

UNIVERSITY OF ARKANSAS - MONTHLY INSURANCE PREMIUMS

Jan 2021	Salary Tiers	Classic Plan		Health Savings Plan		Premier Plan	
Medical Coverage	Salaries below \$28,000	12-Month	*9-Month	12-Month	*9-Month	12-Month	*9-Month
	Employee Only	\$76.04	\$101.39	\$14.42	\$19.23	\$191.45	\$255.26
	Employee & Spouse	\$272.69	\$363.59	\$104.65	\$139.53	\$598.75	\$798.33
	Employee & Child(ren)	\$200.98	\$267.97	\$87.15	\$116.20	\$471.55	\$628.74
	Emp., Sp. & Child(ren)	\$361.58	\$482.11	\$142.52	\$190.03	\$806.50	\$1,075.34
75%-100% Appointed	Salaries \$28,000-\$38,999	12-Month	*9-Month	12-Month	*9-Month	12-Month	*9-Month
	Employee Only	\$76.04	\$101.39	\$14.42	\$19.23	\$191.45	\$255.26
	Employee & Spouse	\$305.42	\$407.22	\$137.38	\$183.17	\$629.43	\$839.23
	Employee & Child(ren)	\$218.45	\$291.27	\$104.62	\$139.49	\$488.38	\$651.17
	Emp., Sp. & Child(ren)	\$391.71	\$522.29	\$172.65	\$230.20	\$834.86	\$1,113.14
	Salaries \$39,000-\$54,999	12-Month	*9-Month	12-Month	*9-Month	12-Month	*9-Month
	Employee Only	\$83.65	\$111.53	\$22.03	\$29.37	\$199.61	\$266.15
	Employee & Spouse	\$327.23	\$436.31	\$159.19	\$212.25	\$649.88	\$866.51
	Employee & Child(ren)	\$240.30	\$320.40	\$126.47	\$168.63	\$509.43	\$679.24
	Emp., Spouse & Child(ren)	\$421.85	\$562.46	\$202.79	\$270.39	\$863.21	\$1,150.95
	Salaries \$55,000-\$99,999	12-Month	*9-Month	12-Month	*9-Month	12-Month	*9-Month
	Employee Only	\$90.48	\$120.64	\$28.87	\$38.49	\$207.61	\$276.81
	Employee & Spouse	\$349.05	\$465.40	\$181.01	\$241.35	\$670.33	\$893.78
	Employee & Child(ren)	\$262.14	\$349.52	\$148.31	\$197.75	\$530.46	\$707.29
	Emp., Spouse & Child(ren)	\$467.04	\$622.73	\$247.98	\$330.64	\$905.73	\$1,207.63
	Salaries \$100,000-\$149,999	12-Month	*9-Month	12-Month	*9-Month	12-Month	*9-Month
	Employee Only	\$92.01	\$122.68	\$30.39	\$40.52	\$215.45	\$287.26
	Employee & Spouse	\$370.86	\$494.48	\$202.82	\$270.42	\$690.79	\$921.05
	Employee & Child(ren)	\$279.62	\$372.83	\$165.79	\$221.05	\$547.29	\$729.72
	Emp., Sp. & Child(ren)	\$504.71	\$672.95	\$285.65	\$380.87	\$941.17	\$1,254.89
Salaries above \$150,000	12-Month	*9-Month	12-Month	*9-Month	12-Month	*9-Month	
Employee Only	\$93.52	\$124.69	\$31.91	\$42.55	\$223.14	\$297.52	
Employee & Spouse	\$403.59	\$538.11	\$235.55	\$314.06	\$721.46	\$961.94	
Employee & Child(ren)	\$305.83	\$407.78	\$192.00	\$256.00	\$572.53	\$763.38	
Emp., Spouse & Child(ren)	\$542.37	\$723.17	\$323.31	\$431.08	\$976.61	\$1,302.14	
50%-74% Appointed	Salaries below \$28,000	12-Month	*9-Month	12-Month	*9-Month	12-Month	*9-Month
	Employee Only	\$173.80	\$231.73	\$112.18	\$149.57	\$293.48	\$391.30
	Employee & Spouse	\$477.21	\$636.28	\$309.17	\$412.22	\$790.48	\$1,053.98
