2025 House Staff Benefit Rates			
Enroll	Benefit Plan	Coverage Options	Semi-Monthly Rates
Benefits Enrolled In PeopleSoft.	Medical Community First Health Plans 1st and 2nd Paycheck deductions	Resident Only Resident + Spouse/Domestic Partner Resident + Child(ren) Resident + Family	\$ 49.21 \$ 90.67 \$ 89.24 \$ 153.24
	Dental - Humana DHMO With Implant 1st and 2nd Paycheck deductions	Resident Only Resident + Spouse/Domestic Partner Resident + Child(ren) Resident + Family	\$ 6.40 \$ 10.34 \$ 14.26 \$ 16.17
	PPO – Bronze Plan \$1,500 Annual Maximum No orthodontia & no implants 1 st and 2 nd Paycheck deductions	Resident Only Resident + Spouse/Domestic Partner Resident + Child(ren) Resident + Family	\$ 13.00 \$ 25.89 \$ 31.70 \$ 42.03
	PPO – Silver Plan \$2,000 Annual Maximum \$1,500 orthodontia & implants 1st and 2nd Paycheck deductions	Resident Only Resident + Spouse/Domestic Partner Resident + Child(ren) Resident + Family	\$ 14.28 \$ 28.53 \$ 38.82 \$ 50.45
	PPO – Gold Plan Unlimited Annual Maximum \$1,500 orthodontia & implants 1 st and 2 nd Paycheck deductions	Resident Only Resident + Spouse/Domestic Partner Resident + Child(ren) Resident + Family	\$ 15.24 \$ 30.43 \$ 41.42 \$ 53.83
	Vision EyeMed 1st and 2nd Paycheck deductions	Resident Only Resident + Spouse/Domestic Partner Resident + Child(ren) Resident + Family	\$ 3.57 \$ 6.79 \$ 7.15 \$ 10.50
	Group Basic Term Life/AD&D Aflac	Coverage \$25,000	No Cost
	Group Dependent Term Life Aflac 1st and 2nd Paycheck deductions	\$10,000 spouse and/or \$ 5,000 child(ren) \$20,000 spouse and/or \$10,000 child(ren) \$30,000 spouse and/or \$15,000 child(ren) \$40,000 spouse and/or \$20,000 child(ren) \$50,000 spouse and/or \$25,000 child(ren)	\$.65 \$ 1.30 \$ 1.95 \$ 2.60 \$ 3.25
	Group Short-Term Disability Aflac	14 Day Elimination Period 70% up to \$500 of taxable weekly benefit Up to 24 weeks of benefits	No Cost
	Group Long-Term Disability Aflac	90-day Elimination Period \$2,000 Monthly taxable benefit 24 months of specialty monthly benefit	No Cost
	Flexible Spending Accounts Navia Benefit Solutions Health Care FSA and Dependent Care FSA 1st and 2nd Paycheck deductions	Healthcare FSA – medical expenses from \$100 up to \$3,200 annually for your eligible family members. *Must re-enroll & elect annual amount every year.	Annual Elections are Divided by 24 Paychecks
	EAP Deer Oaks	Automatically enrolled into Employee Assistance Plan. Contact Deer Oaks at 866-327-2400.	No Cost

Pet Insurance Coverage available for dogs, cats, birds, pigs, Questions or to enroll: snakes, rabbits, reptiles, and exotic animals at Nationwide 877-738-7874 any licensed vet nationwide. Pre-existing Personal Bank Draft deduction conditions are not covered. Email: Benefits enrolled with vendors. DO NOT RE-ENROLL -UhsBenefits@ **Online Enrollment**: New Policies only Pet policy automatically renews BenefitSourceSolutions.com http://www.Petinsurance.com/uhsresidents Guaranteed Issued-No medical **Individual Disability** Questions or to enroll: Guardian - Benefit Source Call 210-340-0777 underwriting. Personal Bank Draft deduction Elimination period 90 days Text: 210-240-2574 Resident Monthly Benefit: Up to \$5,000 Fellow Monthly Benefit: Up to \$7,500 Basic Quote: www.DisabilityQuotes.com/UThealth Benefit Period: Age 67 Benefit Increase: Up to \$15,000 **Email:** Pre-Enrollment: Portable – follows you throughout your UhsBenefits@ www.DisabilityQuotes.com/nava BenefitSourceSolutions.com career. **Retirement Plans** Voluntary contributions into Questions or to enroll: Call 210-979-8277 Vova the 457(b) or 403(b) retirement plans. Every Paycheck **College Savings Plan** 529 College Savings Plan Ouestions or to enroll: Call 866-677-6933

View Benefit Information on infoNET or online at www.uhsbenefitssa.com

Contact Human Resources: Benefit Hotline 210-644-3291 or Email: Uhs.Benefits@uhtx.com