



2024 RECRUITMENT BENEFITS GUIDE



Everett
Washington
WASHINGTON COLLEGE

2024 RECRUITMENT BENEFITS GUIDE

WASHINGTON COLLEGE EMPLOYEE BENEFITS

As an employee of Washington College, you may be eligible for certain benefits such as medical, dental, vision and life insurance at group rates. Washington College pays for the majority of the monthly cost of the benefits you choose to enroll in, and you pay a portion as well. In addition, the company pays for the entire cost of Life/AD&D and Disability benefits on your behalf.

Your company-sponsored benefits are more valuable than ever before and they account for a large portion of the total compensation you receive as an employee of Washington College. Rest assured that we are working hard to provide the best pay and benefits for you and for your family. It's important that you read through this benefits guide carefully so that you can understand what each benefit provides, and how to access coverage when you need it. You may want to share this information with family members as well.

After you read this information, you may contact Liz Behrmann (lbehrmann2@washcoll.edu, 410-778-7260) with questions.

Remember, it's important you enroll during your initial eligibility period as you will not have an opportunity to enroll afterwards until the next open enrollment unless you have a qualifying life event (keep reading to learn more).

Thank you for taking the time to learn about our benefits choices and for enrolling on time.

*Your domestic partner is eligible for benefits if he or she is not a relative and has lived with you for at least six months in a committed relationship. For more information about domestic partner benefits, contact Human Resources.

BENEFIT BASICS

ELIGIBILITY

Regular full-time employees scheduled to work 30 hours per week are eligible for benefits (see HR for more information on eligibility for Retirement). All employees are required to have health insurance and must either join a plan offered by the College or show evidence of coverage by another plan. Most of your benefits are effective on the first day of the month following your date of hire. Your dependents can also enroll for coverage, including:

- Your legal spouse
- Your domestic partner*
- Your children up to age 26

Remember that you may only change coverage if you experience a qualifying life event, as described here.

QUALIFYING LIFE EVENTS

Generally, you may only make or change your existing benefit elections during the open enrollment window. However, you may change your benefit elections during the year if you experience an event such as:

- Marriage
- Divorce or legal separation
- Birth of your child or your domestic partner's child
- Death of your spouse, domestic partner or dependent child
- Adoption of or placement for adoption of your child
- Change in employment status of employee, spouse/ domestic partner or dependent child
- Qualification by the Plan Administrator of a child support order for medical coverage
- New entitlement to Medicare or Medicaid

You must log into Paycom within 30 days of a life event to initiate the qualifying event. Depending on the type of event, you may need to provide proof of the event, such as a marriage license.

Contact HR, if you have any questions on the documentation required.

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CONTACT INFORMATION

If you have any questions regarding your benefits please contact the carriers, or your Washington College Human Resources representative listed below.

MEDICAL INSURANCE

Cigna

DENTAL INSURANCE

Delta Dental /
deltadentalins.com
800-932-0783

VISION INSURANCE

VSP
vsp.com
800-877-7195

BASIC LIFE/AD&D, DISABILITY INSURANCE / VOLUNTARY LIFE/AD&D

Unum
unum.com
866-679-3054

403(B) RETIREMENT

TIAA-CREF
tiaa-cref.org/washcoll
800-842-2776

FLEXIBLE SPENCING ACCOUNT (FSA)

Flores
flores247.com
800-532-3327

HEALTH SAVINGS ACCOUNTS (HSA)

HSA Bank
hsabank.com
800-357-6246

EMERGENCY TRAVEL ASSISTANCE

Assist America
unum.com / medservices@assistamerica.com
800-872-1414 (in U.S.)
609-986-1234 (Outside U.S.)

EMPLOYEE ASSISTANCE PROGRAM

ComPsych
guidanceresources.com
855-399-2524

WASHINGTON COLLEGE BENEFITS

Liz Behrmann, Benefits Manager
lbehrmann2@washcoll.edu
410-778-7260



Throughout this guide you will find video and link icons that will take you to resources that provide additional information on the benefits available to you.



MEDICAL INSURANCE

YOUR HEALTH PLAN OPTIONS

As a full-time employee of Washington College, you have the choice of three medical plan options: The Preserver Plan, The Protector Plan or The Protector Plus Plan.

For each, your deductible will run from JANUARY 1 – DECEMBER 31.

