

# EMPLOYEE BENEFITS AT THE UNIVERSITY OF NEW ENGLAND



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# Welcome to Your 2018 UNE Benefits Package

UNE is committed to providing a competitive and comprehensive benefits package that provides you with various options, enabling you to select the benefits that are best suited for you and your family. Our benefits package is designed to help you stay well, both physically and financially, and provide support and financial protection if the need arises.

Our package includes group Medical, Dental, Vision, Life, and Disability insurance coverage. We also offer Health Savings Account funds, Tax-advantaged Flexible Spending Accounts, and a 403(b) Retirement Plan.

UNE offers a Wellness Program to all benefits-eligible employees, offering opportunities for employees to learn, practice, and be rewarded for healthy habits. You also have access to Health Advocate, a free and confidential service designed to help you navigate insurance issues.

In an effort to support your personal circumstances, we offer access to a variety of voluntary insurance products through payroll deductions. Details on each of these programs are outlined within this guide.

For additional information please contact your Human Resources Department at (207) 602-2394.

# ABOUT YOUR BENEFITS

### **Eligibility Information**

If you are an active benefits-eligible employee you are eligible to elect Medical and/or Dental insurance coverage for yourself and your eligible dependents. If you are a full time benefits-eligible employee you will automatically be enrolled in UNE's Basic Life, AD&D, and Long Term Disability policies. You will also be able to purchase Supplemental Life. Children can be covered as dependents on your Medical, Dental and Vision plans until age 26 regardless of student status.

### When Coverage Begins and Ends

Coverage for eligible new hires begins on the first of the month following the date of hire. If you enroll in benefits during UNE's Open Enrollment period, coverage will begin on January 1st. Coverage for Medical, Dental, and Vision benefits end on the last day of the month following termination from UNE. All other benefits end on your last day of employment.

# **Making Changes During the Year**

Generally, you can only change your benefit elections during the Open Enrollment period, unless you experience a qualified life event such as marriage, divorce, birth or adoption, or a change in your or your spouse's employment status that affects benefits eligibility. You must notify HR within 30 days of a qualified life event.

# COBRA: Continuing Coverage After Termination

Under most circumstances, you and your dependents may continue to participate in some benefit plans through COBRA Insurance after you terminate employment. You will be advised of your COBRA rights if you experience a COBRA qualifying event. For more information contact Group Dynamic at 207-781-8800.

#### **Section 125 Plan Benefit**

A Section 125 Plan is an IRS-regulated benefit that allows an employee to make certain benefit contributions on a pre-tax, rather than an after-tax, basis. Such plans permit Medical, Dental, Vision, and FSA contributions by employees to be deducted from earnings before taxes are calculated. Employees who are eligible and participate in UNE's plans will automatically receive this benefit.



Think Healthy. Live Well. There's nothing more valuable than your good health! UNE offers a choice of medical plans that are designed to help you and your family stay healthy and to provide comprehensive coverage when you need it.

### **Cigna Medical Plans**

UNE offers a choice of three medical plans through Cigna. The difference between these plans is the out of pocket expenses for coinsurance and the deductible, as well as the access to the network of providers. Vision insurance is included with all three plans.

More information about Cigna, including a list of participating providers, may be obtained by visiting the Cigna webpage (**www.cigna.com**).

Highlights of the Cigna medical plans include:

- In-Network Preventive Care services covered 100%
- No requirement of referrals for specialist care
- 24/7 access to a Cigna Customer Service Representative via toll free number
- Access to MyCigna.com to view your personal claim history, account transactions, plan coverage, claim forms, and more
- Cost and quality provider directory to help you compare doctors and medical procedures to control your health care spending
- Access to MyCigna Mobile App to manage your healthcare on the go
- Emergency and Urgent Care when you need it anywhere in the United States

#### CIGNA Open Access Basic

80% coinsurance, \$500 individual/\$1,000 family deductible. Under this plan, office visits require you to pay a \$25.00 co-payment when you see your in-network Primary Care Physician or \$50.00 for an in-network Specialist. Some provider services may be subject to a plan deductible. Prescription drugs require a co-payment. One co-payment is required when you obtain a 30-day supply of prescription drugs. Two co-payments are required for 31 to 90 day supply for both retail and mail order prescription drugs. The co-payment for prescriptions is \$15.00 for generic drugs, \$30.00 for preferred name brand drugs, and \$50.00 for non-preferred name brand drugs. Vision benefits are included.



#### CIGNA Open Access Enhanced

100% coinsurance, \$500 individual/\$1,000 family deductible. Under this plan, office visits require you to pay a \$20.00 co-payment when you see your in-network Primary Care Physician or \$40.00 for an in-network Specialist. Some provider services may be subject to a plan deductible. Prescription drugs require a co-payment. One co-payment is required when you obtain a 30-day supply of prescription drugs. Two co-payments are required for 31 to 90 day supply for both retail and mail order prescription drugs. The co-payment for prescriptions is \$10.00 for generic drugs, \$20.00 for preferred brand-name drugs, and \$35.00 for non-preferred brand-name drugs. Vision benefits are included.

