other IRS publications

Important! Be sure to keep itemized receipts of all your dependent care FSA transactions in case you need to provide documentation supporting your use of the account for eligible dependent care expenses.

For a complete list of dependent care services for which you may claim reimbursement, see IRS Publication 503, available at irs.gov.

Caregiving Resources

Northwestern offers a wide range of support to help you with your caregiving responsibilities. From childcare and eldercare assistance to community connections, the University is here to support you and your family.

Northwestern's caregiving programs include the following offerings:

- Day care center options
- Center-specific childcare fee assistance program
- TGS Graduate Student Childcare Grant
- Backup care program
- Portable Caregiving Grant
- Adoption assistance reimbursement
- Senior and adult care programs
- Dedicated on-campus lactation facilities

Visit hr.northwestern.edu/benefits/caregiving for more information.

Northwestern offers a broad range of caregiving information and resources.

Well-Being Resources

Northwestern provides a full range of resources and benefits to support our community's well-being and work-life integration. For more information, visit hr.northwestern.edu/benefits/well-being.

SupportLinc

SupportLinc is Northwestern's employee assistance program provider. The EAP offers expert content and a comprehensive set of tools to assist faculty and staff and their household members in every aspect of life, all in a no-cost, secure, confidential, and easy-to-use format. SupportLinc is available 24/7. To access it, call 888-881-5462 or visit supportlinc.com and use the code northwestern.

Services include the following:

- **In-the-moment support.** Reach a licensed clinician by phone at any time.
- **Up to 10 short-term counseling sessions.** Access no-cost, in-person or virtual video counseling sessions to resolve emotional concerns such as stress, anxiety, depression, burnout, or substance use.
- **Mental health navigator.** Complete a short assessment to instantly receive personalized guidance to care and support.
- **Addiction care navigator.** Use this stigma-free, anonymous, and confidential tool to assess substance use risk and immediately connect to care and support.
- **Mindstream.** Check out a wide range of topics, from self-care to stress management, allowing you to customize your experience.

SupportLinc is available to you and members of your household. Northwestern pays the full cost of your participation unless you need additional assistance. Your participation is completely confidential.

New Resources Through UnitedHealthcare

Calm Health App

The Calm Health app provides programs and tools to help support your mental health and well-being. As a UHC member, Calm Health is included in your health plan free of charge. The Calm Health app brings you a library of support—including mindfulness content and programs created by psychologists—for a variety of health experiences and life stages. For more information, visit hr.northwestern.edu/documents/benefits/uhc-calm.pdf.

One Pass Select

UHC's fitness membership program, One Pass Select, provides unlimited access to thousands of gyms, fitness studios, online workouts, and grocery delivery. Explore the membership tiers and select one that fits your lifestyle at hr.northwestern.edu/documents/benefits/uhc-onepass.pdf.

Commuter Benefits and PerkSpot Discount Program

Commuter Benefits

For your convenience, the University has partnered with Inspira to administer the Commuter Transit and Parking Program. (The campus parking programs administered by Northwestern Transportation and Parking are not included.)

The program allows you to have the cost of your commuting expenses deducted from your paycheck on a pretax basis.

Visit hr.northwestern.edu/benefits/discounts-transit/commuter-benefits for more information.

PerkSpot

Northwestern has partnered with PerkSpot to offer faculty and staff and their family members discounts from more than 900 merchants nationwide.

When you register with PerkSpot, you can access exclusive offers on a wide range of goods and services, including the following:

- Car purchase discounts
- Cell phone discounts
- Chicago sports tickets
- Computer discounts
- Fitness discounts
- Gifts
- Movie tickets
- Real estate and moving discounts

Visit hr.northwestern.edu/benefits/discounts-transit/perkspot-discounts for more information.

For Your Future

Retirement Benefits

It's never too soon to start saving for retirement.

Northwestern can help you build financial resources for a more secure and comfortable future through the Retirement Plan and the Voluntary Savings Plan.

100 Percent Vesting Right from the Start

"Vesting" refers to your ownership rights in the value of your accounts in the retirement plan and voluntary savings plan. Under these plans, you are 100 percent vested; you own the full value of all contributions to these plans.

