

# SUMMARY OF BENEFITS 2016-17

The Average Value of Your Employee Benefits  
While salaries differ, the average tax-free benefit is equal to approximately 43.5% of your annual income, excluding the value of paid time off.

## USU SELF-FUNDED MEDICAL PLAN ADMINISTERED BY BLUE CROSS/BLUE SHIELD

Base Salary	Monthly Premiums		
	Valuecare/Participating Networks		
Employee only:	Blue Plan	White Plan	High Deductible Plan
\$24,508 or less	\$47.66/\$74.66	\$13.67/\$37.67	\$0.00/\$27.00
\$24,509-\$37,295	\$60.05/\$87.05	\$17.37/\$41.23	
\$37,296-\$57,540	\$75.66/\$102.66	\$21.70/\$45.70	
\$57,541 or more	\$95.32/\$122.32	\$27.35/\$51.35	
<b>Employee plus 1:</b>			
\$24,265 or less	\$107.24/\$167.24	\$30.76/\$84.76	\$0.00/\$87.00
\$24,266-\$36,925	\$135.11/\$195.11	\$38.76/\$92.76	
\$36,926-\$56,970	\$170.23/\$230.23	\$48.83/\$102.83	
\$56,971 or more	\$214.47/\$274.47	\$61.53/\$115.53	
<b>Employee plus 2 or more:</b>			
\$24,265 or less	\$154.90/\$241.90	\$44.44/\$122.44	\$0.00/\$87.00
\$24,266-\$36,925	\$195.16/\$282.16	\$55.99/\$133.99	
\$36,926-\$56,970	\$245.89/\$332.89	\$70.53/\$148.53	
\$56,971 or more	\$309.80/\$396.80	\$88.87/\$166.87	

### PREFERRED BENEFITS

#### HOSPITALIZATION

**White Plan:** Annual \$250 co-pay for the first hospital admission. Benefits are paid at 70% for room, board and ancillary charges after initial admission fee. Subsequent hospitalization is paid at 70%. \$250 co-pay per admission for outpatient surgery.

**Blue Plan:** Annual \$200 co-pay for the first hospital admission. Benefits are paid at 80% for room, board and ancillary charges after initial admission fee. Subsequent hospitalization is paid at 80%. \$200 co-pay per admission for outpatient surgery.

#### SURGERY and ANESTHETIC

**White Plan:** Benefits are paid at 70% for inpatient and outpatient surgery. Hospital physician visits are paid at 70%.

**Blue Plan:** Benefits are paid at 80% for inpatient and outpatient surgery. Hospital physician visits are paid at 80%.

#### MEDICAL and EXTENDED BENEFITS

**White Plan:** Annual up-front deductible of \$750 per person/ \$1500 per family. \$35 per physician visit. \$150 per incident for major diagnostic testing.

**Blue Plan:** Annual up-front deductible of \$500 per person/\$1,000 per family \$30 per physician visit. \$100 per incident for major diagnostic testing.

#### PRESCRIPTIONS

**White Plan:** You pay \$5 Generic; 35% Formulary; 50% Non-Formulary. Maximum out of pocket of \$1,500 per person per year.

**Blue Plan:** You pay \$5 Generic; 35% Formulary; 50% Non-Formulary. Maximum out of pocket of \$1,250 per person per year.

#### MAJOR MEDICAL

**White Plan:** Maximum out of pocket for covered items is \$3,000 per person per year/\$6,000 per family per year. Maximum lifetime benefit is \$2,000,000 per person.

**Blue Plan:** Maximum out of pocket for covered items is \$2,500 per person per year/\$5,000 per family per year. Maximum lifetime benefit is \$2,000,000 per person.

#### HIGH DEDUCTIBLE PLAN

Annual deductible \$1,500 single, \$3,000 family. Coverage of 80% after deductible is met. Maximum out of pocket max is \$5,000 single, \$10,000 family. Prescription coverage at 80% after deductible is met. Option to participate in Health Savings Account (HSA).

### NON-PREFERRED BENEFITS

This option provides coverage when non-preferred facilities or physicians' services are used. Services are paid at a lower level than Preferred Benefits.