#### High Deductible Health Plan w/ Health Savings Account (HSA)

90% in-network, 70% out-of-network coinsurance; \$2,700/\$5,400 deductible. Under this plan, all covered medical and prescription drug expenses accumulate toward the deductible. Specified preventive prescription drugs are covered with coinsurance only; deductible is waived.

The High Deductible Health Plan associated with a Health Savings Account (HSA) gives you the freedom to select any licensed provider when you need one. You will have access to both in-network and out-of-network provider benefits, but reimbursement is higher when you use an in-network provider. You do not have to select a primary care physician and no referrals are needed for specialty care and other medical services. For eligible employees in 2018, UNE will provide you with up to two \$1,300 contributions to your HSA, one in January and one in July, to help offset your medical costs. You can also contribute your own pre-tax funds into this plan, and you can change your contribution amount at any time during the year.



The many benefits to maintaining a Health Savings Account include:

- Control You can use the HSA to pay for any qualified medical expenses.
- Flexibility Your HSA dollars can pay for items identified under your health insurance plan, but also can encompass a broader definition as defined by the IRS which includes dental, vision, orthodontia, and more.
- **Portability** You can take your HSA funds with you; the account belongs to you.
- **Tax Savings** Your contributions to the HSA are made with pre-tax dollars.
- Not Subject to "Use-it-or-lose-it" Balances roll from year to year, so you don't need a crystal ball to forecast medical expenses in the next year.

In addition to the deposit made by UNE associated with your health coverage, you are eligible to contribute your own payroll dollars to the account on a pretax basis. Under IRS rules, the maximum that can be deposited into your HSA in 2018 is \$3,450 if you have employee only health coverage or \$6,900 if you have family coverage. Employees over the age of 55 can deposit an additional \$1,000. These totals include money from all sources, which means the deposits UNE makes to your account accumulate toward the maximums.

You cannot elect the HSA plan if you have a Medical Flexible Spending Account (FSA) or if you have other coverage such as Medicare Part A.

# **Medical Plans At-a-Glance**

	Open Access Plus Basic In-Network		Open Acc In-Network		Choice Fund Open Access Plus HSA	
Coverage	In-Network	Out-of- Network	In-Network	Out-of- Network	In-Network	Out-of- Network
Annual Deductible	\$500 Individual \$1,000 Family	Not Covered	\$500 Individual \$1,000 Family	Not Covered	\$2,700 Individual \$5,400 Family	\$2,700 Individual \$5,400 Family
Annual Out-of-Pocket Maximum	\$3,500 Individual \$7,000 Family	Not Covered	\$3,000 Individual \$6,000 Family	Not Covered	\$3,000 Individual \$6,000 Family	\$6,000 Individual \$12,000 Family
Lifetime Maximum	Unlimited	Not Covered	Unlimited	Not Covered	Unlimited	Unlimited
Preventive Services	No Charge	Not Covered	No Charge	Not Covered	No Charge	OV/Tests not covered Only Immuniza- tions covered by Deductible, then 30%
Routine Mammograms	No Charge	Not Covered	No Charge	Not Covered	No Charge	Deductible, then 30%
Primary Care Visit	\$25 Copay	Not Covered	\$20 Copay	Not Covered	Deductible then 10%	Deductible, then 30%
Specialist Visit	\$50 Copay	Not Covered	\$40 Copay	Not Covered	Deductible then 10%	Deductible, then 30%
Chiropractic Services	\$50 Copay	Not Covered	\$40 Copay	Not Covered	Deductible then 10%	Deductible, then 30%
Outpatient Services (Diagnostic/X-Ray/ Lab Services)	Deductible then 20% Coinsurance	Not Covered	Deductible only	Not Covered	Deductible then 10%	Deductible, then 30%
Outpatient Complex Services (MRI, CAT, PET Scans, etc.)	Deductible then 20% Coinsurance	Not Covered	Deductible only	Not Covered	Deductible then 10%	Deductible, then 30%
Inpatient Hospital Services	Deductible then 20% Coinsurance	Not Covered	Deductible only	Not Covered	Deductible then 10%	Deductible, then 30%
Outpatient Surgery	Deductible then 20% Coinsurance	Not Covered	Deductible only	Not Covered	Deductible then 10%	Deductible, then 30%
Emergency Room (waived if admitted)	Deductible then \$150 Copay	Deductible then \$150 Copay	Deductible then \$100 Copay	Deductible then \$100 Copay	Deductible then 10%	In-Network Deductible then 10%
Outpatient Mental Health Benefits	\$25 Copay	Not Covered	\$20 Copay	Not Covered	Deductible then 10%	Deductible, then 30%
Inpatient Mental Health Benefits	Deductible then 20% Coinsurance	Not Covered	Deductible only	Not Covered	Deductible then 10%	Deductible, then 30%
Pharmacy Benefit	<b>Retail</b> \$15 / \$30 / \$50 <b>Mail Order</b> \$30 / \$60 / \$100	Not Covered	<b>Retail</b> \$10 / \$20 / \$35 <b>Mail Order</b> \$20 / \$40 / \$70	Not Covered	Retail / Mail Order 10%/20%/30% Deductible waived for Preventive Drugs	Not Covered