	Employee & Child(ren)	\$369.19	\$492.25	\$255.36	\$340.48	\$633.54	\$844.73
	Emp., Spouse & Child(ren)	\$647.84	\$863.78	\$428.77	\$571.71	\$1,075.83	\$1,434.44
	Salaries \$28,000-\$38,999	12-Month	*9-Month	12-Month	*9-Month	12-Month	*9-Month
	Employee Only	\$173.80	\$231.73	\$112.18	\$149.57	\$293.48	\$391.30
	Employee & Spouse	\$501.76	\$669.00	\$333.72	\$444.95	\$813.49	\$1,084.66
	Employee & Child(ren)	\$382.29	\$509.73	\$268.46	\$357.94	\$646.16	\$861.56
	Emp., Sp. & Child(ren)	\$670.44	\$893.92	\$451.37	\$601.84	\$1,097.09	\$1,462.79
	Salaries \$39,000-\$54,999	12-Month	*9-Month	12-Month	*9-Month	12-Month	*9-Month
	Employee Only	\$179.50	\$239.33	\$117.88	\$157.18	\$299.59	\$399.46
	Employee & Spouse	\$518.12	\$690.82	\$350.07	\$466.76	\$828.83	\$1,105.11
	Employee & Child(ren)	\$398.68	\$531.57	\$284.85	\$379.79	\$661.95	\$882.60
	Emp., Sp. & Child(ren)	\$693.03	\$924.05	\$473.98	\$631.97	\$1,118.36	\$1,491.15
	Salaries \$55,000-\$99,999	12-Month	*9-Month	12-Month	*9-Month	12-Month	*9-Month
	Employee Only	\$184.63	\$246.17	\$123.01	\$164.02	\$305.59	\$407.46
	Employee & Spouse	\$534.48	\$712.63	\$366.44	\$488.58	\$844.17	\$1,125.56
	Employee & Child(ren)	\$415.06	\$553.41	\$301.23	\$401.63	\$677.72	\$903.64
	Emp., Sp. & Child(ren)	\$726.93	\$969.25	\$507.87	\$677.17	\$1,150.24	\$1,533.66
Salaries \$100,000-\$149,999	12-Month	*9-Month	12-Month	*9-Month	12-Month	*9-Month	
Employee Only	\$185.77	\$247.69	\$124.15	\$165.54	\$311.48	\$415.30	
Employee & Spouse	\$550.84	\$734.45	\$382.80	\$510.39	\$859.51	\$1,146.02	
Employee & Child(ren)	\$428.17	\$570.89	\$314.34	\$419.11	\$690.34	\$920.47	
Emp. Sp. & Child(ren)	\$755.18	\$1,006.91	\$536.12	\$714.83	\$1,176.83	\$1,569.11	
Salaries above \$150,000	12-Month	*9-Month	12-Month	*9-Month	12-Month	*9-Month	
Employee Only	\$186.92	\$249.21	\$125.29	\$167.06	\$317.24	\$422.98	
Employee & Spouse	\$575.38	\$767.17	\$407.34	\$543.12	\$882.51	\$1,176.69	
Employee & Child(ren)	\$447.83	\$597.10	\$333.99	\$445.32	\$709.28	\$945.71	
Emp. Sp. & Child(ren)	\$783.43	\$1,044.58	\$564.37	\$752.50	\$1,203.41	\$1,604.54	

***9-Month Premiums.** Faculty on a 9-month appointment and staff members paying benefits over 9 months' pay an additional premium September through May to prepay for the following June, July, and August. These 9-month premiums are calculated assuming that the premiums will begin in September and will remain unchanged for a 12-month period (through the following August). If changes are made October or later, 9M employees will have to pay an extra premium through the following May to assure that sufficient premiums will be collected to pre-pay for the following summer.

