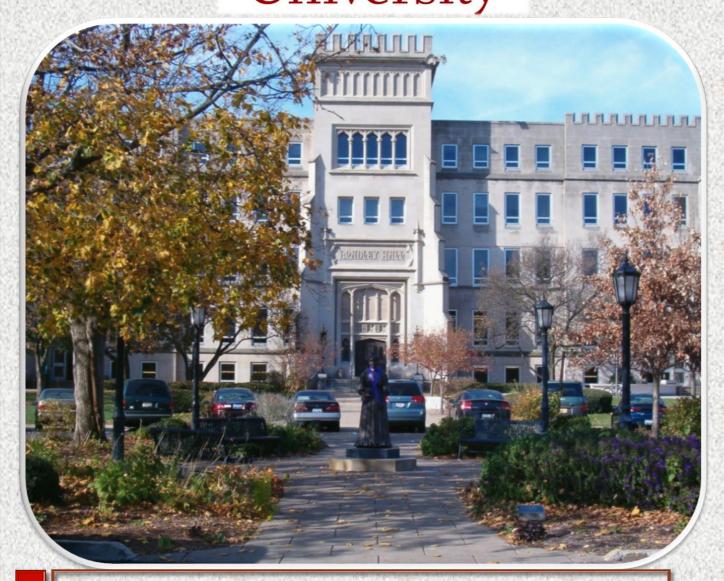


BRADLEYUniversity



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OPERATING ENGINEERS

LOCAL Union #399

BENEFITS SUMMARY

Medical Insurance

Bradley University offers two Medical plans - a PPO and a Qualified High Deductible Health Plan through Blue Cross Blue Shield. The medical/Rx/dental/vision and flex plans run from January 1st through December 31st. Full-time employees are eligible to enroll within their first 31 days of employment and coverage begins on the First of the Month following Date of Hire. Members should utilize the hospitals, ancillary facilities and providers in the BCBS network whenever possible for the highest benefit. The BCBS network includes over 90% of providers nationwide and is in over 170 countries around the world.

Common services <u>not</u> covered by either plan include (but are not limited to): chiropractic care, acupuncture, infertility treatment, holistic medicine, cosmetic procedures

NETWORK INFORMATION	
Administrator	BCBS
Hospitals	Methodist/OSF/Proctor/Pekin
Network	BCBS - PPO
Pharmacy Benefit Mgr.	ExpressScripts (mail order)
Flex Plan Administrator	Benefit Planning Consultants (BPC)
Dental	BCBS

IMPORTANT!

An Employee's spouse who has access to health care that provides minimum value (as defined by the Affordable Care Act)* through their own employer is not eligible for enrollment in the Bradley University Health Plan, regardless of the cost to the spouse and regardless of whether the spouse has been offered an incentive to decline such coverage. The Bradley University Health Plan does not provide secondary coverage on a spouse who has primary coverage.

This allows the University to maintain affordable coverage for its employees, spouses who have no other health care choice, and dependent children. Please note that this only applies to Medical coverage; no other benefits are affected by this policy.

PPO

- In-Network Deductible: \$1,000 for Individual; \$2,000 for Family
 - Out-of-Network Deductible: \$2,000 for Individual; \$4,000 for Family
- In-Network Coinsurance/Out-of-Pocket maximums (includes the deductible and copays) is \$4,500 for Individual; \$9,000 for Family
 - Out-of-Network Coinsurance: \$9,000 for Individual; \$18,000 for Family
- Primary Care Physician Office Visit In-Network \$30 Co-Pay / no deductible
- Specialist Office Visit In-Network \$60 Co-Pay / no deductible
 - Virtual Visit \$0 Co-Pay (with a BCBS provider through BlueAccess for Members)

- Hospital Services deductible applies, then 80/20 coinsurance for In-Network providers
- Emergency Service \$175 copay, deductible, 20% coinsurance

Please refer to the current Summary of Benefits and Coverage (SBC) documents and the benefit highlight sheet on the Bradley University website under the Human Resources page/Benefits/Health Insurance.

Prescription Drug Plan - PPO

- Generic Co-Pay \$10 retail 30-day supply *or* \$20 for 90-day mail order supply
- Preferred Brand (Formulary) Co-Pay \$20 retail 30-day supply *or* \$40 for 90-day mail order supply
- Non-Preferred Brand Co-Pay \$70 retail 30-day supply *or* \$140 for 90-day mail order supply
- Specialty Drug Co-Pay \$150 for a 30 -day supply
- Prescriptions obtained at an out-of-network pharmacy are not covered (CVS/Target, Alwan's)

Qualified High Deductible Health Plan

A QHDHP covers the same health care services (office visits, hospital services, therapy, prescriptions, etc.) as the PPO plan, but only after an individual or a family has met the deductible. The only benefits not subject to the deductible are the adult & child routine wellness services when performed by an In-Network provider – these wellness services are covered by the Plan at 100% / no deductible, no copay. The QHDHP has lower employee premiums than the PPO plan.