# **Monthly Medical Plan Premium Contributions**

# Monthly Cost for 12 Month Faculty/Staff

	Full Time 12 Month Paid			Half Time 12 Month Paid		
	Open Access Plus Basic In-Network Open Access Plus Open Access Plus Open Access Plus Open Access Plus HSA		Open Access Plus Basic In-Network	Open Access Plus In-Network Enhanced	Choice Fund Open Access Plus HSA	
Single Person Coverage	\$85.18	\$214.82	\$60.46	\$127.04	\$475.88	\$95.74
One Parent & Child/ren Coverage	\$213.18	\$364.38	\$149.58	\$642.82	\$868.50	\$514.72
Two Adult Coverage	\$376.84	\$583.64	\$291.80	\$895.80	\$1,173.14	\$731.92
Family Coverage	\$385.46	\$655.20	\$311.98	\$988.00	\$1,316.58	\$823.48

# Monthly Cost for 11 Month Faculty/Staff

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	Full Time 11 Month Paid			Half Time 11 Month Paid			
	Open Access Plus Basic In-Network Open Access Plus In-Network Enhanced Choice Fund Open Access Plus Plus HSA		Open Access Plus Basic In-Network	Open Access Plus In-Network Enhanced	Choice Fund Open Access Plus HSA		
Single Person Coverage	\$92.92	\$234.34	\$65.96	\$138.60	\$519.14	\$104.44	
One Parent & Child/ren Coverage	\$232.56	\$397.50	\$163.20	\$701.28	\$947.44	\$561.50	
Two Adult Coverage	\$411.10	\$636.70	\$318.32	\$977.26	\$1,279.78	\$798.46	
Family Coverage	\$420.50	\$714.76	\$340.34	\$1,077.82	\$1,436.28	\$898.32	

# Monthly Cost for 10 Month Faculty/Staff

	Full Time 10 Month Paid			Half Time 10 Month Paid		
	Open Access Plus Basic In-Network	Open Access Plus In-Network Enhanced	Choice Fund Open Access Plus HSA	Open Access Plus Basic In-Network	Open Access Plus In-Network Enhanced	Choice Fund Open Access Plus HSA
Single Person Coverage	\$102.22	\$257.78	\$72.56	\$152.44	\$571.06	\$114.88
One Parent & Child/ren Coverage	\$255.82	\$437.26	\$179.50	\$771.40	\$1,042.18	\$617.66
Two Adult Coverage	\$452.20	\$700.38	\$350.14	\$1,074.96	\$1,407.76	\$878.30
Family Coverage	\$462.54	\$786.24	\$374.38	\$1,185.62	\$1,579.90	\$988.16

# Monthly Cost for 9 Month Faculty/Staff

	Full Time 9 Month Paid			Half Time 9 Month Paid		
	Open Access Plus Basic In-Network In-Network Enhanced  Choice Fund Open Access Plus Plus HSA		Phis		Choice Fund Open Access Plus HSA	
Single Person Coverage	\$113.58	\$286.42	\$80.62	\$169.38	\$634.50	\$127.66
One Parent & Child/ren Coverage	\$284.24	\$485.84	\$199.46	\$857.10	\$1,157.98	\$686.30
Two Adult Coverage	\$502.46	\$778.20	\$389.06	\$1,194.42	\$1,564.18	\$975.90
Family Coverage	\$513.94	\$873.60	\$415.98	\$1,317.34	\$1,755.44	\$1,098.00



#### Vision benefits are included as part of your medical plan.

The CIGNA Open Access Medical and CIGNA Vision are two separate plans. The CIGNA Vision Plan provides care for a routine eye exam annually including but not limited to eye health examination, dilation, refraction and hardware coverage for lenses, frames or contacts. The Open Access In-Network Plans and the HSA Plan include medical eye care coverage only for treatment of eye conditions. You should have a Medical and Vision ID Card.

	Option A - Open Access	Option B – Open Access	Option	C - HSA
Coverage	In-Network Enhanced \$20 Plan	In-Network Basic \$25 Plan	In-Network	Out-of-Network
Exam Copay	\$10	\$20	\$20	N/A
Exam Allowance (one per frequency, no age limit)	Covered in full every 12 months; reimbursement up to \$45 out-of-network	Covered in full every 12 months; reimbursement up to \$45 out-of-network	Covered in full every 12 months	Reimbursement up to \$45
Materials Copay	\$10	\$20	\$20	N/A
Base Lenses: (one pair pe	er frequency)			
Single Vision Allowance	Covered in full every 24 months; reimbursement up to \$32 out-of-network	Covered in full every 24 months; reimbursement up to \$32 out-of-network	Covered in full every 24 months	Reimbursement up to \$32
Bifocal Allowance	Covered in full every 24 months; reimbursement up to \$55 out-of-network	Covered in full every 24 months; reimbursement up to \$55 out-of-network	Covered in full every 24 months	Reimbursement up to \$55
Trifocal Allowance	Covered in full every 24 months; reimbursement up to \$65 out-of-network	Covered in full every 24 months; reimbursement up to \$65 out-of-network	Covered in full every 24 months	Reimbursement up to \$65
Frame Retail Allowance (one per frequency)	\$100 every 24 months; reimbursement up to \$55 out-of-network	\$100 every 24 months; reimbursement up to \$55 out-of-network	\$100 every 24 months	Reimbursement up to \$55
Contact Lens Allowance	\$100 every 24 months; reimbursement up to \$87 out-of-network	\$100 every 24 months; reimbursement up to \$87 out-of-network	\$100 every 24 months	Reimbursement up to \$87

