Welcome to New Faculty Orientation August, 2020
Welcome to New Faculty Orientation

Suzanne Tapp

Executive Director
Teaching, Learning, and Professional Development Center
Welcome to Texas Tech University
Dr. Lawrence Schovanec
President
Your Role at Texas Tech

Dr. Michael Galyean

Provost

Senior Vice President of Academic Affairs
Welcome to Texas Tech Benefits Orientation

Human Resources
Employee Services Center
Doak Conference Center
Room 160
Phone: 806-742-3851
Fax: 806-742-1371
hrs.employee.services@ttu.edu
ACKNOWLEDGEMENT OF RECEIPT OF COBRA NOTICE

I acknowledge I have received from Texas Tech University, a copy of the general notice of Continuation Coverage Notification (COBRA). The notice informs me and my dependents of rights and opportunities for temporary continuation of group health coverage and/or dental coverage under the law.

_________________________________________                          ____________________________
Employee’s Printed Name                                                  Employee ID

_________________________________________
Employee’s Signature

_________________________________________
Date Signed
New Employee Benefits Guide

ERS
www.ers.texas.gov
1-877-275-4377

Contact information for all agencies can be found on the inside.
Health coverage is effective the 1st of the month following your 60th day of employment.

<table>
<thead>
<tr>
<th>Hire Date</th>
<th>60th Day</th>
<th>Health Begins</th>
</tr>
</thead>
<tbody>
<tr>
<td>September 1st</td>
<td>October 31st</td>
<td>November 1st</td>
</tr>
</tbody>
</table>

More information is available at [www.ers.texas.gov](http://www.ers.texas.gov)

Refer to page 15 of New Employee Benefits Guide
<table>
<thead>
<tr>
<th>Benefit</th>
<th>Network</th>
<th>Non-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Calendar Year Deductible</td>
<td>None</td>
<td>$500 per person</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$1,500 per family</td>
</tr>
<tr>
<td>Out-of-Pocket Coinsurance Maximum</td>
<td>$2,000 per person per calendar year</td>
<td>$7,000 per person per calendar year</td>
</tr>
<tr>
<td>Primary Care Physician</td>
<td>$25</td>
<td>40% - after deductible</td>
</tr>
<tr>
<td>Specialist Office Visit</td>
<td>$40</td>
<td>40% - after deductible</td>
</tr>
<tr>
<td>Annual Eye Exam</td>
<td>$40</td>
<td>40% - after deductible</td>
</tr>
<tr>
<td>Inpatient Hospital</td>
<td>$150/day copay</td>
<td>$150/day copay</td>
</tr>
<tr>
<td></td>
<td>Max of 5 days + 20%</td>
<td>Max of 5 days + 40%</td>
</tr>
<tr>
<td>Total Annual Out-of-Pocket Maximum</td>
<td>$6,750 per person</td>
<td>None</td>
</tr>
<tr>
<td></td>
<td>$13,500 per family</td>
<td></td>
</tr>
</tbody>
</table>
PCP Selection-Supplemental Information Form

Select your Primary Care Physician

1. Complete sections A&D
2. Choose PCP for yourself / dependents
3. Mail the form or call (800)252-8039

Please visit www.healthselectoftexas.com for assistance with finding a PCP
Blue Cross Blue Shield

www.healthselectoftexas.com
<table>
<thead>
<tr>
<th></th>
<th>Premium</th>
<th>State Pays</th>
<th>You Pay</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Employee Only</strong></td>
<td>$624.82</td>
<td>$624.82</td>
<td>$0.00</td>
</tr>
<tr>
<td><strong>Employee &amp; Spouse</strong></td>
<td>$1,339.90</td>
<td>$982.36</td>
<td>$357.54</td>
</tr>
<tr>
<td><strong>Employee &amp; Children</strong></td>
<td>$1,103.58</td>
<td>$864.20</td>
<td>$239.38</td>
</tr>
<tr>
<td><strong>Employee &amp; Family</strong></td>
<td>$1,818.66</td>
<td>$1,221.74</td>
<td>$596.92</td>
</tr>
</tbody>
</table>

Refer to pages 30-31 of New Employee Benefits Guide
TexFlex – Health Care Flexible Spending Account

Set aside money on a pre-tax basis from your paycheck to cover eligible out-of-pocket health care expenses.

