Overview of Benefits

All Newly Eligible Employees

Non-temporary employees must work at least 20 (50%) hours per week and have an appointment for nine (9) months or greater to be eligible for UNI's full benefits package.

If viewing this document in the Google Chrome web browser, please visit our website (https://hrs.uni.edu/mybenefits) for any embedded links. Or, you may use another web browser in order to click directly on the links.

### Health Insurance ▼

<table>
<thead>
<tr>
<th>Coverage Start Date:</th>
<th>Coverage End Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>The first of the next month following the hire date, providing you enroll within 30 days of your date of employment.</td>
<td>The last day of the month the appointment is no longer eligible or the last day of the termination month -- whichever comes first.</td>
</tr>
</tbody>
</table>

UNI’s health plans are self-insured and are administered by Wellmark Blue Cross Blue Shield. Self-insured means the employer collects the premiums and takes the responsibility of paying the employee’s, and their dependents’, medical claims. For more information about each member’s role within a self-insured plan, visit https://hrs.uni.edu/mybenefits#ownership.

**UNI Blue Advantage (HMO) Plan**

Blue Advantage is a managed care plan administered by Wellmark Blue Cross/ Blue Shield of Iowa. This plan requires members to designate a Primary Care Physician (PCP).

**Preventive Care:** Includes: routine physicals, annual well child exams, annual OBGYN exams, and immunizations. Generally covered at 100%.

**Office Visits:** $15 copayment

**Routine Eye Exams:** $15 copayment. Must use network provider.

**Chiropractic Care:** $15 copayment, limit of 12 visits per person per year. Must use network chiropractor.

**Inpatient & Outpatient Coverage | Find a Doctor or Hospital** - Select ‘Blue Advantage (Iowa and Bordering Counties)’

The employee is responsible for 10% of all covered services after a $100 per person or $200 (maximum) deductible for family coverage is met.

**Maternity Coverage:** Covers pre-natal and post-natal care and physician services in full; employee is responsible for 10% of inpatient hospital care after the deductible is met.

**Nervous/Mental, Drug/Alcohol Abuse Services:** Requires pre-treatment review. Outpatient treatment – $15 copayment. Employee is responsible for 10% of inpatient treatment after the deductible is met.

**Prescription Drugs (Retail) | Wellmark Drug List**

- $10 copay - Tier 1 Generic
- $30 copay - Tier 2 Brand formulary
- $50 copay - Tier 3 Non-Preferred & Tier 4 Limited
- $100 copay - Preferred Specialty
- $200 copay - Non-Preferred Specialty

Mail order prescription drug program is available.

**Other Covered Services**

Home Medical Equipment, Oxygen and Equipment, Prosthetics, Therapies: Physical, Private Duty Nursing, Ambulance

**Maximum Out-of-Pocket (MOP)**

<table>
<thead>
<tr>
<th></th>
<th>Prescription Drugs:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical: $750 per person</td>
<td>$2,600 single plan</td>
</tr>
<tr>
<td>Medical: $1,500 (maximum) per family</td>
<td>$5,200 (maximum) per family</td>
</tr>
</tbody>
</table>

All deductibles, coinsurance, and office visit copay applies to MOP. Once MOP is met, all covered services are paid at 100% for the remainder of the calendar year.
Overview of Benefits: All Newly Eligible Employees
Revised 02-SEP-2020

<table>
<thead>
<tr>
<th>Premiums¹</th>
<th>Employee 1/12 Annual Premium</th>
<th>Employee Annual Premium</th>
<th>UNI Annual Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single Plan</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$9,093.72</td>
</tr>
<tr>
<td>Family Plan</td>
<td>$192.60</td>
<td>$2,311.20</td>
<td>$17,505.96</td>
</tr>
<tr>
<td>Shared Family</td>
<td>$20.10</td>
<td>$241.20</td>
<td>$19,694.28</td>
</tr>
</tbody>
</table>

**UNI PPO (Alliance Select) Plan**

Preferred Provider Organization (PPO) plan allows you to choose any health care provider, but member pays lower coinsurance if the provider participates in Wellmark’s Alliance Select PPO network or the National BlueCard PPO network.

