

MANAGERS

BENEFIT SUMMARY

This brochure highlights the Pennsylvania State System of Higher Education Health Program, Management Benefits Program, Annuitant Health Care Program, and leave entitlements for System managers. The benefits described are available to most employees; however, certain eligibility requirements must be met.

Information is provided for general purposes only. Legal Plan Documents will govern any discrepancies that may arise. For additional information concerning these benefits, contact your human resource office. Benefits, benefit levels, and eligibility rules are subject to change.

Basic Health Care and Management Benefits

Coverage

If residing in a Health Maintenance Organization (HMO) service area, may choose between Basic, Preferred Provider Organization (PPO), or HMO Plan coverage; entitled to Management Benefits coverage regardless of selection of basic health care plan.

Basic Plan

Pennsylvania Blue Shield facility and provider charges are paid at 100% of the usual, customary and reasonable charges. Participating providers must accept payment as payment in full. Non-participating providers may balance bill.

ClassicBlue Inpatient Facility Services

- 365 days
- Semi-private room
- 60 days/12-month period for mental and nervous disorders
- Substance abuse rehabilitation (30 days/year)

ClassicBlue Outpatient Facility Services

- Emergency accident and medical
- Surgery
- Diagnostic studies
- Home care (60 visits/90 day period)
- Mental illness
- Substance abuse rehabilitation (30 visits/year)

ClassicBlue Medical/Surgical Services

- Surgery
- Diagnostic testing
- Treatment of mental illness (up to \$25/visit)
- Limited preventive services and immunizations

ClassicBlueMajor Medical

- \$500 individual/\$1,500 family deductible annually
- 80% employer coinsurance on first \$2,000, 100% thereafter up to \$1,075,000 lifetime maximum for general medical and mental expenses
- \$50 outpatient mental visit allowance payable at 50% (\$25)

Preferred Provider Organization (PPO) Plan

Most covered services paid in full if care provided by in-network physician with no annual deductible or co-insurance; care not provided by in-network physician is paid at 80% after a \$250 individual/\$500 family annual deductible.

Inpatient Facility Services

- 365 days
- 30 days per calendar year for mental and nervous disorders
- 30 days per calendar year for substance abuse rehabilitation

Outpatient Facility Services

- Emergency accident and medical (\$50 copayment unless admitted)
- Home health care (60 visits/year)
- Mental health or substance abuse rehabilitation (\$15 copayment – 60 visits per calendar year)

Medical/Surgical Services

- Diagnostic studies
- Surgery
- Treatment of mental illness (\$15 copayment)
- Office visits (\$15 copayment)

Preventive Services and Immunizations

- Well-baby care, including testing and childhood immunizations
- Adult routine physical examination, including testing
- Specific vaccinations

Health Maintenance Organization (HMO) Plan

Most covered services paid in full if care is coordinated by primary care physician; care not coordinated by primary care physician is not covered.

- Inpatient facility services
- Outpatient facility services
- Medical/surgical services
- Preventive services and immunizations
- Office visits
- Copayments for certain services may vary
- Benefits may vary by HMO

Prescription Drug Plan

- \$100 individual/\$300 family deductible annually
- Retail dispensing up to a 30-day supply
 - \$5 for generic drugs
 - \$10 for brand name formulary
 - \$20 for brand name non-formulary
- Mail service pharmacy dispensing up to a 90-day supply at twice the retail copayment (\$10, \$20, or \$40)
- If brand drug that has a generic equivalent is dispensed, employee responsible for brand drug copayment plus difference in cost between generic and brand drug unless physician requests brand drug be dispensed (“No Substitution”)

Management Benefits Program

Dental Plan (Certain maximums apply)

- 100% of the UCR allowance for
 - Diagnostic services
 - Preventive services
 - Basic restorative services
 - Periodontal services
 - Oral surgery services
- 70% of the UCR allowance for
 - Major restorations
 - Prosthetics
- 60% of the UCR allowance for
 - Orthodontics

Vision Plan

- NVA Participating Providers
 - Routine exam, standard lenses, and progressive lenses paid in full
 - Frames - \$50 allowance towards wholesale price
 - Contact lenses and low vision aids based on a schedule of allowances
- NVA Non-Participating Providers
 - Routine exam - \$40 for optometrists and \$45 for ophthalmologists
 - Frames, standard lenses, contact lenses and low vision aids based on a schedule of allowances towards retail price
 - No additional allowance for progressive lenses