You have the ability to purchase dental insurance benefits on a pre-tax basis. UNE gives you the option to choose between two dental plans through Northeast Delta Dental so that you can elect a plan that works best for you and your family.

More information about Delta Dental, including a list of participating providers, may be obtained by visiting the Delta Dental webpage (**www.nedelta.com**).

	Northeast Delta Dental Basic Option*	Northeast Delta Dental Enhanced Option*
Annual Deductible	\$25 / \$75 Deductible Per Person/Family Per Calendar Year Deductible applies to Basic Restorative and Major Restorative Services	\$25 / \$75 Deductible Per Person/Family Per Calendar Year Deductible applies to Basic Restorative and Major Restorative Services
Annual Benefit Maximum	\$1,000 Calendar Year Maximum	\$1,500 Calendar Year Maximum
Diagnostic & Prevention Services	Deductible Waived Plan pays 80%	Deductible Waived Plan pays 100%
Basic Restorative Services	Deductible then plan pays 50%	Deductible then plan pays 80%
Major Restorative Services	Deductible then plan pays 50%	Deductible then plan pays 50%

<sup>\*</sup> The cost share for these services is based on your use of a Delta Dental participating provider. If you visit a non-participating dentist, you may be required to submit your own claim and pay for services at the time they are provided. Payment to non-participating dentists will be limited to the lesser of the dentist's actual submitted charge or Delta Dental's allowance for non-participating dentists in the geographic area in which services are provided.

# **Monthly Dental Plan Contributions**

#### Monthly Dental Cost for 12 Month Faculty/Staff

	Full Time 12	Month Paid	Half Time 12 Month Paid		
	Northeast Delta Dental Basic Option*	Northeast Delta Dental Enhanced Option*	Northeast Delta Dental Basic Option*	Northeast Delta Dental Enhanced Option*	
Single Person Coverage	\$4.48	\$18.26	\$15.58	\$29.36	
One Parent & Child/ren Coverage	\$27.24	\$51.60	\$38.32	\$62.70	
Two Adult Coverage	\$44.78	\$77.30	\$55.88	\$88.38	
Family Coverage	\$53.84	\$92.86	\$61.70	\$103.96	

### **Dental** continued

# Monthly Dental Cost for 11 Month Faculty/Staff

	Full Time 11	Month Paid	Half Time 11 Month Paid		
	Northeast Delta Dental Basic Option*	Northeast Delta Dental Enhanced Option*	Northeast Delta Dental Basic Option*	Northeast Delta Dental Enhanced Option*	
Single Person Coverage	\$4.88	\$19.94	\$17.00	\$32.02	
One Parent & Child/ren Coverage	\$29.74	\$56.32	\$41.82	\$68.42	
Two Adult Coverage	\$48.88	\$84.30	\$60.94	\$96.42	
Family Coverage	\$58.72	\$101.32	\$67.30	\$113.40	

# Monthly Dental Cost for 10 Month Faculty/Staff

	Full Time 10	Month Paid	Half Time 10 Month Paid		
	Northeast Delta Dental Basic Option*	Northeast Delta Dental Enhanced Option*	Northeast Delta Dental Basic Option*	Northeast Delta Dental Enhanced Option*	
Single Person Coverage	\$5.38	\$21.90	\$18.70	\$35.22	
One Parent & Child/ren Coverage	\$32.68	\$61.94	\$45.96	\$75.24	
Two Adult Coverage	\$53.74	\$92.76	\$67.04	\$106.06	
Family Coverage	\$64.58	\$111.44	\$74.06	\$124.74	

# Monthly Dental Cost for 9 Month Faculty/Staff

	Full Time 9	Month Paid	Half Time 9 Month Paid		
	Northeast Delta Dental Basic Option*	Northeast Delta Dental Enhanced Option*	Northeast Delta Dental Basic Option*	Northeast Delta Dental Enhanced Option*	
Single Person Coverage	\$5.94	\$24.32	\$20.76	\$39.12	
One Parent & Child/ren Coverage	\$36.36	\$68.82	\$51.10	\$83.60	
Two Adult Coverage	\$59.74	\$103.10	\$74.52	\$117.86	
Family Coverage	\$71.78	\$123.80	\$82.26	\$138.58	

A Smart Way to Save. With a Flexible Spending Account (FSA), you can set aside pre-tax dollars through payroll deductions to pay for certain health care and dependent care expenses. Plus, you can reduce your tax obligations.

