

EMPLOYEE BENEFITS OVERVIEW

July 1, 2022 through June 30, 2023

MEDICAL | FSA | HSA | DENTAL | VISION | GROUP LIFE & AD&D | DISABILITY | VOLUNTARY LIFE & AD&D



Benefits overview intended for summary purposes only.

Berea College recognizes the importance of being able to provide our employees and their families with quality benefits as part of their overall compensation package. Therefore, Berea College has developed a comprehensive benefits package that provides quality protection for you and your family, while satisfying the diverse needs of our workforce. This summary highlights the benefit options offered by Berea College for plan year 2022 – 2023.









Eligibility

If you are a benefits eligible employee working 24 hours a week or more, you are eligible for all benefits outlined in this summary. Eligible employees may elect to cover their spouse, domestic partner and/or dependent child(ren) up to the age limitations specified by each insurance carrier. Medical, Dental, Vision, Life and Short-Term Disability benefits are available and effective on your date of hire or can be elected during the annual open enrollment period. Please note that Voluntary Life and Voluntary Disability have a Guarantee Issue (no medical questions will be asked) during your initial eligibility only. If you elect these benefits at the annual open enrollment, you will need to fill out a Medical Questionnaire which is subject to Underwriting approval. Long-Term Disability is available as noted on page 10.

NOTE: You must enroll for all benefits within 30 days of your date of hire. Enrollment instructions can be found on pages 14-15.

The Berea College Employee Medical Benefit Plan does not permit a working spouse/ partner with available PPACA compliant employer sponsored coverage to be covered on the Berea College Employee Medical Benefit Plan. For verification purposes, the spouse or partner's employer must complete an Affidavit. The Spousal Affidavit is available on the enrollment portal (**www.Berea.BSwift.com**). See Human Resources for more details.

Open Enrollment is the annual period that allows you the opportunity to enroll in, cancel, or make changes to the following benefits: Medical, Dental, Vision, Flexible Spending or Health Savings Accounts and Voluntary Life and Disability Insurance. Open Enrollment elections/changes will take effect on July 1 annually, and are locked in until June 30, of the following year, unless you experience a Qualifying Event during the year.

Qualifying Events or Change in Family Status includes such events as marriage, birth or adoption of a child, divorce, death and loss of coverage for you or a spouse or dependent. If one of these events occurs during the year, you must notify Human Resources within 30 days of the event if you wish to make changes to your benefits due to the Qualifying Event.

If your Qualifying Event results in removing yourself, a spouse and/or dependent from the Berea benefits, you will be eligible for a reimbursement of paid premiums only if you turn in the appropriate documentation within 30 days of the Event.

Considerations for adding domestic partners to our plan:

Berea College does extend certain coverage to Domestic Partners providing they meet the plan's definition of a Domestic Partner and aren't eligible for benefits through their employer (specifically for medical benefits). However, employees would be taxed more in these situations because the employer portion of Domestic Partner premiums is treated as additional income since they are not considered dependents. Please keep in mind that covering a Domestic Partner incurs a higher cost to the employee (beyond the listed premiums). For more information, contact your Benefits Coordinator.

√◯ | Medical Benefits

Berea College medical plans offer great flexibility for you and your family to manage your healthcare needs. These plans are offered through the Anthem Blue Access National Network and **administered through Aspirant Clinical Solutions (formerly ARC)**. Claims and coverage questions should be directed to Aspirant at **1-855-982-2583**. You can view your claims, search the provider directory or request new ID cards via the Aspirant website at **www.Aspirant.us**. Dependents are covered until the end of the calendar year in which the dependent turns age 26. **Please note your Deductible starts over each year on January 1st**.

If you are able to access care from a Lexington Clinic Provider or Facility, you will have discounted Copays and Deductibles. The Anthem in-network (Tier 2) and the Lexington Clinic (Tier 1) Deductibles are separate but accumulate toward one another. Please note that services provided by the Berea on-site Clinic, operated through Aspirant Clinical Solutions, are charged as Tier 1.

