EMPLOYEE BENEFITS GUIDE





January - December

3

Provided by...

M.Y. BENEFITS Maximize Your Benefits



EASTERN KENTUCKY UNIVERSITY

Serving Kentuckians Since 1906

Office of the President

Coates Box 1A, 107 Coates Building 521 Lancaster Avenue Richmond, KY 40475-3102 (859) 622-2101• FAX (859) 622-2196 doug.whitlock@eku.edu

Dear Faculty and Staff:

Your benefits package as an Eastern Kentucky University employee represents a significant part of your total compensation while providing you and your family with a very important safety net should the need arise. Throughout my professional career at EKU, I have always believed that the University should offer an excellent variety of programs to provide retirement security, health care services, income protection, life insurance, paid time off and other diverse benefits. For that reason, I have sought to preserve and, when possible, enhance our program. The University Benefits Committee is a huge help in both of those respects.

This benefits booklet is designed to provide summary information for each specific benefit program available and will be a valuable reference if you need to contact a provider about a specific matter. I encourage you to take time to thoroughly review the available options and discuss them with your family members to better enable you to make informed decisions regarding your benefits.

If you have questions regarding any information contained in this manual, please contact the Department of Human Resources, Benefits Section, at 859-622-1324 or 859-622-1325.

Sincerely,

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Doug Whitlock President



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DISCLAIMER

All representations contained herein are for general information and illustration purposes. Detailed information regarding specific policies and coverages are available upon request from the member by the carrier/provider.



EKU Employee Benefits Plans are provided to assist in meeting the unique needs of an academic community by providing a wide array of benefits

options and exemplary customer service from the M.Y. Benefits Staff.

IMPORTANT BENEFITS INFO

EKU BENEFITS COMMITTEE

The Eastern Kentucky Benefits Committee is comprised of employees representing the University community. The charge of the Committee is to collaborate with Human Resources to offer timely advice and recommendations to the President with respect to proposed new benefits or changes to existing benefits; to monitor the experience and effectiveness of the various benefit plans at the University; to review information provided by Human Resources to ensure competitive benefit plans and to assist in a timely, consistent, two-way communication with faculty and staff regarding the status of the benefit plans to include any changes that may be approved.

Did you know...

MEDICARE PART D The health benefits provided by Eastern Kentucky University to its employees include prescription coverage. If you cover Medicare Eligible Dependents, they **will not** be penalized if they later decide to enroll in Medicare's Part D. For more detailed information on these provisions, contact the M.Y. Benefits Staff.

<u>COBRA</u>

Consolidated Omnibus The Budget Reconciliation Act (COBRA) was enacted in 1986 to provide continuing medical benefits for employees under certain gualifying events that might cause an individual to lose coverage. Qualifying events include loss of employment, reduction the employee's hours in of employment, death of the employee, divorce or legal separation of the employee, Medicare entitlement, or ineligibility of a dependent child under terms of the group medical plan. Employees and/or qualified dependents are eligible to continue their medical, dental or vision benefits for a pre-determined period of time under the provisions of COBRA. For more specific information concerning your COBRA rights, contact the M.Y. Benefits Staff.

Maximize Your Benefits

The M.Y. Benefits office can assist you with many benefit related issues? The services provided are:

- Assistance with insurance claims issues
- Assistance with prescription issues
- Educational sessions for departments
- Guidance on benefit selections
- Medical Leave requests

Please contact Erin or Tarena if you would like to take advantage of any of these services.

EQUAL OPPORTUNITY/AFFIRMATIVE ACTION STATEMENT

Eastern Kentucky University is an Equal Opportunity/Affirmative Action employer and educational institution that does not discriminate on the basis of age, race, color, religion, sex, sexual orientation, disability, national origin or Vietnam era or other veteran status, in the admission to, or participation in, any educational program or activity which it conducts, or in any employment policy or practice.

Any complaint arising by reason of alleged discrimination should be directed to the Equal Opportunity Office, Eastern Kentucky University, Jones Building, Room 106, Coates CPO 37A, Richmond, Kentucky 40475-3102, (859) 622-8020 (V/TDD), or the Director of the Office for Civil Rights, U.S. Department of Education, Philadelphia, PA.

Keeping your health information confidential is important to EKU and we have procedures in place to keep it protected. The HIPAA Privacy notice is available for your review at:

http://www.hr.eku.edu/benefits/

WELLNESS PROGRAM

Healthy You! At EKU offers you opportunities to get and stay healthy by participating in a variety of activities throughout the year, such as healthy challenges, online workshops, onsite seminars, and a wellness assessment. You can find out about all of these activities and much more by visiting <u>www.HealthyYouAtEKU.com</u>.

Starting October 2012, Healthy You! will be organized into three semester long incentive periods - Fall, Spring and Summer. Instead of accumulating points all year long, your points will reset at the beginning of each semester. Each semester will be organized around a theme, but the general point structure will stay the same from semester to semester.

Some events will occur every semester or be ongoing throughout the year, but you can always look forward to new fun and exciting activities that change each semester.

EVERY SEMESTER OR ONGOING:

- Campus-wide Challenge
- Cooking Classes
- Seminars
- Exercise Classes

Fall Semester will include:

• Free Flu Shots/Benefits Expo

EALTHY YO

🕜 AT EKU 🕅

- Pack the Track Event
- Homecoming 5K Run for FREE with Healthy You!

Spring Semester will include:

- Annual Health FairBiggest Loser
 - Competition
- Hot Women in Health Luncheon

- Lots of Fun!!
- Blood Pressure Screenings
- Weight Watchers at Work Meetings
- Cooper/Clayton Smoking Cessation Classes

Summer Semester will include:

- Farmers Market on
- Campus
- Community Garden

Visit <u>www.HealthyYouAtEKU.com</u> for more information about the program, the semester theme and how to earn great incentives by participating in the program.

EMPLOYEE ASSISTANCE PROGRAM

Access Wellness Group Employee Assistance Program (EAP)

Are you experiencing. . . stress, anger, grief, family issues and/or drug and alcohol problems?

Your Employee Assistance Program (EAP) through Access Wellness Group is available to help with problems of daily living, whether it's with personal or social life, involves family issues, or is a work-related issue. Counseling is available through your EAP at offices away from the work setting, ensuring confidentiality.

- Your EAP can help you deal with personal problems that are interfering with your peace of mind and ability to enjoy work or time away from work.
- Your EAP is a benefit paid by EKU out of concern for your well-being, whether it's at home or at work.
- You are eligible for 6 sessions per year with a maximum of 12 sessions per family unit per year (including sponsored dependents).
- All EAP services are confidential.
- Help is also available for legal and financial consultation as well as elder care issues such as caring for an aging parent.
- EAP counselors are carefully selected for their education, experience, and ability to establish rapport with people and genuinely help them.

For more information or to schedule an appointment, the EAP can be contacted at 859.309.0309 or toll free at 877.834.7836. Please identify yourself as an employee or family member of EKU.

| HEALTH CARE FLAN CO | UMPARISON | ISON | | | | |
|--|--|--|--|--|---|---|
| BLIG | ELIGIBILITY AND MEDICAL OPTION SUMMARIES | AL OPTION SUMM | ARES | | | |
| COMPREHENSIVE HEALTH CARE BENEFITS ARE AVAILABLE TO FULL-TIME EMPLOYEES AND THEIR ELIGIBLE DEPENDENTS. EMPLOYEES MAY ELECT TO COVER LAWFUL SPOUSES, SPONSORED DEPENDENTS AND CHILDREN FROM BIRTH TO AGE 26 REGARDLESS OF STUDENT OR MARITAL STATUS. PLEASE SEE "SPONSORED DEPENDENT" FOR INFORMATION ON RATES FOR A PARTNER AND THEIR CHILDREN. | LL-TIME EMPLOYEES AND THEIR ELIGIBLE DEPI REGARDLESS OF STUDENT OR MARITAL STATI RATES FOR A PARTNER AND THEIR CHILDREN. | VD THEIR ELIGIBLE D DENT OR MARITAL SI R AND THEIR CHILDR | DEPENDENTS. EMF TATUS. PLEASE S EN. | L-TIME EMPLOYEES AND THEIR ELIGIBLE DEPENDENTS. EMPLOYEES MAY ELECT TO COVER LAWFUL SPOUSES. REGARDLESS OF STUDENT OR MARITAL STATUS. PLEASE SEE "SPONSORED DEPENDENT" FOR INFORMATION O RATES FOR A PARTNER AND THEIR CHILDREN. | TO COVER LAWFU | . SPOUSES, ORMATION ON |
| THERE ARE THREE OPTIONS FROM WHICH TO CHOOSE WHEN SELECTING YOUR MEDICAL INSURANCE: BLUE ACCESS HIGH, BLUE ACCESS STANDARD AND BLUE ACCESS ECONOMY. ALL THREE OPTIONS UTILZE THE SAME PPO NETWORK. SUMMARIES FOR THE THREE MEDICAL OPTIONS ARE FOUND ON THE FOLLOWING PAGES. THESE ARE BRIEF DESCRIPTIONS OF THE COVERAGE PROVIDED BY EACH OPTION. | NG YOUR MEDICAL IN IR THE THREE MEDIC HE COVERAGE PROV | ISURANCE: BLUE AC AL OPTIONS ARE FO IDED BY EACH OPTIC | CCESS HIGH, BLUE UND ON THE FOLL DN. | ACCESS STANDARD OWING PAGES. THES | AND BLUE ACCES E ARE BRIEF DES | S ECONOMY. CRIPTIONS OF |
| ONCE A MEDICAL OPTION IS SELECTED, IT REMAINS IN EFFECT FOR THE FULL CALENDAR YEAR. CHANGES IN ENROLLMENT ARE ONLY PERMITTED WITHIN 31 DAYS OF QUALIFYING EVENTS. PLEASE SEE THE PAGE TITLED "NEED TO CHANGE YOUR PLAN" FOR FURTHER INFORMATION REGARDING QUALIFYING EVENTS. OPEN ENROLLMENT CHANGES ARE EFFECTIVE JANUARY IST. | THE FULL CALENDAF R PLAN" FOR FURTHE EFFECTIVE (| L CALENDAR YEAR, CHANGES IN FOR FURTHER INFORMATION REC EFFECTIVE JANUARY IST. | N ENROLLMENT AR GARDING QUALIFY | EE ONLY PERMITTED M ING EVENTS, OPEN EN | ITHIN 31 DAYS OF (UROLLMENT CHAN | QUALIFYING GES ARE |
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| <u>ANTHEM</u> Anthem is our network provider for physicians and hospitalization coverage. Upon request, Anthem will provide members with a Certificate of Coverage which will outline the entire medical insurance plan in greater detail. Members can also login to www.anthem.com to download the Certificate of Coverage. Members are encouraged to contact Anthem, at the toll-free phone number on the plan ID card, with any questions when making decisions regarding specific procedures or medical care. Members can also access the 24/7 NurseLine to speak with a registered nurse who is available to answer confidential, health-related questions any time of the day or night, every day of the year. See back cover for the number. | on coverage. Upor bers can also logir in the plan ID card, speak with a regis for the number. | request, Anthem to www.anthem.(, with any question tered nurse who is | will provide mer com to download is when making s available to an | mbers with a Certifi d the Certificate of (decisions regarding swer confidential, h | cate of Coverage Coverage. Memb specific procec ealth-related qu | which will bers are ures or estions any |
| Annual deductibles and out-of-pocket maximums for the health plan are based on a calendar year. Out-of-network providers may balance bill above Anthem's allowable amounts. | lth plan are based allowable | rre based on a calendar yes allowable amounts. | ar. Out-of-networ | rk providers may ba | llance bill above | Anthem's |
| Medical Coverage | High (| High Option | Standa | Standard Option | Econom | Economy Option |
| (Administered through Anthem Blue Cross/Blue Shield) | In Network | Out-of-Network | In Network | Out-of-Network | In Network | Out-of-Network |
| Annual Deductible (Single/Family) - Deductibles apply to expenses with a % copay | \$750/\$1,500 | \$1,500/\$3,000 | \$1,000/\$2,000 | \$2,000/\$4,000 | \$2,500/\$5,000 | \$5,000/\$10,000 |
| Out-of -Pocket Maximum (Single/Family) - Deductibles are included | \$2,250/\$4,500 | \$4,500/\$9,000 | \$3,000/\$6,000 | \$6,000/\$12,000 | \$4,000/\$8,000 | \$8,000/\$16,000 |
| Physician Office Services | \$20 copay | Deductible, then 30% | \$20 copay | Deductible, then 40% | \$40 copay | Deductible, then 50% |
| Preventive Care (See MY Benefits Office for a list of applicable services and further details) | \$0 copay | Deductible, then 30% | \$0 copay | Deductible, then 40% | \$0 copay | Deductible, then 50% |
| | | | | | 1 | |