Hearing Aid Plan

- 100% of the UCR allowance for services up to \$350/36-month period

Eligibility/Contribution for Active Employees

Basic Plan/PPO Plan/HMO Plan

- Effective 1/1/05
 - Permanent full-time employees contribute 10% of premiums for medical and prescription plan on a pre-tax basis
 - Permanent part-time employees who work at least 50% time, contribute 50% of premium in addition to the 10% contribution rate for medical and prescription plan on a pre-tax basis (Part-time employees are not eligible for HMO Plan)
 - Contributions will be based on selected plan and contract size (single, two-party or family)
- 7/1/05 and after
 - Full-time and part-time employees in the Basic Plan (Indemnity) contribute as outlined above plus any increase in annual premiums over 12%

Management Benefits Program

- State System pays 100% for full-time employees and dependents and for permanent part-time employees and dependents, if the employee works at least 50% time

Annuitant Health Care Program

- For annuitants retired 7/1/05 and later
 - Annuitants under age 65 - ClassicBlue/Major Medical coverage (\$500 deductible) with prescription drug card, PPO coverage with prescription drug card, or HMO coverage with prescription drug card
 - Annuitant pays same dollar amount as he/she paid as an active employee until he/she reaches age 65 – if annuitant, subsequent to retirement, changes plans or adds or deletes dependents, the dollar amount of contribution will change to conform to the dollar amount of contribution for the most comparable plan and size of contract that was in effect on the date the annuitant retired
 - Annuitants age 65 and over - Signature-65 and Major Medical coverage (\$500 deductible) to supplement Medicare and prescription drug discount card
 - Annuitant pays same flat percentage amount of Signature-65 premiums paid by active employees who are enrolled in the PPO Plan (currently 10%)
- Annuitant benefits continue to include coverage for dependents
- State System pays \$5 toward cost of coverage for annuitants not qualifying under eligibility requirements listed below

Eligibility

- For employees hired prior to July 1, 1997, when covered employees retire
 - at age 60 with at least 10 years of credited service (may include purchased service)
 - at any age with at least 25 years of credited service (may include purchased service)
 - on approved disability with at least 5 years of credited service (may include purchased service)
- For employees hired July 1, 1997 to June 30, 2004, when covered employees retire
 - at age 60 with at least 15 years of Commonwealth/State System service only
 - at any age with at least 25 years of Commonwealth/State System service only
 - on approved disability with at least 5 years of Commonwealth/State System service only
- For employees hired on or after July 1, 2004, when covered employees retire
 - at age 60 with at least 20 years of Commonwealth/State System service only
 - at any age with at least 25 years of Commonwealth/State System service only
 - on approved disability with at least 5 years of Commonwealth/State System service only

Flexible Spending Accounts

Reduces the amount of taxes paid by designating a portion of salary to an account for eventual reimbursement of certain medical and dependent care expenses. Account balances not used are forfeited.

Medical Reimbursement Account

- Maximum annual contribution is \$3,500
- Eligible expenses for reimbursement include Major Medical deductibles and amounts in excess of plan allowances or maximums, prescription drug co-payments, PPO, and HMO doctor office visit charges, lasik eye surgery, chiropractic services, most over-the-counter medications and supplies, etc.

Dependent Care Reimbursement

- Maximum annual contribution is \$5,000 (\$2,500 if you are married and filing a separate income tax return)
- Dependent care must be necessary so that you, and if you are married, your spouse can work or look for work
- Eligible expenses for reimbursement include child care centers that care for six or more children and that meet the IRS definition of a qualified day care center, caregivers for a disabled spouse or dependent who lives with you, babysitters, nursery schools, household expenses provided that a portion of these expenses are incurred to ensure a dependent's well-being and protection

Eligibility/Contribution

- Permanent full-time employees
- Permanent part-time employees working at least 50% time
- 100% employee-paid

Premium Conversion Plan

Allows employees to pay health care contributions on pre-tax basis, resulting in higher take-home pay

Eligibility/Contribution

- All employees enrolled in a health care plan and contributing toward the cost of that plan

Group Life Insurance

Coverage

- Term life insurance equal to nearest \$1,000 of annual salary
- Minimum coverage \$2,500; maximum coverage \$50,000
- \$20,000 additional work-related accidental death
- Three-month waiting period
- Right to convert upon termination/retirement