The Preserver plan option offers you significantly lower premiums (payroll deductions) and higher deductible than the Protector and the Protector Plus. You can establish a Health Savings Account (HSA) with HSABank and contribute all or part of the premium savings into the HSA. These funds can be used to cover medical expenses, including, deductibles, and they're yours forever – even if you leave Washington College. And unlike a Flexible Spending Account (FSA), the contributions are not forfeited.

The Protector plan is an in-network plan with reasonable payroll deductions and deductibles.

The Protector Plus plan gives you the option of using in-network or out-of-network providers. You can save money by using in-network providers because Cigna has negotiated significant discounts with them. If you choose to go out-of-network, you'll be responsible for the difference between the actual charge and the Cigna allowed amount, plus your out-of-network deductible and coinsurance.

TIP

Get the most out of your insurance by using in-network providers.

FREQUENTLY ASKED QUESTIONS

? How many hours do I need to work to be eligible for insurance benefits?
You must be a full-time employee working a minimum of 30 hours per week on a regular basis.

? Will I receive a new Medical ID card?
Cigna ID cards are now digital! If you would like a physical card, you can request one from mycigna.com or by calling the customer service number found in the table of contents of this guide.

? Does the deductible run on a calendar year basis?
A calendar year basis.

? How long can I cover my dependent children?
Dependent children are eligible until the end of the month in which they turn age 26.

? I am a new hire, when will my benefits become effective?
Your medical insurance benefit will begin on the 1st of the month coinciding with or following hire date.

HOW TO GET STARTED

1. SELECT YOUR MEDICAL PLAN

- OPTION 1: PRESERVER PLAN
- OPTION 2: PROTECTOR PLAN
- OPTION 3: PROTECTOR PLUS PLAN

THE PRESERVER OFFERS SEVERAL BENEFITS:

- Lower premium contributions and potential maximum out-of-pocket expenses
- Routine preventive exams are covered at 100%
- Catastrophic coverage
- The HSA is owned by you
- You have more control over your health care dollars

THE PROTECTOR AND THE PROTECTOR PLUS MAY BE FOR YOU IF THE FOLLOWING IS TRUE:

- You are not interested in establishing a Health Savings Account
- You would rather pay more in monthly premiums and less on medical expenses when they occur
- You Protector Plus includes out-of-network coverage

MEDICAL INSURANCE

Cigna	The Preserver	The Protector	The Protector Plus
	Employee Cost Per Paycheck*	Employee Cost Per Paycheck*	Employee Cost Per Paycheck*
Employee Employee + Spouse Employee + Child(ren) Employee + Family	\$3.50 \$77.50 \$59.50 \$122.00	\$72.00 \$193.00 \$161.50 \$303.50	\$82.50 \$258.50 \$216.50 \$406.00
	In-Network	In-Network	In-Network
Deductible¹ Individual / Family	\$2,000 / \$4,000	\$500 / \$1,000	\$500 / \$1,000
Company Contribution to HSA**	\$500 / \$1,000	n/a	n/a
Out-of-Pocket Maximum² Individual / Family	\$2,500 / \$4,500	\$3,000 / \$6,000	\$3,000 / \$6,000
Office Visits Preventative Care Primary Care Physician/Specialist Diagnostic Lab / X-Ray Urgent Care	Covered at 100% Deductible then no charge Deductible then no charge Deductible then no charge	Covered at 100% \$25 copay / \$35 copay Deductible then 10% \$50 copay	Covered at 100% \$25 copay / \$35 copay Deductible then 10% \$50 copay
Hospital Visits Inpatient Care (Facility/Physician) Outpatient Surgery Major Diagnostics & Imaging Emergency Room	Deductible then no charge Deductible then no charge Deductible then no charge Deductible then no charge	Deductible then 10% & \$250 Deductible then 10% Deductible then 10% \$100 copay, waived if admitted	Deductible then 10% & \$250 Deductible then 10% Deductible then 10% \$100 copay, waived if admitted
Prescription Drug Deductible Retail Tier 1 / 2 / 3 Copay Mail Order (90-day supply) Copay	Integrated with Medical Deductible \$10 copay / \$35 copay / \$60 \$20 copay / \$70 copay / \$120	N/A \$10 copay / \$35 copay / \$60 \$20 copay / \$70 copay / \$120	N/A \$10 copay / \$35 copay / \$60 \$20 copay / \$70 copay / \$120
	Out-of-Network	Out-of-Network	Out-of-Network ³
Deductible Individual / Family	Not Covered	Not Covered	\$1,000 / \$2,000
Coinsurance (Member Pays)	Not Covered	Not Covered	30%
Out-of-Pocket Maximum Individual / Family	Not Covered	Not Covered	\$3,000 / \$6,000