- Available ONLY to HealthSelect of Texas participants
- Cover things such as:
  - Prescription Fees
  - Copays
  - Coinsurance
  - Includes eligible vision, hearing, and dental expenses

www.texflexers.com

Refer to pages 22-23 of New Employee Benefits Guide
# Overview

<table>
<thead>
<tr>
<th></th>
<th>Health Care Account</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Annual Maximum Contribution</strong></td>
<td>$2,750 per participant</td>
</tr>
<tr>
<td><strong>Fund Availability</strong></td>
<td>Full-amount available when contributions are deducted</td>
</tr>
<tr>
<td><strong>Debit Card</strong></td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Carryover of Funds</strong></td>
<td>Up to $550</td>
</tr>
<tr>
<td></td>
<td>(Sept. 1 – Aug. 31)</td>
</tr>
<tr>
<td><strong>Submit Claims</strong></td>
<td>Submit all claims by Dec. 31 for expenses incurred between Sept. 1 - Aug. 31.</td>
</tr>
</tbody>
</table>
# Consumer Directed HealthSelect (HDHP)

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Network</th>
<th>Non-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Calendar Year Deductible</td>
<td>$2,100 per person $4,200 per family</td>
<td>$4,200 per person $8,400 per family</td>
</tr>
<tr>
<td>Primary Care Physician</td>
<td>20% - after deductible</td>
<td>40% - after deductible</td>
</tr>
<tr>
<td>Specialist Office Visit</td>
<td>20% - after deductible</td>
<td>40% - after deductible</td>
</tr>
<tr>
<td>Annual Eye Exam</td>
<td>20% - after deductible</td>
<td>40% - after deductible</td>
</tr>
<tr>
<td>Inpatient Hospital</td>
<td>20% - after deductible</td>
<td>40% - after deductible</td>
</tr>
<tr>
<td>Total Annual Out-of-Pocket</td>
<td>$6,750 per person $13,500 per family</td>
<td>None</td>
</tr>
<tr>
<td>Maximum</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
How a HDHP Works

<table>
<thead>
<tr>
<th></th>
<th>In-Network</th>
<th>Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible</td>
<td>Individual coverage: $2,100</td>
<td>Individual coverage: $4,200</td>
</tr>
<tr>
<td></td>
<td>Family coverage: $4,200</td>
<td>Family coverage: $8,400</td>
</tr>
<tr>
<td>Coinsurance</td>
<td>Plan pays: 80%</td>
<td>Plan pays: 60%</td>
</tr>
<tr>
<td></td>
<td>You pay: 20%</td>
<td>You pay: 40%</td>
</tr>
<tr>
<td></td>
<td>Preventive Services Covered</td>
<td></td>
</tr>
<tr>
<td></td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>Out-of-Pocket</td>
<td>Per individual: $6,750</td>
<td>None</td>
</tr>
<tr>
<td>Maximum</td>
<td>Per family: $13,500</td>
<td></td>
</tr>
</tbody>
</table>
How to Fund the High Deductible?

If enrolling into Consumer Directed HealthSelect, you must set-up a Health Savings Account (HSA) through Optum Bank

Triple Tax Advantage

• The contributions are made pre-tax from payroll
• Funds earn interest, can be invested & earnings grow tax free
• Withdraw tax-free for qualified expenses

Additional Considerations

• The account belongs to you, so you decide how to spend it
• Money left in the account carries over from year to year
• The funds remain yours even if you switch jobs, change health plans or retire
• Money can be used to pay for current and/or future healthcare expenses
How Much Can I Contribute to the HSA?

The IRS adjusts for inflation and sets the contribution limits each calendar year. There is no limit on the amount your account can grow, only limits on how much you can deposit in a single year.

The state contributes $45/month to an individual account or $90/month for a family.

<table>
<thead>
<tr>
<th>Calendar Year</th>
<th>Individual</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maximum Limit</td>
<td>$3,550</td>
<td>$7,100</td>
</tr>
<tr>
<td>State Contribution</td>
<td>$540</td>
<td>$1,080</td>
</tr>
<tr>
<td>Employee Contribution</td>
<td>$3,010</td>
<td>$6,020</td>
</tr>
</tbody>
</table>

*Additional $1,000 a year catch-up for those individuals 55 and over.*

Refer to page 10 of New Employee Benefits Guide
Optum Bank

Health Savings Account Provider

www.optumbank.com/texasers

1-800-791-9361
Available Monday – Friday 8am – 7pm CT
Saturday 7am – 3pm CT
## Full-Time Premium Rates