Medical Benefits Summary





Medical Bener	its Summ	aly	1			
	Premium PPO Plan		Core PPO Plan		HDHP Plan	
In-Network Benefits	Lexington Clinic Providers (Tier 1)	Anthem Providers (Tier 2)	Lexington Clinic Providers (Tier 1)	Anthem Providers (Tier 2)	Lexington Clinic Providers (Tier 1)	Anthem Providers (Tier 2)
Calendar Year Annual Medical Deductible	\$250 indiv. \$500 family	\$750 indiv. \$1,500 family	\$1,000 indiv. \$2,000 family	\$2,000 indiv. \$4,000 family	\$4,000 indiv. \$8,000 family	\$5,500 indiv. \$11,000 family
Coinsurance (Plan / Member)	90% / 10%	80% / 20%	90% / 10%	80% / 20%	100% / 0%	100% / 0%
Medical Maximum Out-of-pocket (includes deductible, coinsurance and Medical copays)		ndividual) family		ndividual) family		ndividual 0 family
Rx Maximum Out-of- Pocket		ndividual) family		ndividual) family	n	/a
Aggregated or Embedded Accumulators ¹	Embe	bedded Embedded		Embedded		
HSA Annual Employer Contribution	n	n/a n/a		\$750 individual \$1,500 family		
Benefit Overview ²	Member C	Cost Share	Member Cost Share		Member Cost Share	
Primary Care Office Visit	No Charge	\$20 Copay	No Charge	\$30 Copay	Deductible then 0%	Deductible then 0%
Specialist Office Visit	No Charge	\$40 Copay	No Charge	\$60 Copay	Deductible then 0%	Deductible then 0%
Preventive Care	No Charge	No Charge	No Charge	No Charge	No Charge	No Charge
Laboratory & Basic X-ray	No Charge	Deductible then 20%	No Charge	Deductible then 20%	Deductible then 0%	Deductible then 0%
Mammography & Colonoscopy (Diagnostic)	No Charge	No Charge	No Charge	No Charge	Deductible then 0%	Deductible then 0%
Advanced Imaging	No Charge	Deductible then 20%	No Charge	Deductible then 20%	Deductible then 0%	Deductible then 0%
Emergency Room	n/a	\$150 Copay	n/a	\$250 Copay	n/a	Deductible then 0%
Urgent Care Center	\$25 Copay	\$50 Copay	\$50 Copay	\$75 Copay	Deductible then 0%	Deductible then 0%
Inpatient Facility Services	n/a	Deductible then 0%	n/a	Deductible then 0%	n/a	Deductible then 0%
Outpatient Services	Deductible then 10%	Deductible then 20%	Deductible then 10%	Deductible then 20%	Deductible then 0%	Deductible then 0%

See NEXT PAGE for Medical Payroll Deduction Rates for each Plan

1 Embedded Deductible means that no single person on a Family Plan will pay a Deductible higher than the individual Deductible.

2 The above references Anthem In-network and Lexington Clinic network providers only; for Out-of-Network benefits, see full summary of benefits.

3 Lab tests drawn, but not performed by Lexington Clinic, may be subject to Tier 2 or out-of-network benefits.

4 Anesthesiology based claims at Lexington Clinic will be billed under Tier 2 benefits. Services provided at Lexington Clinic in collaboration with UK Markey Cancer Center will be subject to Tier 2 benefits.

RATES FOR NON-SMOKER AND/OR NON-TOBACCO USER

2022 - 2023 Base Payroll Deductions

Employee Contribution	Premium PPO Plan	Core PPO Plan	HDHP Plan
Employee	\$278.07	\$183.25	\$71.88
Employee + Spouse/Partner ¹	\$583.61	\$379.73	\$142.46
Employee + Child(ren)	\$482.75	\$316.82	\$124.11
Family	\$847.35	\$553.40	\$212.50

1. Covering a Domestic Partner incurs a higher cost to the employee (beyond the listed premiums) due to IRS regulations. See Human Resources for more details.

RATES FOR SMOKER AND/OR TOBACCO USER(S)

2022 - 2023 | ONE Employee or Spouse/Partner Use

Employee Contribution	Premium PPO Plan	Core PPO Plan	HDHP Plan
Employee	\$308.07	\$213.25	\$101.88
Employee + Spouse/Partner ¹	\$613.61	\$409.73	\$172.46
Employee + Child(ren)	\$512.75	\$346.82	\$154.11
Family	\$877.35	\$583.40	\$242.50

1. Covering a Domestic Partner incurs a higher cost to the employee (beyond the listed premiums) due to IRS regulations. See Human Resources for more details.

2022 - 2023 | BOTH Employee and Spouse/Partner Use Tobacco

Employee Contribution	Premium PPO Plan	Core PPO Plan	HDHP Plan
Employee + Spouse/Partner ¹	\$643.61	\$439.73	\$202.46
Family	\$907.35	\$613.40	\$272.50

1. Covering a Domestic Partner incurs a higher cost to the employee (beyond the listed premiums) due to IRS regulations. See Human Resources for more details.

Current tobacco users can receive the non-tobacco discount by:

- Enrolling in and complying with an approved nicotine cessation program OR
- Providing a signed letter from your physician stating that ceasing use of nicotine and/or tobacco products would be unreasonably difficult due to a medical condition or it is medically inadvisable to quit nicotine use at this time OR
- Providing a new Affidavit after being tobacco-free for 90 days.
- Smoking Cessation classes are offered at the beginning of each term: end of August 2022 and early January 2023 and as requested (minimum enrollment needed). Contact the Director of Health & Wellness for detailed information on classes.

If it is unreasonably difficult, due to a medical condition, for you to achieve the standards for the discount under this program, or if it is medically inadvisable for you to attempt to achieve the standards for the discount under this program, call the Director of Health and Wellness who will work with you to develop another way to qualify for the reward.

Emergency Room Visit Alternative

Did you know that an Emergency Room visit that is not a true emergency could be declined for payment by the insurance company, leaving you with the full cost of the visit?