| Medical Nutritional Therapy | \$20 copay | Deductible, then 30% | \$20 copay | Deductible, then 40% | \$40 copay | Deductible, then 50% |
|---|---|---|---|---|---|---|
| Physical Medicine Therapies (when rendered as Physician Office) Combined Network & Non-network limits apply | \$20 copay | Deductible, then 30% | \$20 copay | Deductible, then 40% | \$40 copay | Deductible, then 50% |
| Physical/Occupational Therapy | 40 visit limit | | 30 visit limit | | 20 visit limit | |
| Speech Therapy | 40 visit limit | | 30 visit limit | | 20 visit limit | |
| Chiropractic | 20 visit limit | | 15 visit limit | | 12 visit limit | |
| Inpatient Services * | Deductible, then 10% | Deductible, then 30% | Deductible, then 20% | Deductible, then 40% | Deductible, then 30% | Deductible, then 50% |
| *Unlimited days except for 60 days per benefit period limit combined networ | etwork/out-of-network for inp | k/out-of-network for inpatient physical medicine/rehabilitation | rehabilitation | | | |
| Outpatient Services* | Deductible, then 10% | Deductible, then 30% | Deductible, then 20% | Deductible, then 40% | Deductible, then 30% | Deductible, then 50% |
| *Outpatient Surgery Hospital/Alternative Care Facility, Outpatient Services for Medical Nutritional Therapy, Outpatient Physical Therapy, Other Outpatient Services, Hospital/Alternative Care Facility | ices for Medical Nutritional 1 | ⁻ herapy, Outpatient Phys | ical Therapy, Other | Outpatient Services, Hospi | tal/Alternative Care F | acility |
| Outpatient Diagnostic Testing, X-ray and Lab | Deductible, | Deductible, Then 30% | Deductible, then 20% | Deductible, then 40% | Deductible, then 30% | Deductible, then 50% |
| Maternity Services (Facility/Ancillary/Professional) | Deductible, | Deductible, | Deductible, | Deductible, | Deductible, | Deductible, |
| Emergency Room (ER copay waived if admitted and inpatient services would apolv) | \$150 copay per visit | \$150 copay per visit | \$150 copay | \$150 copay per visit | Deductible, then 30% | Deductible, then 30% |
| Urgent Care | \$60 copay per visit | Deductible, then 30% | \$60 copay per visit | Deductible, then 40% | Deductible, then 30% | Deductible, then 50% |
| *Please Note for The Following Services: The member is | | ounts charged that excee | d the maximum allo | responsible for any amounts charged that exceed the maximum allowable amount for out of network services. | twork services. | |
| Ambulance Services (Medically Necessary Ground) | Covered in Full | Covered in Full | Covered in Full | Covered in Full | Covered in Full | Covered in Full |
| Home Care Services | Deductible, then 10% Unlimited visits | Deductible, then 30% 30 visit limit | Deductible, then 20% Unlimited visits | Deductible, then 40% 30 visit limit | Deductible, then 30% Unlimited visits | Deductible, then 50% 30 visit limit |
| Hospice Services | Covered in Full | Covered in Full | Covered in Full | Covered in Full | Covered in Full | Covered in Full |
| Human Organ and Tissue Transplants (Except kidney and cornea transplants) | See Summary Plan Description | See Summary Plan Description | See Summary Plan Description | See Summary Plan Description | See Summary Plan Description | See Summary Plan Description |
| Durable Medical Equipment (Supplies, Equipment, and Appliances) | Deductible, then 10% | Deductible, then 30% | Deductible, then 20% | Deductible, then 40% | Deductible, then 30% | Deductible, then 50% |

| COMPARISON CONTINUED | | | | | | |
|--|--|--|---|--|--|------------------------------------|
| | High | High Option | Standa | Standard Option | Econom | Economy Option |
| Mental realth (MH) / Substance Abuse (SA) (Administered through Anthem Blue Cross/Blue Shield) | In Network | Out-of-Network | In Network | Out-of-Network | In Network | Out-of-Network |
| Inpatient and Outpatient MH/SA NOTE: Preauthorization Required | Deductible, then 10% | Deductible, then 30% | Deductible, then 20% | Deductible, then 40% | Deductible, then 30% | Deductible, then 50% |
| Physician's office MH/SA NOTE: Preauthorization Required | \$20 copay | Deductible, then 30% | \$20 copay | Deductible, then 40% | \$40 copay | Deductible, then 50% |
| Express Scripts is our pharmacy benefit manager (PBM). Express Scripts benefits include access to a 24-hour, 365-day-a-year Patient Care Contact Center, a Express Scripts is our pharmacies and home delivery for medications and refills which can be ordered as early as 30 days ahead of time from the Express Scripts Pharmacy (also for specialty medications). Employees will receive an Express Scripts ID card that can be presented at any network pharmacy. CuraScript, a division of Express Scripts, is utilized for the effective management of specialty drugs. | ss Scripts benefit is and refills whic e an Express Sc nt of specialty dr | s include access t ch can be ordered rripts ID card that o ugs. | o a 24-hour, 36 as early as 30 can be present | 5-day-a-year Patier days ahead of time ed at any network p | it Care Contact from the Expres harmacy. CuraS | Center, a s Scripts cript, a |
| Prescription (Administered through Express Scripts) | | | | | | |
| Generic / Brand / Non- Formulary Network Retail Pharmacies 30 day supply Mail Order Service 90-day supply** ** Please note: Scripts must be written for a 90-day supply only. | \$7/\$25/\$60 \$14/\$50/\$120 | | \$7/\$25/\$60 \$14/\$50/\$120 | | Deductible (<i>Per</i> <i>Member</i>): \$200, then 50% (min. \$20/max. \$70) | |

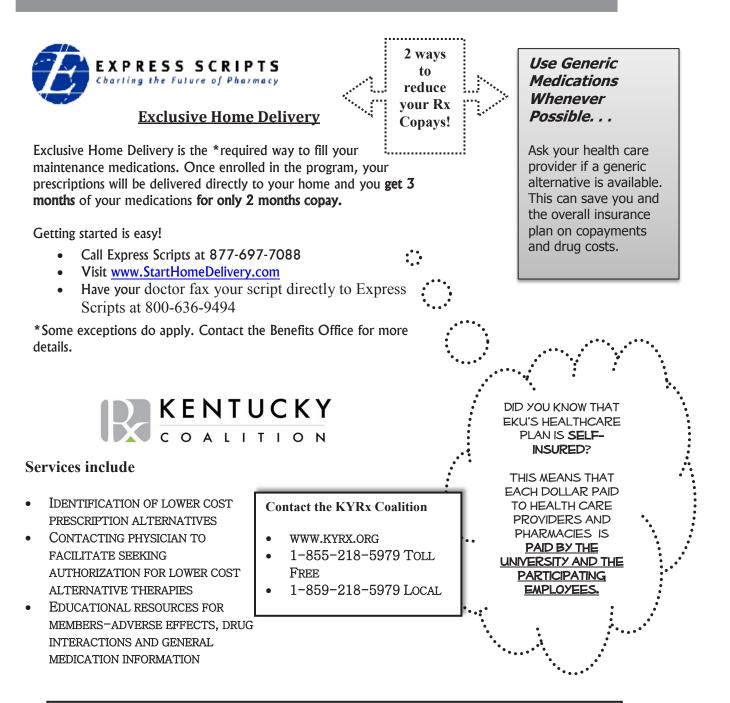
NOTE: Maintenance medications taken on a regular basis must be filled through Express Scripts Home Delivery unless being filled by a retail pharmacy discount (ex. \$4 generic at Kroger) or if you have secondary prescription coverage such as Medicare or Medicaid. Contact the M.Y. Benefits Office for more details.

| BLUE ACCESS HIGH OPTION PPO | Total Monthly Premium | University Monthly Contribution | Employee Monthly Premium | Faculty (20 Pays) | Semi-Monthly (24 Pays) | Bi-Weekly (26 Pays) |
|----------------------------------|--------------------------|------------------------------------|--|----------------------|--|------------------------|
| Employee Only | \$549.13 | \$479.61 | \$69.52 | \$41.71 | \$34.76 | \$32.09 |
| Employee + Spouse | \$938.06 | \$574.56 | \$363.50 | \$218.10 | \$181.75 | \$167.77 |
| Employee + Child(ren) | \$889.14 | \$562.62 | \$326.52 | \$195.91 | \$163.26 | \$150.70 |
| Employee + Family | \$1,449.39 | \$747.87 | \$701.52 | \$420.91 | \$350.76 | \$323.78 |
| Two EKU Employees+ Family | | Up to \$1,053.35 | \$396.04 | \$237.62 | \$198.02 | \$182.79 |
| | | | | | | |
| BLUE ACCESS STANDARD OPTION PPO | Total Monthly Premium | University Monthly Contribution | Employee Monthly Premium | Faculty (20 Pays) | Semi-Monthly (24 Pays) | Bi-Weekly (26 Pays) |
| Employee Only | \$476.19 | \$476.19 | FREE | FREE | FREE | FREE |
| Employee + Spouse | \$694.78 | \$476.19 | \$218.59 | \$131.15 | \$109.30 | \$100.89 |
| Employee + Child(ren) | \$665.48 | \$476.19 | \$189.29 | \$113.57 | \$94.65 | \$87.36 |
| Employee + Family | \$1,068.19 | \$631.57 | \$436.62 | \$261.97 | \$218.31 | \$201.52 |
| Two EKU Employees+ Family | | Up to \$878.91 | \$189.27 | \$113.56 | \$94.64 | \$87.36 |
| | | | | | | |
| BLUE ACCESS ECONOMY OPTION PPO | Total Monthly Premium | University Monthly Contribution | Employee Monthly Premium | Faculty (20 Pays) | Semi-Monthly (24 Pays) | Bi-Weekly (26 Pays) |
| Employee Only | Ë | onomy not available for e | employees electing single | coverage. Please sel | Economy not available for employees electing single coverage. Please select Standard or High option. | n. |
| Employee + Spouse | \$518.92 | \$466.84 | \$52.08 | \$31.25 | \$26.04 | \$24.04 |
| Employee + Child(ren) | \$499.83 | \$465.32 | \$34.51 | \$20.71 | \$17.26 | \$15.93 |
| Employee + Family | \$661.21 | \$552.25 | \$108.96 | \$65.38 | \$54.48 | \$50.29 |
| Two EKU Employees + Family | | Up to \$878.91 | FREE | FREE | FREE | FREE |
| TWO EMPLOYEES ON THE SAME POLICY | | NO DEPENDENTS RE | WITH NO DEPENDENTS RECEIVE 100% OF THEIR COVERAGE PAID FOR BY EKU. | COVERAGE PAID | FOR BY EKU. | |

MEDICAL BENEFITS COSTS

NOTE TO FACULTY: NEW FACULTY PAY FOR BENEFITS FROM AUGUST-JUNE; RETURNING FACULTY PAY BEHIND FOR JULY AND AHEAD FOR JUNE. NON-RETURNING FACULTY: BENEFITS END JUNE 30.