UNIVERSITY OF ARKANSAS - MONTHLY INSURANCE PREMIUMS

Jan 2021

	12 Month Premiums				9 Month Premiums*					
Dental Coverage	Coverage	<u>75-100% Appt</u>		<u>50-74% Appt</u>		Coverage	<u>75-100% Appt</u>		<u>50-74% Appt</u>	
	Employee Only	\$16.00		\$21.44		Employee Only	\$21.33		\$28.59	
	Employee & Spouse	\$33.00		\$44.22		Employee & Spouse	\$44.00		\$58.96	
	Employee & Child(ren)	\$27.85		\$37.32		Employee & Child(ren)	\$37.13		\$49.76	
	Emp., Sp & Child(ren)	\$44.85		\$60.10		Emp., Sp & Child(ren)	\$59.80		\$80.13	
Vision Insurance	Coverage	<u>Basic</u>		<u>Enhanced</u>		Coverage	<u>Basic</u>		<u>Enhanced</u>	
	Employee Only	\$5.47		\$11.04		Employee Only	\$7.29		\$14.72	
	Employee & Spouse	\$10.86		\$21.82		Employee & Spouse	\$14.48		\$29.09	
	Employee & Child(ren)	\$10.63		\$21.39		Employee & Child(ren)	\$14.17		\$28.52	
	Emp., Sp & Child(ren)	\$16.16		\$32.51		Emp., Sp & Child(ren)	\$21.55		\$43.35	
Life Insurance	Basic Life mandatory & 100% employer paid - \$0.155 per \$1,000				Basic Life mandatory & 100% employer paid - \$0.207 per \$1,000					
	Optional Life	<u>Your current age:</u>			Optional Life			<u>Your current age:</u>		
		Less than 30	\$0.042	50 but < 55	\$0.193		Less than 30	\$0.056	50 but < 55	\$0.257
		30 but < 35	\$0.059	55 but < 60	\$0.361		30 but < 35	\$0.079	55 but < 60	\$0.481
		35 but < 40	\$0.067	60 but < 65	\$0.554		35 but < 40	\$0.089	60 but < 65	\$0.739
		40 but < 45	\$0.084	65 but < 70	\$1.067		40 but < 45	\$0.112	65 but < 70	\$1.423
		45 but < 50	\$0.126	70 & older	\$1.722		45 but < 50	\$0.168	70 & older	\$2.296
	To calculate your monthly premium:				To calculate your monthly premium:					
	1. Multiply your annual salary by 1, 2, 3, or 4 (based on your coverage election). Round to next \$1,000.				1. Multiply your annual salary by 1, 2, 3, or 4 (based on your coverage election). Round to next \$1,000.					
	2. Divide by \$1,000				2. Divide by \$1,000					
3. Multiply by Age Rate above.				3. Multiply by Age Rate above.						
Dependent Life Insurance	Employees can cover spouse for \$10,000, \$15,000 or \$20,000.	Coverage		\$10,000 \$2.85		Employees can cover spouse for \$10,000, \$15,000 or \$20,000.	Coverage		\$10,000 \$3.80	
		\$15,000 \$4.27		\$15,000 \$5.69			\$15,000 \$5.69		\$20,000 \$7.59	
	Eligible dependent children are covered at 50% of spouse's coverage.	\$20,000 \$5.69		\$20,000 \$7.59		Eligible dependent children are covered at 50% of spouse's coverage.	\$20,000 \$7.59			
Short Term Disability	Basic Short-Term Disability mandatory & 100% employer paid.				Basic Short-Term Disability mandatory & 100% employer paid.					