**Consumer Directed HealthSelect**

<table>
<thead>
<tr>
<th></th>
<th>Premium</th>
<th>State Pays</th>
<th>You Pay</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Only</td>
<td>$624.82</td>
<td>$624.82</td>
<td>$0.00</td>
</tr>
<tr>
<td>Employee &amp; Spouse</td>
<td>$1,304.16</td>
<td>$982.36</td>
<td>$321.80</td>
</tr>
<tr>
<td>Employee &amp; Children</td>
<td>$1,079.64</td>
<td>$864.20</td>
<td>$215.44</td>
</tr>
<tr>
<td>Employee &amp; Family</td>
<td>$1,758.98</td>
<td>$1,221.74</td>
<td>$537.24</td>
</tr>
</tbody>
</table>

Refer to pages 30-31 of New Employee Benefits Guide
## Prescription Drug Coverage

<table>
<thead>
<tr>
<th></th>
<th>HealthSelect of Texas</th>
<th>Consumer Directed HealthSelect</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Pharmacy Network</strong></td>
<td>Visit Website</td>
<td>Visit website</td>
</tr>
<tr>
<td><strong>Deductible</strong></td>
<td>$50 for each covered individual</td>
<td>$2,100 per individual &amp; $4,200 per Family (combined medical &amp; pharmacy expenses) using in-network pharmacies</td>
</tr>
<tr>
<td><strong>Co-Pay (In-network)</strong></td>
<td>Up to a 30-day supply <strong>Non-maintenance medication:</strong> Tier 1: $10, Tier 2: $35, Tier 3: $60 <strong>Maintenance medication:</strong> Tier 1: $10, Tier 2: $45, Tier 3: $75</td>
<td>20% coinsurance after the annual deductible is met</td>
</tr>
<tr>
<td><strong>Co-Pay (Out-of-network)</strong></td>
<td>40% of drug price minus copay OR average wholesale price of the drug, plus a dispensing fee, minus copay</td>
<td>40% coinsurance after the annual out-of-network deductible is met</td>
</tr>
</tbody>
</table>

Refer to page 13 of New Employee Benefits Guide
<table>
<thead>
<tr>
<th>Extended Days Supply (EDS)</th>
<th>HealthSelect of Texas</th>
<th>Consumer Directed HealthSelect</th>
</tr>
</thead>
<tbody>
<tr>
<td>(90-day supply)</td>
<td>Tier 1: $30, Tier 2: $105 Tier 3: $180</td>
<td>20% coinsurance after the annual deductible is met</td>
</tr>
<tr>
<td>Mail Order</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Brand Name Drug Payment</td>
<td>If a generic drug is available &amp; you choose the brand-name drug, you will pay the Tier 1 copay or coinsurance, as applicable, plus the difference in cost to the plan between the brand-name &amp; generic drug</td>
<td>Refer to pages 12-13 of New Employee Benefits Guide</td>
</tr>
</tbody>
</table>
www.optumrx.com/ers

• Drug pricing tool
• Prescription drug list
• Compare both health plans
Health Plan Comparison Tool

Log into: www.healthselectoftexas.com

- **Consumer Directed HealthSelect**
- **Plan Decision Tool**
Virtual Visits

You have two options to choose from for medical virtual visits and mental health virtual visits:

**Doctor On Demand®**
doctorondemand.com
(800) 997-6196

**MDLIVE®**
mdlive.com/healthselect
(800) 770-4622
Virtual Visits

With medical virtual visits, licensed, board-certified doctors can provide general health treatment and pediatric care for the following conditions:

- Allergies
- Asthma
- Bladder and urinary tract infections
- Bronchitis
- Cold and flu
- Ear problems
- Headaches
- Nausea
- Pinkeye
- Sore throat and rash

24/7 access to board certified physicians if enrolled in:
- HealthSelect of Texas
- HealthSelect Out-of-State
- HealthSelect Secondary

Consumer Directed HealthSelect participants are required to meet annual deductible and are subject to coinsurance.
Eligible Dependents

Who is a dependent?
• Spouse
• Dependent children under the age of 26
  - Children are not required to be living with the employee
  - This includes adopted, foster, and legal wards

Employee **must** be enrolled in coverage to enroll dependents.

Refer to pages 4-5 of New Employee Benefits Guide
Certification/Verification of Dependents

There are two parts to enrolling dependents:

Certification and Verification

Certification will be done through the online enrollment process via the ERS website or paper form.

Verification will be done by Alight Solutions, who has been contracted by ERS. A letter will be mailed to the address indicated on W-4 via US Postal Service with instructions on the process and what is required.

Refer to pages 4-5 of New Employee Benefits Guide
What If......

You need treatment after your health coverage effective date begins, but you have not received your ID card?