**Preventive Care:** Includes: routine physicals, annual well child exams, annual OBGYN exams, and immunizations. Generally covered at 100%.

**Office Visits:** $20 copayment; unless a Specialist then $40 copayment.

**Routine Eye Exams:** In Network: Covered at 100%. Out-of-Network: The employee is responsible for 30% of exam after satisfying the Out-of-Network deductible.

**Chiropractic Care:** In Network: $20 office visit copay. Out-of-Network: The employee is responsible for 30% of service after satisfying the Out-of-Network deductible.

**Inpatient & Outpatient Coverage | Find a Doctor or Hospital - Select ‘Alliance Select (Iowa)’**

In Network: The employee is responsible for 10% of all covered hospital-related services after a $350 per person or $700 (maximum) deductible for family coverage is met. Out-of-Network: The employee is responsible for 30% of all covered hospital related services after a $1,000 deductible per person or $2,000 (maximum) deductible for family coverage is met.

**Maternity Coverage:** In Network: The employee is responsible for 10% of usual, reasonable, and customary (UCR) services for obstetrical care and delivery after satisfying the deductible.

**Nervous/Mental, Drug/Alcohol Abuse Services:** In Network: The employee is responsible for 10% of outpatient treatment after In Network deductible is met. The employee is responsible for 10% of UCR inpatient services after satisfying the In Network deductible. Out-of-Network: The employee is responsible for 30% of outpatient treatment after Out-of-Network deductible is met. The employee is responsible for 30% of UCR after satisfying the Out-of-Network deductible.

**Prescription Drugs (Retail) / Wellmark Drug List**

- $10 copay - Tier 1 Generic
- $30 copay - Tier 2 Brand formulary
- $50 copay - Tier 3 Non-Preferred & Tier 4 Limited
- $100 copay - Preferred Specialty
- $200 copay - Non-Preferred Specialty
- Mail order prescription drug program is available.

**Maximum Out-of-Pocket (MOP)**

Medical: In Network $1,750 per person / Out-of-Network $4,000

Medical: In Network $3,500 (maximum) per family / Out-of-Network $8,000

Prescription Drugs: $2,600 per person

Prescription Drugs: $5,200 (maximum) per family

All deductibles, coinsurance, and office visit copay applies to MOP. Once MOP is met, all covered services are paid at 100% for the remainder of the calendar year.

<table>
<thead>
<tr>
<th>Premiums¹</th>
<th>Employee 1/12 Annual Premium</th>
<th>Employee Annual Premium</th>
<th>UNI Annual Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single Plan</td>
<td>$21.45</td>
<td>$257.40</td>
<td>$9,093.72</td>
</tr>
<tr>
<td>Family Plan</td>
<td>$364.80</td>
<td>$4,377.60</td>
<td>$17,505.96</td>
</tr>
<tr>
<td>Shared Family</td>
<td>$182.40</td>
<td>$2,188.80</td>
<td>$19,694.28</td>
</tr>
</tbody>
</table>

¹ The UNI PPO (Alliance Select) is the base health plan for which UNI premiums are determined.

- For Single coverage, the employer premium for the UNI PPO (Alliance Select) is applied to the UNI Blue Advantage (HMO) Plan.
- For Family coverage, 80% of the full premium for the UNI PPO (Alliance Select) is applied to UNI Blue Advantage (HMO) Plan.
Dental Insurance — Dental Plan 2 ▼

<table>
<thead>
<tr>
<th>Coverage Start Date:</th>
<th>Coverage End Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>The first of the next month following the hire date, providing you enroll within 30 days of your date of employment.</td>
<td>The last day of the month the appointment is no longer eligible or the last day of the termination month -- whichever comes first.</td>
</tr>
</tbody>
</table>

Participation is optional for eligible employees. Employees who work at least half-time or more and are appointed for nine (9) months or longer are eligible for dental insurance through the University. This plan has no deductible. For more information, visit [www.uni.edu/hrs/mybenefits/dental](http://www.uni.edu/hrs/mybenefits/dental).

