

Open Enrollment 2026

Agenda:

- Key dates
- What is **NOT** changing in 2026?
- What **IS** changing in 2026?
- Benefits options
- Changing State or UFSelect benefits
- Reminders & Resources



2026 Open Enrollment

October 13, 8 a.m. ET – October 31, 6 p.m. ET

- Open Enrollment is your opportunity to make benefits changes for 2026
- Passive Open Enrollment
- Change State Benefits via People First
- Change UFSelect Benefits via myUFL
- State of Florida and UFHR Benefits & Wellness Fair:
 - Tuesday, October 14, 10 a.m.-2 p.m.
 - Evans Champion Club at Ben Hill Griffin Stadium





What is **NOT** changing in 2026?

- No Employee Increase to:
 - State medical plans
 - Three State dental plans Sun Life Prepaid, Humana Prepaid, Humana Indemnity
 - Most State supplemental plans (i.e. cancer, hospitalization, etc.)
 - GatorCare medical plans
 - UFSelect Eagles Dental, Humana Vision and The Standard Life & Disability plans
- <u>No Change</u> to plan designs for Standard PPO/HMO medical, dental, and vision plans (*except HDHP deductible will increase to \$1700 single/\$3400 family IRS minimum amount*)

2026 State Health Insurance Premiums

State Employees' Group Health Self-Insurance Trust Fund

Health Premiums



Rate change for all participants effective December 2025 for January 2026 coverage

Subscriber Category/Contribution Cycle		Coverage	HMO/PPO Standard			НМО/РРО НОНР		
		Types	Employer	Enrollee	Total	Employer ⁴	Enrollee	Total
		Single	\$925.35	\$50.00	\$975.35	\$925.35	\$15.00	\$940.35
	Monthly Full-Time Employees ¹	Family	\$2,015.48	\$180.00	\$2,195.48	\$2,015.48	\$64.30	\$2,079.78
Canada Camilas (ODC		Spouse	\$2,165.48	\$30.00	\$2,195.48	\$2,039.40	\$30.00	\$2,069.40
Career Service/OPS	Bi-Weekly Full-Time Employees ¹	Single	\$462.68	\$25.00	\$487.68	\$462.68	\$7.50	\$470.18
		Family	\$1,007.74	\$90.00	\$1,097.74	\$1,007.74	\$32.15	\$1,039.89
		Spouse	\$1,082.74	\$15.00	\$1,097.74	\$1,019.70	\$15.00	\$1,034.70
	Monthly Full-Time Employees ^{1,2}	Single	\$967.01	\$8.34	\$975.35	\$928.86	\$8.34	\$937.20
000 100 00		Family	\$2,165.48	\$30.00	\$2,195.48	\$2,039.37	\$30.00	\$2,069.37
SES/SMS	Bi-Weekly Full-Time Employees ^{1,2}	Single	\$483.51	\$4.17	\$487.68	\$464.43	\$4.17	\$468.60
		Family	\$1,082.74	\$15.00	\$1,097.74	\$1,019.69	\$15.00	\$1,034.69
COBRA	*4	Single	\$0	\$994.86	\$994.86	\$0	\$916.66	\$916.66
(Non-Medicare)	Monthly ³	Family	\$0	\$2,239.39	\$2,239.39	\$0	\$2,036.38	\$2,036.38
Early Retirees/Eligible		Single	\$0	\$813.46	\$813.46	\$0	\$736.80	\$736.80
Former Employees/ Surviving Spouse	Monthly	Family	\$0	\$1,831.08	\$1,831.08	\$0	\$1,632.05	\$1,632.05
Over-age Dependents		Single	\$0	\$813.46	\$813.46	\$0	\$736.80	\$736.80



State of Florida Life Insurance Provider

- MetLife will replace Securian 1/1/26
 - Employer-paid basic term life for eligible employees
 - · Employee-paid optional term life
 - Employee-paid spouse and child life
- Current Securian elections and beneficiaries will transfer to MetLife
- Age-based rate reduction
- Employees may increase their coverage by one times earnings to a maximum of \$500,000 without medical underwriting. Medical underwriting is required for all new enrollees.
- AD&D will not be included in the MetLife plans