1. Contact *Blue Cross Blue Shield* at **1-800-252-8039** to request new cards. When requested, provide them with the following Group#:
   - **Blue Cross Blue Shield** Group # 238000 (or SSN)
   - **OptumRx 1-855-828-9834** Group # ERSTX (or SSN)

2. Give the doctor and/or pharmacy the appropriate *Group#* and your SSN to verify coverage.
Insurance Opt-Out Credit

You Can Decline Health Insurance

Consider Carefully. If you waive health insurance coverage, you will lose prescription benefits and the $5,000 Basic Group Term Life and AD&D coverage.

To Qualify for the Opt-Out Credit, you must be:
• Eligible for the state contribution toward health insurance
• Able to certify you have health insurance equal to or better than the TX Employees Group Benefit Plan (GBP) coverage.

This credit is not available to you, if:
• Your other insurance is Medicare
• You have GBP coverage as a dependent
• You receive a state contribution for other insurance coverage

Refer to page 11 of New Employee Benefits Guide
Default Enrollment

Employee Action Required

• All employees **hired as full-time** are **automatically enrolled** in **HealthSelect of Texas** – Employee only coverage.

• The employee must take action and enroll all dependents and select additional products for coverage or waive/opt-out.

Refer to page 2 of New Employee Benefits Guide
Tobacco Certification

You MUST certify – whether you use tobacco or not!

- Everyone enrolled (including dependents of all ages) in health coverage **MUST** certify tobacco use or incur a $30 per participant monthly fee.

**Effective September 1\textsuperscript{st}, 2020, ERS’ tobacco policy has been updated to include the use of electronic cigarettes and/or vaping products.**

Refer to page 11 of New Employee Benefits Guide
Recap

- There are two different health options to choose in this area – **HealthSelect** and **Consumer Directed HealthSelect**
- Employee and dependent coverage is available
- Watch mail for the **dependent verification** process
- **TexFlex and Health Saving Account** (HSA) are completely different accounts – selection depends on chosen health coverage
Benefits Eligibility – Additional Products

<table>
<thead>
<tr>
<th>Hire Date</th>
<th>31st Day</th>
<th>Optional Begins</th>
</tr>
</thead>
<tbody>
<tr>
<td>September 1st</td>
<td>October 1st</td>
<td>1st of the month following election</td>
</tr>
</tbody>
</table>

*You must enroll within the first 31 days of employment.*

www.ers.texas.gov

Refer to page 15 of New Employee Benefits Guide
# Dental Insurance Options

<table>
<thead>
<tr>
<th>Providers</th>
<th>DeltaCare USA (DHMO)</th>
<th>State of Texas Dental Choice Plan (PPO)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Providers</td>
<td>Must designate a primary care dentist</td>
<td>Network/Participating Dentist</td>
</tr>
<tr>
<td>Deductible</td>
<td>None</td>
<td>Preventive and diagnostic - $0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Combined Basic/Major – Individual - $50; Family - $150</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Orthodontic – No deductible</td>
</tr>
<tr>
<td>Copays / Coinsurance</td>
<td>Vary according to service</td>
<td>Preventive - $0 Basic Services- 10%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Major Services- 50%</td>
</tr>
<tr>
<td>Maximum Calendar Year Benefit</td>
<td>Unlimited</td>
<td>$2,000 per person (includes orthodontic extractions) Then you pay 60% coinsurance</td>
</tr>
</tbody>
</table>

Refer to pages 16-17 of New Employee Benefits Guide
Website – Delta Dental

www.ersdentalplans.com
# Dental Plan Premiums

<table>
<thead>
<tr>
<th></th>
<th>Employee Only</th>
<th>Employee &amp; Spouse</th>
<th>Employee &amp; Child(ren)</th>
<th>Employee &amp; Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>DHMO Humana</td>
<td>$ 9.59</td>
<td>$ 19.18</td>
<td>$ 23.02</td>
<td>$ 32.59</td>
</tr>
<tr>
<td>State of TX Dental Choice</td>
<td>$ 27.21</td>
<td>$ 54.42</td>
<td>$ 65.30</td>
<td>$ 92.51</td>
</tr>
</tbody>
</table>

Refer to page 31 of New Employee Benefits Guide
# State of Texas Vision

<table>
<thead>
<tr>
<th></th>
<th>In-Network</th>
<th>Non-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Routine eye exam</strong></td>
<td>$15 copay</td>
<td>Up to $40 after $15 copay</td>
</tr>
<tr>
<td>Frames or contact lenses¹</td>
<td>$200 retail allowance</td>
<td>Up to $50 or Up to $100 retail</td>
</tr>
<tr>
<td><strong>Standard contact lens fitting</strong></td>
<td>$25 copay</td>
<td>Up to $100 retail</td>
</tr>
<tr>
<td><strong>Single vision lenses</strong></td>
<td>$10 copay</td>
<td>Up to $30 retail</td>
</tr>
<tr>
<td><strong>Bifocal lenses</strong></td>
<td>$15 copay</td>
<td>Up to $45 retail</td>
</tr>
</tbody>
</table>

¹Contact lenses are in lieu of eyeglass lenses and frames benefit.