OPPORTUNITIES TO REDUCE YOUR COST



SMALL STEPS, BIG REWARDS

The Diabetes program is offered on campus to EKU employees and their dependents if covered on EKU's health plan. This program is coordinated by the Diabetes Center of Excellence of the Madison County Health Department as a partner with EKU's Health Care Programs. The Diabetes Educator, Paula Hollon, RN, CDE, will help you make positive choices so that you can feel better and improve your health. She is available on campus in Rowlett 114 three days per week. For more information or to schedule an appointment with Paula, call 622-7259 or e-mail paulaa.hollon@ky.gov.

VISION

ELIGIBILITY AND VISION PLAN SUMMARY

VISION BENEFITS ARE AVAILABLE TO FULL-TIME EMPLOYEES AND THEIR ELIGIBLE DEPENDENTS THROUGH ANTHEM BLUE VIEW VISION. EMPLOYEES MAY ELECT TO COVER LAWFUL SPOUSES, SPONSORED DEPENDENTS AND CHILDREN FROM BIRTH TO AGE 26 REGARDLESS OF STUDENT OR MARITAL STATUS. PLEASE SEE "SPONSORED DEPENDENT" FOR INFORMATION ON RATES FOR A PARTNER AND THEIR CHILDREN.

ONCE THE VISION PLAN IS SELECTED, IT REMAINS IN EFFECT FOR THE FULL CALENDAR YEAR. CHANGES IN ENROLLMENT ARE ONLY PERMITTED WITHIN 31 DAYS OF QUALIFYING EVENTS. PLEASE SEE THE PAGE TITLED "NEED TO CHANGE YOUR PLAN" FOR FURTHER INFORMATION REGARDING QUALIFYING EVENTS. OPEN ENROLLMENT CHANGES ARE EFFECTIVE JANUARY 1ST.

| Vision Coverage | In Network Copay | Frequency |
|---|---------------------------|----------------------|
| Exam | \$10 | Once every 12 months |
| Eyeglass Lenses | \$20 | Once every 12 months |
| UV Coating | \$15 | Once every 12 months |
| Tint (Solid & Gradient) | \$15 | Once every 12 months |
| Standard Scratch-Resistance | \$15 | Once every 12 months |
| Standard Polycarbonate | \$40 | Once every 12 months |
| Standard Progressive (Add-on to bifocal copay) | \$65 | Once every 12 months |
| Standard Anti-Reflective Coating | \$45 | Once every 12 months |
| Other Add-ons and Services | 20% off retail | Once every 12 months |
| 2 | In Network Plan Allowance | <i>467</i> 99 96.0 |
| Frames | \$130 | Once every 24 months |
| Contact Lenses | \$130 | Once every 12 months |

Please Note:

• The member is responsible for any amounts charged that exceed the maximum allowable amount

- Members are not permitted to receive Lenses/Frames and Contact Lenses in the same plan year
- Discounts on lens option upgrades are not available out-of-network

| Vision | Monthly Premium | Faculty (20 Pays) | Semi-Monthly (24 Pays) |
|-----------------------|--------------------|----------------------|---------------------------|
| Employee Only | \$ 7.12 | \$4.27 | \$3.56 |
| Employee + Spouse | \$12.08 | \$7.25 | \$6.04 |
| Employee + Child(ren) | \$12.80 | \$7.68 | \$6.40 |
| Employee + Family | \$19.20 | \$11.52 | \$9.60 |

| | | ELIGIBLE DEPENDENTS THROUGH DELTA DENTAL PREMIER OR PPO NETWORKS. EMPLOYEES MAY ELECT TO V FROM BIRTH TO AGE 26 REGARDLESS OF STUDENT OR MARITAL STATUS. PLEASE SEE "SPONSORED EMATION ON RATES FOR A PARTNER AND THEIR CHILDREN. | 2MITTED WITHIN 31 DAYS OF QUALIFYING S. OPEN ENROLLMENT CHANGES ARE | . Dentists who have not signed a pre-authorization and/or are | Preventive Option | 0\$ / 0\$ | \$1,000 | \$0 copay | Not Covered | Not Covered | Not Covered | |
|--------|---------------------------------------|---|---|--|-------------------|-----------------------------------|--|-----------------|--|--|--|--|
| | AN SUMMARIES | THROUGH DELTA DENTAL PREMIER OR PPO 5 REGARDLESS OF STUDENT OR MARITAL 8 PARTNER AND THEIR CHILDREN. | CHANGES IN ENROLLMENT ARE ONLY PER RMATION REGARDING QUALIFYING EVENTS 271 ⁵¹ | s payment in full for covered services mount. Certain procedures require , | Standard Option | \$50 / \$150 | \$1,500 | \$0 copay | Deductible, then 20% copay | Deductible, then 50% copay | Not Covered | |
| | ELIGIBILITY AND DENTAL PLAN SUMMARIES | | S IN EFFECT FOR THE FULL CALENDAR YEAR. TO CHANGE YOUR PLAN" FOR FURTHER INFO EFFECTIVE JANUAR | able amount negotiated by Delta Dental a any amount in excess of the allowable a | High Option | \$0 / \$0 | \$2,000 | \$0 copay | 15% copay | 40% copay | 50% of the allowable amount (\$1,000 lifetime max) (dependents under 19 only) | |
| DENTAL | | DENTAL BENEFITS ARE AVAILABLE TO FULL-TIME EMPLOYEES AND THEIR ELIGIBLE DEPENDENTS THROUGH DELTA DENTAL PREMIER OR PPO NETWORKS. EMPLOYEES MAY ELEC COVER LAWFUL SPOUSES, SPONSORED DEPENDENTS AND CHILDREN FROM BIRTH TO AGE 26 REGARDLESS OF STUDENT OR MARITAL STATUS. PLEASE SEE "SPONSORED DEPENDENT" FOR INFORMATION ON RATES FOR A PARTNER AND THEIR CHILDREN. | ONCE A DENTAL OPTION IS SELECTED, IT REMAINS IN EFFECT FOR THE FULL CALENDAR YEAR. CHANGES IN ENROLLMENT ARE ONLY PERMITTED WITHIN 31 DAYS OF QUALIFYING EVENTS. PLEASE SEE THE PAGE TITLED "NEED TO CHANGE YOUR PLAN" FOR FURTHER INFORMATION REGARDING QUALIFYING EVENTS. OPEN ENROLLMENT CHANGES ARE EFFECTIVE JANUARY 1 ⁵¹ . | Participating dentists agree to accept the allowable amount negotiated by Delta Dental as payment in full for covered services. Dentists who have not signed a participation agreement may bill you directly for any amount in excess of the allowable amount. Certain procedures require pre-authorization and/or are subject to limitations. | Dental Coverage | Annual Deductible (Single/Family) | Maximum Annual Benefit Per Covered Member | Preventive Care | Minor Services Routine Fillings, Simple Extractions, Root Canals, Simple Denture Repair, Oral Surgery, Periodontics (Gum Disease) | Major Services Inlays or Crowns, Prosthetic Services (Dentures) | Orthodontic Services Diagnosis & Treatment Plan Minor Treatment for Tooth Guidance | |

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|-------|---------------------------|----------------------|--------------------------------|---------------------------------------|--------------------------|-----------------------|
| Υ. | \$57.96 | \$69.55 | \$115.92 | \$12.70 | \$128.62 | Employee + Family |
| - | \$33.72 | \$40.46 | \$67.43 | \$12.70 | \$80.13 | Employee + Child(ren) |
| | \$30.51 | \$36.61 | \$61.01 | \$12.70 | \$73.71 | Employee + Spouse |
| | \$12.47 | \$14.96 | \$24.94 | \$12.70 | \$37.64 | Employee Only |
| - , . | Semi-Monthly (24 Pays) | Faculty (20 Pays) | Employee Monthly Premium | University Monthly Contribution | Total Monthly Premium | Delta Dental High |

| | Delta Dental Standard | Total Monthly Premium | University Monthly Contribution | Employee Monthly Premium | Faculty (20 Pays) | Semi-Monthly (24 Pays) |
|---|--------------------------|--------------------------|---------------------------------------|--------------------------------|----------------------|---------------------------|
| \$50.62 \$12.70 \$37.92 \$22.75) \$47.76 \$12.70 \$35.06 \$21.04 \$78.52 \$12.70 \$65.82 \$39.49 | Employee Only | \$24.84 | \$12.70 | \$12.14 | \$7.28 | \$6.07 |
| () \$47.76 \$12.70 \$35.06 \$21.04 \$78.52 \$12.70 \$65.82 \$39.49 | Employee + Spouse | \$50.62 | \$12.70 | \$37.92 | \$22.75 | \$18.96 |
| \$78.52 \$12.70 \$65.82 \$39.49 | Employee + Child(ren) | \$47.76 | \$12.70 | \$35.06 | \$21.04 | \$17.53 |
| | Employee + Family | \$78.52 | \$12.70 | \$65.82 | \$39.49 | \$32.91 |

| Delta Dental Preventive | Total Monthly Premium | University Monthly Contribution | Employee Monthly Premium | Faculty (20 Pays) | Semi-Monthly (24 Pays) | |
|----------------------------|--------------------------|---------------------------------------|--------------------------------|----------------------|---------------------------|---|
| Employee Only | \$12.70 | \$12.70 | FREE | FREE | FREE | |
| Employee + Spouse | \$25.88 | \$12.70 | \$13.18 | \$7.91 | \$6.59 | P |
| Employee + Child(ren) | \$24.42 | \$12.70 | \$11.72 | \$7.03 | \$5.86 | |
| Employee + Family | \$40.15 | \$12.70 | \$27.45 | \$16.47 | \$13.73 | |

HEALTHY MOUTH, HEALTHY BODY

The Delta Dental benefits have been enhanced to include up to four routine teeth cleanings (prophylaxes) or periodontal maintenance cleanings per benefit period (rather than the standard two) for enrollees with certain high-risk medical conditions; including:

- Diabetes and periodontal (gum) disease
- Pregnancy and periodontal (gum) disease Individuals at risk for infective endocarditis
- History of infective endocarditis
 Certain congenital heart defects (such as
- Certain congenital heart defects (such as having one ventricle instead of the normal two)
 - Individuals with artificial heart valves
 Heart valve defects caused by acquired
- conditions like rheumatic heart disease
- Hypertropic cardiomyopathy, which causes abnormal thickening of the heart muscle
- Individuals with pulmonary shunts or conduits
 Mitral valve prolapse with regurgitation(blood
 - INITIAL VALVE PLOIAPSE WITH LEGUIGITATION
 - Other at-risk conditions

•

- Kidney failure or those who are undergoing dialysis
- Those who have weakened immune systems due to chemotherapy and/or radiation
 - HIV positive status
 Organ transplant and
- Organ transplant and/or stem cell (bone marrow) transplant

If you have one or more of the conditions listed above, ask your dentist and physician how you can better manage your oral health to prevent infection and contact Delta Dental's Customer Service Department at (800) 955-2030 to take advantage of this enriched benefit.

SPONSORED DEPENDENT

EKU IS NOW OFFERING HEALTH, VISION AND DENTAL COVERAGE TO YOUR SPONSORED DEPENDENT AND THEIR CHILD(REN).