Premium Increases

- 11 out of 14 State dental plans 2-5%
- State Humana Vision 3% increase
- UFSelect Preferred Legal Plan \$2 / pay period increase

Premium Decreases

Cigna Hospital Supplemental Plan



Health Savings Accounts

- Contribution increase
 - \$4,400 limit for individual coverage (\$100 increase)
 - \$8,750 limit for family coverage (\$200 increase)
 - Includes state contribution to the HSA
- Only those enrolled in a state HDHP are eligible
- Provider: Chard Snyder



Dependent Care FSA & Healthcare FSA

- Contribution increase
 - Dependent Care FSA: \$7,500 limit for family coverage (\$2,500 increase)
 - Healthcare FSA: \$3,300 limit for individual coverage (\$100 increase)
- Provider: Chard Snyder



Weight Management Program & Diabetes Management Program

- Must have been enrolled in the State PPO or HMO plan during 2025 and continue enrollment in 2026
- Limited to the first 2800 applicants for Weight Management Program and first 2000 for Diabetes Management Program
- Signed medical provider referral is required with application
- Application Period: November 3-17, 2025
- Late applications will not be accepted



UFSelect Voluntary Life & Disability - The Standard

- Employees are eligible for \$300,000 guaranteed-issue life insurance with no medical questions (even if previously declined)
- Spouses are eligible for \$50,000 guaranteed-issue life insurance with no medical questions (even if previously declined)
- Any life insurance amounts over the guaranteed issue will require medical questions
- AD&D is included in The Standard Life Insurance plans
- No longer offering smoker rates all employees will pay the non-smoker rates
- Employees may enroll in STD or LTD with no medical questions (even if previously declined)





State of Florida

Standard-deductible and high-deductible HMO and PPO plans

• University of Florida

GatorCare is available for postdoctoral associates, clinical faculty in the College of Medicine, residents, and faculty and staff who have domestic partners

Medical Plan Highlights

	Standard PPO	Standard HMO	НДНР РРО	НДНР НМО
Provider Access	In or out of network	In network only	In or out of network	In network only
Annual Deductible (In-Network)	Single: \$250 Family: \$500	None	Single: \$1700 Family: \$3400	Single: \$1700 Family: \$3400
Preventative Care	Covered at 100%	Covered at 100%	Covered at 100%	Covered at 100%
Flexible Spending Account	\$3300 / year	\$3300 / year	Limited Purpose	Limited Purpose
Health Savings Account	No	No	ER Contribution: \$500 / \$1000 EE Contribution: \$3900 / \$7750	ER Contribution: \$500 / \$1000 EE Contribution: \$3900 / \$7750
Network Provider	Florida Blue (BCBS)	Aetna or UHC	Florida Blue (BCBS)	Aetna or UHC
Rx Provider	Optum Rx	Optum Rx	Optum Rx	Optum Rx
EE Monthly Cost	\$50	\$50	\$15	\$15
Family Monthly Cost	\$180	\$180	\$64.30	\$64.30

Dental Insurance

- State of Florida
 - Fourteen dental insurance options
 - Dental Insurance Plans
- University of Florida
 - UFSelect Eagles Reimbursement Plan
 - UFSelect Eagles Dental Brochure
 - Monthly Rates
 - Employee Only: \$40.60
 - Employee + Spouse/DP: \$81.00
 - Employee + Child(ren): \$122.00
 - Family: \$160.00