Refer to page 18 of New Employee Benefits Guide
# State of Texas Vision Rates

<table>
<thead>
<tr>
<th></th>
<th>Monthly Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Only</td>
<td>$5.12</td>
</tr>
<tr>
<td>Employee &amp; Spouse</td>
<td>$10.24</td>
</tr>
<tr>
<td>Employee &amp; Children</td>
<td>$11.01</td>
</tr>
<tr>
<td>Employee &amp; Family</td>
<td>$16.13</td>
</tr>
</tbody>
</table>

Refer to page 31 of New Employee Benefits Guide
To search for a doctor in your area or view plan details, visit

https://www.superiorvision.com/stateoftexasvision
Life Insurance Options

Protect your family from the unexpected loss of your life and income during your working years.

- Optional Term Life and AD&D
- Dependent Term Life and AD&D

Refer to pages 19-20 of New Employee Benefits Guide
Optional Term Life

Maximum of $400,000

Election 1
1X annual salary

Election 2
2X annual salary

Election 3
3X annual salary

Election 4
4X annual salary

Subject to EOI

EOI Required

Refer to page 19 of New Employee Benefits Guide
Dependent Term Life

One premium ($1.38) covers all

$5,000 term life per eligible dependent

$5,000 AD&D per eligible dependent

Refer to page 19 of New Employee Benefits Guide
**Voluntary AD&D**

Coverage from $10,000 to $200,000 (Increments of $5,000)

<table>
<thead>
<tr>
<th></th>
<th>Employee Only</th>
<th>Employee &amp; Family</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>$0.02/$1,000 of coverage</strong></td>
<td><strong>$0.04/$1,000 of coverage</strong></td>
<td></td>
</tr>
<tr>
<td>Example:</td>
<td><strong>$200,000 of Coverage</strong></td>
<td><strong>$200,000 of Coverage</strong></td>
</tr>
<tr>
<td></td>
<td>$4.00 per month</td>
<td>$8.00 per month</td>
</tr>
</tbody>
</table>

Refer to page 20 of New Employee Benefits Guide
# Texas Income Protection Plan (TIPP)

<table>
<thead>
<tr>
<th>Short-Term Disability</th>
<th>Long-Term Disability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Max Monthly Benefit</td>
<td>Max Monthly Benefit</td>
</tr>
<tr>
<td>66% of insured monthly</td>
<td>60% of insured monthly</td>
</tr>
<tr>
<td>Max Salary</td>
<td>Max Salary</td>
</tr>
<tr>
<td>$10,000 monthly</td>
<td>$10,000 monthly</td>
</tr>
<tr>
<td>30-day elimination period</td>
<td>180-day elimination period</td>
</tr>
<tr>
<td>STD Rate</td>
<td>LTD Rate</td>
</tr>
<tr>
<td>$.26 / $100 of monthly salary</td>
<td>$.63 / $100 of monthly salary</td>
</tr>
</tbody>
</table>

Refer to pages 20-21 of New Employee Benefits Guide
TexFlex Dependent Care Account

Set aside money on a pre-tax basis from your paycheck to cover eligible dependent care expenses.

- Dependent Children Under 13 yrs
- Daycare Expenses
- Before- and After-School Care

*Adult day care for qualifying dependents

www.texflexers.com

Refer to pages 22-23 of New Employee Benefits Guide
## TexFlex Enrollment Example