For after-hours non-emergency issues, consider LiveHealth Online, Urgent Treatment Centers, Little Clinics, Lexington Clinic walk-in locations or Nurseline.

Live**Health**®

LiveHealth Online is a convenient way to interact with a US Board-Certified doctor via live, two-way video on your computer or mobile device 24 hours a day/7days a week! Doctors can ePrescribe to local pharmacies as your State allows.

The cost for an online doctor visit is a \$10 copay for an office visit under your PPO Plans, and \$59 if you have an HDHP Plan. To register, go to:

www.livehealthonline.com

Aspirant Pharmacy | PrudentRx Specialty Pharmacy



ASPIRANT

A 90-day supply of your maintenance medications is available through mail order and at your local CVS Pharmacy for 2 copays instead of 3.



Copay Assistance Program

- \$0 out-of-pocket expense for Specialty medications dispensed by CVS Specialty Pharmacy using PrudentRx.
- 30% coinsurance for Specialty medications that do not go through PrudentRx.
- All members receiving Specialty medications are eligible to participate.
- On-the-spot capabilities to apply copayment assistance dollars when the Specialty prescription is filled by CVS Specialty Pharmacy.



Pharmacy Benefits Summary

AspirantRx/ PrudentRx	Premier PPO Plan	Core PPO Plan	HDHP Plan	
	Tier 1: \$8 Tier 2: \$35 Tier 3: \$50	Tier 1: \$8 Tier 2: \$35 Tier 3: \$50	Deductible then 0%	
Retail Copays	Tier 4: Specialty Drugs** : • 30% coinsurance when filling Specialty medications outside of PrudentRx Specialty Pharmacy.			
Separate Rx Maximum Out-of-Pocket	\$4,350 indiv. \$8,700 family	\$2,600 indiv. \$5,200 family	Integrated with Medical Max. Out-of-Pocket	
Mail Order Rx (90 day supply)	Tier 1: \$16 Tier 2: \$70	Tier 1: \$16 Tier 2: \$70	Deductible	
Mail Order Information: 1-844-253-1825	er Information: Tier 3: \$100		then 0%	

**Specialty drugs are available in a 30-day supply. Contact CVS/Caremark Specialty Pharmacy at 1-800-237-2767.



Which medical plan is best for you? Check out the <u>Decision Tool</u> provided by HealthEquity.

The Berea College health plans and payroll deductions have been pre-loaded. You just select the plans and scenarios you would like to evaluate. We'll show you side-by-side how the plans compare and show you tax saving opportunities.

This plan comparison tool offers personalized insight into your benefits and provides useful data so you can make informed decisions regarding your health plan selection.

Visit: https://www.comparemyhsa.com/bereacollege

PPO vs. HSA Medical Plans...What is the Difference?

The information below provides key definitions and a review of how PPO and HDHP/HSA medical plans function. Both plans cover the same network of providers and the same services but how you pay for your share of expenses is handled differently. The benefit summary grid will outline your out-ofpocket expenses and the benefit period specific to your plan.



PPO MEDICAL PLAN

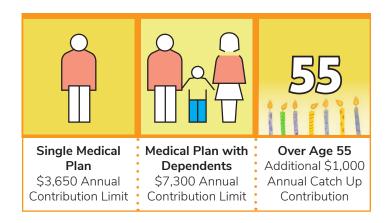
- **Copays** are flat dollar amounts listed on your Benefit Summary for certain services. Typically, copays apply to physician office visits and prescriptions.
- When you use services such as MRIs, CT Scans, lab work, hospitalization, or surgeries you must meet the **deductible** as indicated on your plan. **Copays do not apply to your deductible**.
- **Coinsurance** is a percentage of costs that you share with the insurance carrier after your deductible has been met.
- The Maximum Out-of-Pocket is the maximum amount you will pay, during a benefit period, and includes all deductible, copay, and coinsurance expenses. When an individual meets the maximum out-of-pocket, covered services are paid in full by the plan for that individual until the end of that benefit period. If the family maximum is met, services are covered in full by the plan for the entire family until the end of the benefit period.

HSA MEDICAL PLAN

- **Copays:** Generally, HSA medical plans do not feature copays for medical or pharmacy services. Instead, you are responsible for the amount of the claim, after the carrier has applied all applicable discounts, and the entire claim will be applied toward your deductible.
- Deductible: The full deductible on your HSA medical plan must be met before your plan begins to pay. All out-ofpocket medical and prescription expenses apply to your deductible.
- **Coinsurance** is a percentage of costs that you share with the insurance carrier after your deductible has been met.
- The Maximum Out-of-Pocket is the maximum amount you will pay, during a benefit period, and includes all deductible, copays, and coinsurance expenses. When an individual meets the maximum out-of-pocket, covered services are paid in full by the plan for that individual until the end of that benefit period. If the family maximum is met services are paid in full by the plan for the entire family until the end of the benefit period.