A SPONSORED DEPENDENT IS DEFINED AS AN ADULT THAT SHARES PRIMARY RESIDENCE WITH THE COVERED EKU EMPLOYEE FOR AT LEAST 12 MONTHS PRIOR TO THE EFFECTIVE DATE OF COVERAGE, IS NOT A RELATIVE AND IS NOT EMPLOYED BY THE EKU EMPLOYEE. ANY CHILD OF A SPONSORED DEPENDENT MUST ALSO SHARE PRIMARY RESIDENCE WITH THE EKU EMPLOYEE, IS UNDER THE AGE OF 26, IS THE NATURAL BORN OR ADOPTED CHILD OF THE SPONSORED DEPENDENT AND IS NOT A RELATIVE OF THE COVERED EKU EMPLOYEE.

BECAUSE THE UNIVERSITY'S BENEFIT PROGRAM FOR ITS FACULTY AND STAFF IS CLASSIFIED AS A SECTION 125 CAFETERIA BENEFITS PLAN, THE UNIVERSITY IS PREVENTED FROM ALLOWING YOU TO PAY FOR COVERAGE ON A PRE-TAX BASIS. ALSO, MEDICAL EXPENSES INCURRED BY YOUR SPONSORED DEPENDENT ARE NOT ELIGIBLE UNDER YOUR FLEXIBLE SPENDING ACCOUNT.

SEE THE FULL SPONSORED DEPENDENT POLICY FOR ADDITIONAL INFORMATION.

IF YOU WISH TO ENROLL A SPONSORED DEPENDENT OR SPONSORED DEPENDENT'S CHILD(REN), PLEASE CONTACT THE MY BENEFITS OFFICE.

| HEALTH RATES | _ | | | |
|------------------------------------|-----------------------------|----------------------|-------------------------|---------------------------|
| Blue Access High Option PPO | Employee Monthly Premium | Faculty (20 Pays) | Semi-Month (24 Pays) | ly Bi-Weekly (26 Pays) |
| Sponsored Dependent (SD) | \$461.87 | \$277.12 | \$230.94 | \$213.17 |
| SD's Child(ren) | \$412.95 | \$247.77 | \$206.48 | \$190.59 |
| SD + SD's Child(ren) | \$973.20 | \$583.92 | \$486.60 | \$449.17 |
| Blue Access Standard Option PPO | Employee Monthly Premium | Faculty (20 Pays) | Semi-Month (24 Pays) | ly Bi-Weekly (26 Pays) |
| Sponsored Dependent (SD) | \$218.59 | \$131.15 | \$109.30 | \$100.89 |
| SD's Child(ren) | \$189.29 | \$113.57 | \$94.65 | \$87.36 |
| SD + SD's Child(ren) | \$592.00 | \$355.20 | \$296.00 | \$273.23 |
| BLUE ACCESS ECONOMY OPTION PPO | Employee Monthly Premium | Faculty (20 Pays) | Semi-Month (24 Pays) | ly Bi-Weekly (26 Pays) |
| Sponsored Dependent (SD) | \$52.08 | \$31.25 | \$26.04 | \$24.04 |
| SD's Child(ren) | \$32.99 | \$19.79 | \$16.50 | \$15.23 |
| SD + SD's Child(ren) | \$194.37 | \$116.62 | \$97.19 | \$89.71 |
| VISION RATES | Employee Monthly Premium | Faculty (20 Pays) | | Semi-Monthly (24 Pays) |
| Sponsored Dependent (SD) | \$4.96 | \$2.98 | | \$2.48 |
| SD's Child(ren) | \$5.68 | \$3.41 | | \$2.84 |
| SD + SD's Child(ren) | \$12.08 | \$7.25 | | \$6.04 |

Dental Rates

| HIGH OPTION | Employee Monthly Premium | Faculty (20 Pays) | Semi-Monthly (24 Pays) |
|--------------------------|-----------------------------|----------------------|---------------------------|
| Sponsored Dependent (SD) | \$61.01 | \$36.61 | \$30.51 |
| SD's Child(ren) | \$67.43 | \$40.46 | \$33.72 |
| SD + SD's Child(ren) | \$115.92 | \$69.55 | \$57.96 |
| STANDARD OPTION | Employee Monthly Premium | Faculty (20 Pays) | Semi-Monthly (24 Pays) |
| Sponsored Dependent (SD) | \$37.92 | \$22.75 | \$18.96 |
| SD's Child(ren) | \$35.06 | \$21.04 | \$17.53 |
| SD + SD's Child(ren) | \$65.82 | \$39.49 | \$32.91 |
| | | | |
| PREVENTIVE OPTION | Employee Monthly Premium | Faculty (20 Pays) | Semi-Monthly (24 Pays) |
| Sponsored Dependent (SD) | \$13.18 | \$7.91 | \$6.59 |
| SD's Child(ren) | \$11.72 | \$7.03 | \$5.86 |
| SD + SD's Child(ren) | \$27.45 | \$16.47 | \$13.73 |

IF YOU ARE COVERING A SPONSORED DEPENDENT OR A SPONSORED DEPENDENT'S CHILD(REN), YOU WILL BE RESPONSIBLE FOR THE PREMIUMS ON THIS PAGE AS WELL AS ANY APPLICABLE PREMIUMS FOR YOUR COVERAGE.

FLEXIBLE SPENDING ACCOUNTS

A FLEXIBLE SPENDING ACCOUNT (FSA) IS AN EMPLOYER-SPONSORED PLAN REGULATED BY THE IRS AND IS ADMINISTERED BY CHARD SNYDER. A FLEXIBLE SPENDING ACCOUNT ALLOWS BENEFIT-ELIGIBLE EMPLOYEES AND THEIR LAWFUL SPOUSE AND CHILDREN REIMBURSEMENT OF CERTAIN EXPENSES ON A PRE-TAX BASIS. THIS MEANS THE GOVERNMENT TAXES LESS OF YOUR INCOME.

There are two ways to participate in this plan:

Health Care Spending Account - allows reimbursement for out-of-pocket medical, dental, and vision expenses.

Dependent Care Assistance Plan - allows reimbursement for dependent daycare expenses.

The max annual contribution is **\$2,500 per plan year for health care** and \$5,000 per plan year for dependent care. You can participate in one or both of the plans **and must enroll prior to the beginning of each plan period**. You may become eligible to join the plan or change your election at some time during the plan period if a qualifying change in family status occurs. Please see the page titled "Need to Change your Plan" for further information.

Upon enrollment, you will be mailed a set of 2 "Benny" debit cards for your convenience. You may use this card like a debit card to pay for eligible expenses. The money comes directly out of your FSA. These cards are good for 5 years; please do not throw them away.

HEALTH CARE SPENDING ACCOUNT (HCSA):

The types of eligible expenses are typically out-ofpocket expenses that may not be covered by insurance.

Examples include:

Non-Allowable

Deductibles/Co-pays/ Coinsurance Hearing Devices Dental & Orthodontic Services Over-the-Counter Drugs Over-the-Counter medic Cosmetics Dietary Toiletries

Services Over-the-Counter Drugs (physician prescribed) Over-the-Counter medical supplies Smoking Cessation Programs Adoption Expenses Eye Exam & Glasses Weight loss (physician prescribed) Vitamins (physician prescribed)

This list is not all-inclusive, but it will give you a good idea of the types of expenses that are reimbursable in an HCSA. If you choose to participate in the HCSA plan, you decide how much money to set aside from your paycheck (up to the plan maximum of \$2,500). You also want to include the out-ofpocket health care expenses for your dependents, even if those dependents are not covered under your employer-sponsored medical (excluding sponsored dependents).

DEPENDENT CARE ASSISTANCE PLAN (DCAP): To qualify as a dependent, a person must regularly

spend at least eight hours a day in your home, be under the age of 13 or is physically or mentally incapable of taking care of him/herself (including a spouse or parent).

To be an eligible daycare provider, the facility must have a tax I.D. number or if it is an individual care giver, that individual must be willing to provide a social security number. This individual can be anyone who is not your dependent under the age of nineteen, or anyone for whom you do not claim an exemption for income tax purposes. Care may be provided inside or outside of your home. If care is provided outside the home, your state's guidelines for what constitutes a daycare facility will apply.

The IRS tracks the daycare maximum amounts on a calendar year basis. Keep in mind that any amount deducted in excess of the IRS maximum of \$5,000 (single or married filing jointly) or \$2,500 (married filing separately) will be considered taxable income.

Additionally, participation in DCAP may affect eligibility for the Child and Dependent Care Tax Credit. See your tax advisor for more information.

IMPORTANT

PLAN CAREFULLY & ENJOY THE TAX SAVINGS!

- Account balances MUST be used during plan period (January 1 December 31, 2013) or balance is FORFEITED!
- Services must be provided or expenses must be incurred during the plan year!
- You can check your balance and see the full eligible expense list at <u>www.chard-snyder.com</u>
- Terminated employees have 90 days from termination date to submit claims incurred during that plan year.

GROUP LIFE AND AD&D

BASIC COVERAGE:

The University provides regular fulltime employees with a 1x salary up to \$50,000 basic Life and Accidental Death & Dismemberment (AD&D) insurance policy through THE HARTFORD at no cost to the employee.

SUPPLEMENTAL COVERAGE:

Employees have the option to add to their basic term life insurance equal to 1x, 2x, 3x, or 4x their annual salary, excluding bonuses, overtime, or any form of extra pay, to a maximum of \$450,000. During open enrollment you may increase supplemental life by one increment of annual salary up to the lesser of guarantee issue (3x salary or \$300,000). A personal health application would be required for amounts exceeding guarantee issue and for those who have no prior supplemental life coverage. If an employee elects supplemental life insurance, he/she may also elect supplemental life coverage for their spouse/sponsored dependent and dependent child(ren).

AD&D is available in increments of \$10,000 to a maximum of the **lesser** of 5x salary or \$500,000.

HIGHLIGHTS INCLUDE

See "Hartford Assistance Programs" for additional support offerings.

<u>ACCELERATED DEATH BENEFIT</u> – Pays a portion of the insured employee's benefit in the event the insured employee becomes terminally ill and the employee has been given a life expectancy of 12 months or less. This one-time payment will be equal to 80% of the insured employee's Life amount, to a maximum of \$500,000. The employee's death benefit will be reduced by the Accelerated Death Benefit paid.

<u>PORTABILITY (FOR ADDITIONAL LIFE)</u> – Allows an insured employee and his/her dependents to elect portable Life coverage, at group rates, if the employee terminates employment, reduces hours or retires from the employer.

<u>LIFE INSURANCE CONVERSION PRIVILEGE</u> - When an insured employee's group coverage ends, employees and their dependents may convert their coverage to individual life policies.

<u>LIFE INSURANCE PREMIUM WAIVER</u> - Life insurance premiums will be waived for insured employees who become disabled prior to age 60 and who remain disabled during an elimination period.

DEPENDENT LIFE ELIGIBILITY REQUIREMENTS

SPOUSE SUPPLEMENTAL LIFE- If you purchase Employee Supplemental Life, you can purchase Spouse Supplemental Life in increments of \$5,000. The maximum amount you can purchase cannot be more than the lesser of \$225,000 or 50% of your Employee Supplemental Life coverage. If you elect an amount that exceeds the guaranteed issue amount of \$25,000, your spouse will need to provide evidence of good health that is satisfactory to The Hartford before the excess can become effective. The monthly premium for Spouse Supplemental Life is \$.45 per 1,000 of coverage.