#### **Lower Your Taxes with FSAs**

Each year during Open Enrollment, benefits-eligible employees have the option of enrolling in one or both of the following:

- Health Care FSA You can contribute between \$250 - \$2,650 per year to pay for eligible out-of-pocket health care expenses.
- Dependent Care FSA You can contribute between \$250 - \$5,000 per year to pay for eligible out-of-pocket dependent care expenses.

**End result:** You pay fewer taxes on a smaller amount of income and get to keep more take-home pay!

#### **How FSAs Work**

Your contributions will be deducted from your paychecks in equal amounts during the plan year.

As you pay for eligible expenses out of your own pocket, you are reimbursed from your account(s).

Money can't be transferred between accounts for expense reimbursements.

You can't stop or change your FSA contributions during the plan year unless you have a qualified life event. You must re-enroll in any FSA each year during the annual Open Enrollment period. Per IRS Regulations, funds not spent by the end of the grace period will be forfeited.

For more detailed information about eligible expenses, please check the Flexible Spending Account website at **www.groupdynamic.com** or call the number listed on back cover.

#### **FSA Decision Guidelines**

Before participating in an FSA, ask yourself questions such as:

- How much were my out-of-pocket health care and dependent care expenses last year?
- Do I expect to pay for some health care costs that are not totally covered by my benefits?

Please note that you cannot elect a medical FSA if you are on the medical HDHP/HSA plan.

#### "GRACE PERIOD"

Regulations allow employers who sponsor FSA's the opportunity to add an extension of time at the end of the plan year during which employees may incur eligible expenses and be reimbursed from their FSA funds. This extension of time is called a "grace period." The University of New England has chosen to add a 2.5 month "grace period" to the 2018 plan year.

The "grace period" allows you the opportunity to spend your 2018 Medical/Dependent Care Flexible Spending Account funds up until March 15, 2019. You have until May 30, 2019 to submit any claims incurred during the plan year or during the "grace period."

If you terminate employment at UNE during 2018, you have until May 30, 2019 to submit for reimbursement. You may only submit for expenses incurred up through your termination date (unless you elect COBRA for your FSA).

Disability insurance can provide a sense of security, knowing that if the unexpected should happen, you can still provide for yourself and your family.

The Standard is UNE's Life and Disability carrier. The Standard offers employees the ability to file a claim with one phone call.

# Long Term Disability (LTD) Insurance

Regular full time benefits-eligible employees will be automatically enrolled in Long Term Disability on the first day of the month following their date of hire.

This benefit assures eligible employees 50% of their income (\$7,500/month maximum) in the event that they are disabled for more than 180 days up to the normal Social Security retirement age based upon the Benefit Table in the Long Term Disability Summary Plan Document.

The premium cost for this benefit is paid by the employee on a post-tax basis. However, UNE provides the employee with income to cover this premium cost. Therefore, UNE actually provides this coverage to full time employees at virtually no cost. In the event of disability, you will not be taxed on any LTD benefit payments.



# **Short Term Disability (STD) Insurance**

Short Term Disability provides income when benefits-eligible employees are absent from work due to a non-occupational illness, injury, or pregnancy related disability. When disabled, benefits typically begin following a 14-day elimination period. The STD benefit replaces a portion of your weekly income, providing funds directly to you. The premium cost for this benefit is paid by the employee on a post-tax basis. In the event of disability, you will not be taxed on any STD benefit payments.

STD coverage is available in \$50 increments up to a maximum of 70% of your predictable earnings, with a maximum weekly benefit of \$750. The maximum benefit period is 180 days.

Short Term Disability rates are calculated based on age in increments of 5 years. The bracket is based on your age as of January 1 each plan year. If you have entered into a new age bracket due to a birthday, your premiums will automatically increase.

Employee's Age as of 1/1/18:	Monthly Cost per \$10 of benefit
Under 30	\$0.55
30-34	\$0.55
35-39	\$0.55
40-44	\$0.55
45-49	\$0.52
50-54	\$0.60
55-59	\$0.72
60-64	\$0.87
65-69	\$1.02
70+	\$1.33

IMPORTANT: If you sign up for Short Term Disability for the first time during Open Enrollment and you become disabled during the first 12 months due to physical disease, mental disorder, or pregnancy, you will have a 60 day elimination period (instead of the regular 14 day elimination period if you sign up during your date of hire).

Life is constantly changing. UNE knows how important it is to make sure you have enough life insurance to protect the ones you love.

#### Life Insurance

If you are a full time benefits-eligible employee, UNE will automatically provide Group Life Insurance coverage (which includes Accidental Death & Dismemberment coverage) to you at no cost through The Standard. Coverage is equivalent to one times annual base salary, rounded to the next higher \$1,000. The maximum coverage amount is \$300,000 and the minimum is \$20,000. Half time employees do not get the annual base salary core coverage or the \$2.50 per month credit, however, half time employees may purchase basic life insurance in multiples of 1-4 times their annual salary.