Bigging Servings Account (HSA)

If you elect the HSA Medical Plan, you may be eligible to contribute money into a Health Savings Account (HSA). **This is a personal bank account designed to allow you to save pre-tax dollars for current and future medical expenses. Money in this account is always yours and unused funds roll over year after year providing savings for future medical expenses**. Even though there is no limit to the amount of money you can accumulate in your account, there are annual contribution limits set each year by the IRS. The contribution limits are based on who you are covering under your medical plan. The contribution limits for January 1st – December 31st are as follows and are subject to change, per IRS regulations.



EMPLOYER CONTRIBUTIONS

Berea College contributes money into your Health Savings account in the amount of \$750 (if you are on a single medical plan) and \$1,500 (if you have dependents on your plan).

- Employees hired on, or prior to, December 31, 2022 will receive the full Employer HSA contribution in July.
- Employees hired on or after January 1, 2023 will receive 50% of the Employer HSA contribution.



Health**Equity**®

We have chosen **HealthEquity** as the administrator for Health Savings Accounts. Upon initial election of the HSA Medical Plan, a Health Savings Account will automatically be opened for you and a debit card will be mailed to the address on file. Upon receipt, you must activate your card as instructed. Your debit card can be used as soon as funds are available in the account.



FREQUENTLY ASKED QUESTIONS

What expenses are covered?

• Out-of-pocket expenses for medical, dental, vision, pharmacy, and over-the-counter medical items. For a complete listing of covered items, please visit your HSA administrator's website.

Who is eligible to contribute to a Health Savings Account?

- You are eligible if you have enrolled in an HSA-eligible medical plan and you **do not** have PPO coverage in addition to your HSA Medical Plan.
- You are NOT eligible for a Health Savings Account if you (or your spouse) contribute to a General-Purpose Flexible Spending Account (FSA) and
- You are NOT eligible for a Health Savings Account if you are enrolled in a government-sponsored medical plan such as Medicare, Medicaid, or Tricare.

Who can I use the funds for?

- You can pay for qualified expenses for yourself, your spouse, and dependent children, even if they are not covered on your insurance plans.
- If your Domestic Partner meets the IRS qualifications to be considered a taxable dependent, you can use your HSA funds for his/her qualified expenses.

Can I change my contributions throughout the year?

- Yes. You are not required to encounter a Qualifying Event to adjust your HSA contribution amount. Contact HR for more details and/or limitations on when changes to HSA contributions deducted through payroll should be reported.
- It's important to note that the IRS calculates annual limits on a Calendar Year and it is your responsibility to monitor your HSA contribution amounts.

What if I move to a PPO medical plan next year?

• Once funds are deposited into the HSA, the account can be used to pay for qualified expenses **tax-free**, even if you are no longer covered by an HSA-eligible medical plan. Please note, additional funds cannot be contributed into the account if you are not enrolled in an HSA-eligible medical plan.

What if I incur more expenses than I have funds available in my account?

• If you do not have sufficient HSA funds to pay for an eligible expense, you will need to issue payment by some other means. However, as funds accumulate in your HSA, you can reimburse yourself for those expenses provided the account was open on or before the date the expense was incurred. You will be required to provide the receipt(s) showing proof of payment.

I Healthcare Flexible Spending Accounts (FSA)

Flexible Spending Accounts (FSAs) offer you the opportunity to payroll deduct some of your income on a **pre-tax basis** to pay for certain healthcare expenses that may not be covered as part of your benefit plans. In addition to the pre-tax savings benefit, your total election amount will be available at the beginning of the plan year! You will "pay back" the program with future paycheck deductions.

Healthcare Flexible Spending Account Details

Annual Contribution Limits (limits subject to change)	Up to \$2,850	
Medical FSA (Available with PPO Plans or stand-alone)	Qualified Expenses: Medical, Dental, Vision, Pharmacy, and some over-the-counter medications	
Limited Purpose FSA (Only available with HSA medical plan)	Qualified Expenses: Dental and Vision Only	
Debit Card Included	Yes	
Plan Year	July 1st – June 30th	
Rollover Provision?	\$550	

The Dependent Care Account

(for use with either medical plan or stand-alone)

This account allows you to payroll deduct **tax-free dollars** to fund the daycare of children under the age of 13 (or a disabled spouse, child or parent) so that you can work. This account can be used for daycare, preschool, after school care, summer day camp or elder care.

The annual maximum contribution is \$5,000 for individuals or married couples filing jointly, or \$2,500 for married individuals filing separately. Married couples have a combined \$5,000 limit, even if each has access to a separate dependent care FSA. This account can only be used as the money accumulates from your paycheck and must be spent by the end of the Plan Year (July 1st – June 30th) or forfeited.

Flexible Spending Accounts





Say hello to Go365.

It's your personalized wellness and rewards program.

Have some healthy fun!