****If you have a spouse employed at Washington College, contact HR to see if you are eligible for a discount on your medical premiums***

***** Deposited with 1st paycheck of the year. Pro-rated for new hires during the year***

- (1) Family deductible on The Preserver is non-embedded; no family member will receive post-deductible benefits until the entire family deductible is met
- (2) Out-of-Pocket maximum includes all cost-sharing: deductible, coinsurance and copays
- (3) Out-of-Network services subject to deductible, coinsurance and balance billing

Premiums are withheld from your paycheck on a pre-tax basis unless you request otherwise

Your election can only be changed during the plan year if you experience a qualifying life status change. If you have a qualifying life event, log into Paycom to request the coverage change within 30 days of the event.

CARE OPTIONS & WHEN TO USE THEM

YOUR CARE OPTIONS

While we recommend that you seek routine medical care from your primary care physician whenever possible, there are alternatives available to you. Services may vary, so it's a good idea to visit the care provider's website. Be sure to check that the facility is in-network by calling the toll-free number on the back of your medical ID card, or by visiting mycigna.com.



PRIMARY CARE

- Routine, primary/preventive care
 - Non-urgent treatment
 - Chronic disease management
- For routine, primary/ preventive care or non-urgent treatment, we recommend going to your doctor's office. Your doctor knows you and your health history and has access to your medical records. You may also pay the least amount out of pocket.



CONVENIENCE CARE

- Common infections (ear infections, pink eye, strep throat & bronchitis)
 - Flu shots
 - Pregnancy tests
 - Vaccines
 - Rashes
 - Screenings
- These providers are a good alternative when you are not able to get to your doctor's office and your condition is not urgent or an emergency. They are often located in malls or retail stores (such as CVS, Walgreens, Wal-Mart and Target), and generally serve patients 18 months of age or older without an appointment. Services may be provided at a lower out-of-pocket cost than an urgent care center.



URGENT CARE

- Sprains
 - Small cuts
 - Strains
 - Minor infections
 - Sore throats
 - Mild asthma attacks
 - Back pain or strains
- Sometimes you need medical care fast, but a trip to the emergency room may not be necessary. During office hours, you may be able to go to your doctor's office. Outside regular office hours – or if you can't be seen by your doctor immediately – you may consider going to an Urgent Care Center where you can generally be treated for many minor medical problems faster than at an emergency room.



EMERGENCY ROOM

- Heavy bleeding
 - Large open wounds
 - Chest pain
 - Spinal injuries
 - Difficulty breathing
 - Major burns
 - Severe head injuries
- An emergency medical condition is any condition (including severe pain) which you believe that, without immediate medical care, may result in serious injury or is life threatening. Emergency services are always considered in-network. If you receive treatment for an emergency in a non-network facility, you may be transferred to an in-network facility once your condition has been stabilized.

If you believe you are experiencing a medical emergency, go to the nearest emergency room or call 9-1-1, even if your symptoms are not described here.

▶ Primary Care vs. Urgent Care vs. ER

CIGNA TOOLS AND RESOURCES

CIGNA TELEHEALTH CONNECTION

Washington College offers access to telehealth services through MDLive as part of your medical plan. Cigna Telehealth Connection provides you with 24/7/365 access to board-certified doctors via video chat or phone. The cost of a phone or online visit is the same or less than with your primary care provider

Use Cigna Telehealth Connection to connect with a doctor about:

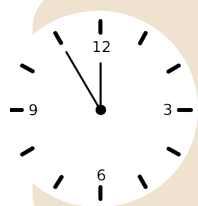
- Allergies
- Asthma
- Bronchitis
- Cold & Flu
- Diarrhea
- Earaches
- Headache
- Infections
- Nausea
- Sinus Infections
- Rashes
- Sore Throat

MDLive - [MDLIVEforCigna.com](https://www.mdlive.com) - 1-888-726-3171

MDLive is only available for medical visits. For covered services related to mental health and substance abuse, you have access to the Cigna Behavioral Health network of providers.