**Check Ups & Teeth Cleaning for Preventive Maintenance Care**
100% covered up to the maximum annual benefit.

**Cavity Repair & Tooth Extractions**
The employee is responsible for 10% if in the PPO network or 20% in the Premier Network, up to the maximum annual benefit.

**Root Canals, Gum & Bone Disease**
The employee is responsible for 40% if in the PPO network or 50% in the Premier Network, up to the maximum annual benefit.

**High Cost Restorations, Dentures, Bridges & Straighter Teeth**
The employee is responsible for 50%, up to the maximum annual benefit.

**Maximum Annual Benefit**
$1,500 per person per calendar year for covered services.

**Orthodontic Care**
The employee is responsible for 50%, up to the $1,500 life time maximum per member. Orthodontic care is available only to dependent children up to age 19.

**Additional Teeth Cleanings for Those Who Qualify — Delta Dental’s Enhanced Benefits Program**
Employees and their covered family members who have certain health conditions may qualify for additional annual teeth cleanings. For more information visit [https://hrs.uni.edu/sites/default/files/mybenefits/bn_dental_enhanced.pdf](https://hrs.uni.edu/sites/default/files/mybenefits/bn_dental_enhanced.pdf).

**Automatic Annual Rollover — Delta Dental’s To Go Program**
Employees and covered family members who do not use the maximum annual benefit within the calendar year will rollover the unused balance to the following year. This occurs each January 1. For more information visit [https://hrs.uni.edu/sites/default/files/mybenefits/bn_dental_togo.pdf](https://hrs.uni.edu/sites/default/files/mybenefits/bn_dental_togo.pdf).

<table>
<thead>
<tr>
<th>Premiums²</th>
<th>Employee 1/12 Annual Premium</th>
<th>Employee Annual Premium</th>
<th>UNI Annual Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single Plan</td>
<td>$6.00</td>
<td>$72.00</td>
<td>$306.00</td>
</tr>
<tr>
<td>Family Plan</td>
<td>$54.75</td>
<td>$657.00</td>
<td>$657.00</td>
</tr>
<tr>
<td>Shared Family</td>
<td>$46.50</td>
<td>$558.00</td>
<td>$612.00</td>
</tr>
</tbody>
</table>

² Monthly premiums are based on prior years’ claims utilization and actuarial estimates.

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**Health and Dental Pre-tax Deduction ▼**

Health and/or dental premiums are deducted before federal and state income tax, FICA and Medicare taxes are calculated. Premiums are then a pre-tax deduction, and is the default option for health and dental premiums for the University. Employees may choose to opt out of this by contacting Human Resource Services.

Participation in the health and dental pre-tax deduction option limits the changes that can be made to health and dental plans during the plan year and may slightly reduce Social Security benefits. For more information, visit [https://hrs.uni.edu/mybenefits/learn-takehome-pay](https://hrs.uni.edu/mybenefits/learn-takehome-pay).
Vision Options ▼

<table>
<thead>
<tr>
<th>Coverage Start Date:</th>
<th>Coverage End Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>The first of the next month following the hire date, providing you enroll within 30 days of your date of employment.</td>
<td>The last day of the month the appointment is no longer eligible or the last day of the termination month -- whichever comes first.</td>
</tr>
</tbody>
</table>

**Avesis**

Vision insurance is optional for employees and the employer does not contribute to the plan. The plan is administered by Avesis. Employees may choose between two optional vision plans. The 'Vision Exam & Materials' plan covers one routine eye exam per year after paying a $10 copayment; employees and covered dependents are also eligible to receive glasses or contact lenses at a discounted rate. The 'Materials Only' plan covers glasses or contact lenses at a discounted rate for employees and covered dependents. Employees pay the full cost of the premium through payroll deduction. This deduction is always pre-tax. For more information, visit [https://hrs.uni.edu/mybenefits/vision](https://hrs.uni.edu/mybenefits/vision).