CHILD(REN) SUPPLEMENTAL LIFE- If you purchase Employee Supplemental Life you can purchase Child(ren) Supplemental Life for your Dependent Child(ren) between the ages of 2 weeks and 19 years (25 if a full time student) in the amount of \$10,000. The monthly premium is \$1.90 for all covered Children.

| Supplemental Life Rates | | |
|-------------------------|------------------|--|
| Age Bands | Rate per \$1,000 | |
| | coverage | |
| <25 | 0.032 | |
| 25-29 | 0.030 | |
| 30-34 | 0.037 | |
| 35-39 | 0.055 | |
| 40-44 | 0.084 | |
| 45-49 | 0.135 | |
| 50-54 | 0.222 | |
| 55-59 | 0.352 | |
| 60-64 | 0.478 | |
| 65-69 | 0.800 | |
| 70-74 | 1.402 | |
| 75+ | 2.060 | |

To calculate your monthly cost, please use the following formula:

Base Annual Earnings/1,000=_____ x appropriate rate above = Monthly Cost

NEW HIRES PLEASE NOTE:

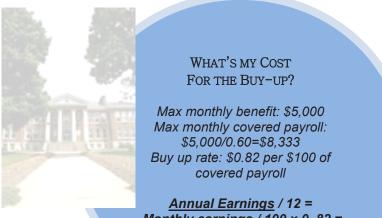
Medical insurability is required for elections greater than 3x annual salary or \$300,000. If this election is not made 31 days from the date of hire, medical insurability will be required for any additional amount.

LONG TERM DISABILITY

BASIC COVERAGE

When an employee suffers a disability, the loss of a regular paycheck can be equally debilitating. The Hartford disability income protection plan helps to provide a long-term source of income based on the employee's earnings at the time of disability.

Each eligible full-time employee of the University receives a monthly benefit of **50% of gross monthly earnings up to a maximum of \$1,250 per month** for a covered disability. Eligible employees include non-vested employees (less than five years of service) and participants in the Optional Retirement Plan. Once vested (5 years of service) in KERS/KTRS, both retirement systems provide disability coverage without additional cost.



<u>Monthly earnings</u> / 100 x 0 .82 = <u>monthly premium</u>

BUY-UP COVERAGE

Eligible employees also have the option to increase their benefit amount to 60% of monthly gross earnings to a maximum of \$5,000 per month for a covered disability. Your total monthly benefit may be reduced if you have other sources of income including, but not limited to, Social Security. Workers' Compensation employer and For further retirement plans. information contact the M.Y. Benefits The Hartford assistance Staff. programs included with this policy offer an integrated approach to income protection tailored to the employee's personal life stage needs. It surpasses traditional disability insurance by offering not only important financial benefits, but also accessible information, support and benefits management that meet a wide range of employee benefit needs. For additional information, see "Hartford Assistance Programs."

HIGHLIGHTS INCLUDE:

<u>Income Replacement</u> - Sound financial protection with early intervention and return-to-work programs helps employees regain independence and maximize their abilities.

<u>Family-Care Benefit</u> – Helps a claimant with family care expenses while he or she is participating in a rehabilitation program. The allowable expenses are treated as deduction from earnings for purpose of calculating the monthly benefit payable. The maximum monthly family care credit allowed for each qualifying child or family member is \$350 during the first 12 months of the rehabilitation program and \$175 thereafter, not to exceed \$2,500 in a calendar year. The benefit is built into the coverage at no additional cost, and is designed to decrease as the employee's earnings increase.

<u>Transition Insurance Options</u> - Quality options at preferred prices for new insurance coverage based on emerging life stage needs when changing employers or retiring.

<u>Employer FICA Match & Pay</u> - The Hartford will deduct and pay the employee's share of the FICA tax due to the federal government from the employee's LTD checks during the first six months of a disability claim. The Hartford automatically pays the employer portion of FICA.

VOLUNTARY INSURANCE

ACCIDENT INSURANCE

Accidents can happen anytime, anywhere.

In your lifetime, which of these accidental injuries have happened to you or someone you know?

- Sports-related accidental injury 0 0
- Broken bone 0

- Burn Concussion
- 0 Laceration Back or knee injuries 0

0 Accident Insurance from Colonial Life & Accident Insurance Company can help protect you, your spouse or your dependent children from the unexpected expense of an accident.

Features of Colonial Life's Accident Insurance:

- You are paid benefits to help you with the care and treatment of a covered accidental injury. 0
- Your benefits are paid directly to you (unless you specify otherwise). 0
- You are paid benefits regardless of any other insurance you may have with other insurance companies. 0
- Your coverage is portable; you can take it with you if you change jobs or retire. 0

See your Colonial Life benefits counselor to learn more about accident insurance and how it can help protect what really counts.

CANCER INSURANCE

How will you pay for what your health insurance won't? If diagnosed with cancer, would you have the money to cover:

- Out-of-network treatments 0
- Experimental treatments 0
- Rehabilitation 0

- Travel expenses to and from treatment centers
- Childcare expenses

Cancer Insurance from Colonial Life & Accident Insurance Company helps guard against financial hardship if you or a loved one is diagnosed with cancer.

Features of Colonial Life's Cancer Insurance:

- Helps pay some of the direct and indirect costs related to cancer diagnosis and treatment. 0
- Helps fill the gaps in your health insurance by helping to pay deductibles and coinsurance. 0
- Pays an annual benefit for specified cancer screening tests. 0

See your Colonial Life benefits counselor to learn more about cancer insurance and how it can help protect what really counts.

CRITICAL ILLNESS INSURANCE

... so you can better deal with the cost of an illness.

If you were to suffer a heart attack (myocardial infarction), stroke, end stage renal failure, coronary artery bypass surgery, or major organ transplant, would you have the money to cover:

- Deductibles and co-insurance not covered by health insurance
- Lost income 0
- Rehabilitation expenses 0 Childcare expenses 0

Home health care needs

0

Travel expenses to and from treatment centers

Even those of us who plan for the unexpected with life, disability and health insurance may discover that some expenses can still remain unpaid. Without adequate protection, sufferers of critical illness might have to pull from their savings or rely on the financial aid of family members in their time of need.

Specified Critical Illness Insurance from Colonial Life & Accident Insurance Company helps preserve your lifestyle in the event of a specified critical illness. It pays money that you can use however you need it most.

Features of Colonial Life's Specified Critical Illness Insurance:

- Pays a benefit if you are diagnosed with a covered specified critical illness. 0
- Coverage is available for you and your family members. 0

See your Colonial Life benefits counselor during your upcoming enrollment period. Learn more about this type of insurance and how it can help protect what really counts.



VOLUNTARY INSURANCE

EDUCATOR SHORT TERM DISABILITY INSURANCE If you get sick or hurt and can't work, which of these bills could you continue paying? 0 Medical bills • Car payment • Utilities House payment 0 Groceries 0 Educator Disability Insurance from Colonial Life & Accident Insurance Company can help protect your income, so you can still pay your bills. Features of Colonial Life's Disability Insurance income protection coverage: Two plan options are offered with several benefit levels that cover on-and off-job disability for covered accidents and 0 covered sicknesses. Included are additional benefits that include accident/sickness hospital confinement and accident benefits for AD&D, 0 fractures, dislocations and medical fee benefits. You're paid regardless of any other insurance you may have with other insurance companies. 0 Benefits are paid directly to you unless you specify otherwise. 0 You may choose the amount of your disability benefits to meet your needs, subject to income requirements. 0 If you change jobs or leave your employer, you can take your coverage with you. 0 See your Colonial Life benefits counselor to learn more about disability insurance and how it can help protect what really counts. HOSPITAL CONFINEMENT INDEMNITY INSURANCE You may have health insurance...But are you really covered? Health insurance covers... It does not cover... o Hospital • Deductibles Outpatient surgery 0 Co-payments • Office visits/ER Co-insurance 0 Prescriptions 0 Colonial Life's Hospital Confinement Indemnity Insurance helps fill the gaps when you have unexpected health care expenses. It pays an indemnity benefit for each covered hospital confinement. Plans also include a wellness testing benefit which helps reimburse you for part of your expenses for tests you would normally have each year. Features of Colonial Life's Hospital Confinement Indemnity Insurance: Benefits are paid directly to you unless you specify otherwise. 0 Benefits are paid regardless of any other insurance you may have with other insurance companies. 0 Coverage is portable. You can take it with you if you change jobs or leave your employer. 0 Coverage is guaranteed renewable as long as premiums are paid when they are due. 0 Coverage is available for you, your spouse and your family. 0 See your Colonial Life benefits counselor to learn more about hospital confinement indemnity insurance and how it can help protect what really counts. **TERM LIFE INSURANCE** Life insurance protection when you need it most. Life insurance needs change as life circumstances change: Getting married Taking on additional debt 0 0 Buying a home Salary changes 0 0 Having a child 0 Colonial Life's Term Life Insurance provides protection for a specified period of time, typically offering the greatest amount of coverage for the lowest initial premium. This fact makes term insurance a good choice for supplementing cash value coverage during life stages where obligations are higher, such as while children are young. It is also a good option for families on a tight budget – especially since the insured can convert it to a permanent cash value plan later. Benefits of Colonial Life's Term Life Insurance: Provide loved ones with a tax-free benefit because life insurance benefits are typically free from income tax for the 0 beneficiary. An Accelerated Death Benefit is included that can pay a percentage of the death benefit if diagnosed with a terminal 0

- An Accelerated Death Benefit is included that can pay a percentage of the death benefit if diagnosed with a terminal illness.
- Take it with you if you change jobs or retire.
- Convert to a Colonial Life cash value life insurance plan with no proof of good health to age 75.
- Spouse and dependent children coverage is available.

Why take chances with your family's financial security? Talk to your Colonial Life benefits counselor about assessing your life insurance needs and find out more about Term Life Insurance.

UNIVERSAL LIFE INSURANCE

Life insurance is not for you. It's for the people who depend on you.

What if something unexpected happened to you today or tomorrow? Would your family have the funds they need to: • Pay final expenses, such as the funeral costs and medical bills?

- Pay off debt such as credit cards and car loans?
- Pay off the mortgage so they can remain in the family home?
- Replace your lost income they depend on for day to day living expenses?
- Provide your children the education you planned for?

With Colonial Life's Universal Life Insurance, you have the flexibility you need to help protect the life you're building. Universal Life Insurance helps provide long-term life insurance protection for all of life's stages.

Features of Colonial Life's Universal Life Insurance:

- Tax-free benefit since life insurance benefits are typically free from income tax for the beneficiary.
- The flexibility to increase or decrease your premiums or death benefit as your needs or goals change.
- Spouse and dependent children coverage options are also available.
- Portable coverage you can keep if you change jobs or retire.
- Cash value that builds on a tax-deferred basis with a credited interest rate guaranteed to never go below 4 percent.
- Accelerated Death Benefit that provides a benefit of a percentage of the death benefit if insured is diagnosed with a terminal illness.

Whatever stage of life you're in, a flexible life insurance plan can help secure your family's financial future. Talk to your Colonial Life benefits counselor to find out more about Universal Life Insurance.

WHOLE LIFE INSURANCE

Life insurance that comes with guarantees...because life doesn't.

Colonial Life's Whole Life Insurance provides guaranteed features – cash value accumulation, premium rates and death benefit (minus any loans and loan interest) – that help ensure those benefits will be there when they're needed to protect your family's way of life.

Guaranteed protection: Offers lifetime protection with a guaranteed death benefit that will not change as long as premiums are paid when due.

Guaranteed premiums: Promises a level premium that stays the same from the day you purchase the policy.

Guaranteed cash value: Guarantees the cash value amount - which accumulates tax deferred.

Features of Colonial Life's Whole Life Insurance:

- Tax-free benefit since life insurance benefits are typically free from income tax for the beneficiary.
- Three option dates to purchase additional coverage with no proof of good health required if you are age 55 or younger at the time of purchase.
- Accelerated Death Benefit that provides a benefit of a percentage of the death benefit if insured is diagnosed with a terminal illness.
- \$3,000 immediate claim payment as an advance of the death benefit paid to the designated beneficiary.

You can't predict the future, but you can rest easy knowing you have life insurance protection with lifelong guarantees. Talk to your Colonial Life benefits counselor to find out more about Whole Life Insurance.

Colonial Life products are underwritten by Colonial Life & Accident Insurance Company, for which Colonial Life is the marketing brand. Coverage is subject to policy exclusions and limitations that may affect benefits payable. Products may vary by state and may not be available in all states. For cost and complete details, see a Colonial Life benefits counselor.