- Go to [Cignabehavioral.com](https://cignabehavioral.com) to search for a video telehealth specialist.
- Call to make an appointment with your selected provider.

ANSWERS



Cigna is
on the clock for you
24/7/365



MYCIGNA ONLINE EMPLOYEE PORTAL

Online and on the go - [myCigna.com](https://mycigna.com) and myCigna mobile App.

Find in-network doctors and medical Services

Manage and track claims

See cost estimates for medical procedures

Compare quality of care for doctors and hospitals

Access a variety of health and wellness tools and resources

1. Launch the myCigna App or to go [myCigna.com](https://mycigna.com) and select “Register Now”
2. Enter your personal information
3. Confirm your identity
4. Create your security information and provide your primary eMail address for enhanced security protection and notifications
5. Review, then select “Submit”

CIGNA 24/7/365

By phone, anytime day or night - live, 24/7 customer service, 365 days a year (call the number on the back of your Cigna ID card).

- Order an ID card, update insurance information and check claim status
- Speak with a health coach about your health goals and questions

SEARCH CIGNA’S NETWORK IN 5 STEPS

- Step 1** Go to [Cigna.com](https://cigna.com), click on FIND A DOCTOR at the top of the screen. Then select the orange box that reads “Plans through your employer or school.”
- Step 2** Choose whether you’re looking for a doctor or a place to receive medical care.
- Step 3** Enter the geographic location you want to search.
- Step 4** Select the **Open Access Plus Plan**.
- Step 5** Enter a name, specialty or other search word. Click SEARCH to see your results.

HEALTH SAVINGS ACCOUNT (HSA)



UNDERSTANDING A HEALTH SAVINGS ACCOUNT (HSA)

THERE ARE TWO WAYS YOU CAN CONTRIBUTE MONEY INTO YOUR HSA:

- Regular payroll deductions on a pre-tax basis, or
- Lump-sum contributions of any amount, anytime, up to the maximum limit.

WHAT IS AN HSA?

A savings account where you can either direct pre-tax payroll deductions or deposit money to be used to pay for current or future qualified medical expenses for you and/or your dependents. Once money goes into the account, it's yours to keep – the HSA is owned by you, just like a personal checking or savings account.

THE HSA CAN ALSO BE AN INVESTMENT OPPORTUNITY.

Depending upon your HSA account balance, your account can grow tax-free in an investment of your choice (like an interest-bearing savings account, a money market account, a wide variety of mutual funds – or all three). Of course, your funds are always available if you need them for qualified health care expenses.

YOUR FUNDS CAN CARRY OVER AND EVEN GROW OVER TIME.

The money always belongs to you, even if you leave the company, and unused funds carry over from year to year. You never have to worry about losing your money. That means if you don't use a lot of health care services now, your HSA funds will be there if you need them in the future – even after retirement.

HSA FUNDS CAN BE USED FOR YOUR FAMILY.

You can use your HSA for your spouse and tax dependents for their eligible expenses – even if they're not covered by your medical plan.

Contribute up to \$4,150 Single, or \$8,300 Family

WHAT ARE THE RULES?

- You must be covered under a Qualified High Deductible Health plan (QHDHP) in order to establish an HSA.
- You cannot establish an HSA if you or your spouse also have a medical FSA, unless it is a Limited Purpose FSA.
- You cannot be enrolled in Medicare or TRICARE due to age or disability.
- You cannot set up an HSA if you have insurance coverage under another plan, for example your spouse's employer, unless that secondary coverage is also a qualified high deductible health plan.
- You cannot be claimed as a dependent under someone else's tax return.

WHAT ELSE SHOULD I KNOW?

- You can invest up to the IRS's annual (calendar year) contribution limits. The contribution limits for 2024 are \$4,150 for Single and \$8,300 for Family coverage. If you are age 55 or older, you are allowed to make an extra \$1,000 contribution each year. *Annual contribution limits include Washington College's contribution.*
- Washington College contributes \$500 (employee only) / \$1,000 (family) towards the HSA. The amount is funded during your first month of enrollment and is prorated for new hires. The amount is included in IRS maximums.
- The contributions grow tax-free and come out tax-free as long as you utilize the funds for approved services based on the IRS Publication 502, (medical, dental, vision expenses and over-the-counter medications).
- Your unused contributions roll over from year to year and can be taken with you if you leave your current job.
- If you use the money for non-qualified expenses, then the money becomes taxable and subject to a 20% excise tax penalty (like in an IRA account).
- There is no penalty for distributions following death, disability (as defined in IRC 72), or attainment of Medicare eligibility age, but taxes would apply for non-qualified distributions.
- If your healthcare expenses are more than your HSA balance, you need to pay the remaining cost another way, such as a credit card or personal check. But save your receipts in case you are ever audited! You can request reimbursement later, after you have accumulated more money in your account.