2026	Prepaid Dental Plans (DHMO)			Preferred Provide (PPO) F	•	Indemnity with	Indemnity Plans	
Dental Plans	Cigna Prepaid Dental (4034)	Sun Life Prepaid Dental (4025)	Humana HD 205 Prepaid Dental (4044)	Ameritas, Humana, MetLife Preventive PPO (4023, 4094, 4033)	Ameritas, Humana, MetLife Standard PPO (4022, 4092, 4032)	Ameritas, Humana, MetLife Indemnity w/PPO (4021, 4090, 4031)	Sun Life Indemnity w/ PPO (4074)	Humana Indemnity (4084)
Type I: Preventative Services (Routine cleanings, X-rays, etc.)	See benefit schedule: Fixed copayments	See benefit schedule: Fixed copayments	See benefit schedule: Fixed copayments	100% in-network 80% out of network	100% in-network 80% out of network	100% in or out of network	100% in or out of network	See benefit schedule: Reimbursement amounts
Type II: Basic Services (Fillings, root canals, etc.)	See benefit schedule: Fixed copayments	See benefit schedule: Fixed copayments	See benefit schedule: Fixed copayments	80% in-network 50% out of network	80% in-network 50% out of network	80% in or out of network	80% in or out of network	See benefit schedule: Reimbursement amounts
Type III: Major Services (Crown, bridges, etc.)	See benefit schedule: Fixed copayments	See benefit schedule: Fixed copayments	See benefit schedule: Fixed copayments	No coverage	50% in-network 30% out of network	50% in or out of network	50% in or out of network	See benefit schedule: Reimbursement amounts
Annual Deductible	No Deductible	No Deductible	No Deductible	Type I: No deductible Type II only: Individual: \$50 EE + Spouse: \$100 EE + Children: \$100 Family: \$150	Type I: No deductible Type II & III: Individual: \$50 EE + Spouse: \$100 EE + Children: \$100 Family: \$150	Type I: No deductible Type II & III: Individual: \$50 EE + Spouse: \$100 EE + Children: \$100 Family: \$150	Type I: No deductible Type II & III: Individual: \$50 Family: \$100	No Deductible
Annual Maximum	None	None	None	\$1,000	\$1,500	\$2,000	\$2,000 in-network \$1,500 out of network	\$1,000
Orthodontia	Yes, no age limit	Yes, no age limit	No age limit: Eligible for 25% discount at provider's discretion	No coverage	Yes, no age limit	Yes, no age limit	Yes, only dependents under 19	No Coverage
Waiting Period for Orthodontic Services	None	None	None	No Coverage	12 month waiting period (may be satisfied w/ prior creditable coverage)	None	None	No Coverage
Orthodontia Maximum	None	None	None	No Coverage	\$2,000 in-network; \$1,500 out of network	\$2,500 in or out of network	\$1,500	No Coverage

DENTAL PLAN MONTHLY PREMIUMS

Type of Dental Plan	Plan Code	Plan Name	Employee Only	+ Spouse	Employee + Child(ren)	+ Family
Prepaid Dental Plan Pays benefits only when you use	4034	<u>Cigna</u> Prepaid Dental	\$23.49	\$46.29	\$55.20	\$70.51
network providers. No deductible or annual maximum. Most preventive care at no charge.	4025	<u>Sun Life</u> Prepaid Dental	\$14.93	\$25.17	\$33.26	\$43.54
You pay a fixed copayment for dental procedures listed on the copayment schedule. Orthodontia: Covered for adults and children.	4044	Humana HD205 Prepaid Dental	\$12.64	\$21.20	\$23.00	\$32.98
PPO Dental Plan Receive care from any dentist.	4023	Ameritas Preventive	\$22.04	\$41.68	\$44.62	\$65.36
Your cost is lower when you use network dentists.	4094	Humana Preventive	\$21.54	\$39.88	\$44.56	\$64.68
 You have an annual deductible to meet before the plan starts paying benefits and then you pay part of the cost for the services you receive. Orthodontia: Covered for adults and children (excluding Preventive PPO) 	4033	Metlife Preventive	\$19.24	\$35.56	\$39.74	\$57.70
	4022	Ameritas Standard	\$32.22	\$60.34	\$67.56	\$98.36
	4092	Humana Standard	\$32.16	\$59.54	\$66.52	\$96.58
	4032	Metlife Standard	\$38.06	\$70.40	\$78.66	\$114.20
ndemnity with PPO Dental Plan Receive care from any dentist.	4074	Sun Life Indemnity	\$47.68	\$91.54	\$108.22	\$142.74
Your cost is lower when you use network dentists.	4021	Ameritas Indemnity	\$48.12	\$89.28	\$101.66	\$146.76
You have an annual deductible to meet before the plan starts paying benefits, and then you pay a percentage of the cost for	4090	Humana Indemnity	\$48.04	\$88.88	\$99.32	\$144.20
 Orthodontia: Covered for adults and children (SunLife – children only). 	4031	Metlife Indemnity	\$48.48	\$89.66	\$100.20	\$145.46
ndemnity Dental Plan						
Receive care from any dentist.	4084	Humana	04474	604.00	000.00	607.40
 You have a deductible to meet and then pay part of the cost for the services you receive. 		Schedule B	\$14.74	\$21.96	\$23.30	\$37.10