Fidelity Is Plan Administrator

Northwestern has partnered with Fidelity to provide enhanced services for the retirement plans offered to faculty and staff. All contribution elections, even if you contribute to TIAA, are made through Fidelity. Enrollments and election changes can be made at any time during the year via myHR through the NetBenefits portal administered by Fidelity.

Two Ways to Contribute

Eligible participants can contribute to the Retirement Plan and the Voluntary Savings Plan in two ways.

- **Pretax contributions:** Contributions are made with pretax funds but you'll pay taxes when you take these contributions and their investment earnings out of the plans.
- **Roth after-tax contributions:** Contributions are made with after-tax funds but you'll pay no taxes when you take these contributions and their investment earnings out of the plans.

Details about these savings options are provided at hr.northwestern.edu/documents/benefits/roth_intro.pdf.

RETIREMENT PLAN

Benefits-eligible faculty and staff who are scheduled to work half-time (18.75 hours) or more per week and are at least age 21 may participate in the retirement plan after either one year of continuous service or one year of eligibility service, as defined by the Northwestern Voluntary Savings Plan and Retirement Plan Summary Plan Description.

Once eligible, your participation in the retirement plan will begin as soon as possible, which is typically within one to two pay periods.

Through your participation, your retirement plan savings can grow in three ways.

- **Northwestern's automatic retirement contributions.** Once you're eligible, Northwestern will automatically contribute to your account each pay period. These contributions currently equal 5 percent of your eligible earnings.
- **Employee contributions.** You contribute through payroll deductions. These contributions can equal any whole percentage from 1 to 5 percent of your eligible earnings.
- **Northwestern's matched retirement contributions.** Once you're eligible, Northwestern will match your employee contributions dollar for dollar up to 5 percent of your eligible earnings, subject to the contribution limits specified by the IRS.

VOLUNTARY SAVINGS PLAN

All actively employed faculty and staff (excluding third-party contractors and consultants) paid by Northwestern are eligible to participate in this plan starting on their first day, regardless of age.

As a participant, you can make employee supplemental retirement contributions to this plan even before you are eligible to participate in the retirement plan. Contributions are made through automatic payroll deductions in whole percentages or dollar amounts of your eligible earnings, subject to the contribution limits specified by the IRS.

Northwestern does not make any contributions to your voluntary savings plan account.

Retiree Benefits and Privileges

As a Northwestern retiree, you will have several benefits and privileges available to you.

You may enroll in one of the following medical plans at retiree rates:

- Pre-65 medical, dental, and vision
- Post-65 UnitedHealthcare Medicare Advantage Plan

Northwestern partners with Via Benefits, an organization that provides retirees with personalized health insurance advice and enrollment assistance.

For details, go to hr.northwestern.edu/benefits/retirement/prepare/benefits/health-plans.html.

For more information about retiree benefits, visit hr.northwestern.edu/benefits/retirement/prepare.

Northwestern extends a number of privileges to retirees, including

- eligibility for a Northwestern retiree Wildcard
- parking permits
- access to University libraries and computing resources
- Northwestern University Employees Credit Union membership
- travel services
- University recreation facilities
- discounted tickets to Pick-Staiger Concert Hall and Virginia Wadsworth Wirtz Centers performances
- athletic tickets
- Osher Lifelong Learning Institute membership

Visit hr.northwestern.edu/benefits/retirement/prepare/privileges.html for more information about retiree privileges.

When you retire from Northwestern, the following are some ways you can keep in touch with the University:

- ***Visit the PlanIt Purple calendar.***
- ***Contact Northwestern Athletics and Recreation to find out about any discounts offered.***
- ***Join a discussion group at the Osher Lifelong Learning Institute.***
- ***Enjoy all that Northwestern offers on its campuses and around town.***

Glossary

Key words and terms about your Northwestern benefits

After-tax contributions: Contributions thatinclude the premium costs for the supplemental, spouse, and dependent child term life insurance, legal services benefit, and long-term disability coverage you elect. If a civil union partner or their dependents children are covered under the medical, dental, or vision plan, the portion of the premium applied to them will be an after-tax contribution. After-tax contributions are deducted from your pay after federal and state income taxes and Medicare and Social Security taxes are calculated. After-tax contributions have no impact on your taxable income (and the current income taxes you pay). For after-tax contributions to your 403(b) plans, see the Roth after-tax definition.