If you have questions about Colonial's voluntary products, please call EKU's local sales representative, Margaret Terry, at (859) 227-6309 or e-mail Margaret.Terry@ColonialLife.com.

VOLUNTARY INSURANCE

Mass Mutual Long Term Care Plan

Mass Mutual's SignatureCare Long Term Care Insurance is available to EKU employees to provide a combination of services: personal care, health, social and supportive. Its goal is to provide assistance and improve the quality of life of those with chronic, long term conditions.

The high costs associated with long term care can place substantial burdens – both financial and emotional – on the family. By transferring risk to the long term care insurance company, employees can help ensure that assets and even the home are protected. SignatureCare Long Term Care Insurance is a tax qualified, individual policy that provides choices – choices of care, choice of settings, choice of benefits – and lets the employee design a policy to fit their specific needs.

HIGHLIGHTS INCLUDE

- Discounted Rates
- Extended Family: As part of an employee benefit, the entire family (employee, spouse, parents, in-laws, grandparents and children) may also be eligible to receive a SignatureCare policy at discounted rates.
- Fully Portable
- Guaranteed Renewable

For more information and assistance in preparing a long-term care solution that is right for you, For general information contact Richard Carr with Neace Lukens, at 859-626-1770; <u>bud.carr@neacelukens.com</u>. For a quote, contact James McGary with Mass Mutual at 859-223-4141 ext. 324; imcgary@financialquide.com.





<u>LIBERTY MUTUAL</u> PROPERTY AND CASUALTY INSURANCE

Employee benefits now include savings on auto and home insurance! As an employee of Eastern Kentucky University you qualify for a special group discount* on your auto, home, and renter's insurance through Group Savings Plus® from Liberty Mutual. This unique program allows you to purchase highquality auto, home and renters insurance at low group rates.

See for yourself how much money you could save with Liberty Mutual compared to your current insurance provider. For a free, no-obligation quote, call Joey Doom or Jeff Creech in Lexington at (859)223-1313 or visit <u>www.libertymutual.com/gspeku</u>.

*Group discounts, other discounts, and credits are available where state laws and regulations allow, and may vary by state. Certain discounts apply to specific coverage only. To the extent permitted by law, applicants are individually underwritten; not all applicants may qualify. Coverage provided and underwritten by Liberty Mutual Insurance Company and its affiliates, 175 Berkeley Street, Boston, MA

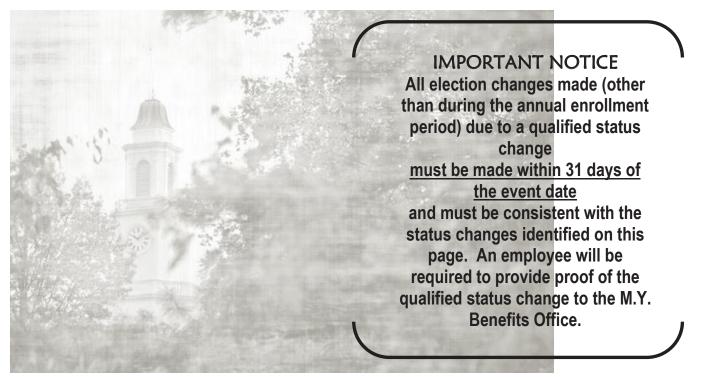
NEED TO CHANGE YOUR PLAN?

Eastern Kentucky University's medical, dental, vision and flexible spending plans are administered in accordance with IRS Section 125 tax code, which allows for a tax advantage (premiums may be deducted on a "pre-tax" basis) for all employees who wish to participate (excluding sponsored dependents).

Due to this tax advantage, the code limits the changes that an employee can make to their elections or enrollment into a plan outside of the annual open enrollment period.

Generally, an employee may not change his/her plan elections outside of annual open enrollment unless a change in family status occurs. Some of these exceptions are as follows:

- Cancellation of dependent coverage due to dependent ineligibility (i.e. divorce or child reaching ineligible status).
- Acquiring a new dependent through marriage, birth, or adoption.
- Obtaining other coverage through a spouse's employer providing that a qualified status change has occurred (i.e. marriage or a similar annual enrollment occurring at a spouse's employer during the year).
- Gain in eligibility (i.e. change in employment status: for example, part-time or temporary to full-time).
- Loss of eligibility (i.e. change in employment status from full-time to part-time or temporary or termination of employment).
- Taking a leave of absence (coverage may be discontinued if insurance premiums are not paid during a period of leave).
- Loss of coverage under spouse's employer plan due to a spouse's death, termination of employment, divorce, or loss of eligibility for other coverage (such as exhaustion of COBRA benefits).
- Qualified medical child support order.



Please Note:

- An employee and/or eligible dependent(s) not previously covered elsewhere may not enter the plan mid-year.
- When removing a dependent, the level of coverage cannot be changed.

RETIREMENT OPTIONS

KENTUCKY EMPLOYEES RETIREMENT SYSTEM (KERS)

KERS is a defined benefit retirement plan for all positions that do not require certification or a 4-year college degree. Benefited employees **must** participate by law. Benefited employees are employees who average 100 or more hours of work per month over twelve consecutive months.

NORMAL RETIREMENT

KERS members may choose normal retirement and receive a monthly benefit based on a formula using years of service and salary.

CONTRIBUTIONS

Employees in nonhazardous positions contribute varying percent of salary depending on when they join the system. EKU contribution rate is determined by the KERS Board of Trustees in accordance with KRS 61.565. The employer rate is reviewed annually following the valuation by a consulting actuary. Employer contributions are not deposited to members accounts. Employer contributions are deposited to the Retirement Allowance Account and are used to pay monthly benefits and the expenses of the system.

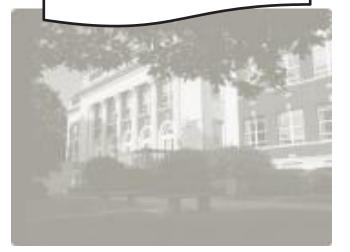
Annual compensation for retirement purposes is limited by 26 U.S.C. 401(a)(17). No employee or employer contributions are made on compensation above the annual compensation limit. The administrative expenses of the systems are subject to approval by the General Assembly and are paid from the Retirement Allowance Account.



For more information regarding Eastern Kentucky University's retirement options, contact the M.Y. Benefits Office or KERS at www.kyret.gov.

PLEASE NOTE: SOME PROVISIONS MAY BE CHANGED BY THE STATE LEGISLATURE.

READ YOUR NEWSLETTERS!



FINAL COMPENSATION

The benefits of all vested members are based on years of service and final compensation. Final compensation is the average of the three or five fiscal years during which the member had the highest average monthly salary. The percent may vary depending when you were hired and retire.

DISABILITY BENEFITS

As provided by 105 KAR 1:210, an employee who is not eligible for an unreduced benefit may retire due to disability.

The employee must have at least 60 months of service, 12 of which are current service credited under KRS 61.543(1) or 78.615(1) and must apply within 12 months of the last day of paid employment in a "benefited" position. An employee may apply for disability prior to termination or while on sick leave.

VESTING

In order to be vested, a member under the age of 65 must have at least 60 months of service credit; over age 65 may receive a reduced benefit.

RETIREMENT OPTIONS CONTINUED

DEFINED BENEFITS VS. DEFINED CONTRIBUTIONS

Limited portability-designed for career employees

Disadvantages

No borrowing capabilities

Defined Benefit Pension Plan – KTRS

This is a plan that specifies the pension benefit the employee will receive, usually as a function of one or more factors such as age, years of service or compensation. The employee's and employer's annual contribution is determined on an actuarial basis, taking into consideration the employee's age and salary history and the performance of the fund's investments.

Kentucky Teachers' Retirement System is based on Final Average Salary times multiplier times years of service.

Advantages

Benefits set by formula No investment risk Investments professionally managed Retirement benefits may have COLAs (Cost of Living Adjustments) Actuarial risk assumed by employer

- Post-retirement health benefits
- Disability benefits

Defined Contributions - Optional Retirement Plans (ORP)

This is a plan that maintains an individual's account for each participant and specifies how contributions to the account are determined instead of specifying the amount of benefits the individual will receive. Employee advantages and disadvantages are as follows:

Advantages

Portability aids short-term employees May have borrowing capability Benefits determined by contributions and investment earnings Disadvantages Bears all investment risk No post-retirement health insurance No disability benefits

Please note: Participation in either KTRS or the ORP is mandatory and you must enroll within 30 days of starting employment. Some provisions may be changed by the State Legislature. Read your newsletters!

KENTUCKY TEACHERS' RETIREMENT SYSTEM (KTRS)

All Eastern Kentucky University faculty members and staff who occupy a position requiring certification or graduation from a four (4) year college or university as condition of employment are eligible to participate in the Kentucky Teachers' Retirement System.

KTRS is a "Defined Benefit Plan" and contributions are made by both the Employer and Employee on a pre-tax basis. The percent of contribution will depend on your enrollment effective date.

For details of the plan, please go to www.ktrs.ky.gov. For assistance, please see EKU's M.Y. Benefits Staff.

The benefits of the Kentucky Teachers' Retirement System are summarized as follows:

A. Vesting - The member is vested after five (5) years of service.

B. <u>Retirement Benefits</u> - Service retirement benefits are computed in several ways depending on when the employee joined KTRS. Specific information is available by contacting the M.Y. Benefits Office.

C. <u>Additional Service Credit</u> – Service in another state system or military service, under certain conditions, may be used to purchase years of service in the Kentucky System.

D. <u>Disability</u> - A member with at least five (5) years of service who qualifies for total disability from any cause receives 60% of the average of the five highest years salary for a minimum of five years - with at least a 50% value thereafter.

E. <u>Taxation</u> - On retirement contributions dated after August 1, 1982, federal and state taxes are not deducted. Retirement contributions made prior to August 1, 1982, have had all applicable taxes deducted.

F. <u>Survivor Benefits</u> - Survivors' benefits for dependents of those not eligible for retirement may reach a maximum of \$200 monthly. Regular service retirement benefits would accrue to the survivor of the member eligible to retire. A \$2,000 death benefit is provided for active members. Upon retirement, health insurance is offered to the retiree, spouse, and dependents.

RETIREMENT OPTIONS CONTINUED

OPTIONAL RETIREMENT PLAN

THE OPTIONAL RETIREMENT PLAN (ORP) IS AVAILABLE TO THOSE INDIVIDUALS EMPLOYED ON OR AFTER AUGUST 1, 1996, WHO WOULD OTHERWISE BE REQUIRED TO PARTICIPATE IN THE KENTUCKY TEACHERS' RETIREMENT SYSTEM (KTRS).

DESCRIPTION

The ORP is established as a 403(b) defined contribution plan under the Internal Revenue Service Code guidelines. Specific rates of contribution have been established for both the employee (6.16%) and employer (8.74%). The percentages cannot be increased or decreased. The level of benefits a participant receives in retirement will depend on several factors, including level and duration of contributions, investment earnings, and age at retirement.

ELIGIBILITY

Individuals who are eligible to participate in KTRS may choose this optional retirement program rather than KTRS. Former employees and those previously employed by other state institutions who were members of KTRS are ineligible for ORP participation unless there has been a six (6) month break in service.