What Is A Health Savings Account?

HEALTH SAVINGS ACCOUNT (HSA)

YOU CAN USE HSA FUNDS FOR IRS-APPROVED ITEMS SUCH AS:

- Doctor's office visits
- Dental services
- Eye exams, eyeglasses, laser surgery, contact lenses and solution
- Hearing aids
- Orthodontia, dental cleanings, and fillings
- Prescription drugs and some over-the-counter medications
- Physical therapy, speech therapy, and chiropractic expenses

More information about approved items, plus additional details about the HSA, is available in the [HSABank Learning Center](#).

Every time you use your HSA, save your receipt in case the IRS asks you to prove your claim was for a qualified expense. If you use HSA funds for a non-qualified expense, you will pay tax and a penalty on those funds.

The HSA is your personal account and contains your personal funds. It can be considered an asset by a creditor and garnished as applicable.

As an HSA account holder, you will be required to file a Form 8889 with the IRS each year. This form identifies any contributions, distributions, or earned interest associated with your account.

THIS MAY BE THE BEST PLAN OPTION FOR YOU IF ANY OF THE FOLLOWING IS TRUE:

- You do not incur a lot of medical and prescription medication expenses.
- You would like money in a savings account to pay for Qualified Expenses permitted under Federal Law.
- You would like the opportunity to contribute pre-tax income to a Health Savings Account.

TIP

Health Savings Account (HSA) - must be enrolled in The Preserver plan

FREQUENTLY ASKED QUESTIONS

WHAT WILL I PAY AT THE PHARMACY WITH THE HSA QUALIFIED PLAN OPTIONS?

You will pay the actual discounted cost of the drug until you satisfy your calendar year deductible in full.

WHAT WILL I PAY AT THE PHYSICIAN'S OFFICE WITH THE HSA QUALIFIED PLAN?

You'll provide your ID card at the time of the visit and the physician's office will submit the claim to Cigna. You will not owe anything at the time of the visit. Later you'll receive an Explanation of Benefits (EOB) from Cigna that shows the charges discounted based on their contract with the physician. When you receive a bill from the physician's office, you pay the portion of the discounted cost you are responsible for as shown on the EOB.

WHERE CAN I GET A COPY OF AN EOB?

You can access all of your EOB information, as well as obtain other important information, by logging on to mycigna.com.

FLEXIBLE SPENDING ACCOUNTS (FSA)



HEALTH CARE FLEXIBLE SPENDING ACCOUNT

This account enables you to pay medical, dental, vision, and prescription drug expenses that may or may not be covered under your insurance program (or your spouse's) with pre-tax dollars. You can also pay for dependent health care expenses, even if you choose single (vs. family) coverage. The total amount of your annual election is available to you up front, reducing the chance of having a large out-of-pocket expense early in the plan year. Be aware – any unused portion of the account at the end of the plan year is forfeited.

Eligible Expenses Examples

- | | |
|----------------------------------|--|
| ■ Coinsurance and copayments | ■ Laboratory fees |
| ■ Contraceptives | ■ Licensed practical nurses |
| ■ Crutches | ■ Orthodontia |
| ■ Dental expenses | ■ Orthopedic shoes |
| ■ Dentures | ■ Oxygen |
| ■ Diagnostic expenses | ■ Prescription drugs |
| ■ Eyeglasses, including exam fee | ■ Psychiatric care |
| ■ Handicapped care and support | ■ Psychologist expenses |
| ■ Nutrition counseling | ■ Routine physical |
| ■ Hearing devices and batteries | ■ Seeing-eye dog expenses |
| ■ Hospital bills | ■ Prescribed vitamin supplements (medically necessary) |
| ■ Deductible amounts | |

HOW THE HEALTH CARE FLEXIBLE SPENDING ACCOUNT WORKS

When you have out-of-pocket expenses (such as copayments and deductibles), you can either use your FSA debit card to pay for these expenses at qualified providers or submit an FSA claim form with your receipt to Flores. Reimbursement is issued to you through direct deposit into your bank account, or if you prefer, a check can be issued to you.