Getting healthy is a lot more fun with Go365. Earn Bucks you can use in the Go365 Mall for e-gift cards from Amazon.com, Target, Lowe's and Spafinder, the latest activity trackers from Fitbit and Garmin, and more. Plus, you could win a prize in our monthly Jackpot drawings or get a surprise reward. Download the Go365 app or log into **Go365.com** to get started today.

Trouble logging in? Contact <u>Wellness@</u> <u>berea.edu</u> to activate your account.

Rewards earned through Go365 are taxable. Payroll taxes will be deducted accordingly.

≥ि = | Dental Benefits

Staying healthy includes obtaining quality dental care for you and your family. The Berea College dental plan is provided through the Anthem National Dental Network and administered through Aspirant Clinical Solutions (formerly ARC). Claims and coverage questions should be directed to Aspirant at **1-877-309-2955**. See chart below for dental summary.

Dependent age is to the end of the calendar year in which the dependent turns age 26.

Dental Benefits Summary



Summary		
Dental Benefits	In-Network Dental Blue 100/200/300	
Plan Year Annual Dental Deductible (July 1 - June 30)	\$0 Deductible	
Maximum Annual Benefit for Type I, II & III Services	\$1,000 per covered person	
Maximum Annual Benefit for Type IV Services	\$750 per covered person	
Maximum Lifetime Benefit for Type IV Services	\$1,500 per covered person	
Covered Services	Member Cost Share	
Type I - Basic Services - Clinical Oral Exams - Dental prophylaxis - Bitewing & Full Mouth X-rays - Fluoride & Sealant Treatment (Child only) - Space Maintainers (Child only) - Emergency Care Treatment	No member cost	
Type II - Minor Services - Oral Surgery - Periodontal and/or Endodontic Minor Services - Extractions - Re-cementing Crowns, Bridges, In-Lays - Amalgams - General Anesthesia Administration - Antibiotic Drugs	20%	
Type III - Major Services - Crowns - Prosthodontic Services - Periodontal Adjunctive Services - Periodontal Surgical Services - Occlusal Guards	50%	
Type IV Orthodontic Services -Braces (Must be on the plan 12 months before being eligible for Orthodontics)	\$750 Annually / \$1,500 Lifetime	
Orthodontic Age Limit	Dependent Children under age 19	
Dental Monthly Cost		
Employee	\$4.00	
Family \$30.00		

The benefits outlined here are for illustrative purposes only. The carrier's master policy will be relied upon exclusively in determining benefit reimbursement. Please refer to your bebefit summary for out-of-network coverage.

Voluntary Vision Benefits

Berea College is pleased to provide access to a comprehensive vision care program. The amount you pay for vision services depends upon whether you visit a network or non-network provider. Network providers for EyeMed Vision Care can be found at **www.eyemed.com** or call EyeMed's Customer Care Center at **1-866-804-0982**. See below for a brief description of vision benefits.

Dependent age is to the end of the calendar year in which the dependent turns age 26.

Vision Benefits Summary



EyeMed Vision Care			
In Network Benefits	Member Cost Share*		
Copays			
Exams	\$10 copay		
Service Frequency			
Exams	Once every 12 Months		
Lenses	Once every 12 Months		
Frames	Once every 24 Months		
Lens Coverage			
Single Vision Lenses	\$25 copay		
Lined Bifocal Lenses	\$25 copay		
Lined Trifocal Lenses	\$25 copay		
Frames	\$130 retail allowance; then 20% off remaining balance		
Contact Lenses			
Fitting Fees	Standard Fit and Follow up: up to \$55 / Premium Fit and Follow up: 10% off		
Elective Lenses	\$130 allowance; then 15% off remaining balance		
Medically Necessary	Covered in full		
Vision Monthly Cost			
Employee	\$6.51		
Employee + Spouse	\$12.39		
Employee + Child(ren)	\$13.03		
Family	\$19.16		

*Upgrades to frames & lenses can result in additional out-of-pocket expenses. The above references in-network benefits only; for out-of-network benefits see full summary of benefits.



Employer-Paid Group Life and AD&D Voluntary Life and AD&D Disability

Employer-Paid Group Life and AD&D

Life insurance is a critical component of financial planning and is used to support your loved ones in the event of your death. **Basic life insurance is employer-paid**. This policy also includes Accidental Death & Dismemberment (AD&D). AD&D insurance provides benefits to you or your beneficiary if you suffer loss of life or limb due to an accident. AD&D is considered "double indemnity" which means that if your death is due to an accident, your beneficiary would receive double the life insurance benefit. Benefit reductions apply at age 65. See your Plan Certificate for additional information.

Your basic life insurance policy is equal to $1 \frac{1}{2} \times Annual$ Income to a max of \$300,000.

Note: An additional \$15,000 Life/AD&D policy is provided through Anthem, at no cost, for employees only who are covered on the Berea College Medical Plan.



You may also purchase additional life insurance for you, your spouse and child(ren) that would pay <u>in addition to</u> the basic group life policy we provide. Premiums are based on your age and the amount of insurance you want to purchase. The Guarantee Issue amount below is available upon initial eligibility without Evidence of Insurability (no medical questions required). If you choose not to enroll in the life insurance plan when initially offered as a new hire, but decide to purchase at a later date, you will be required to submit evidence of medical insurability and will be subject to medical underwriting and approval. Your policy may include benefit reductions based on specific ages, so please refer to the Plan Certificate for details.