### **Voluntary Life Insurance**

UNE offers additional Life Insurance to be purchased through The Standard. You may purchase this in increments of 1, 2, 3, or 4 times your annual salary, up to \$350,000 with no evidence of insurability necessary. For example:

Full Time Employee Purchase	d	UNE Provided	=	Total Coverage
1 x Annual Salary	+	1 x Annual Salary	=	2 x Annual Salary
2 x Annual Salary	+	1 x Annual Salary	=	3 x Annual Salary
Half Time Employee Purchase	d		=	Total Coverage
	d			
Employee Purchase	d		=	Coverage  1 x Annual

Life insurance rates are calculated based on age in increments of 5 years. The bracket is based on your age as of January 1 each year. If you have entered into a new age bracket due to a birthday, your premiums will automatically increase.

#### Life Insurance Rates

Employee's Age as of 1/1/18:	Monthly Cost per \$1,000
Under 30	\$0.048
30-39	\$0.056
40-44	\$0.096
45-49	\$0.160
50-54	\$0.280
55-59	\$0.440
60-64	\$0.656
65-69	\$1.008
70 +	\$2.536

**EXAMPLE:** If your annual salary is \$20,000 and you are 36 years old, and you wish to have your salary equivalent in life insurance, you would buy \$20,000 in life insurance at \$0.056 per thousand per month, or \$1.12 per month. If you want twice your salary equivalent in insurance, you would need to buy \$40,000 at \$0.056 per thousand, or \$2.24.

**IMPORTANT:** The maximum total life insurance you may purchase is four times your salary, up to \$500,000. You may purchase \$350,000 of this coverage with no evidence of insurability necessary. Amounts in excess of \$350,000 will require that you answer questions about your health history. You will need to go through the Evidence of Insurability process. This process will determine if your election is approved by The Standard. Contact HR or The Standard for this form. It is also located on the UNE Human Resources website. Failure to go through the EOI process may affect your benefit.

\* Life Insurance benefits and associated premiums are reduced by 50% after you reach age 70. Consider this change during Open Enrollment so you can make sure you have appropriate coverage for when you reach age 70.

# Accidental Death & Dismemberment Insurance

If you are a full time benefits-eligible employee, UNE will automatically provide Group Life Insurance coverage which includes Accidental Death & Dismemberment coverage to you at no cost through The Standard. Coverage is equivalent to one times annual base salary, rounded to the next higher \$1,000.

A strong company cannot exist without healthy employees. The choices we make in our everyday lives can help us to live healthier and happier. UNE offers a comprehensive wellness program as part of our overall benefit package.

Our Wellness Program is open to all benefits-eligible employees and offers a variety of tools to support a healthy lifestyle and encourage employees to be physically and mentally healthy and happy!

#### **Motivate Me! Incentive Awards Program**

Benefits-eligible employees may participate in the Motivate Me! Incentive Awards Program offered by UNE. This program is offered by the University to assist in rewarding employees for taking positive preventive measures over their health. You have the ability to earn points that can be redeemed in the form of a gift card if you take certain preventive measures such as having an annual exam, completing a biometric screening, completing an online health assessment, and much more. For more information please contact Human Resources.

#### **Recreation Center**

Eligible University employees have access, at no cost, to the University's athletic complex (weight training, swimming pool, indoor running track, gymnasium, etc). Guests may access the Campus Center at no cost on Friday evening, Saturday, and Sunday, when accompanied by the employee.

UNE provides other wellness opportunities throughout the year, including yoga, Zumba, Wellness Fairs, an annual Fun Run/Walk, and much more. Please visit the Human Resources website for more information.



Health Advocate is the nation's leading healthcare advocacy and assistance company. Their comprehensive service helps members deal with clinical, insurance, and administrative issues involving medical, hospital, dental, pharmacy, and other healthcare. Their goal is to help members obtain the most from their healthcare experience.

Health Advocate is a service provided by UNE at no cost to you. This service is available to all benefits-eligible employees and your eligible family members. With this service you have confidential, unlimited access to a Personal Health Advocate who can help you resolve healthcare and insurance related issues through a single toll free number.

The Health Advocate service is centered on a team of Personal Health Advocates, typically registered nurses, supported by medical directors and benefits and claims specialists. The highly personalized services range from addressing a host of healthcare and insurance-related issues to providing one-on-one support for improving health and well-being. Coverage extends to the employee, spouse or domestic partner, dependent children, parents, and parents-in-law.



### **How Health Advocate Helps**

- Find qualified doctors, dentists, hospitals, other healthcare providers anywhere in the country.
- Expedite appointments including those with hard-to-reach specialists.
- Arrange for specialized treatments and tests.
- Provide comparative health cost estimates.
- Help resolve insurance claims.
- Negotiate billing and payment arrangements.
- Assist with eldercare such as finding adult daycare, assisted living and other related issues facing parents and parents-in-law.
- Work with insurance companies to obtain appropriate approvals for needed services.
- Obtain unbiased health information about complex medical conditions to help make informed decisions.
- Answer questions about test results, treatments, and medication prescribed by the physician.
- Assist in the transfer of medical records, x-rays, and lab results.
- Locate and research the newest treatments for a medical condition.
- Explain benefits and help facilitate access to appropriate care.
- To access Health Advocate 24 hours a day call 866-695-8622 or visit www.healthadvocate.com/une.