<table>
<thead>
<tr>
<th></th>
<th>Enrolled in TexFlex</th>
<th>Not Enrolled in TexFlex</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Annual Salary</strong></td>
<td>$38,461</td>
<td>$38,461</td>
</tr>
<tr>
<td><strong>TexFlex Enrollment</strong></td>
<td>-$5,400</td>
<td>$0</td>
</tr>
<tr>
<td></td>
<td>($4,800 Dependent &amp; $600 Health)</td>
<td></td>
</tr>
<tr>
<td><strong>Taxable Salary</strong></td>
<td>$33,061</td>
<td>$38,461</td>
</tr>
<tr>
<td><strong>Income Tax &amp; FICA</strong></td>
<td>-$3,604</td>
<td>-$4,717</td>
</tr>
<tr>
<td><strong>Health and Dependent Care</strong></td>
<td>Paid with funds from tax-free accounts</td>
<td>-$5,400</td>
</tr>
<tr>
<td><strong>Take-home Income</strong></td>
<td>$29,457</td>
<td>$28,344</td>
</tr>
</tbody>
</table>

Employee enrolled paid $1,113 less in Federal Income Tax
## Overview

<table>
<thead>
<tr>
<th>Dependent Care Account</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Annual Maximum Contribution</strong></td>
</tr>
<tr>
<td>$5,000 per household</td>
</tr>
<tr>
<td><strong>Fund Availability</strong></td>
</tr>
<tr>
<td>Funds available as they are accrued monthly</td>
</tr>
<tr>
<td><strong>Debit Card</strong></td>
</tr>
<tr>
<td>No- Reimbursement ONLY</td>
</tr>
<tr>
<td><strong>Carryover of Funds</strong></td>
</tr>
<tr>
<td>Use-it or Lose-it</td>
</tr>
<tr>
<td>(Sept. 1 – Aug. 31)</td>
</tr>
<tr>
<td>Grace period thru Nov. 15</td>
</tr>
<tr>
<td><strong>Submit Claims</strong></td>
</tr>
<tr>
<td>Submit all claims by Dec. 31 for expenses incurred between Sept. 1 – Nov. 15.</td>
</tr>
</tbody>
</table>
Recap

- There are two dental plans available
- Guaranteed insurability during initial eligibility for Life, STD, LTD (first 31 days of employment)
- Pre-tax deductions from payroll to TexFlex accounts saves on federal taxes
Benefits Enrollment (paper form)

- Complete Benefits Election Form
- Return form to HR at hrs.employee.services@ttu.edu

---

**BEFITS ELECTION FORM**

Information provided to ERS is maintained for managing your benefits. If you have questions about your information, or believe that information provided to ERS may be incorrect, please notify your Benefits Coordinator or HHS Employee Service Center.

You may complete your benefits election either by:
- Using your online account at www.ers.state.tx.us, or
- Send this completed form to your benefits coordinator or HHS Employee Service Center for employees at HHS enterprise agencies

**SECTION A: EMPLOYEE DATA (To be completed by employee.)**

<table>
<thead>
<tr>
<th>Social Security Number/National ID (SSN)</th>
<th>Employee ID</th>
<th>First Active Duty Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Employee Name: First, M, Last</th>
<th>Eligibility County</th>
<th>Mailing Address</th>
<th>Check if new</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Email Address</th>
<th>Gender</th>
<th>Date of Birth</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Agency Name</th>
<th>Dept ID/Agency Number</th>
<th>Employee Class</th>
<th>Insurance Pay Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Employee SSN/National ID Correction</th>
<th>Employee Name Change or Correction</th>
<th>Date of Birth Correction</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please provide this information, as it could affect the waiting period for your medical insurance:

- Were you covered as a dependent under the Texas Employee Group Benefits Program (GEP) at the time of your hire? ☐ Yes ☐ No
- If yes, please provide the Social Security number of the person covering you: ____________________________

- Are you a University of Texas (UT) or Texas A&M University (TAMU) employee or dependent transferring to this GEP participating agency or institution without a break in health coverage? ☐ Yes ☐ No Date coverage ends _____________
- If yes, please provide proof of no break in coverage to your benefits coordinator. If you are a Health and Human Services (HHS) Enterprise employee, provide the proof to HHS Employee Service Center.

- Are you recently retired with the same state agency within 90 days of leaving active duty? ☐ Yes ☐ No
- If yes, please provide your military release date: ____________________________
If enrolling children, one Dependent Child Certification Form per child is REQUIRED.