Eligibility/Contribution

- State System pays 100% for permanent employees
- Dependents ineligible

Voluntary Group Life and Personal Accident Insurance

Coverage

- Employee term life and personal accident insurance in increments of \$10,000; maximum coverage \$500,000
- Spouse term life and personal accident insurance in increments of \$10,000; maximum coverage \$100,000
- Children term life and personal accident insurance in amounts of \$5,000 or \$10,000

Eligibility/Contribution

- Permanent full-time employees and dependents
- Permanent part-time employees and dependents, if employee works at least 50% time
- 100% employee-paid

Voluntary Long-Term Disability Insurance

Coverage

- Income protection equal up to 60% of gross annual base salary
- Amount offset by retirement benefits, workers' compensation, social security, and paid leave with a guarantee of 10% of long-term disability benefit amount or \$100/month, whichever is greater
- Employee may elect either a 90-day or 180-day elimination period
- Cost of living adjustments

Eligibility/Contribution

- Permanent full-time employees
- Permanent part-time employees working at least 50% time
- 100% employee-paid

Annual, Sick, and Personal Leaves

Annual Leave

- Paid leave earned based on percentage of regular hours paid biweekly and years of service as follows:

Up to one year of service	10.4 days/yr. (4% of hrs. paid)
Over 1 year to 15 years of service	15.6 days/yr. (6% of hrs. paid)
Over 15 years to 25 years of service	20.8 days/yr. (8% of hrs. paid)
Over 25 years of service	26.0 days/yr. (10% of hrs. paid)

- Unused leave may be carried from one year to the next
- 45 day maximum accumulation
- Leave in excess of 45 days not used within the first seven pay periods of the new leave calendar year will be converted to sick leave
- Payment for unused leave at termination/retirement

Sick Leave (Includes Bereavement and Sick Family Leave)

- Paid leave earned at 6% of regular hours paid biweekly which equates to 15.6 days/yr.
- Unused leave may be carried from one year to the next
- Unlimited accumulation
- 3-5 days of leave may be used for death of relative, depending on relationship
- 5 days of leave may be used for sickness in immediate family
- Payment in accordance with the following schedule for accumulated leave at retirement or death while in active service if certain eligibility is met

<u>Days Accumulated</u>	<u>% Payout</u>	<u>Maximum Days Paid</u>
0 – 100	30%	30
101 – 200	40%	80
201 – 300	50%	150
Over 300 (in last year of employment)	100% of days over 300	15

- 100% of unused leave paid to survivor for work-related death

Personal Leave

- 6 days earned per year
- No carry-over from previous year
- Payment for unused accrued leave at termination/retirement

Leave Donation Program

- Permanent employees may donate maximum of 5 days annual and/or personal leave to management employees or union employees whose union has agreed to participate in the plan to be used for catastrophic illness/injury of employee or family member
- Can donate within university or Office of the Chancellor
- Donations may not result in annual leave balances of less than 5 days
- Employees receiving donated leave must use 20 days for the catastrophic illness/injury each year before utilizing donated leave and must use all accrued leave
- Employees may use up to 12 weeks donated leave per year, but not more than 2 consecutive calendar years

Holidays

- 10 paid holidays per year
- Observation of holidays may vary by university

Retirement

- Choice of:
 - State Employees' Retirement System (SERS)
 - 6.25% employee contribution to SERS
 - Public School Employees' Retirement System (PSERS)
 - 7.5% employee contribution to PSERS

- Alternative Retirement Plan (ARP)
 - 5.0% employee contribution to ARP
 - Participating ARP companies
 - AIG VALIC
 - ING
 - Met-Life
 - TIAA-CREF
 - Employee may participate in one or more of the ARP companies at one time
- Employer contribution and benefits vary by plan (view the **Retirement Comparison Chart** by visiting the State System's website at www.passhe.edu keywords "Benefits, "Retirement Plans")
- Selection of retirement plan must be made within 30 days of date of hire; if no choice is made, employee will automatically default to SERS

Other Benefits

- Civil Leave With Pay
- Educational Leave With or Without Pay
- Family Care Leave Without Pay
- Military Leave With or Without Pay
- Parental Leave Without Pay
- Work-Related Disability Leave
- Deferred Compensation/Tax Deferral of Leave Payouts
- Direct Deposit of Pay
- PA State Employees Credit Union (1-800-435-6500)
- Savings Bonds Through Payroll Deduction
- State Employee Assistance Program (1-800-692-7459)
- Social Security
- Tax-Sheltered Annuities
- Tuition Waiver
- Unemployment Compensation (certain classes exempted by law)
- Workers' Compensation

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