	Employee	Spouse	Child(ren)
Voluntary Life and AD&D Increments	\$10,000	\$5,000	\$5,000
Minimum Amount	\$10,000	\$5,000	\$5,000
Guarantee Issue \$200,000		\$50,000	\$10,000
Maximum Amount	5x annual earnings to \$300,000 max.	Lesser of 50% of EE elected amount or \$100,000	6 months to age 26 \$10,000

Life/AD&D coverage can be purchased separately. Benefit reduction applies at age 65. See Plan Certificate for details.

🔥 | Disability Benefits

Disability benefits are designed to provide income replacement in case you are unable to work due to an illness and/or injury. Details on disability benefits are provided here. Short-Term Disability lasts for a specified amount of time. If you are unable to return to work beyond that time, Long-Term Disability would begin subject to the policy limitations outlined below.

Long-Term Disability is paid for by Berea College; however, you will pay tax on the premium paid in order to get the highest level of benefit in the event of disability. Long-Term Disability is available on the 1st of the month following 6 months from date of hire and you must be actively at work on the date your coverage begins.

Disability Benefits Summary				
	Voluntary Short-Term Disability*	Long-Term Disability		
Benefits begin after	7th day	6 months		
Duration	26 weeks	SSNRA		
Amount of income protection	60%	60%		
Maximum Amount	\$2,000 week	\$6,000 month (inclusive of SS or WC)		

*Short-term Disability can be used in conjunction with sick leave; however, the benefit will be reduced if your disability income, inclusive of sick pay, exceeds 100% of your weekly income.

All disability claims are underwritten and administered by the insurance carrier (New York Life) who is solely responsible for any disability determination or decision.

OPEN ENROLLMENT

If you elected **Voluntary Life Insurance** for either you or your spouse when you were first eligible, then during the annual Open Enrollment period each year, you may increase your life insurance by one benefit level (\$10,000 Employees; \$5,000 for Spouse) without answering medical questions as long as the benefit does not exceed the Guaranteed Issue Amount.



GROUP BENEFIT SOLUTIONS



Our suite of value-add resources includes:

FinancialConnect®

Sometimes you may not know where to start when facing a stressful financial challenge or when you need financial planning expertise. With FinancialConnect® you and your family members have unlimited access to a team of qualified experts including Certified Public Accountants (CPAs), CERTIFIED FINANCIAL PLANNERS™ (CFP®) and other financial professionals to help guide you. If additional help is needed, you can request referrals to financial professionals in your local community.

In addition, on guidanceresources.com, you will have access to financial information on a wide range of topics including debt management, family budgeting, estate planning and tax planning as well as interactive tools and financial calculators.

LegalConnect[®]

If you are facing a difficult legal challenge and don't know where to start, LegalConnect® can help. This program gives you access to unlimited phone consultations with a staff of attorneys who can provide guidance on issues such as divorce, adoption, estate planning, real estate, and identity theft. If needed, you can be referred to a local attorney for a free 30-minute consultation and a 25 percent reduction in fees thereafter. Lastly, information on low cost and no legal options are available along with referrals to consumer advocacy groups and governmental organizations if needed.

EstateGuidance[®]

This user-friendly online tool allows you and your family members to write a last will and testament, a living will and documents outlining your wishes for final arrangements quickly, easily and cost effectively. EstateGuidance® walks you through the entire process, guiding your choices with a series of questions and breaking down each step into easy-to-understand terms. Access is available anytime, anywhere via tablet, desktop, or mobile app.

Contact Info: 800-344-9752 www.guidanceresources.com (Web ID: NYLGBS)



🚔 | 403(b) Retirement Plan

The Berea College Retirement Plan is a defined contribution plan that operates under section 403(b) of the Internal Revenue Code. All benefit eligible full-time and part-time employees may participate in this plan. You can begin participating in the Plan on your date of hire. College contributions begin on the first day of the month after you fulfill the following requirements:

- You complete one year of service at the College;
- If you worked for another college or university in a benefit-eligible position and have been covered by the retirement plan of that college or university; and, you must have been employed there for longer than one year; and, you must have the previous employer validate your employment history and your inclusion as a member of their plan. See Human Resources for additional information;
- Former College employees who are re-employed, and who previously completed the service requirement for Plan eligibility prior to terminating their employment, will begin participation in the Plan immediately after re-employment if working in a benefit eligible full-time or part-time position.

When you begin participation in the Plan, contributions will be made automatically to the funding vehicles that you've chosen. Plan contribution as a percentage of compensation by the College is 8%. IRS limitation is \$19,500 for 2020.

You are fully and immediately vested in the benefits arising from contributions made under this Plan. Such amounts are non-forfeitable.