2024 Maximum Contributions

Health Care Flexible Spending Account	\$3,200 max
Dependent Care Expense Account	\$5,000 max

For a full list of FSA expenses from the IRS visit: fstore.com/FSA-Eligibility-list.aspx

 [What Is A Flexible Spending Account?](#)

2. SELECT YOUR FSA ACCOUNTS

- HEALTH CARE FLEXIBLE SPENDING ACCOUNT
- DEPENDENT CARE EXPENSE ACCOUNT



DEPENDENT CARE EXPENSE ACCOUNT

This account gives you the opportunity to redirect a portion of your annual pay on a pre-tax basis to pay for dependent care expenses. An eligible dependent is any member of your household for whom you can claim expenses on your Federal Income Tax Form 2441, "Credit for Child and Dependent Care Expenses." Children must be under age 13. Care centers which qualify include dependent care centers, preschool educational institutions, and qualified individuals (as long as the caregiver is not a family member and reports income for tax purposes). Before deciding to use the Dependent Care Expense Account, it would be wise to compare its tax benefit to that of claiming a child care tax credit when filing your tax return. You may want to check with your tax advisor to determine which method is best for you and your family. Any unused portion of your account balance at the end of the plan year is forfeited.

CONTACT INFORMATION

Request a full statement of your accounts at any time by calling 800-532-3327, or log on to flores247.com to review your FSA balance.

At flores247.com, you can:

Sample Instructions

- View account information and activity
- File claims
- Manage your profile
- View notifications
- Access forms

DENTAL INSURANCE

3. REVIEW YOUR DENTAL PLAN



DELTA DENTAL IS THE DENTAL CARRIER

The dental plans are PPOs that offer coverage in and out-of-network. It is to your advantage to utilize a network dentist in order to achieve the greatest cost savings. If you choose to go out-of-network, you will be responsible for any cost exceeding Delta Dental's negotiated fees, plus any deductible and coinsurance associated with your procedure. Dependent children are eligible until the end of the month in which they turn age 26.

In-Network Providers:
Provider is reimbursed based on contracted fees and cannot balance bill you.

Out-of-Network Providers:
Provider is reimbursed based on Reasonable and Customary standards and balance billing is possible.

What Is Dental Insurance?

DENTAL INSURANCE PLAN OPTIONS AND COSTS

Delta Dental	Delta Dental Base Employee Cost Per Paycheck		Delta Dental Buy-up Employee Cost Per Paycheck	
Employee	\$15.56		\$20.57	
Employee + Spouse	\$34.20		\$45.31	
Employee + Child(ren)	\$23.57		\$34.61	
Employee + Family	\$43.97		\$60.69	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible Individual / Family	\$50 / \$150		\$50 / \$150	
Annual Maximum	\$1,000		\$2,500	
	Carrier Pays			
Diagnostic / Preventive Services	100% no deductible	80% no deductible	100% no deductible	100% no deductible
Basic Services	80% after deductible	60% after deductible	90% after deductible	80% after deductible
Major Services	50% after deductible	50% after deductible	60% after deductible	50% after deductible
Orthodontia Services Children & Adults	N/A		Lifetime maximum of \$2,000 per member	

FIND A DENTAL PROVIDER

To find a Delta Dental Provider in your area, visit the website at deltadentalins.com.

- Click on "Find a Dentist"
- Enter your ZIP Code
- Select the "PPO network"
- Click "Submit" for a comprehensive directory of dentists

VSP IS THE VISION CARRIER

****NEW for 2024**** We are offering a ‘buy-up’ vision plan, providing: Increased frame allowances, Increased frame frequency (every 12 mos. Vs. every 24 mos.), Anti-glare lens coating at no cost, and an allowance for VSP LightCare.

Also, if you are considering Lasik surgery or other non-covered benefits, there are discounts available with some providers. To find a participating provider, go to vsp.com.

