

Findlay 2020 Fringe Benefits List

Health Insurance Plans

Elective offer as of hire date		Exempt and Non-Exempt Bi-Weekly		
ORANGE		Cost/Annual	Cost/Pay (26)	
Single		\$3,260.14	\$125.39	
2 Person (employee + s	spouse)*	\$6,349.46	\$244.21	
Employee + Child(ren)		\$5,645.90	\$217.15	
Family* In Network Out of Network	ORANGE Plan I Per Person \$750 \$1,000	\$8,452.34 Deductible Per Family \$1,500 \$2,000	\$325.09 ORANGE Plan (Per Person \$2,500 \$4,000	Out of Pocket Maximum** Per Family \$5,000 \$8,000
BLACK		Cost/Annual	Cost/Pay (26)	
Single		\$2,701.40	\$103.90	
2 Person (employee + s	spouse)*	\$5,261.36	\$202.36	
Employee + Child(ren)		\$4,678.18	\$179.93	
Family* In Network Out of Network	BLACK Plan De Per Person \$1,500 \$2,000	\$7,010.12 ductible Per Family \$3,000 \$4,000	\$269.62 BLACK Plan Ou Per Person \$4,000 \$6,000	t of Pocket Maximum** Per Family \$8,000 \$12,000
High Deductible Healt	h Plan (HDHP)	Cost/Annual	Cost/Pay (26)	
Single		\$1,383.46	\$53.21	
2 Person (employee + s	spouse)*	\$2,694.38	\$103.63	
Employee + Child(ren)		\$2,395.90	\$92.15	
Family*		\$3,590.34	\$138.09	
In Network Out of Network	HDHP Deductib Single \$3,000 \$5,000	e Family \$6,000 \$10,000	HDHP Out of Po Single \$3,425 \$7,000	ocket Maximum** Family \$6,850 \$14,000

*Working Spouse Eligibility: A spouse of a University of Findlay employee is required to participate in his/her employer sponsored health care plan if the spouse has access to continuous group health coverage through his/her employment, and the employer contributes at least 50 percent of the premium.

If these conditions are met, the spouse must enroll in his/her employer's health care plan. The spouse will be permitted to remain on the University of Findlay's plan for secondary health care coverage.

This rule does not apply if your spouse is:

•Not employed

Self employed

•Is not offered medical coverage at their employer

•Both you and your spouse work for the University of Findlay

**Amounts applied to the In Network and Out of Network Calendar Year Deducible and amounts In Network and Out of Network Calendar Year Out of Pocket Maximum will be combined.

UMR administers the Health Plan. All plans utilize the United Healthcare Choice Plus Network. To search for an In Network provider logon to www.umr.com.

Revised 5/1/2020

Prescription Drug Benefit: Orange & Black Out of Pocket Maximum/Calendar			
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Per Covered Person	\$1,250
Per Covered Family	\$2,500

Pharmacy Option (30 Day Supply)	Orange	Black	HDHP
Generic Drug	\$8.00	\$10.00	25% after deductible
Formulary Brand Name Drugs	\$22.00 or 25% whichever is greater	\$30.00 or 25% whichever is greater	25% after deductible
Non-Formulary Brand Name Drugs	\$42.00 or 30% whichever is greater	\$50.00 or 30% whichever is greater	25% after deductible
Specialty Drugs	50%	50%	Paid based on applicable tier
Mail Order Option (90 Day Supply)			
-OR- Retail 90	Orange	Black	HDHP
Generic Drug	\$16.00	\$30.00	25% after deductible
Formulary Brand Name Drugs	\$44.00 or 25% whichever is greater	\$90.00 or 25% whichever is greater	25% after deductible
Non-Formulary Brand Name Drugs	\$84.00 or 30% whichever is greater	\$150.00 or 30% whichever is greater	25% after deductible
Specialty Drugs	N/A	N/A	N/A

Health Savings Account (HSA) - HDHP Plan eligible

Health Savings Account (HSA) – HPHP Plan eligible. Experience significant tax savings by contributing pre-tax dollars to an HSA. •Personal Bank Account - you own it

•You keep it - balance rolls over year over year

To be an eligible individual and qualify to contribute to an HSA, you must meet the following requirements:

•You must be covered under an HDHP on the first day of the month

- •You must not be covered by other health coverage (a non-qualified medical plan that is not an HSA or a spouse's full purpose FSA) •You must not be enrolled in Medicare
- •You must not be claimed as a dependent on someone else's tax return Personal Bank Account

Maximum HSA Limit for 2020 Tax Year is \$3,550 Individual Plan contribution and \$7,100 Family Plan contribution.

Catch up contribution 55+ is \$1,000.

Healthcare Flexible Spending Account (FSA) - Orange and Black Plans eligible

Healthcare FSA - Orange and Black Plan eligible. Experience significant tax savings by contributing pre-tax dollars to an FSA.

•Allows IRS-approved medical, Rx, dental or vision expenses not covered by the insurance plan with pre-tax dollars.

•Full annual election amount available immediately.