Annual Northwestern salary: Your salary, as a Northwestern University employee, as of September 1 of the prior year or your hire date, if it is after September 1.

Basic term life insurance: The University- (employer-) paid life insurance plan.

Beneficiary: The person (parent, spouse, child, or other relative or friend) designated to receive life insurance or retirement benefits in the event of the death of the covered person. A beneficiary may also be a trust.

Coinsurance: The percentage of your health care cost that you must pay after meeting the deductible or copay. For example, a plan may cover 80 percent of the cost of a service and leave you responsible for 20 percent of the cost; the 20 percent you pay is your coinsurance.

Copay: The flat dollar amount that you pay at the time you receive health care services. For example, you may pay a $45 copay for a physician's visit. Copays do not count toward your annual deductible. Health care copays do count toward your out-of-pocket maximum.

Coverage tier: How the University categorizes whom you want to cover (example: You + Spouse).

Deductible: The deductible is the dollar amount that you need to pay out of pocket before your health care plan begins to pay benefits. (Generally, the larger your deductible, the smaller your premium contribution.)

Dependent: Your dependents include your

- **Spouse:** The person to whom you are legally married under the laws of your state of residence.
- **Partner:** The person to whom you are legally joined in a civil union; any reference to a "spouse" also refers to a civil union partner.
- **Child(ren):** Dependent children under age 26, regardless of their educational, marital, tax, or work status, including biological children, foster children, stepchildren, legally adopted children or grandchildren, and any child for whom you are the legal guardian, as defined by a court order. Eligibility for tuition benefits stops at age 24.

Dependent Child Term Life Insurance: The employee-paid life insurance plan covering the employee's eligible dependent children.

Eligible earnings: The portion of your Northwestern compensation used to calculate the contributions that you and Northwestern make to the retirement plan and voluntary savings plan. This is typically your base salary. Eligible earnings do not include reimbursements or other expense allowances, fringe benefits (cash and noncash), moving expenses, nonqualified deferred compensation, welfare benefits, bereavement pay, lump sum payments of unused vacation time, or severance pay.

Evidence of insurability: A form—made available by the sponsoring company for the life insurance plans—required for applying for life insurance coverage after hire or initial eligibility. Applies to the supplemental and spouse term life insurance plans.

Flexible spending account (FSA): A tax-advantaged account into which you make contributions to pay for eligible health or dependent care expenses, such as deductibles, copays, over-the-counter items, and some health care services not covered by the health care plan. Northwestern offers three FSA types: a traditional Health Care FSA; a limited-use Health Care FSA (for participants in the Value PPO); and a Dependent Care FSA.

Generic drug: Prescription drugs in this tier are identical (or equivalent) to a brand-name drug in dosage form, safety, strength, route of administration, quality, performance characteristics, and intended use. Although chemically identical to its brand-name counterpart, a generic drug is typically sold at substantial discounts. To gain FDA approval, the manufacturer of a generic drug is subject to strict guidelines and standards.

Health Savings Account (HSA): A special investment account established by people who are enrolled in a high-deductible health care plan; it is used to pay for current and future medical expenses.

Network: A group of doctors, hospitals, and pharmacies organized by a health care plan to provide health care services to covered participants. To get the maximum coverage for the lowest cost, you generally must use the plan's network. (In a PPO, you have the option to use out-of-network providers, but you will usually pay more for these services.)

Nonpreferred brand-name drug: Prescription drugs in this tier are typically newer or highly advertised medications, many of which have a different brand or generic equivalent.

Out-of-pocket maximum: The maximum amount you pay out of pocket each year for health care services. This amount includes deductibles, coinsurance, and health care copays. Most health care plans have a yearly maximum for out-of-pocket expenses. Once you reach the maximum for the period, the plan pays 100 percent for any remaining covered health care expenses.

Preferred brand-name drug: Prescription drugs in this tier are patent protected and trademarked.

Premium contribution: The dollar amount deducted from your paycheck to pay for your coverage.

Pretax contributions: These contributions include the premium costs for the medical, dental, and vision coverage you elect; any contributions you choose to make to a Health Savings Account (HSA), Health Care Flexible Spending Account (Health Care FSA), and Dependent Care Flexible Spending Account (Dependent Care FSA); employee-matched contributions to the retirement plan; and employee supplemental retirement contributions to the voluntary savings plan. Pretax contributions are deducted from your pay before federal and state income taxes and Medicare and Social Security taxes are calculated, reducing your taxable income (and the current income taxes you pay).