VISION INSURANCE PLAN OPTIONS AND COSTS

VSP	Base Coverage		Buy-Up Coverage	
	Employee Cost Per Paycheck		Employee Cost Per Paycheck	
Employee Employee + Spouse Employee + Child(ren) Employee + Family	\$3.55 \$5.65 \$5.76 \$9.29		\$6.06 \$10.20 \$10.42 \$16.79	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Examination Copay	\$10 copay	<u>Reimbursement</u> Up to \$45	\$10 copay	<u>Reimbursement</u> Up to \$45
Frequency of Service Exam Lenses Frames	Every 12 months Every 12 months Every 24 months		Every 12 months Every 12 months Every 12 months	
Lenses Single Bifocal Trifocal Anti-glare coating	\$20 copay; 100% covered \$20 copay; 100% covered \$20 copay; 100% covered Not covered	<u>Reimbursement</u> Up to \$30 Up to \$50 Up to \$65 Not covered	\$20 copay; 100% covered \$20 copay; 100% covered \$20 copay; 100% covered \$0 after lens copay	<u>Reimbursement</u> Up to \$30 Up to \$50 Up to \$65 Not covered
Frames	\$150 allowance + 20% off balance; \$170 featured frame allowance; \$150 Walmart/Sam’s Club allowance; \$80 Costco allowance	<u>Reimbursement</u> Up to \$70	\$200 allowance + 20% off balance; \$220 featured frame allowance; \$200 Walmart/Sam’s Club allowance; \$110 Costco allowance	<u>Reimbursement</u> Up to \$70
Conventional Contacts	\$150 allowance	<u>Reimbursement</u> Up to \$105	\$150 allowance	<u>Reimbursement</u> Up to \$105
VSP Lightcare	Not covered		\$200 allowance for ready-made non-prescription sunglasses or blue light filtering glasses, <i>instead</i> of prescription glasses or contacts	Not covered

FIND A VISION PROVIDER

To find a VSP Vision Provider in your area, visit the website at vsp.com.

- On the left side of the page you can quickly find a provider by clicking on “Find a Doctor”
- Search by location, Office, or Doctor. Results list providers closest to your ZIP code first (if searching by Location)
- Click on the View Practice Details button next to the provider to display products, services, doctors, etc. for that location.



LIFE INSURANCE AND AD&D



BASIC LIFE AND AD&D

Washington College provides 1½x your annual earnings to a maximum of \$85,000 in Basic Life and Accidental Death & Dismemberment (AD&D) insurance.

This coverage is offered through Unum at no cost to you.

 [What Is Life And AD&D Insurance?](#)



VOLUNTARY LIFE AND AD&D AND DEPENDENT LIFE

You can purchase additional Life and AD&D Coverage beyond what Washington College provides. Unum guarantee issues coverage during your initial enrollment period – which means you can't be turned down for coverage based on medical history.

- **Voluntary Employee Life & AD&D:** minimum \$10,000 to a maximum of 5x your annual salary, or \$500,000, in \$10,000 increments. Guarantee issue up to \$200,000.
- **Optional Spouse Life & AD&D:** minimum \$10,000 up to the lesser of 100% of the employee amount or \$500,000, in \$10,000 increments. Guarantee issue up to \$30,000.
- **Optional Child Life & AD&D:** minimum \$2,500 up to \$10,000 maximum. Guarantee issue up to \$10,000.

If you don't enroll in the Voluntary Life and AD&D plan during your initial enrollment period, **you will be required to complete an Evidence of Insurability (EOI) form and be approved by Unum. The EOI form and link are in the Paycom benefit documents.**

You must be enrolled in voluntary life and AD&D coverage in order for your spouse, and/or eligible dependent children to enroll.

Please note: If you elect Voluntary Life for yourself and/or your dependents, Voluntary AD&D is an automatic election based on the voluntary life insurance amount.

5. REVIEW YOUR LIFE INSURANCE POLICY

- ADD YOUR SPOUSE
- ADD YOUR DEPENDENTS
- REVIEW YOUR BENEFICIARIES

VOLUNTARY LIFE AND AD&D AND DEPENDENT LIFE OPTIONS AND COSTS PER PAYCHECK

Unum	Rates per \$10,000 of coverage		
	Age	Employee	Spouse*
Voluntary Life	<25	\$0.335	\$0.335
	25-29	\$0.380	\$0.380
	30-34	\$0.475	\$0.475
	35-39	\$0.525	\$0.525
	40-44	\$0.570	\$0.570
	45-49	\$0.805	\$0.805
	50-54	\$1.180	\$1.180
	55-59	\$2.125	\$2.125
	60-64	\$3.205	\$3.205
	65-69	\$6.075	\$6.075
	70-74	\$9.790	\$9.790
	75+	\$9.790	\$9.790
Child(ren)	\$0.25 per paycheck per \$2,500 coverage		

**Spouse rate is based on the employee's age.*

DID YOU KNOW? Washington College provides you Basic Life and AD&D AT NO CHARGE.