	Optional STD Classified Staff				Optional STD Classified Staff					
	Covers salary over \$45,000 up to a maximum covered of \$216,000.				Covers salary over \$45,000 up to a maximum covered of \$216,000.					
	Calculate your monthly premium:				Calculate your monthly premium:					
	1. Subtract \$45,000 from annual salary				1. Subtract \$45,000 from annual salary					
	2. Multiply by .0055				2. Multiply by .0055					
3. Divide by 12				3. Divide by 9						
Non-Classified Faculty/Staff				Non-Classified Faculty/Staff						
Covers salary from \$0.00 up to a maximum covered salary of \$216,000.				Covers salary from \$0.00 up to a maximum covered salary of \$216,000.						
Calculate your monthly premium:				Calculate your monthly premium:						
1. Multiply annual salary by .0051				1. Multiply annual salary by .0051						
2. Divide by 12				2. Divide by 9						
Long Term Disability	Basic Long-Term Disability mandatory & 100% employer paid.				Basic Long-Term Disability mandatory & 100% employer paid.					
	Optional LTD Coverage				Optional LTD Coverage					
	Enroll only if salary is over \$20,000. Maximum salary to be used in calculation is \$500,000.				Enroll only if salary is over \$20,000. Maximum salary to be used in calculation is \$500,000.					
	Calculate your monthly premium:				Calculate your monthly premium:					
1. Divide annual salary by 12				1. Divide annual salary by 9						
2. Subtract 1,666.67				2. Subtract 2,222.22						
3. Divide by 100				3. Divide by 100						
4. Multiply by \$0.430				4. Multiply by \$0.430						
AD&D Insurance	Coverage	Single	Family			Coverage	Single	Family		
	\$25,000	\$0.38	\$0.75	Spouse covered for 60% of coverage amount and eligible dependent children for 20% of family coverage amount. Coverage in excess of \$150,000 will be limited to the lesser of \$300,000 or 15-times employee's salary (rounded up to next \$25,000).		\$25,000	\$0.51	\$1.00	Spouse covered for 60% of coverage amount and eligible dependent children for 20% of family coverage amount. Coverage in excess of \$150,000 will be limited to the lesser of \$300,000 or 15-times employee's salary (rounded up to next \$25,000).	
	\$50,000	\$0.75	\$1.50			\$50,000	\$1.00	\$2.00		
	\$75,000	\$1.13	\$2.25			\$75,000	\$1.51	\$3.00		
	\$100,000	\$1.50	\$3.00			\$100,000	\$2.00	\$4.00		
	\$125,000	\$1.88	\$3.75			\$125,000	\$2.51	\$5.00		
	\$150,000	\$2.25	\$4.50			\$150,000	\$3.00	\$6.00		
	\$175,000	\$2.63	\$5.25			\$175,000	\$3.51	\$7.00		
	\$200,000	\$3.00	\$6.00			\$200,000	\$4.00	\$8.00		
	\$225,000	\$3.38	\$6.75			\$225,000	\$4.51	\$9.00		
	\$250,000	\$3.75	\$7.50			\$250,000	\$5.00	\$10.00		
\$275,000	\$4.13	\$8.25	\$275,000			\$5.51	\$11.00			
\$300,000	\$4.50	\$9.00	\$300,000	\$6.00	\$12.00					
Voluntary Products	1. Group Rated Auto/Home Insurance: Rates quoted year-round by Liberty Mutual, 1-800-524-9400, www.libertymutual.com/lm/arkemp .									
	2. Critical Illness Insurance: Rates can be found online at https://hr.uark.edu/benefits/catastrophic/critical-insurance.php									
	3. Identity Theft: Contact ID Watchdog at 1-866-513-1518 or go to http://identitybenefits.com/?code=UniversityofArkansas to enroll.									
	4. Legal Protection through LegalShield: Contact 1-870-295-0417 or go to www.legalshield.com/info/uas to enroll.									