<table>
<thead>
<tr>
<th>Premiums</th>
<th>Employee 1/12 Annual Premium</th>
<th>Employee Annual Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>Materials Only Single Plan</td>
<td>$8.82</td>
<td>$105.84</td>
</tr>
<tr>
<td>Materials Only Family Plan</td>
<td>$20.29</td>
<td>$243.48</td>
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<tr>
<td>Exam &amp; Materials Single Plan</td>
<td>$12.63</td>
<td>$151.56</td>
</tr>
<tr>
<td>Exam &amp; Materials Family Plan</td>
<td>$28.54</td>
<td>$342.48</td>
</tr>
</tbody>
</table>

**DeltaVision Discount**

Employees who are enrolled in Delta Dental of Iowa have access to a vision discount program through DeltaVision at no additional cost. For more information, visit [https://hrs.uni.edu/sites/default/files/mybenefits/deltavision.pdf](https://hrs.uni.edu/sites/default/files/mybenefits/deltavision.pdf).

Life Insurance ▼

<table>
<thead>
<tr>
<th>Coverage Start Date:</th>
<th>Coverage End Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>First day of employment.</td>
<td>The day after you are no longer eligible, or the day after your last day worked -- whichever comes first.</td>
</tr>
</tbody>
</table>

UNI pays the full premium. Participation in the life insurance program is automatic for employees with a permanent appointment of half time or more for a minimum of nine months. Coverage is effective on the first day of active employment. For more information, visit [https://hrs.uni.edu/mybenefits/life-ins](https://hrs.uni.edu/mybenefits/life-ins).

**Academic Administrators, Faculty, Institutional Officials, Merit Supervisory, and P&S Staff**

**Coverage:** One and one-half (1.5) times annual budgeted salary

**Maximum Benefit:** $250,000

**Merit AFSCME and Merit Confidential**

**Coverage:** Two (2) times annual budgeted salary

**Maximum Benefit:** $124,000
Voluntary Term Life Insurance and Accidental Death & Dismemberment (AD&D)

**Coverage Start Date:**
The first of the next month following the hire date, providing you enroll within 30 days of your date of employment.

**Coverage End Date:**
The day after you are no longer eligible, or the day after your last day worked -- whichever comes first.

Additional term life insurance and AD&D coverage may be purchased and is offered through Principal Life Insurance Company. Employees pay the full cost of the premium with after-tax dollars through payroll deduction. Guaranteed coverage is available if purchased within 30 days of employment. Employees can elect up to $300,000 of coverage for themselves. Coverage up to $50,000 is available for spouses and coverage for eligible children 14 days to age 26 is $10,000 per child. Spouse and dependent coverage cannot exceed 100% of employee’s coverage. The benefit reduces 35% at age 70 and an additional 15% reduction at age 75. Visit [https://hrs.uni.edu/mybenefits/voluntary-life](https://hrs.uni.edu/mybenefits/voluntary-life) for more information. Coverage for Voluntary Term Life Insurance and AD&D is effective the first of the month following the date of employment if elected.

Long-Term Disability Insurance/TIAA Retirement Plan Supplement Benefit

**Coverage Start Date:**
First day of work.

**Coverage End Date:**
Ends the day after you are no longer eligible for the benefit.

**Long-Term Disability Insurance**
Provides salary replacement if an employee becomes totally disabled, and unable to work. If approved for LTD, benefits would be 66 2/3% of salary up to a maximum monthly benefit of $6,666. Participation in the long term disability program is automatic for employees with a permanent appointment of half time or more for a minimum of nine months. Coverage begins on the first day of active employment. For more information, visit [https://hrs.uni.edu/mybenefits/ltd](https://hrs.uni.edu/mybenefits/ltd).