Preventive care: The term used for regularly scheduled checkups with your provider to identify health risks and prevent, diagnose, and treat illnesses so they can be found in early, more treatable stages.

Primary care physician (PCP): A doctor who is intended to be your primary doctor and who helps determine when you need to see a specialist. If you enroll in an HMO, you usually must select a PCP.

Roth after-tax 403(b) contributions: These contributions do not reduce your current taxable income; taxes are withheld at the time you make contributions to the retirement plan, the voluntary savings plan, or a combination of both.

Specialty drug: Prescription drugs in this tier require special handling, administration, or monitoring. These drugs are used to treat complex, chronic, and often costly conditions, such as multiple sclerosis, rheumatoid arthritis, hepatitis C, and hemophilia.

Spouse term life insurance: The employee-paid life insurance plan covering the employee's spouse or civil union partner.

Supplemental term life insurance: The employee-paid life insurance plan that covers the employee.

Directory

General Questions		
askHR Service Center	847-491-4700	northwestern.edu/hr/benefits
For Your Health		
Medical Plans		
UHC PPO Contract 942063	833-314-1787	uhc.com
UHC HMO Contract 942063	855-828-7715	uhc.com
UHC Medicare Advantage Group 12826 (Post-65 Retiree)	844-481-8822	retiree.uhc.com
Prescription Drugs		
CVS Caremark Group 942063	833-844-5348	hr.northwestern.edu/benefits/health-insurance/health-plans/prescription-drug-benefits
Dental Plans		
Delta Dental of Illinois Group 20549	800-323-1743	deltadentalil.com
Guardian Dental Group 378954	866-494-4542	guardiananytime.com
Vision		
BCBSIL/EyeMed Group F019106	855-362-5539	eyemedvisioncare.com/bcbsilvis
FSA/HSA		
Inspira	800-284-4885	mybenefits.inspirafinancial.com
For Your Protection		
Extended Sick Time and Long-Term Disability		
MetLife	847-491-4700	mybenefits.metlife.com
Life Insurance		
MetLife	847-491-4700	mybenefits.metlife.com
This is a group plan sponsored by Northwestern. MetLife will not have specific information about your coverage. Review myHR or contact askHR with questions about coverage.		
Pet Insurance		
MetLife	800-GET-MET8	quote.metlifepetinsurance.com/pet
Legal Plan Benefit		
LegalEASE	800-248-9000	www.legaleaseplan.com/northwestern
For Your Well-Being		
Tuition Benefit	847-491-4700	hr.northwestern.edu/benefits/tuition
PerkSpot	866-606-6057	perkspot.com
Well-being and Caregiving Resources		wellbeing@northwestern.edu
SupportLinc (EAP)	888-881-5462	supportlinc.com, code: northwestern
For Your Future		
Retirement Plan/Voluntary Savings Plan		
Fidelity	800-343-0860	fidelity.com
TIAA	800-842-2776	tiaa.org

About This Guide

This guide highlights key provisions of plans and policies that are part of the Northwestern University benefits program. It is not intended to be a summary plan description (SPD). If there are differences between the information presented in this guide and the SPD or plan document for one of the plans it references, the terms of the SPD or plan document will govern.

Benefit changes other than those indicated in this guide may apply due to ongoing evaluation, interpretation, and guidance related to requirements of the Patient Protection and Affordable Care Act (PL 111-148) and the Health Care and Education Reconciliation Act (PL 111-152) enacted March 23, 2010. Please contact the insurance companies directly for complete coverage provisions and limitations.

Provider network directories and descriptive brochures from participating insurance companies are also available. Please contact the insurance companies directly with specific questions.

Northwestern University may amend or terminate its plans at any time at its sole discretion. The description of the program, the plan itself, or participation in the plan is not an employment contract or any type of employment guarantee and should not be construed as such.

Northwestern University is committed to providing a safe environment free from discrimination, harassment, sexual misconduct, and retaliation. To view Northwestern's

- complete nondiscrimination statement, see northwestern.edu/civil-rights-office/about/statements.html.
- crime and safety data, see northwestern.edu/up/your-safety/clery-act-safety-reports.html.

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