

UT Southwestern Medical Center

2026-27 Employee Benefits Summary

Benefits for Employees are created by statute and subject to continued funding by the Texas Legislature. As such, benefits may be subject to change or even elimination by state legislature in the future.

Questions and Support

Our HR team is here to support you and answer any questions you may have. Please feel free to reach out to us directly via email at benefits@utsouthwestern.edu or by calling 214-648-9830.

Medical, Prescription, Dental and Vision Coverage

UT Medical Plans

- UT Select Medical (PPO) is administered by Blue Cross/Blue Shield of Texas. Details about the medical plan, which includes prescription services, details about the plan can be view at www.utsystem.edu/benefits. Preventive care is covered at 100% with no copayment.
- An additional \$50 premium differential applies to each employee and spouse without a preventive care exam completed by June 30 of each year. Preventive exams are covered 100% under the medical plan.
- Tobacco Premium Program: Monthly cost of \$30 per month per individual medical participant, age 16 and over, who has used tobacco products in the past 60 days, up to a family maximum of \$90/month.

	UT SELECT (PPO)
Copayment	\$30 (Family Care Physician); \$50 (Specialist)
Coinsurance	80% plan / 20% member
Coinsurance Maximum Individual/Family	\$5,000 / \$15,000
Annual Deductible Individual/Family	\$600 / \$1,800
Out-of-Network	After \$1,800 annual deductible, plan pays 60% of allowable amount.
Out-of-Area	After \$600 annual deductible, plan pays 75% of allowable amount.
Annual Out-of-Pocket Maximum	\$10,600/person; \$21,200/family (includes medical and prescription deductibles, copayments, and coinsurance)

Prescription Drug Program

- UT Prescription Drug Program is administered by **Express Scripts**.
- \$200 annual deductible per person.

	Generic	Preferred Brand	Non-Preferred Brand
Retail Network Pharmacy co-payments (up to a 30-day supply):	\$10.00	\$35.00	\$60.00
Mail Order/Walgreens/UT Pharmacy co-payments (90-day supply):	\$20.00	\$87.50	\$150.00

Dental Plans

- UT SELECT Dental covers preventive services at 100% of the allowable amount. Minor and major restorative services, endodontics, prosthodontics, oral surgery, and orthodontia are covered at 50% to 80% of the allowable amount after a \$25 annual deductible per person. The plan includes a \$1,250 annual maximum benefit per person and a \$1,250 lifetime maximum benefit for orthodontic services per person.
- UT SELECT Dental Plus offers the same plan design as UT SELECT Dental, but with enhanced coverage levels of 80% to 100% of the allowable amount and no annual deductible. The plan provides an annual maximum benefit of \$3,000 per person and a lifetime orthodontia maximum of \$3,000 per person.
- DeltaCare USA Dental HMO is available in Austin, Dallas/Ft. Worth, El Paso, Galveston, Houston, San Antonio, Tyler, and part of the Valley. Plan eligibility is based on your zip code. Participants must select a primary care dentist and do not need to submit claim forms. The plan has no deductible and uses set copayments that vary by service. There is no annual maximum benefit.

Vision Plans

- **Superior Vision** - Plan provides routine eye exam with glasses or contacts annually. Discounts are available for other services.
- **Superior Vision Plus** - Plan provides the same benefits as the Superior Vision plan, plus benefits for Progressive lenses, Polycarbonate lenses up to age 26, factory scratch coating, and ultraviolet coating.

Disability, Life Insurance, and Accidental Death and Dismemberment Coverage

Short Term Disability

- Blue Cross Blue Shield offers a benefit of 60% of regular weekly earnings up to a maximum of \$850 per week. Elimination period of 7 days and the exhaustion of available PTO and prior sick leave bank. Benefit can be paid up to a maximum of 22 weeks; 4 weeks for pre-existing conditions.

Long Term Disability

- Blue Cross Blue Shield offers a benefit of 60% of monthly earnings up to a maximum of \$15,000 per month. Elimination period of 90 days. Benefit paid until disability ends or age 65, whichever occurs first.

Term Life Insurance

- Blue Cross Blue Shield offers coverage from 1 to 10 times annual salary, up to \$2 million. UT Southwestern provides a \$50,000 basic benefit for employees enrolled in medical coverage. Coverage above 3 times annual salary requires Evidence of Insurability (EOI). Optional dependent coverage is available, including \$10,000 for a spouse and each child, as well as \$25,000 or \$50,000 spouse coverage with EOI.