CONTRIBUTIONS

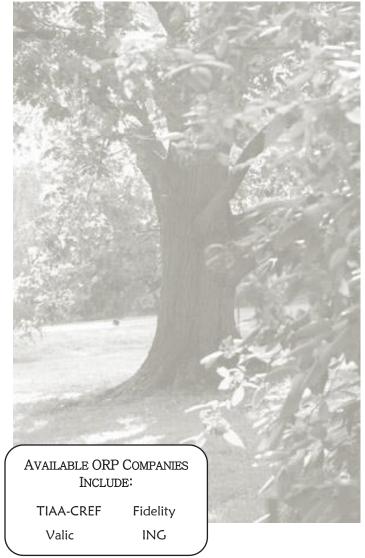
The University's contribution is determined each year; the employee's contribution is fixed by KRS. Currently the **employee contribution is 6.16%** and the **University contribution is 8.74%**. Contributions by both the employee and the University are forwarded to the selected company for purposes of funding individual retirement annuities. Although the University contributes to these annuities, the benefits payable to the participants are not the obligation of the University, the Commonwealth of Kentucky or KTRS. The benefits and other rights of the ORP are the liability and responsibility of the designated companies to which contributions have been made.

All contributions to the ORP are fully vested and are non-forfeitable. Both University and employee contributions are portable and remain with employees upon separation of employment.

SPECIAL BENEFIT IMPLICATIONS

The ORP does not have a disability retirement provision. The only long-term-disability benefit to which employees may be entitled to is that provided by the University's group disability plan.

You are given a one-time opportunity to change from ORP to KTRS, if you switch within the first 6 1/2 years, you can purchase service years while on the ORP. But once changed; **you cannot go back to ORP from KTRS**.



Additionally, medical insurance coverage is not available to ORP retirees.

SUPPLEMENTAL RETIREMENT

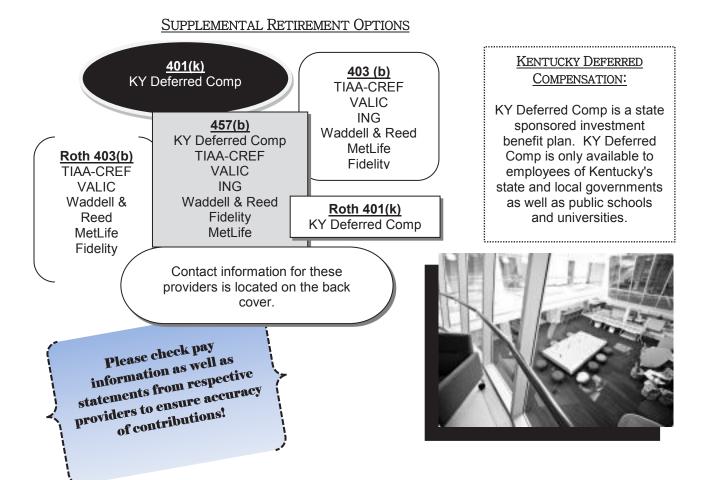
SUPPLEMENTAL RETIREMENT PLANS:

401(k), 403(b), 457(b), ROTH 401(k) and 403(b) Plans

These plans, which provide supplemental retirement benefits, are salary reduction plans made through payroll deduction. The amounts deducted from your paycheck are then credited to an investment annuity. 401(k), 403(b) and 457(b) are exempt from federal and state tax until retirement or earlier withdrawals. Roth 401(k) are post tax but grow tax free. Employees may make these voluntary, tax-deferred or post tax contributions to a supplemental retirement program as defined by the Internal Revenue Code. **EKU does not provide any matching funds.**

Benefit-eligible employees are able to participate in the 401(k), 403(b) and the 457(b) plans. The maximum contribution for employees under the 401(k), 403(b) and 457(b) plans is designated annually by the IRS. **Employees over the age of 50** <u>may</u> be eligible for catch up contributions: Please see your investment representative for further details.





UNIVERSITY PERKS

ELECTION DAYS

Eastern Kentucky University strongly encourages all eligible employees to participate in the democratic process by exercising their right to vote. The University will allow regular full time employees approved time off to vote. Regular employees will be given up to four hours off to vote on Election Day, with one hour to be with pay.

FITNESS CENTERS

Campus Recreation offers numerous events and activities housed in the state-of-the-art Fitness &Wellness Center to help students, faculty and staff achieve the benefits of a healthy lifestyle. Six months or a year memberships are available.

The Burke Wellness Center is located in the Weaver Building and is available to all University employees. The center is equipped with exercise and weight equipment.

TICKETS FOR ATHLETIC EVENTS

The University sponsors a wide range of men's and women's intercollegiate sports. These teams participate in the Ohio Valley Conference and also compete against nonconference institutions.

The University encourages employee support of its athletic teams by providing the opportunity for all full-time employees to purchase football and basketball season tickets at a discount. Single game tickets are sold at regular game prices. Tickets and schedules for all athletic teams may be acquired from the athletic ticket office in the Alumni Coliseum. Ticket and game information is regularly included in various newsletters and bulletins distributed on campus. **This benefit may be subject to taxation.**

DIRECT DEPOSIT

For the convenience and safety of our employees, EKU uses direct electronic payroll deposits to your designated checking and/or savings. See the Division of Human Resources for more information.

CREDIT UNION MEMBERSHIP

All employees and students of Eastern Kentucky University or any member of his/her immediate family is eligible for membership in the Park Community Federal Credit Union. Park Community Federal Credit Union has a local office in Richmond. For more information, go to www.parkcommunity.com.

PARKING PERMITS

Parking permits are available at no cost to University employees. All employees who wish to park on campus must acquire a permit to park in University lots. This can be done by showing proper identification and obtaining an authorizing document from the Division of Human Resources. The document is presented to the Division of Public Safety for the issuance of the parking permit.

FACULTY/STAFF TUITION WAIVER PROGRAM

Eligibility: An Eastern Kentucky University full-time benefited employee is eligible to participate in the faculty/staff scholarship program. Temporary or part-time employees are not eligible for a faculty/staff scholarship. The scholarship may be transferred to the spouse/ sponsored dependent and/or dependent children of eligible employees for classes taken at EKU. If you have questions about eligibility, contact the Division of Human Resources.

Applicability: Eligible employees may use a scholarship for any course(s) for academic credit and for special interest courses that are directly related to employment responsibilities. The maximum scholarship available for each semester provides tuition support for a full time student class load as defined in the current student handbook.

In situations where an employee is transferring the scholarship to a spouse/sponsored dependent and/or dependent(s), the maximum number of hours that may be transferred per semester, in any combination, is twelve. A spouse/sponsored dependent or dependent child may use the scholarship for academic credit courses ONLY. The scholarship applies only to tuition and not to special course fees or other fees required for a course.

Eligible employees may use the scholarship at any Kentucky public, postsecondary institution for a maximum of 6 credit hours per semester, up to 18 credit hours per academic year. This benefit cannot be transferred to a dependent. Contact the Division of Human Resources regarding the procedure for using this benefit at another institution.

Please review the Staff Handbook for more details.

Scheduling: Employees are encouraged to take courses other than during normal working hours.

Procedures: In order to assure approval, individuals should complete a Faculty/Staff Tuition Waiver form **immediately after enrollment in a course(s)**. **Failure to do so could result in denial of tuition waiver**. The individual is responsible for obtaining all required signatures. Keep in mind employees must complete a new tuition waiver request each semester.

Graduate level courses may be subject to taxation.

Berea College Tuition Waiver

The University has an agreement with Berea College that will allow faculty and staff to utilize the tuition waiver plan. Please review the Staff Handbook for more details. Employees interested in this benefit should contact the Division of Human Resources for further information and to obtain a request form.

HOLIDAY SCHEDULE

The following is the normal holiday schedule for Eastern Kentucky University. This schedule may be altered by the President of Eastern Kentucky University to meet operational demands. Some work units or individual employees may be required to work during holiday periods. Those required to work on holidays will receive equivalent compensatory time to be used at another time at the supervisor's discretion. The policy for Spring Break is that University offices will be open.

| Independence Day | One Day |
|---|------------|
| Labor Day | One Day |
| Columbus Day or Presidential National Election | One Day |
| Tuesday following Columbus Day or | |
| Monday before election day in Presidential National | One Day |
| Election years | |
| Thanksgiving (Thursday and Friday) | Two Days |
| Between Semester Holiday (approved year to year) | Seven Days |
| Martin Luther King Jr. Day | One Day |
| Memorial Day | One Day |
| Floating Holiday (must be used each fiscal year) | One Day |
| | |

VACATION SCHEDULE

Vacation Leave is earned by all regular full time, benefit eligible staff. Individuals are encouraged to use their vacation allotments.

Employees are not eligible to utilize vacation leave until the end of their 90 day orientation period.

| 1 - 4 Years Service | 10 Days Per Year | |
|-----------------------|------------------|--|
| 5 - 9 Years Service | 15 Days Per Year | |
| 10 - 14 Years Service | 20 Days Per Year | |
| 15 + Years Service | 22 Days Per Year | |

Vacation is accrued per pay period based on the above schedule. *Maximum accrual is your annual allotment times two years. The supervisor must approve all vacation schedules.*

SICK LEAVE POLICY

Beginning with your employment, benefited employees receive sick leave for the benefit of employees absent because of personal illness, injury, or other short-term disability; attendance to immediate family (as outlined in the *Staff and Faculty Handbooks*) whose condition requires the employee's direct care; and a death in the household if not covered by the University's bereavement leave policy.

Employees shall receive sick-leave credits on the basis of one day per month for each period of employment with Eastern Kentucky University. Sick leave credits accrue with each payroll. Periods of leave without pay earn no sick leave credits. The *Staff Handbook and Faculty Handbook* further explains the sick leave policies and record keeping.

MILITARY LEAVE WITH PAY

Eastern Kentucky University complies with all requirements of the USERRA Guidelines. Employees on military leave shall be paid their annual salaries or compensations for a period or periods not exceeding 15 calendar days or 10 working days if the employee's position is based upon a five-day workweek in any one calendar year. Request for Military Leave should be coordinated through Human Resources.

FAMILY & MEDICAL LEAVE ACT (FMLA)

 The Family and Medical Leave Act (FMLA) provides employees who have twelve months of service with the University and who have performed at least 1,250 hours of service in the prior twelve month period with up to twelve weeks of leave during a rolling twelve month period. Employees will be returned to their former or equivalent position when released by his/her medical provider.

Any leave taken due to one of the following reasons will be considered FMLA leave. Leaves for other reasons do not qualify as FMLA leave. Eligible reasons include:

- For the birth of an employee's child
- For placement of a child with the employee by adoption or foster care
- To care for an employee's child, spouse/sponsored dependent, or parent with a serious health condition
- Employee is unable to perform the essential functions of his or her job due to a serious health condition
- For "any qualifying exigency arising out of the fact that the spouse/sponsored dependent, child, or parent is on active duty (or has been notified of an impending call or order to active duty) in the Armed Forces in support of a contingency operation
- To care for a member of the Armed Forces (employee's spouse/sponsored dependent, child, parent, or next of kin) for a serious injury or illness up to 26 weeks

Employees on FMLA retain the following benefits:

- The University shall maintain its contributions to the group health, dental and life insurance coverage at the same level and under the same conditions the employee would have received had the leave not occurred.
- Paid holidays that fall during the period of leave.
- Employees will continue to accumulate vacation and sick time if they remain on a paid status while on leave. Note: Employees must use any accrued leave while on FMLA.
- Employee-elected voluntary products are the responsibility of the employee. Please contact the M.Y. Benefits Office to make arrangements.

UNIVERSITY PERKS CONTINUED

EXTENDED MEDICAL LEAVE

Extended medical leave is approved time away from the job due to an **employee's serious health condition**, which exceeds the twelve weeks provided under the provisions of Family Medical Leave Act (FMLA).

The maximum allowable time period for extended medical leave (leave beyond FMLA) is computed in the following manner:

- One additional week of extended medical leave for each year of continuous service with Eastern Kentucky University in excess of twelve years, plus
- Any period covered by accrued sick or vacation time.
- The combination of FMLA and extended medical leave is not to exceed the longer of 6 months away from the job or the exhaustion of accrued sick time.

Employees on extended medical leave will continue the benefits of employment in the same manner as when on the initial FMLA. Employees may make application for extended medical leave through the M.Y. Benefits Office.