•Rollover provision does not apply. Use it or lose it rule applies.

•Grace Period-Allows you and your dependents to continue incurring medical care expenses and dependent care expenses for up to two and a half months following the end of the plan year.

•All requests for reimbursement are due no later than March 31st.

Maximum Healthcare FSA limit for 2020 Tax Year is \$2,700.

What is a Limited Purpose Flexible Spending Account?

•Limited purpose FSA's aren't intended to be used for the same wide range of expenses covered by HSA's. Instead, they're designed to be limited to just dental and vision expenses –oftentimes, specific expenses as defined by the limits of the plan. •Limited purpose FSA's aren't intended to replace traditional HSA's, which is why they only cover vision and dental expenses. Medical expenses, such as prescription medications and emergency room visits, are not covered by the limited purpose FSA.

Dependent Care Flexible Spending Account (FSA)

Dependent Care FSA. Experience significant tax savings by contributing pre-tax dollars to an FSA.

•This program lets you pay for certain IRS-approved dependent daycare expenses with pre-tax dollars.

•Rollover provision does not apply. Use it or lose it rule applies.

•Eligible for care while parents are at work or school.

•ONLY amount payroll deducted to date is available for distribution.

•Some examples include:

•Daycare/Preschool for dependent children to age 13

•Adult daycare

•Before and after school programs •Camps

Dependent Care FSA annual maximum -\$5,000/family or \$2,500 for single or married and filing separately.

Elective offer as of hire date	Exempt and Non-Exempt Bi-Weekly		
Vision Insurance (see Plan document)	Cost/Pay (26)	Cost/Annual	
Single	\$4.32	\$112.32	
2 Person	\$6.54	\$170.04	
Family	\$11.68	\$303.68	

MetLife administers the Vision Plan. To access the Preferred Provider Network (private practice and retail centers) logon to www.metlife.com.

Elective offer as of hire date	Exempt and Non-Exempt Bi-Weekly	
Dental Insurance (see Plan document)	Cost/Pay (26)	Cost/Annual
Single	\$4.85	\$126.10
Family	\$11.77	\$306.02

UMR administers the Dental Plan. There is not a Preferred Provider Network. The employee selects the dentist of their choice.

Basic Life & Accidental Death and Dismemberment (AD&D) Insurance

University of Findlay provides a Basic Life and AD&D benefit to eligible employees through MetLife. The Life insurance benefit will be paid to your designated beneficiary in the event of death while covered under the plan. The AD&D benefit will be paid in the event of a loss of life or limb by accident while covered under the plan. University of Findlay pays the premiums for this plan.

BASIC LIFE & AD&D	DESCRIPTION
Life (Employee)	\$50,000
AD&D	In the event of an accidental dismemberment, a benefit is provided up to a scheduled amount corresponding to the loss. Please see your booklet for further details.

Benefits will reduce: 35% at age 65. An additional 25% of original amount at age 70. An additional 15% of original amount at age 75. Benefits terminate at retirement.

Refer to the benefit summary or certificate of coverage for more information.

Long-Term Disability

University of Findlay provides a company sponsored Long-Term Disability plan through MetLife. The greatest threat to your earning power is illness or injury. If you are disabled for 90 days or longer due to a nonoccupational illness or injury, University of Findlay provides you with LTD benefits at no cost to you. The LTD plan is designed to provide you with a reasonable level of income replacement in case you can no longer work due to a disability. University of Findlay pays the premiums for this plan.

Refer to the benefit summary or certificate of coverage for more information.

Employee and Family Supplemental – Voluntary Life

Voluntary life insurance for employees and their families is available at discounted group rates administered through MetLife. This life insurance plan will cover you or a covered family member in the event of a death while covered by the plan. This is an opt-in benefit fully paid by the employee.

Benefit Amount (Employee)	Units of Increments of \$10,000 up to 5 times salary to a maximum of \$500,000
Benefit Amount (Spouse)	Units of Increments of \$5,000 but not more than 50% of employee amount to a maximum of \$50,000. Election cannot exceed 50% of employee's coverage amount
Benefit Amount (Child/ren)	Age 15 days to (25 if FTS): Option of \$10,000

In order to purchase Voluntary Life for Spouse and Child/ren the employee you must buy coverage for yourself.

Refer to the benefit summary or certificate of coverage for more information.

Accident, Critical Illness and Hospital Indemnity Insurance

Accident, Critical Illness and Hospital Indemnity Insurance for employees and their families is available at discounted group rates Administered through MetLife. This is an opt-in benefit fully paid by the employee.

Plan Options that are tailored to meet your needs:

- Guaranteed issue coverage for employees, spouses, and children.
- Benefits are paid regardless of what's covered by medical insurance.
- Lump sum paid directly to you as the employee, to spend as you choose.
- Portable coverage that you can take wherever you go.
- Value-added services like online will preparation, digital legacy app, funeral planning services, and vision discounts at no cost to you.

What you need to know about MetLife's Accident coverage:

- Over 150 covered events and services, such as fractures, dislocations and medical treatments or tests.
- You and your eligible family members are guaranteed coverage. No medical exam and no hassle.
- Lump-sum payment helps cover unexpected costs that result from an accident.