- In-Network Deductible: \$2,000 for Individual; \$4,000 for Family
 - Out-of-Network Deductible: \$4,000 for Individual; \$8,000 for Family
- In-Network Out-of-Pocket maximums (includes the deductible) is \$4,000 for Individual; \$8,000 for Family
 - Out-of-Network Coinsurance: \$8,000 for Individual; \$16,000 for Family
- Office Visits deductible applies, then 80/20 coinsurance for In-Network providers
- Outpatient Services –20% coinsurance after deductible is met/0% after out-of-pocket is met
- Outpatient Emergency Care –20% coinsurance after deductible is met/0% after out-of-pocket is met

Prescription Drug Plan QHDHP

The prescription drug benefit under the Qualified High Deductible Plan is not subject to a separate Out-of-Pocket ... it is combined with the Medical Out-of-Pocket maximum

- All tiers of prescription drugs are subject to deductible, then 80/20 coinsurance for In-Network providers.
 This includes a 30-day retail supply as well as a 90-day mail order supply
- Prescriptions are paid at 100% once the out-of-pocket maximum is met
- Prescriptions obtained at an out-of-network pharmacy are not covered (CVS/Target, Alwan's)

Dental

There is no preferred network for dental - you are able to choose any provider for dental services. However, using an in-network dentist will extend your benefits because of contractual discounts and no balance-billing.

- Plan year begins January 1 and ends December 31
- Annual Deductible: \$50 Individual / \$150 Family

- Preventive Care (routine exams, cleanings & x-rays): covered at 100%, no deductible; limited to twice per calendar year per covered person
- All other dental services (restorative/general, major services, etc.): subject to deductible, then 80/20 coinsurance
- \$1,000 annual maximum benefit per covered person

Vision

The Vision plan is provided by EyeMed, a division of BCBS. Vision plan participants will receive an EyeMed Welcome Packet in the mail, which will include a courtesy vision ID card; however, an ID card is <u>not</u> required in order to use the vision benefit - simply let your vision provider know that you have EyeMed vision insurance. If you need a replacement vision ID card, they are <u>only</u> available through the EyeMed member website, or virtually through the EyeMed mobile app. HR cannot order replacement vision ID cards.

EyeMed offers over 24,000 in-network providers Nation-wide, including many local providers such as Illinois Eye Center, Gailey Eye Clinic, Bard Optical, Bond Eye Associates, etc., as well as online options through:

ContactsDirect.com, Glasses.com, Lenscrafters.com, Targetoptical.com, and Ray-ban.com/insurance, and many more

• Provider search: eyemedvisioncare.com/bcbsilvis

Covered members have the right to obtain vision care from the provider of his or her choice; however, payment of benefits varies depending on the type of provider chosen. Be sure to utilize network providers for the most benefit. Note: COSTCO & Walmart are not in-network

The following Member Costs are for In-Network services for each enrolled member:

- Eye exam \$10 copay; once every 12 months
- Frames \$150 allowance & 20% discount off balance over \$150; once every 24 months

(Please note: If the entire allowance is not used during a purchase, the balance of the allowance cannot be used at a later visit.)

- Eveglass Lenses or Contact Lenses once every 12 months:
 - Eyeglass Lenses \$25 copay (single vision, bifocal, trifocal, lenticular); there is an additional member cost for options such as tinting, UV coating, etc.
 - Contact Lenses (in lieu of eyeglass lenses) :
 - Conventional \$150 allowance & 15% discount off balance over \$150
 - Disposable \$150 allowance, plus balance over \$150
- Additional discounts are available on the following In-Network services: 40% additional pair discount, 15% off LASIK, and more

Out-of-Network benefits are on a reimbursement basis (e.g., member pays in full) and benefits are limited. Please refer to your plan materials for Out-of-Network benefits

Flexible Spending Account

The Flexible Spending Account is administered by Benefit Planning Consultants (BPC). The Flexible Spending Account is a voluntary plan with two provisions: First, it allows full-time employees to pay their employee benefit premiums with tax-free dollars. Secondly, full-time employees may also set aside tax-free dollars to help pay for un-reimbursed **medical expenses and/or dependent care**. The money you contribute to either FSA account is not subject to payroll taxes, so you end up paying less in taxes and taking home more of your paycheck.

The Flexible Spending Account can be utilized when enrolled in either the PPO or the Qualified High Deductible Plan (IRS rules apply; see the <u>Health Savings Account (HSA)</u> section, next).

FSA Medical – <u>2024 annual limit is \$3,200</u>. You have two ways to access the funds in your account – via auto reimbursement or manual submission of claims. You have immediate access to 100% of your elected total, regardless of what is actually in your account.

Auto reimbursement is the default. Claims are automatically submitted from BCBS to BPC and then reimbursed to you through an established direct deposit account or a paper check will be mailed to you. Direct deposits are processed daily; paper checks only once a week. You can select your method of reimbursement in ADP.