Accidental Death and Dismemberment (ADD)

- Blue Cross Blue Shield offers coverage from 1 to 10 times annual salary, up to \$2 million. UT Southwestern provides a \$50,000 basic benefit for employees enrolled in medical coverage. Optional dependent coverage is available for a spouse (up to 50% of the employee's coverage) and \$10,000 per child.

Flexible Spending Account

UT Flex

- Allows employees to set aside pre-tax income to pay for eligible health, prescription, dental, and dependent care expenses, including childcare costs for children under age 13 when both parents are employed.
 - **Health Care:** \$180 Annual Minimum and \$3,400 Annual Maximum
 - **Day Care:** \$180 Annual Minimum and \$7,500 Annual Maximum

Retirement

Mandatory Retirement Plans

Teacher Retirement System of Texas (TRS) ([visit www.trs.texas.gov](http://www.trs.texas.gov))

- TRS is a mandatory defined benefit plan. The employee contributes 8.25%; UT Southwestern contributes 8.25%.

Optional Retirement Program (ORP)

- ORP is an alternate mandatory defined contribution plan that requires irrevocable 'opt out' from TRS within 90 days from appointment date. **Eligibility for ORP is based upon criteria established by the Texas Higher Education Coordinating Board.** Full-time working status required. The employee contributes 6.65%; UT Southwestern contributes 8.5%.

Voluntary Retirement Plans

UT Saver Tax Sheltered Annuity (TSA)

- Pre-tax and post-tax investment program. Choose from five approved retirement providers to supplement your retirement savings.

UT Saver Deferred Compensation Plan (DCP)

- Pre-tax and post-tax investment program. Choose from five approved retirement providers to supplement your retirement savings.

Additional Employee Benefits

Holidays

- UT Southwestern observes nine paid holidays each fiscal year:
 - Labor Day
 - Thanksgiving Day
 - Thanksgiving Holiday (the day after Thanksgiving)
 - Christmas Day
 - New Year's Day
 - Martin Luther King, Jr. Day
 - Memorial Day
 - Emancipation Day (Juneteenth)
 - Independence Day
- All full-time employees receive three floating holidays each year (part-time employees receive a prorated amount). These will be loaded Sept. 1 and will be available for immediate use, with supervisor pre-approval.

Paid Time Off

- Full-time employees accrue 160 hours of PTO leave the first year. The accrual rate for part-time employees is proportionate to their percent of time. Time can be used for personal and sick time. The accrual rate increases each year up to 20 years of service.

Other Benefits

- Family and Medical Leave
- Paid Parental Leave
- Convenient Parking
- Convenient Day Care Options
- Bright Horizons (Backup Daycare and Elder Care)
- Employee Wellness Program
- Employee Discount Program
- Headspace (Employee Support)
- Tuition Reimbursement Program
- Meal Facilities (on premises)
- Public Service Loan Forgiveness

UT Lifestyle Benefits

The lifestyle benefits are intended to help employees prepare for unexpected events before they happen. These benefits include plans offering robust coverage at lower premium rates than similar plans available for purchase on the open market.

- **Accident Insurance** provides cash payments for covered accidental injuries.
- **Critical Illness Insurance** provide cash payments for covered diagnoses such as heart attack or cancer.
- **Hospital Indemnity Insurance** helps offset out-of-pocket costs associated with hospital stays.
- **Legal Coverage** (LegalEASE) offers access to legal services and attorney support.
- **Pet Insurance** (MetLife) helps cover the costs of unexpected accidents, illnesses, and routine care.

Insurance Premiums

Monthly Premium for Medical, Dental, Vision and Tobacco

Coverage Level	UT Select Full-Time Medical	UT Select Part-Time Medical	UT Select Dental	UT Select Dental Plus	DeltaCare USA Dental HMO	Superior Vision	Superior Vision Plus	Tobacco Premium*
Subscriber Only	\$0.00	\$ 449.67	\$28.52	\$61.40	\$9.01	\$5.02	\$7.64	\$30.00
Subscriber & Spouse	\$429.20	\$1,125.68	\$54.14	\$116.60	\$17.14	\$7.90	\$11.98	\$60.00
Subscriber & Child(ren)	\$414.39	\$1,031.65	\$59.66	\$128.66	\$18.94	\$8.10	\$12.82	\$60.00
Subscriber & Family	\$820.85	\$1,686.03	\$84.84	\$183.30	\$27.05	\$12.84	\$18.10	\$90.00

*Only applicable when enrolled in medical coverage.