Supplemental Benefits

Life and Disability Insurance

State of Florida: Life and Short-term Disability

UFSelect: Life and Long-term Disability

Supplemental Insurances

State of Florida: Accident, Cancer, Hospitalization and Hospital Intensive Care

Savings Accounts

State of Florida: Healthcare Flexible Spending Account, Dependent Care Flexible Spending Account, Health Savings Account

Legal Plan

UFSelect Preferred Legal Plan



People First

Find your People First ID in myUFL

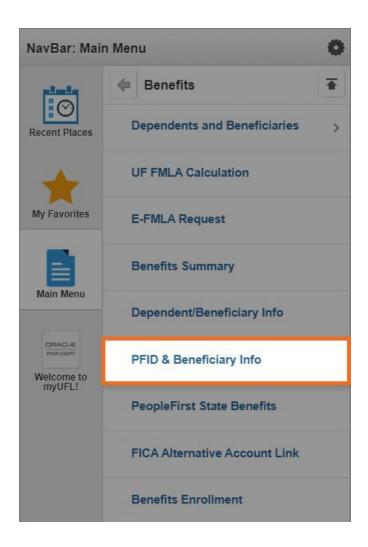
myUFL >

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PFID & Beneficiary Info



People First

Log in to People First website

- Contact UFHR Benefits team for assistance with login issues
- Make plan changes over the phone:
 - People First Service Center: 866-663-4735
- Enrollment Guide

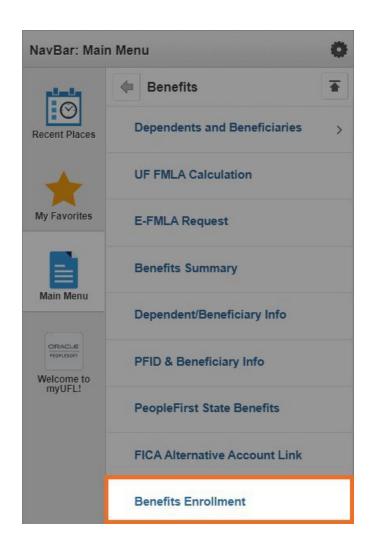


UFSelect and GatorCare

myUFL Benefits Portal

UFSelect benefits include:

GatorCare, Eagles Dental, Humana Vision, Optional Term Life, and Long-term Disability



Reminders and Resources



Make sure you review:



- Review your State of Florida Benefits Summary
- Beneficiaries
- Considerations
 - Did you get married or have a child?
 - Do you need to change your life insurance?
 - Does your child need orthodontia coverage?



Make sure you review:



Visit the **ONE.UF** directory to update your **personal mailing address**.

Instructions available at <u>UF Benefits-Life Events</u>



More Information

- UFHR Benefits Website
- State of Florida Open Enrollment Website
- Rate Changes:
 - State Benefits (excluding FSA/ HSA): 12/12 paycheck
 - UFSelect Benefits and FSA/HSA: 1/9 paycheck
- Benefits and Wellness Fair
 - Tuesday, October 14 from 10 a.m. to 2 p.m.
 - Evans Champions Club at Ben Hill Griffin Stadium



We are here to help!



Email us: benefits@ufl.edu



Book an in-person or video consult:

https://hr.ufl.edu/benefits/support/



Call us:

(352) 392-2477 Option 2