**TIAA Retirement Plan Supplement Benefit**
This plan continues TIAA contributions for employee’s who qualify for disability benefits and who are enrolled in TIAA. Coverage is automatic and the premium cost is paid in full by UNI.

Employee Assistance Program (EAP)

**Coverage Start Date:**
First day of work.

**Coverage End Date:**
Ends the day after you are no longer eligible for the benefit.

UNI contracts with [Employee & Family Resources (EFR)](https://hrs.uni.edu/mybenefits/eap) to provide EAP services. EAP offers initial assessment/referral and short-term counseling for employees and their immediate family members to address problems affecting personal relationships, health and work performance. For additional information, visit the Human Resource Services’ EAP website at [https://hrs.uni.edu/mybenefits/eap](https://hrs.uni.edu/mybenefits/eap).

Iowa Workers’ Compensation

**Coverage Start Date:**
First day of work.

**Coverage End Date:**
Ends the day after you are no longer eligible for the benefit.

Pays medical bills and salary replacement for employees injured on the job or who suffer from job-related illnesses. The program is administered by Sedgwick CMS of Des Moines, Iowa. For more information, visit [https://hrs.uni.edu/mybenefits/workerscomp](https://hrs.uni.edu/mybenefits/workerscomp).
**Flexible Spending Accounts (FSA)**

<table>
<thead>
<tr>
<th>Coverage Start Date:</th>
<th>Coverage End Date:</th>
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</thead>
<tbody>
<tr>
<td>Effective the first day of the month following the date of enrollment, providing you enroll within 30 days of your date of employment.</td>
<td>The last day of the month the appointment is no longer eligible or the last day of the termination month -- whichever comes first.</td>
</tr>
</tbody>
</table>

Employees may elect to make pre-tax contributions to a spending account to be reimbursed for dependent care expenses and/or health, dental, and vision expenses. To be eligible for reimbursement, expenses must be incurred by March 15. Reimbursement requests must be received by March 31 following the end of the plan year. Funds not used will be forfeited. Contribution elections may not be changed during the calendar year unless there is an approved family status change. New employees electing to participate in a spending account enroll from date of eligibility until December 31 only for the initial year of participation.

**Dependent Care Account**

This account is used to reimburse dependent daycare care expenses incurred by employees. The maximum contribution is $5,000 per year per family or the salary of the lower paid spouse – whichever is lower. Spouses who are full time students have an assumed income of $200 per month. The minimum contribution is $20 per month. Eligible expenses are limited to those allowed by the IRS for the Dependent Care Tax Credit. Every dollar contributed to a Dependent Care Account reduces the allowable tax credit (on the tax return) by a dollar. Generally if family income is $30,000 or more, the Dependent Care Account is more advantageous than the tax credit. Expenses are reimbursed as funds accrue in the account. For more information, visit [https://hrs.uni.edu/mybenefits/learn-takehome-pay](https://hrs.uni.edu/mybenefits/learn-takehome-pay).

**Health Care Account**

This account is used to reimburse health, dental, and vision expenses that are not covered by insurance plans. Expenses are limited to those allowed as deductions by the IRS. Some examples include: deductibles, copayments, co-insurance amounts, and expenses not covered such as eyeglasses and some over-the-counter drugs. The IRS publishes a separate listing of deductible expenses. The maximum contribution is $2,750 per year. The minimum contribution is $20 per month. Expenses are reimbursed when they are incurred up to the annual contribution level. For more information, visit [https://hrs.uni.edu/mybenefits/learn-takehome-pay](https://hrs.uni.edu/mybenefits/learn-takehome-pay).