# **EMPLOYEE ASSISTANCE PROGRAM**

Life is unpredictable. To help you and your household members cope with everyday life, work challenges, stress, family problems, and other personal issues, an Employee Assistance Program (EAP) is available 24 hours a day, seven days a week through Cigna.

This service is completely confidential and is available to all employees and their household members. Enrollment is automatic for all employees and UNE pays the full cost for this coverage. Benefits include confidential access to the following:

- 5 face-to-face counseling sessions with a counselor in your area.
- **Legal assistance:** 30-minute consultation with an attorney face-to-face or by phone.
- **Financial:** 30-minute telephone consultation with a qualified specialist on topics such as debt counseling or planning for retirement.
- Parenting: Resources and referrals for childcare providers, before and after school programs, camps, adoption organizations, child development, prenatal care and more.
- Eldercare: Resources and referrals for home health agencies, assisted living facilities, social and recreational programs, and long-distance caregiving.
- **Pet care:** Resources and referrals for pet sitting, obedience training, veterinarians, and pet stores.
- **Identity theft:** 60-minute consultation with a fraud resolution specialist.

To access these services, you can call 877-622-4327 or log in to **CignaBehavioral.com** (employer ID: une).





# 403(b) RETIREMENT

UNE's 403(b) Retirement Savings Plan is designed to help you prepare for a secure financial future.

UNE matches up to 8.0% of a full time or half time benefits-eligible employee's 403(b) defined contribution with Fidelity. Individuals may begin contributions prior to the date when the University begins matching funds. Individuals may also contribute greater than 8.0% (UNE will not match anything greater than 8.0%) as long as contributions are within the federal guidelines.

UNE offers employees opportunities for educational enrichment and career development. In addition to your own personal development, your dependents can apply to participate in several higher education tuition benefits offered by the University.

#### **Tuition Grant in Aid**

#### **Employees**

Benefits-eligible employees may take classes at UNE at a discount. Undergraduate courses are \$50 per course and graduate courses are \$100 per course. Full time employees are limited to 2 courses per semester; half time employees may take 1 course per semester.

#### **Employee's Dependents**

Employee's dependents may take course work at a discount for undergraduate course work in non-enrollment capped programs for their dependent child(ren) or stepchild(ren) (to age 24). After merit aid is awarded (if applicable) the remaining balance of tuition will be discounted by 20% for each year of continuous uninterrupted service. The chart below illustrates the tuition discount based on continuous years of service:

Tuition Grant in Aid	Discount Percentage
1 Year	20%
2 Years	40%
3 Years	60%
4 Years	80%
5 Years	100%

### **UNE Blue Scholar Program**

After an employee has reached at least ten years of continuous and uninterrupted full time service, their dependents may apply for the UNE Blue Scholar Program. This program awards between \$10,000 and \$25,000 (depending on years of service), and can be used towards the direct billed cost of attendance at any regionally accredited institution.



# **Council of Independent Colleges**

Dependent children of full time UNE employees who have completed at least one year of uninterrupted full time service are eligible to apply to attend any of the 300+ private independent colleges (participating in the Council of Independent Colleges Program) tuition free. Visit the CIC Web Page (www.cic.edu) for a list of participating CIC-TEP institutions.

### **Tuition Exchange Program**

This program is available to regular full time UNE employees who have completed at least fifteen years of uninterrupted full time service (or its equivalent) with the University by their date of application. Employees must continue to be employed full time by UNE for the full duration of the tuition exchange period in order for the benefits to continue. Visit the Tuition Exchange Program Web Page (www.tuitionexchange.org) for a list of participating colleges.



## **Holiday Pay**

The University guarantees its employees at least twelve paid holidays per year. The holiday schedule will be posted by September 1 of each year. When a holiday falls on a Saturday or Sunday, it is generally observed on the preceding Friday or the following Monday. All benefits-eligible employees (except 9 and 10 month faculty) are eligible for paid University holidays. In recognition that people have different needs to celebrate different holidays, benefits-eligible employees will earn a maximum of two floating holidays per year (earning dates October 1 and March 1).

The usual and customary University holidays are as follows: (Recognized on Mondays through Fridays).

New Year's Eve	Thanksgiving Day
New Year's Day	Day after Thanksgiving
Martin Luther King Jr. Day	Christmas Eve
Memorial Day	Christmas Day
Independence Day	(2) Floating Holidays
Labor Day	

#### **Personal Time Off**

#### Personal Leave

All full time benefits-eligible employees earn 8 hours of personal leave upon attaining one year of continuous service, and 8 hours per year thereafter on their employment anniversary date of hire. Half time benefits-eligible employees earn 4 hours per year in the same manner. Personal leave must be used within the anniversary year following posting.