FSA Dependent Care – <u>Current annual limit is \$5,000</u>. This account is used to pay for eligible dependent care services, such as preschool, summer day camp, before- or after-school programs, and child or adult daycare. Access to the funds in the Dependent Care FSA is limited to the amount that is currently in your account at the time you request reimbursement.

<u>Use it or lose it rule:</u> Both FSAs are a calendar year benefit (Jan 1-Dec 31). However, you have until March 31st of the following calendar year to incur more expenses to use up any remaining funds; claims must be submitted for reimbursement by April 30th. Any money not claimed by April 30th will be forfeited.

Health Savings Account (HSA)

If you are enrolled in a Qualified High Deductible Health Plan, you can establish a tax-exempt Health Savings Account with your own funds. The 2024 limit is \$4,150 (single) or \$8,300 (family). Employees age 55+ can contribute an additional \$1,000. These funds may be used to pay for qualified medical, dental, and prescription services. Unlike an FSA, your HSA dollars roll over from year to year.

To contribute to an HSA you must first establish an HSA at a bank of your choice – Bradley does not provide this service. Once the HSA is opened, you need to enroll in ADP and complete an HSA Direct Deposit form so payroll knows where to send your contributions. Claiming eligible expenses is between you & the IRS; however, once you reach age 65 you can use your HSA funds for <u>anything</u> you wish.

Basic Life Insurance

Basic Life Insurance is available on a contributory basis through Standard. The University pays two-thirds of the total premium for each full-time employee. Coverage is effective on the first of the month following the date of employment. The amount of the insurance is based on the employee's annual contract salary. The accidental death and dismemberment coverage is equal to the life insurance coverage.

Voluntary Life Insurance

Employees also have an opportunity to buy additional life insurance through Standard. Voluntary life insurance coverage can be purchased in \$10,000 increments (employee pays full premium) up to 5 times their annual wages with a maximum benefit of \$500,000. (Example, employee making \$30,000 annually may purchase any amount of additional coverage in \$10,000 increments up to \$150,000 – 5 times the annual wages.) We have open enrollment for life insurance every November this allows employees to make changes to their life insurance coverage. The life insurance plan year runs from January 1st through December 31st.

Long-Term Disability

Long-term disability insurance is available for all full-time employees through Standard after one year of continuous service at Bradley. New full-time employees are eligible to join immediately if employed by the University within three months of leaving another group total disability insurance plan. The University pays two-thirds of the total premium for employees through a total disability insurance policy on the first \$2,000 benefit. Employees may elect

to pay 100% of the premium to have additional coverage of up to \$5,000 monthly benefit based on salary. If approved, long-term disability becomes effective following the first 180 consecutive days of disability. When eligible for benefits, employees receive 60% of their base monthly salary up to the elected maximum benefit per month, less any benefit from Social Security (including dependents' benefit) and workers' compensation. The benefit paid will never be less than \$100. During total disability, the monthly income and the annuity premium benefit will be increased each year by 3% compounded annually.

Long-Term Care

As an employee, you may purchase coverage during the enrollment period through Unum without having to fill out a medical questionnaire, as long as you do not choose benefits that exceed the Guarantee Issue limits. Your enrollment kit contains complete information on the Guarantee Issue limits. If you wait to enroll, you will need to fill out the medical questionnaire and may not be accepted. This benefit is available for employees and family members. The levels of care that this plan could cover include a long term care facility, professional home and community care and total choice home care. This benefit also can include inflation protection. You can select from 4 plan options, each option has 9 levels of monthly benefit and 3 levels of duration.

To view benefit information please visit www.BradleyLTC.com. Informational video available at http://www.agltc.com/BradleyUniversity/Seminar/

Social Security

Bradley participates in the Social Security program with equal contributions from the employee at the current legal rate.

Vacation Leave

Covered by Union contract.

Paid Leave

Covered by Union contract.

Sick Leave

Covered by Union contract.

Short-Term Disability

Covered by Union contract.

Holidays

Covered by Union contract.

Tuition Provisions

A full-time employee, with one year of service, may take a maximum of six semester hours of undergraduate and graduate courses* per session at \$5.00 per semester hour. For more information please call the Financial Aid Office.

A full-time employee's dependents and spouse must meet the University's academic standards before they are

accepted into the institution. After they become accepted, as defined in the Tuition Policy, are eligible for tuition remission for undergraduate courses based on the following number of years of full-time service:

During 1 st year	0%
During 2 nd year	25%
During 3 rd year	50%
During 4 th year	75%
After 4 th year	100%

^{*}The spouse of a full-time employee who is exempt under the Fair Labor Standards Act may take graduate courses at \$5.00 per semester hour.

Other Benefits

Use of all recreational facilities, discounted tickets for sports events, Bradley Theatre Department productions and a discount at the Bradley Bookstores.

Note: This document is intended as a summary only. The benefits will be administered as outlined in Bradley University's plan document and current policies

^{*}Dependents of a full-time exempt employee are eligible for graduate course tuition remission of 50% if classroom space is available. Tuition remission for graduate courses is taxable for dependents and spouses.