**Employee Well-being**

<table>
<thead>
<tr>
<th>Coverage Start Date:</th>
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</thead>
<tbody>
<tr>
<td>First day of work.</td>
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</tbody>
</table>

The mission of UNI Employee Well-being is to enhance the well-being of UNI faculty and staff through holistic programs and initiatives that support a healthy lifestyle and create a healthy environment in which to live and work. Employees are offered free flu vaccinations, biometric screenings, and smoking cessation services. The program also includes an annual Benefits & Well-being fair, on-campus health and well-being challenges and educational learning opportunities. Employees have the option to use the Wellness & Recreation Center by paying an annual user fee. Employees also have access to fitness and leisure classes, personal trainers, adult and youth swim lessons, CPR and first aid classes, and over-the-counter products through the Student Health Clinic. For more information, visit [https://hrs.uni.edu/wellbeing](https://hrs.uni.edu/wellbeing).

**Nursing Mothers and Lactation Rooms**

<table>
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</tr>
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</tbody>
</table>

As part of our family-friendly benefits, the University of Northern Iowa supports breastfeeding mothers by accommodating the mother who wishes to express breast milk during her workday. The University provides five private lactation rooms for mothers to use to express milk. Lactation rooms are located in Gilchrist Hall, Bartlett Hall, Maucker Union, Schindler, and in the Child Development Center at Nielsen Field House. Additionally, if you elect a University sponsored health plan, it may cover part of the cost for a breast pump. For more information, visit [https://hrs.uni.edu/mybenefits/nursing-mothers](https://hrs.uni.edu/mybenefits/nursing-mothers).
Retirement Programs ▼

**Coverage Start Date:**
First day of employment.

**Coverage End Date:**
The last day of the month the appointment is no longer eligible or the last day of the termination month -- whichever comes first.

The State of Iowa requires all state employees to participate in an approved retirement program. The only exceptions are foreign nationals who are in the United States as exchange scholars, trainees, professors, teachers, research assistants and specialists. If a new employee does not choose a retirement program, he or she will default to IPERS participation. Participation election, both by election or by default, is irrevocable and cannot be changed at any time during an employee’s employment with the University of Northern Iowa.

**Iowa Public Employees Retirement System (IPERS)**

- If a new employee has retired and previously participated in IPERS at UNI or another state agency, they cannot receive IPERS distributions if they earn an annual salary of $30,000 or more at any state agency.

A defined benefit program administered by the State of Iowa. UNI contributes 9.44% of paid salary. Employee contributes 6.29% of paid salary. The contributions (both UNI and the employee) are different for Regent Police Officers. For more information, as well as contribution rates, visit [https://hrs.uni.edu/mybenefits/ipers](https://hrs.uni.edu/mybenefits/ipers).

**Teachers Insurance and Annuity Association (TIAA)**

- If a new employee has retired from UNI and previously participated in TIAA, they cannot return in a TIAA eligible position and receive distributions. Therefore, even if the employee is now participating in IPERS, they cannot hold a non-temporary appointment of half-time or greater, and earn an annual salary of $7,800 or more at the University and receive TIAA distributions.

A defined contribution program administered by TIAA. Employee may allocate monthly contributions between several accounts. UNI contributes 6.66% of the first $4,800 of earnings; 10% of all earnings over $4,800. Employee contributes 3.33% of the first $4,800 of earnings; 5% of all earnings over $4,800. Contributions increase to 10% for UNI and 5% for employees, following five years of continuous participation. For more information, visit [https://hrs.uni.edu/mybenefits/tiaa](https://hrs.uni.edu/mybenefits/tiaa).

**Tax-Deferred Annuity (TDA) Plan**

Employees may set aside additional contributions to a TIAA Supplemental Retirement Annuity or to another approved vendor subject to IRS guidelines for maximum exclusion amounts. UNI does not contribute matching funds. For more information, visit [https://hrs.uni.edu/mybenefits/tda](https://hrs.uni.edu/mybenefits/tda).