#### Sick Leave

All full time benefits-eligible employees earn 8 hours of sick leave for each completed calendar month of service. Half time benefits-eligible employees earn 4 hours for each completed calendar month of service. The maximum sick leave accumulation is 960 hours for full time employees and 480 hours for half time employees.



#### Vacation Leave

Regular full time exempt non-faculty personnel and regular full time twelve month faculty members earn 20 days (160 hours) of vacation leave per year. Full time twelve month faculty members earn 20 days (160 hours) of vacation leave per year. Regular full time non-exempt personnel who work twelve months per year earn 10 days (80 hours) for each of their first three years of continuous service, 15 days (120 hours) for the fourth and fifth years, and 20 days (160 hours) per year after completion of five years of continuous service.

Regular full time hourly or salaried non-faculty personnel who work nine, ten, or eleven months per year earn 9/12ths, 10/12ths, or 11/12ths (respectively) of the leave time earned by their twelve month counterparts.

Regular half time employees working at least nine months per year earn one half the vacation time earned by their full time counterparts working the same number of months.

Vacation time is not vested to employees and must be used by May 31st each year or it will be forfeited.

Please check the Handbook for full policy details.

#### Summer Voluntary Unpaid Personal Time Off

For the months of June, July, and August regular full time and half time salaried and hourly employees may request personal time off without pay. Hourly employees can request time off in hourly increments only, and salaried employees can request time off in full day increments only. Not all departments have the flexibility to accommodate requests so department approval is required to ensure that productivity continues without interruption.

# ADDITIONAL BENEFITS

#### **Colonial Life Voluntary Benefits**

Colonial Life benefits are available through payroll deduction. These policies can be selected to fit your specific needs and budget.

The Colonial Life voluntary benefits provides choices to suit your specific needs for you and your family members. You may select from:

- Life Insurance: Term, Whole, Universal (optional LTC Rider)
- Accident Insurance that pays specific benefit amounts for injuries received in a covered accident, for as little as \$8.96 per pay period for employee coverage, or \$16.31 for family. (Optional Disability Income Replacement Rider for your spouse.)
- **Cancer Insurance** that pays specific benefit amounts for the detection and treatment of cancer, for as little as \$5.75 per pay period for employee coverage, or \$9.75 for family.
- Critical Illness Insurance that pays a lump sum benefit upon diagnosis of a covered specified illness such as heart attack, stroke, end stage renal kidney failure, and more. Premium for a sample \$5,000 policy is \$1.70 per pay period for someone age 24, \$2.20 for age 34, \$3.38 for age 44, \$5.50 for age 54, \$8.40 for age 64. Higher coverage amounts are available. Premium does not increase with age after enrollment.

Benefits are paid directly to you, regardless of any other insurance you have; and policies are fully portable when you change jobs or retire.

## **Additional Discount Programs**

Area businesses welcome the patronage of UNE faculty and staff. Please note that while we are happy to pass along the information provided to us by these businesses, incentive programs may change without our knowledge. UNE does not recommend or endorse the services or products of any business, but encourages all faculty and staff to be educated consumers.

To view a list of discounts available to you, along with information about how to access or find out more about these offerings, visit www.une.edu/employee-discounts.



Please contact the individual company/provider listed here to learn more about a specific benefit plan. We also invite you to contact your Human Resources Department at 207-602-2394.

When You Have Questions About	Contact	Phone Number	Website/Email
Health	CIGNA Member Services	800-Cigna24 (800-244-6224)	www.Cigna.com www.MyCigna.com - Register for personalized plan information
Health Savings Account	HSA Bank	800-357-6246	www.hsabank.com
Vision	CIGNA VISION Customer Service	877-478-7557	www.Cigna.com
Dental	Delta Dental Customer Service	800-832-5700	www.nedelta.com
Flexible Spending Account (FSA)	Group Dynamic	207-781-8800	www.gdynamic.com email: claims@gdynamic.com
403(b) Retirement Plan	Fidelity	800-343-0860	https://nb.fidelity.com/public/nb/une/home
COBRA	Group Dynamic	207-781-8800	www.gdynamic.com e-mail: cobra@gdynamic.com
Employee Assistance Program (EAP)	Cigna EAP Member Services	877.622.4327	www.cignabehavioral.com
Health Advocate	Health Advocate	866-695-8622	healthadvocate.com/members e-mail: answers@healthadvocate.com
Life/AD&D	The Standard	800-628-8600	www.standard.com Email: lifebenefits@standard.com
Long Term Disability	The Standard	800-368-1135	www.standard.com
Short Term Disability	The Standard	800-368-2859	www.standard.com
Voluntary Benefits	Colonial Life	207-828-8016	www.coloniallife.com

Summary Plan Descriptions can be found at https://www.une.edu/hr/benefits. Our various insurance plans are listed, and the SPD's can be found within each link. If you wish to have a printed copy please contact Human Resources and we would be happy to provide this at no cost.

Consult the various plan documents and/or Employee Handbook to determine full eligibility and details of the various benefits noted above.