BEREAVEMENT LEAVE

Eligible employees shall be allowed bereavement leave **up to** three days for the death of an immediate family member.

- Mother/ Father (to include step Mother or Father)
- Spouse/sponsored dependent
- Brother / Sister (to include half Brother or Sister)
- Child (to include step child)
- In Laws of the same kind
- Grandparent or grandchild
- Other persons with whom the employee has a "loco parentis" relationship

Accrued sick leave and/or vacation may be utilized for situations not otherwise covered by this policy. The eligible employee shall notify his/her supervisor of the need for bereavement leave in accordance with their department/college leave notification policy and/or practice.

E-KUSTOM WORK SCHEDULE

This voluntary, modified schedule allows employees to work a customized schedule such as flextime, a compressed work week, or the establishment of additional creative solutions to accommodate life and family demands. Customizing the employee's schedule should be a collaborative, open-minded process between the supervisor and employee. A complete description can be found on the HR website at www.humanresources.eku.edu.

SPOUSAL SICK LEAVE SHARING

GUIDELINES

- Staff may only transfer leave to their spouse/sponsored dependent.
- Sick leave may be transferred only if it has been accrued and available.
- Requests for the transfer of leave will not be processed retroactively, except to cover the period between the date the request was submitted and date of approval.
- Leave will be transferred in no less than blocks of five days but no more than ten days during any one fiscal year. For purposes of the procedure, day is defined as the number of regular work hours specified by the transferring employee's assignment.
- Unused transferred leave will not be returned to the transferring employee.
- Staff must have at least one year of full-time service before they qualify to transfer or receive sick time under this policy. This policy does not impact a staff member's ability to apply for sick time from the sick bank.
- Transferors must maintain a minimum balance of 10 sick days.

WORKERS' COMPENSATION

Scope

All employees, regardless of status or type of employment, are covered under the Kentucky Workers' Compensation Law (KRS 342).

Purpose

The Workers' Compensation law is designed to compensate employees for loss of earning power due to work-related injuries or diseases arising out of and in the course of their employment. This coverage includes both medical expenses and loss-time payments to an employee who is unable to work for an extended period of time because of a compensable injury or disease. For further information, contact the Office of Risk Management and Insurance in the Mattox Building, or at 859-622-5523.

REFER TO EASTERN KENTUCKY UNIVERSITY STAFF AND FACULTY HANDBOOKS FOR MORE SPECIFIC DETAILS AND ADDITIONAL INFORMATION REGARDING UNIVERSITY PERKS.

HARTFORD ASSISTANCE

HARTFORD ASSISTANCE PROGRAMS

In addition to the EAP available through Access Wellness Group, another program is also available to all benefit-eligible employees. This benefit is an enhancement to the University's Group Life and Long-Term Disability through The Hartford and is provided at no cost to the employee.

Program offerings include:

Ability Assist (800-964-3577)

The program is designed to help employees and their families cope with life, from the everyday to the unexpected. Whether managing everyday issues such as stress, relationships, financial planning, legal concerns, finding child care, grief and impact of a disability, Ability Assist can help. This program provides a 24-hour access toll-free number, face-to-face sessions, online resources, and referrals. **This benefit is for employees with Long Term Disability coverage only.**

Beneficiary Assist (866-367-4278)

Available to the employee and family, the program is designed to help in dealing with complex personal issues such as grief, financial, and legal counseling after the loss of a loved one. This program provides a 24-hour access toll-free telephone number to contact a counselor for unlimited phone contact, face-to-face sessions, and referrals and support services. Services are available to beneficiaries of an insured person who dies, insured person who qualifies for an accelerated benefit from a group life insurance plan, and insured person who qualifies for benefits from a group accident policy because of accidental injury.

Worldwide Travel Assistance (800-243-6108 US and Canada & 202-828-5885 Outside US and Canada)

Toll-free emergency assistance is available to covered employees and their families 24 hours a day, 7 days a week when traveling 100 miles or more from your primary home (national or international travel) for 90 days or less. This program provides three kinds of services for your business or vacation travels – Pre-Trip Information, Emergency Medical Assistance and Emergency Personal Services.

LIFE CONVERSATIONS

This service is a unique program offered to employees covered under a Hartford group life policy. This service provides employees with access to a suite of online tools and services to guide them through major life decisions. From selecting the appropriate amount of life insurance and creating a will to at-need services such as funeral planning and grief counseling, Life Conversations provides employees with online and 24/7 advisor support. The services offered through this program include:

Estate Guidance – With the support of licensed attorneys, this service assists an employee with creating a simple legal will quickly and conveniently online. This service is offered through ComPsych, the nation's leading EAP provider. **EstateGuidance® Promotional Code: WILLHLF**

Funeral Planning and Concierge Services – This service is offered through Everest and provides employees with 24/7 funeral planning assistance from funeral advisors, online funeral planning tools and PriceFinder search reports to find detailed, local funeral home price comparisons. It also provides employees with a planning session with a licensed funeral director, documentation of the family's wishes, communication of the plan to the funeral home of the family's choice and negotiation of prices. **Everest Funeral Planning Access Code: HFEVLC**

> PLEASE VISIT WWW.HARTFORDLIFECONVERSATIONS.COM OR CALL 1-866-854-5429 FOR MORE INFORMATION.

OPEN ENROLLMENT

- 1. Review Your Benefits
 - Read this Guide thoroughly- it summarizes EKU's benefit options.
 - Logon to EKU Direct to view your current benefits
- 2. Consider Your Choices Carefully
 - After the open enrollment period closes, you cannot make changes to most benefits without a qualifying event.
- 3. Getting Ready to Enroll
 - Have social security numbers and dates of birth for yourself and your eligible family members.
 - Have your estimated out-of-pocket healthcare (medical, dental, vision) and Dependent care (day care) expenses to help you plan your Flexible Spending Account contributions.
 - Choose the best method for your enrollment. Details are below.
- 4. Follow-up!
 - Be sure to check your first paycheck on EKU Direct to confirm that your payroll deductions are correct. Report any discrepancies immediately to the MY Benefits Department.

ONLINE ENROLLMENT

Logon to <u>https://harmonyenroll.coloniallife.com</u> Online enrollment will be available from October 3 – October 24

- ✓ Your **user name** is EKU + EKU ID Number (example: EKU901654321)
- ✓ Your **password** is the first four characters of your last name + the last four digits of your EKU ID Number (example: smit4321)
- You will be prompted to <u>change your password</u> for security
- Enroll your benefit choices. Some may be required even if you don't intend to make a change.
- Proceed to last page of enrollment site. CLICK ON THE LOG OUT BUTTON ON LAST PAGE TO COMPLETE ENROLLMENT "Your Enrollment is Complete. Please Log Out."

You will have an opportunity to print or save a copy of your election form upon completion of your enrollment. **Please know that Macintosh Computers are not compatible.**

Note: For technical assistance accessing or using the system, call the Help Center at 1-866-875-4772, hours of operation 8:30 am - 6:00 pm, EST.

YOU MAY RECEIVE THE FOLLOWING CARDS:

ANTHEM BC/BS – MEDICAL EXPRESS SCRIPTS – PRESCRIPTION DELTA DENTAL ANTHEM BLUE VIEW VISION CHARD SNYDER "BENNY" CARD – FLEXIBLE

BENEFITS EXPO

October 9 & 10 Perkins 9:00 am – 4:00 pm

October 17 & 18 Keen Johnson Ball Room 9:00 am – 4:00 pm

During the Benefits Expo, you can walk in at any time to get your questions answered and/or receive assistance completing your enrollment with a Colonial representative.

The M.Y. Benefits Office makes every effort to have all benefit providers present at the Benefits Expo to answer your questions, but their attendance is based on availability. The Benefits Staff will also be onsite to answer questions.

Because there is a change in dental options, we STRONGLY encourage everyone to complete the open enrollment process.

Also remember that you must enroll in your FSA/Medical Reimbursement and Dependent Care plans every year. All representations contained herein are for general information and illustration purposes only. Detailed information regarding specific policies and coverages are available upon request from the member by the carrier/provider.

Find Answers to Your Questions Here

Find Us in Jones 104

Jamie Carmichael

Benefits Specialist Jamie.carmichael@eku.edu 859-622-8637

Erin Bailey Benefits Specialist Erin.bailey@eku.edu 859-622-1324

Tarena Tyree Benefits Specialist Tarena.tyree@eku.edu 859-622-1325

Find Us in Coates 2

Patty Sallee

Retirement Specialist Patty.sallee@eku.edu 859-622-1326

Leanna Bowles

Wellness Analyst Leanna.bowles@eku.edu 859-622-7218

Wally Skiba

Associate Director Wally.skiba@eku.edu 859-622-5893

M.Y. Benefits Office

CPO 24A, Jones 104 Eastern Kentucky University 521 Lancaster Avenue Richmond KY 40475-3102

Our website has helpful resources and updates. www.hr.eku.edu/benefits

Health Care Plans

Anthem Blue Cross and Blue Shield - Medical and Mental Health Provider

- Customer Service: 1-888-650-4047
- My Anthem Employee Service www.anthem.com (order cards, see paid claims, get special offers)
- Mail claims to: P.O. Box 105187, Atlanta, GA 30348-5187
- 24/7 NurseLine: 1-888-279-5378

Express Scripts - Prescription Benefit Manager

- Customer Service: 1-800-451-6245 www.express-scripts.com
- CuraScript (Specialty Medications) 1-888-773-7376 www.curascript.com
- Additional Resource: Kentucky Rx Coalition 1-855-218-5979 Local 1-859-218-5979

Employee Assistance Program

- Access Wellness Group
 - 1-877-834-7836 1-859-309-0309
- Anthem Blue View Vision
 - 1-866-723-0515
- Delta Dental Plan of Kentucky
 - Employee Self Service 1-800-955-2030 www.deltadentalky.com (order cards, look at benefit information, see claim status)
 - Mail claims to: P.O. Box 242810, Louisville KY 40224-2810

Chard Snyder

- FSA (Flexible Spending Account) for Pre-tax Medical and Dependent Care Expenses 1-800-982-7715
- 24-hour employee account information, claim forms, tax calculator www.chard-snyder.com

The Hartford Life Insurance & LTD

• Customer Service: 1-800-523-2233 – www.thehartfordatwork.com

Colonial Voluntary Products

Customer Service: 1-800-325-4368 – www.coloniallife.com

Liberty Mutual Property and Casualty Insurance

• Joey Doom or Jeff Creech: 1-859-223-1313 or 1-800-852-4419

Long-Term Care Insurance

- General Information: Neace Lukens Richard Carr 1-859-626-1770 bud.carr@neacelukens.com
 - Mass Mutual SignatureCare James McGary 1-859-223-4141, Ext 324 jmcgary@financialguide.com

Healthy You at EKU!

• EKU Employee Wellness Program – www.healthyyouateku.com

State Retirement Plans

- KTRS (Kentucky Teacher Retirement System) 1-800-618-1687 www.ktrs.ky.gov
 - KERS (Kentucky Employees Retirement System) 1-800-928-4646 www.kyret.ky.gov

ORP (Optional Retirement Plans)

- TIAA/CREF Appointments: 1-800-842-2003; Account information: 1-800-842-2776 www.tiaa-cref.org
- Valic Appointments: 1-800-892-5558; Account information: 1-800-448-2542 www.valic.com
- ING 1-800-214-5844 www.ing.com
- Fidelity 1-800-343-0860 www.fidelity.com/atwork

Supplemental Retirement Plans

- MetLife Resources 1-800-492-3553 www.metlife.com
 - Waddell & Reed 1-877-412-8818 www.waddell.com
 - KY Deferred Compensation 1-800-542-2667 www.kentuckydcp.com

Small Steps, Big Rewards

• Employee Diabetes Program – 1-859-622-7259 – paulaa.hollon@ky.gov