To enroll or review your account, log into:

https://www.berea.edu/human-resources/retirement/

How to Use Your EAP

Employee

Your employer has provided you with an Employee Assistance Program (EAP). This benefit provides free and confidential counseling services and resources designed to help you and your household family members.

What Assistance Is Available?

Counseling Services

Our counselors are experienced in many areas, such as:

- Grief & Loss
- Stress Management
- Alcohol/Substance Use
- Marital/Relationship
- Anxiety
- Depression
- Personal Growth
- Child Care Resources
- Parenting Concerns
- Conflict Resolution
- Work-life Balance

- Anger Management
- Family Conflicts
- Spiritual Matters
- Workplace Concerns
- Communications Skills
- Coping with Change
- Interpersonal Difficulties
- Financial Concerns
- Elder Care Resources
- Self-Esteem
- Trauma

Online Work/Life Services

HDC offers a comprehensive Work/Life website to help employees balance their jobs, family and personal responsibilities. This module is interactive and includes:

- Assessments
- Courses

- Videos
- Quizzes

- Articles
- Calculators

The Benefit of Using Your EAP

- FREE-Counseling and life management services are offered at no cost to you.
- CONFIDENTIAL-Services are confidential to the extent permitted by the law.
- NOT REPORTED-Individual use of your EAP is not reported to your employer or manager.
- FAMILY MEMBERS ARE ELIGIBLE-Your EAP is available to you and your household family members.

Each Employee and each dependent may receive 6 counseling sessions per person per year.

Call us 24/7/365 at 502.589.4357 or visit www.humandev.com



Unparalleled Solutions • Prompt Response

3 Easy Steps To Using Your EAP

Call 502.589.4357 or review online resources at www.humandev.com.

Speak confidentially with an intake specialist about your situation or request.

Receive professional support to assist you in resolving work and life issues.

We Are Here for You

Our dedicated consultants are available 24 hours a day, 7 days a week to address your needs. Crisis calls are handled immediately and all appointments will be scheduled in a timely manner. Individual use of your EAP is confidential and is not reported to your employer.

> All counseling services are confidential and in compliance with the law.

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NOTES

www.Berea.BSwift.com

The Berea.BSwift Portal contains a library of all benefit documents (Benefit Summaries, Plan Certs, Compliance Notices, rates and forms) for your review at any time. Please keep your User Name and Password for future reference.

ACCESS TO ONLINE ENROLLMENT

You can directly access the Benefits website by using the Web address <u>www.berea.bswift.com</u>. Bswift supports the following browsers. We encourage you to keep your browser updated with the latest version:

Chrome; Mozilla Firefox; Microsoft Edge; Microsoft Internet Explorer; Safari

Log-in Inform	ation
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User Name: Your personal Berea Number ("B" Number)

Password: The last 4 digits of your Social Although the online benefits enrollment site is a secure site, and your information is encrypted during transit, it is important that you log off when you have completed your session. Click the Log Out icon in the upper right-hand corner of the enrollment site to log off. For security purposes, the system will automatically log you out if you leave your system idle for more than 30 minutes. For successful navigation of the site, do NOT use the "back" button in your internet browser, as this will automatically log you out of the site. Once you have logged in, you will be instructed to change your password. Hit Save and you will be taken to your Home Page.

To begin your enrollment from the Home Page, click on the "Enroll Now" button.

Verify your Personal Information

Before beginning your enrollment, please verify the accuracy of all of your personal information (e.g. address, DOB, etc.) If you need to make any changes, contact your HR Manager. Enter in all required fields with an asterisk (*).

When you are finished, please click "I agree" and "Continue" at the bottom on the screen.

Verify your Family Information

Please be sure to add all dependents that may be missing from the Family Information section before proceeding to the next section. To do this, click on the "Add Dependents" link. If you wish to add dependents, please note that all fields with an asterisk (*) are required. When all of your family information is accurate, read through the "Dependent Information Notice" section, check "I agree" and click "Continue."

Employee Notices

Berea College is required to provide specific notices each year as set forth by the Department of Health & Human Services (HHS), the Department of Labor (DOL), the Internal Revenue Service (IRS) and the Employee Retirement Income Security Act (ERISA). Under the Employee Notices Section of your enrollment, you can choose to acknowledge that these notices are available at any time electronically on the enrollment portal or you can have paper copies provided to you.

Select Your Benefits

All available benefits will be displayed on the screen. When a benefit selection is complete, a green check mark will be displayed next to the plan type. Throughout your enrollment, you can track your per pay period cost on the upper right hand side of your screen.

Berea College offers financial assistance to help lower your health insurance premium, if you qualify. The Premium Subsidy form can be found in the Library Section of the Berea.BSwift portal and must be returned to HR, with appropriate documentation, when completed.

Spousal Affidavit forms can be found in the Library Section of the Berea.BSwift Portal and must be turned into the HR Department when completed.

Please Note: Your enrollment selections are not considered complete until you receive the message "**Your Enrollment is Complete**". You can change your elections until the Open Enrollment period ends.