## DENTAL INSURANCE

Monthly PREMIUM:	Single	Couple	Family
	\$ 10.42	\$18.18	\$32.96

### BASIC BENEFITS

Examinations, fillings, x-rays, sealants, etc., covered at 80%..

### GENERAL

Maximum benefit per person per contract year on all dental benefits is \$1500. Maximum benefit on orthodontics is \$1500 per person per lifetime.

### PROSTHETICS

Dentures, bridges, crowns, etc., covered at 50% of eligible.

### ORTHODONTICS

Eligible benefits are paid at 50%.

## TIAA or FIDELITY RETIREMENT PLAN

If you are enrolled in the TIAA or Fidelity retirement plan, USU contributes 14.2% of your annual gross earnings to retirement--above and beyond your annual salary. You designate how this contribution is invested among the investment options. Contributions are immediately vested.

## SOCIAL SECURITY / MEDICARE

USU shares the cost of your Social Security/Medicare benefits by contributing 6.2% of your salary. You will match these contributions by payroll deduction. Social Security provides several important benefits in the form of retirement payments, disability benefits, medical benefits under Medicare, and death benefits paid to a spouse or dependent.

## WORKER'S COMPENSATION

Coverage is provided for medical, hospital (paid at 100%) and lost wage costs (paid at 66.67%) due to an on-the-job injury.

### SHORT TERM DISABILITY

PREMIUM: USU \$5.67/month  
Employee \$4.00/month

Short term disability is available for disabilities lasting 150 days or less. These benefits cover 66.67% of your salary while disabled. In addition, your premiums for medical, dental and life insurance programs are waived and contributions to your retirement plan continue.

### EMPLOYEE TERM LIFE INSURANCE

USU pays the premium for Basic Term Life insurance of one times annual salary rounded to the nearest \$1,000 to a maximum of \$250,000. A new hire may enroll in supplemental insurance up to a lesser of five times annual salary or \$400,000 without evidence of insurability. In addition, supplemental life can be increased in units of \$10,000 to a maximum of \$1,500,000 with evidence of insurability.

Supplemental Accidental Death & Dismemberment insurance coverage is available to an employee and their family (if applicable) for a modest premium.

### LONG TERM DISABILITY

PREMIUM: USU pays 100%

This program covers disabilities that extend beyond 150 days. LTD pays at the rate of 66.67% of your salary. A continued contribution to your retirement plan will be made by the disability vendor.

### DEPENDENT TERM LIFE INSURANCE

You may enroll your spouse and dependent children in the following term life insurance programs.

Basic life (\$1.00/mo): \$10,000 of coverage for spouse and \$5,000 for dependents.

Employee and dependent life insurance options include double indemnity in case of accidental death.

Voluntary Dependent Life insurance for a spouse may be increased in units of \$10,000 to a maximum of \$250,000 (proof of insurability is required after \$20,000). Dependent coverage may be increased in units of \$5,000 to a maximum of \$20,000 per dependent.

### SICK LEAVE

Members of staff are provided 12 days of sick leave per calendar year. Unused sick leave may accumulate to a maximum of 130 days.

### OTHER IMPORTANT BENEFITS

### VACATION AND HOLIDAYS

#### ANNUAL LEAVE

Annual leave for exempt employees is earned at the rate of 14.67 hours per month or 22 days per year. Leave earnings are based on the calendar year. No more than a maximum of 30 days may be carried forward each year.

Annual leave for non-exempt employees is earned according to the following schedule:

<u>BEGINNING YEAR</u>	<u>DAYS ANNUAL LEAVE</u>
• 0 through 4	12 days
• 5 through 9	18 days
• 10+ years	22 days

- Tax deferred and roth supplemental retirement plans
- Flexible Spending Account (FSA)
- Health Savings Account (HSA)
- Reduced USU tuition of 50% (according to policy)
- Free audit of University courses
- USU Bookstore discount
- I.D. card privileges and discounts
- Auto and Homeowners Program
- Employee Assistance Program

### HOLIDAYS

Employees earn 12 paid holidays per year.

This statement is prepared in non-technical language and only highlights your benefits. Specific technical interpretation of the benefits provided is available in the various legal documents providing coverage. The benefits outlined here are based upon your eligibility according to the terms of your appointment and the assumption that you have enrolled in the programs. Several programs require premium sharing on the part of the employee.