What you need to know about MetLife's Hospital Indemnity coverage:

- You and your eligible family members are guaranteed coverage. No medical exam and no hassle.
- Lump-sum payment can be used to help cover unexpected costs that result from a hospitalization.

What you need to know about MetLife's Critical Illness coverage:

- Over 20 covered critical illnesses, such as Cancer, Heart Attack, Stroke, and Kidney Failure.
- You and your eligible family members are guaranteed coverage. No medical exam and no hassle.
- Lump-sum payment can be used however you want, including to help cover unexpected costs that result from a covered critical illness.

For your convenience, premiums will be automatically deducted from your paycheck.

Refer to the benefit summary or certificate of coverage for more information.

Retirement Plan

At this time the Supplemental Retirement Annuity is an elective plan. Full-time employees may elect to put in their own funds (dollar amount or percentage) into a Supplemental Retirement Annuity account. This Plan allows an employee to contribute their funds pre-tax or post-tax, as of hire date or anytime in a calendar year.

The most an employee can contribute to a 403(b) account out of salary - is \$19,500 in 2020. Employees who are age 50 or over at the end of the calendar year can also make catch-up contributions of \$6,500 in 2020.

StraightLine

A research-based professional management firm offers proactive services to retirement plan participants, actively managing the employee's existing retirement plan and make adjustments to allocations when needed. Contact a StraightLine representative to manage your retirement plan account at (419) 425-8440 or visit <u>www.myRplan.com/oilers</u>. Fee for service -- fully paid by the employee.

Tuition Remission

Tuition remission is a benefit offered to eligible employees to provide financial assistance for classes taken at the University of Findlay by those employees and other qualified individuals. Eligibility requirements apply to this benefit. Some tuition remission benefits qualify to be offered on a tax free basis, while other tuition remission benefits must be treated as taxable income to the beneficiary of the Tuition Remission benefit.

Costs for textbooks, materials, additional fees, room and board, miscellaneous fees, and any non-tuition fees are not included in the Tuition Remission Policy. Tuition Remission Policy is available after completion of five (5) months of employment. Employee, employee spouse and/or child(ren) may apply to enroll in the first full semester or term after meeting this requirement (apply for admission as all other students do and be accepted based on the established criteria).

Refer to the Tuition Remission Policy for more information regarding enrollment process, application deadlines, exclusions, limitations, etc.

Social Security (on the first 137,700)	Employee Contribution 6.2%	Employer Contribution: 6.2%
Medicare	Employee Contribution 1.45%	Employer Contribution: 1.45%
Self-Insured Workers' Compensation, if certified:	Employee Contribution 0%	Employer total amount

Tickets

Free General Admission tickets are available for the employee, their spouse/significant other, and any children under 18 that are still living at home for the following UF home athletic events: Football, Men's and Women's Basketball, Women's Volleyball and Indoor Track and Field. On-campus event tickets are available as long as the event is not sold out (a valid Employee Identification Card is required). Some events which are not included: Tournaments, Concerts, etc.

University Bookstore Discount

The University Bookstore offers a 10% discount on purchase of supplies, gifts, textbooks, and clothing to all university employees (a valid Employee Identification Card is MANDATORY at time of purchase).

Campus Facilities

Use of the campus facilities: Croy Gymnasium, Koehler Fitness and Recreation Complex, and Shafer Library (a valid Employee Identification Card is required).

Paid Vacation:

Staff and administrative accruals begin immediately upon hire date.

Part-time Non-Exempt Employee (if	eligible)	Pro-rated hours per month
40 Hour Non-Exempt Employee	Years 1 – 5 Years 6 – 10 Years 11 – on	6.67 hours per month (2 weeks) 10.00 hours per month (3 weeks) 13.33 hours per month (4 weeks)
Exempt Employee	From hire date	13.33 hours per month (4 weeks)

Employees should use all of their allotted vacation time off during the fiscal year (August 1 to July 31). Employees will be permitted to carry vacation time off which is not used into the following fiscal year. Vacation time not used by the end of the second fiscal year will be forfeited.

Paid Sick Leave:

Staff and administrative accruals begin after the 90-day probationary period is fulfilled.

Part-time non-exempt employee (if eligible)	Pro-rated hours per month
40 hour non-exempt and exempt employees:	8.0 hours per month

Sick leave benefits are intended to provide income protection in the event of actual illness or injury, sick days cannot be carried over from one fiscal year to the next and employees are not paid for unused sick days either at the end of the fiscal year or upon termination.

Holiday List

Paid Holiday's include: New Year's Day, Dr. Martin Luther King, Jr. Day, Good Friday, Memorial Day, Independence Day, Labor Day, Thanksgiving (2), Christmas Eve, Christmas Day, and New Year's Eve.

Direct Deposit

Direct Deposit is mandatory for all payroll checks.

Pay Dates

Exempt and Non-Exempt employees are paid bi-weekly as scheduled by the Office of Human Resources.