Tobacco/Non-Tobacco

After you choose your medical plan, you will be asked to confirm if you and your Spouse/Domestic Partner are tobacco users. After you answer and save, you will be given the appropriate medical rates that apply to your tobacco status. See page 7 of the Employee Benefits Overview for the full medical rate grid.

Voluntary Life and Accidental Death & Dismemberment

Berea College provides 1.5 x annual salary in Group Term Life and Accidental Death & Dismemberment coverage; however, you can also elect additional Life/AD&D coverage on a voluntary basis. Please note that Life and AD&D can be purchased separately.

Since Berea offers life insurance at no cost to their employees, you are required to complete the Beneficiary Designation Section of the enrollment.

Voluntary Short Term Disability

If this benefit is elected outside of when you were a newly eligible employee, medical questions will be required and the benefit is subject to medical underwriting approval.

Completing your Enrollment

Once you have made the selection on the final plan, click the "Continue" button to the right of the screen.

Review All Your Selections - Almost Finished!

You will now be directed to the final review page. Carefully review all of your benefit elections and covered dependents. Note that you may change your elections by clicking the "**Edit**" button for any of your plan selections. The dependents you wish to have included in your coverage will be listed. You may notice that some of your elections are pended due to approval by the insurance carrier.

Once you've completed your review, read through the Participation agreement, click the "I agree, and I'm finished with my enrollment", then click the "**Complete Enrollment**" button to the right of the page.

Confirmation Statement

To make changes, return to the Home screen, "Change My Election".

It is highly recommended that you e-mail yourself a confirmation of your elections. To do so, click on the "**Email**" link on the New Elections page after making your election. If you don't have an e-mail address in the system, please print out the confirmation page before you leave the site by clicking on "**Print**" link.

Printing/Uploading Documents

You can print documents off the Berea.BSwift portal by '**double-clicking**' on the document. When it opens, you should have a menu bar at the top which will allow you to print to any connected printer.

If you want to house a completed document for HR to retrieve, such as an Affidavit, save it to your computer and take the following steps:

- Click on 'My Profile' from the Home page;
- Click on 'Employee File' from the menu bar on the left hand side of the page.
- Click on 'View and Upload Document' and choose the location where the document is saved.

The HR Department will be sent an alert that you have uploaded a document for their review.

Logging Out

When you have completed any actions taken on the Benefits site, please be sure to log out by clicking the "Log Out" button on the upper right hand corner of your browser.

	Conta	ct Information A	t-A-Glance
	Human Resources Contact Information	BEREA COLLEGE	Skylar Miller Human Resources Coordinator Phone: 859-985-4225 email: millers2@berea.edu
	Benefit Library & Enrollment Portal	bswift	www.Berea.BSwift.com
•	Additional Benefit Information	BEREA COLLEGE	For additional benefit information, visit: https://www.berea.edu/human-resources/
\checkmark	Medical / Dental Benefits	Anthem 🕸 🌍 ASPIRAN	Customer Service: 1-855-982-2583 www.Aspirant.us
	Health Savings Account (HSA) Administrator	Health Equity ®	Customer Service: 1-866-346-5800 www.healthequity.com
୍ଦ୍ର	Aspirant Pharmacy Benefits	ASPIRANT	Customer Service: 1-855-242-2583 www.Aspirant.us
	CVS/Caremark - Pharmacy Specialty & Home Delivery	CVS /caremark [™]	Customer Service: 1-855-402-2583 Mail Order: 1-844-253-1825 Specialty Rx: 1-800-237-2767
6	Voluntary Vision Benefits	eye Med	Customer Service: 1-866-804-0982 www.eyemed.com
	Employer-Paid Group Life and AD&D	GROUP BENEFIT LIFE SOLUTIONS	Customer Service:
	Voluntary Life and AD&D Disability		1-800-732-1603
	New York Life Guidance Resources: • FinancialConnect [®] • LegalConnect [®] • EstateGuidance [®]	GROUP BENEFIT	New York Life Guidance Resources Customer Service: 1-800-344-9752 website: www.guidanceresources.com (Web ID: NYLGBS)
CIT	Employee Assistance Program (EAP)	HDC Human Development Company	Customer Service: 502-589-4357 www. humandev.com
4	403(b) Retirement Plan Administrator	TIAA CREF	Phone Counseling Center:Automated Phone service:1-800-842-27761-800-842-2252https://www.berea.edu/human-resources/retirement/
- -	Additional Assistance Claims, Billing, & Enrollment Resolution Benefit Planning Firm	•, Bim Group	Jan LaBonde Client Service Manager Phone: 859-255-9455 ext. 133 email: jan@bimgroup.us Rose Taylor Client Service Concierge Phone: 859-255-9455 ext. 102 email: rose@bimgroup.us

The benefits overview is intended for summary purposes only. It is not to be relied upon for the determination of any policy benefits, limitations or exclusions. The master insurance policies issued by the respective carriers will be relied upon exclusively to determine all benefits.