Please return, along with Benefit Election Form, to HR at hrs.employee.services@ttu.edu
Benefits Enrollment (online)

Enrolling Online is Easy!
Can be done after 9/01/20

Go to [www.ers.texas.gov](http://www.ers.texas.gov) and click on the “My Account Login” button on the top right side of the page, and then “Register Now”.
ERS uses 3 pieces of information to identify you while setting up your new account:

- **Social Security Number**
- **Date of Birth**
- **Address**

**Please send an email to the ESC inbox at hrs.employee.services@ttu.edu** if you are unable to create an account.
ERS System

Post-Hire Change
Benefits Enrollment Questions?
Retirement Plan Options

Two Retirement Option

Teachers Retirement System of Texas (TRS) – Defined Benefit Plan – Default

Optional Retirement Plan (ORP) – Defined Contribution Plan
Teacher Retirement System of Texas

All benefits eligible employees must participate in retirement

Employee
- Contributes 7.7%* of monthly salary on a tax deferred basis

State of Texas
- Contributes 7.5%*
- You must retire through TRS to receive state contribution

*Contributions are subject to Legislative change

www.trs.texas.gov
An Overview of TRS and ORP

Retirement Plan Options

You have a choice to make between two different retirement plans.

- **TRS**: All TRS-eligible employees at Texas public institutions of higher education and Texas public educational institutions (e.g., K-12 ISDs) are automatically enrolled in the Teacher Retirement System (TRS) on their first day of employment.

- **ORP**: ORP-eligible employees at Texas public institutions of higher education may elect to participate in the Optional Retirement Program (ORP) as an alternative to TRS.

Limited ORP Election Period

You have a one-time opportunity during your employment in Texas public higher education to choose between TRS and ORP.

- You’re eligible to elect ORP on your first day of employment in an ORP-eligible position, which is your Initial ORP Eligibility Date.
- You have 90 additional calendar days to make your election, which is your ORP Election Period.

Default Plan is TRS

- You will be an active member of TRS unless and until an election of ORP is made by submitting your completed TRS-28 election form (and any other required institutional forms) to your Human Resources Office.
- If you submit your completed TRS-28 (and any other required institutional forms):

Contribution Rates

<table>
<thead>
<tr>
<th>Category</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee</td>
<td>6.65%*</td>
</tr>
<tr>
<td>State</td>
<td>6.8%*</td>
</tr>
</tbody>
</table>

*Subject to legislative change
ORP Acknowledgement Form

Information Acknowledgement

- Required from ANYONE who is offered ORP
- Please review #7 carefully
- Complete the personal information at the bottom of the page, sign, date and return the form to HR.
Supplemental Retirement Program

Tax Deferred Account 403(b)

- Set aside additional money towards retirement
- Contribution limits are set by IRS
- Open account through Retirement Manager
  - https://www.myretirementmanager.com/MyRM/
- Select vendor and amount to deduct each paycheck
- Enroll at any time during the year
Texa$aver 457 Plan is a voluntary deferred compensation program that can help you save more for retirement!

Advantages of TEXA$AVER

• Payroll deductions
• Low-cost program
• Easy account management
• Quick and easy transfers
• Has “catch-up” provisions

ENROLL ANYTIME!
1-800-634-5091
www.texasaver.com

Refer to page 27 of New Employee Benefits Guide
Recap

- Participation in retirement is a condition of employment
- Full-time faculty will have the choice between TRS & ORP
- Enrollment in TRS is default; election for ORP must be made within the first 90 days of employment
- Supplemental retirement programs are OPTIONAL
Faculty 12 Month Salary Spread Request

To: Payroll Department
    Mail Stop 1582
    Texas Tech University
    Lubbock, Texas 79409

Tech ID or SSN:  

Date:  

Last Name:  

First Name:  

Department/Position:  

Title:  

I hereby request that my nine (9) month faculty salary be paid to me in twelve (12) equal installments beginning with the school year that starts in September ________ (Year).

• I agree that it is my responsibility to review my pay each September to ensure that this request is in effect for the new fiscal year.

• I understand that the purpose of the salary spread is to equalize pay over 12 months and agree that if the initial appointment for a fiscal year is greater than 5 months, the full appointment will be considered in the calculation of the 12 equal payments.

• I agree that my appointment is for less than 9 months, there is a break in service, or my position changes then this salary spread request will automatically be inactivated, and will be reactivated at the start of the next fiscal year in which I have a qualifying 9 month appointment.

• I agree that this request cannot be honored if my salary is being funded totally by Current Restricted Funds or the percent of funding from Current Restricted funds does not permit the salary spread. The salary spread will be applied to base pay only. Any salary supplement will be paid as authorized.

• I agree that this request cannot be changed during the 12 month period unless my employment with the University is terminated. If the termination date submitted by my department is prior to August 31, the balance of the salary spread due to me will be paid off in one payment on the first available payroll following both termination date and receipt of terminating paper work in the Payroll Department. The size of this payment could result in an inflated income tax deduction.

• I agree that, except for the above, this payment plan will remain in effect until I notify the Payroll Department in writing to cancel this request. This notification must be made prior to September 1 of any year to be effective for the academic year.