Faculty Only Benefits

**Sick Leave for Faculty ▼**

**Coverage Start Date:**
First day of employment.

**Coverage End Date:**
Coverage will end the last day of the month in which employment ends.

Full time faculty members accrue 60 hours or 7.5 days of sick leave at the beginning of each semester. Sick leave may be used for the employee’s illness. Other uses of sick leave with limitations are emergency leave or the care of ill or injured family members, funeral leave, pallbearer leave and adoption leave. Accumulation of sick leave is limited to 120 days or 960 hours. For more information, visit [https://hrs.uni.edu/mybenefits/faculty-absence#5](https://hrs.uni.edu/mybenefits/faculty-absence#5).
Vacation for Staff ▼

Coverage Start Date:
First day of employment.  
Coverage End Date: 
The last day of the month the appointment is no longer eligible or the last day of the termination month -- whichever comes first.

Vacation time may be used with the approval of the department. When the maximum accrual is reached, the employee does not accumulate additional vacation until some has been used. Holidays that fall during an employee's scheduled vacation are paid as a holiday and are not charged to an employee's vacation accumulation. Questions should be referred to Payroll, 3-6425. For more information, visit https://hrs.uni.edu/mybenefits/absence#7.

Academic Administrators, Institutional Officials, Merit Supervisory, and P&S Staff

Full time, 12-month employees accrue 16 hours of vacation and personal days per month or 24 days per year. Employees may accumulate a maximum of twice the annual accrual -- 384 hours or 48 days.

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Merit AFSCME, Merit Confidential, and Merit Supervisory

Following is the schedule for vacation accrual:

<table>
<thead>
<tr>
<th>Year of Service</th>
<th>Monthly Vacation Accrual-Hours</th>
<th>Monthly Personal Holiday Accrual-Hours</th>
<th>Total Monthly Accrual-Hours</th>
<th>Annual Accrual-Hours</th>
<th>Annual Accrual-Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st-4th</td>
<td>6.67</td>
<td>1.33</td>
<td>8.00</td>
<td>96 Hours</td>
<td>12 Days</td>
</tr>
<tr>
<td>5th-11th</td>
<td>10.00</td>
<td>1.33</td>
<td>11.33</td>
<td>136 Hours</td>
<td>17 Days</td>
</tr>
<tr>
<td>12th-19th</td>
<td>13.33</td>
<td>1.33</td>
<td>14.66</td>
<td>176 Hours</td>
<td>22 Days</td>
</tr>
<tr>
<td>20th-24th</td>
<td>14.67</td>
<td>1.33</td>
<td>16.00</td>
<td>192 Hours</td>
<td>24 Days</td>
</tr>
<tr>
<td>25th+</td>
<td>16.67</td>
<td>1.33</td>
<td>18.00</td>
<td>216 Hours</td>
<td>27 Days</td>
</tr>
</tbody>
</table>

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Sick Leave for Staff ▼

Coverage Start Date: 
First day of employment.  
Coverage End Date: 
The last day of the month the appointment is no longer eligible or the last day of the termination month -- whichever comes first.

Full time, 12-month employees accrue 12 hours of sick leave per month or 18 days per year. Sick leave may be used for the employee's illness. Other uses of sick leave, with limitations, are emergency leave for the care of ill or injured family members, funeral leave, pallbearer leave and adoption leave. Accumulation of sick leave is unlimited.

Once an employee has accumulated a minimum of 240 hours of sick leave, he or she may elect to convert the monthly accrual of 12 hours into 4 hours of vacation. Conversion is done on a monthly basis, not on a retrospective basis. Conversion is not allowed any month that an employee uses sick leave or any month which the balance of accrued sick leave falls below 240 hours. Note: the waiting period for Long-Term Disability benefits is 90 working days or 720 hours. For more information, visit https://hrs.uni.edu/mybenefits/absence#5.

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Staff Tuition Reimbursement Program ▼

Coverage Start Date: 
After 12 months of service to UNI.  
Coverage End Date: 
The last day of the month the appointment is no longer eligible or the last day of the termination month -- whichever comes first.

Due to budget reductions the Staff Tuition Reimbursement Program has been suspended for the fiscal year 2021 and will be reevaluated for fiscal year 2022. After 12 months of non-temporary service to UNI, eligible staff may apply for tuition reimbursement. For additional information, visit https://hrs.uni.edu/pd/strp.