Signature:  

Date:  
In Closing

Enroll for Benefits:
First 31 days all products offered, except health coverage
First 60 days enroll dependents in health coverage and select PCP as appropriate

Sign up for ERS & TRS Electronic Notifications

More information available at
www.ers.texas.gov
1-877-275-4377

Employee Services Center
Doak Conference Center (North side of large parking area on University & 15th)
806-742-3851
hrs.employee.services@ttu.edu
Welcome to Texas Tech University from the TTU Teaching Academy
First Day of Class — Establish the Class Culture

Establish code of class conduct including no use of cell phones and no packing up early, arriving late, and leaving early.

Set expectations for two-way communication, respectful exchange of ideas, and mutual trust and respect.
Learn and use students’ names
Care about students!

Enjoy teaching students!
Five-Step Process for Effective Teaching and Learning
Five Sequential Steps

1. Tell them what you are going to tell them.

2. Benefit to students—what’s in it for me?

3. Tell them.

4. Tell them what you told them.

5. Student—what’s its use to me?
Effective teaching is developmental and dynamic.

- Lifelong learning.
- Reflecting on what is known and done.
- Constructing new instructional abilities.
- Organizing new schema for deepening understanding of content and new applications of pedagogical approaches.
Learning is a developmental and dynamic process.

- Helping students take personal ownership of their learning.
- Providing students with prompt and beneficial feedback.
- Facilitating student learning inside and outside of classrooms.
- Challenging students to meet high expectations.
Course Design — Tell Them What You Are Going to Tell Them

Syllabus

Assignments
- Purpose, tasks, and criteria or grading rubric

Course outline with readings and due dates for assignment

Student Learning Outcomes
- Daily objectives, reviews, and take-home points
Benefit Statement — What’s in it for Me? (Learner-Centered)

Not this!

- Covering the textbook
- Going through all the slides
- Three tests and a final over the lectures

Meet students’ wants and needs — ask what they already know, any questions they have, and how they learn best.

Use discussion boards, blogs, in-class writing, and quizzes via a variety of technologies to get students to read.

Teaching students how to study and learn how to learn using metacognitive strategies; encourage development of a growth mindset.
Lecturing presents information otherwise unavailable to students and a synthesis of information from multiple sources. Lecturing can help organize information in a logical structure and clarify confusing concepts, principles, and ideas.

Active learning reinforces content, concepts, and skills, helps students deepen subject matter knowledge and develop higher-order thinking skills, provides students with opportunities to think about learning and apply learning through discussion and other activities, improves student engagement in learning, student motivation, and classroom climate and sense of community, and increases enthusiasm for a topic.
Interactive Lecturing includes Engaging Learning Activities

<table>
<thead>
<tr>
<th>Guided notes</th>
<th>Circle of voices discussions</th>
<th>Fishbowl discussions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Small-group work</td>
<td>Exploratory writing activities</td>
<td>Peer feedback on written assignments</td>
</tr>
<tr>
<td>Jigsaw</td>
<td>Rotating stations</td>
<td>Review games like Jeopardy and Bingo</td>
</tr>
<tr>
<td>Assessment as Learning (diagnostic)</td>
<td>• Involves the use of ongoing self-assessments by students as they monitor and reflect on their own learning with the goal of making individual adjustments to achieve deeper understanding.</td>
<td></td>
</tr>
<tr>
<td>Assessment for Learning (formative)</td>
<td>• Provides teacher feedback to students to improve their performances with the goal of helping them take greater ownership of their learning.</td>
<td></td>
</tr>
<tr>
<td>Assessment of Learning (summative)</td>
<td>• Uses measurements to determine what students know and confirm if they have met learning outcomes.</td>
<td></td>
</tr>
</tbody>
</table>
Action Plan — Using new Knowledge and Skills

Goal-Driven Action Plan includes these:

Tasks
Milestones
Deadlines
Resources Needed
Measurements of Progress
Real-world experiences
Networking
Five Sequential Steps

1. Preview the course design in a well-designed syllabus.

2. Listening and learning benefits students.

3. Teachers use a variety of instructional approaches interspersed with engaging learning activities.


5. Students plan how to use new knowledge and skills.
References


References


Question and Answer Session

Dr. Rob Stewart
Senior Vice Provost

Dr. Genevieve Durham-Decesaro
Vice Provost/Interim Dean, Visual and Performing Arts

Dr. Jaclyn Cañas-Carrell
Associate Vice Provost
Director, STEM Core