DISABILITY INSURANCE



LONG-TERM DISABILITY INSURANCE

Disability insurance provides income replacement should you become disabled and unable to work due to a non-work-related illness or injury. Coverage is automatic, but you do need to choose what type of tax treatment your benefit will receive should you need it. If you want to receive tax-free money should you become disabled, you are required to pay taxes on the value of the insurance plan (premium cost) now.

Long-Term Disability insurance offered through UNUM is provided at no cost to you. The plan benefit is 60% of basic monthly earnings up to a maximum of \$ 6,000 per month maximum.

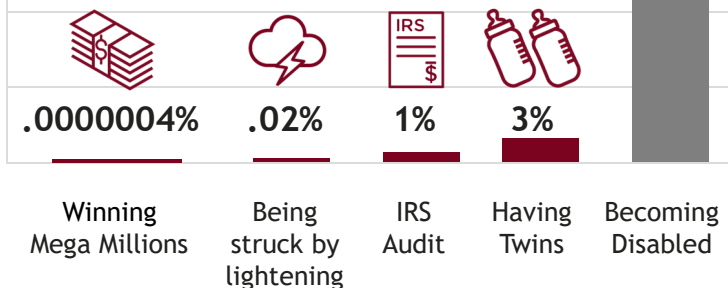
The benefits begin after a 180 day waiting period.

You have the opportunity to choose to pay for the LTD premium with **pre-tax or after-tax dollars**. If you elect to pay with pre-tax dollars, your LTD benefits will be subject to federal income tax. If you elect to pay with after-tax dollars, you'll pay more now, but if you become disabled, your LTD benefits will be exempt from income tax.

DID YOU KNOW?
Washington College pays for this benefit 100%

WHAT'S MORE LIKELY?

Many workers think these events are more likely than becoming disabled during their careers. But here are the actual odds:



In fact, nearly **40 million** American adults live with a disability.

[▶ What Is Disability Insurance?](#)

6. REVIEW YOUR DISABILITY COVERAGE

- LONG-TERM DISABILITY
- ELECT PRE OR POST TAX

COULD YOU PAY THE BILLS IF YOU WEREN'T WORKING?

Less than **1/4** of U.S. consumers have enough emergency savings to cover six months or more of their expenses.

Nearly **70%** of workers that apply to Social Security Disability Insurance are denied.



RETIREMENT



OUR 403(B) PLAN IS MANAGED BY TIAA

The Washington College 403(b) Retirement Savings Plan gives you an easy way to save for your future through payroll deductions.

ELIGIBILITY

You are eligible to participate in the plan after you've completed 1,000 hours of service within a plan year (for part-time employees), or immediately upon hire into a full-time position with the College.

EMPLOYEE CONTRIBUTIONS

Contributions from your pay may be made on a pretax or ROTH basis based on the amount you specify up to the IRS annual limit. If you are 50 years of age or older (or if you will reach age 50 by the end of the year), you may make a catch-up contribution in addition to the normal IRA annual limit.

EMPLOYER CONTRIBUTIONS

For fiscal year 2023, the College will contribute 4% of eligible compensation to your account regardless of how much you contribute. The College contribution is updated each July.

VESTING

Vesting refers to your right of ownership to the money in your account. You are immediately vested in all of your contributions and earnings on your contributions, and in the college's contributions.

TIPS ON HOW TO SAVE SMART FOR RETIREMENT:

- Start **NOW**. Don't wait. Time is critical
- Start small, if necessary. Even small contributions can make a big difference given enough time and the right kind of investments
- Save regularly. Make saving for retirement a habit
- Be realistic about investment returns. Never assume that a year or two of high market returns (or market declines) will continue indefinitely
- Roll over retirement account money if you change jobs
- Don't dip into retirement savings

NEXT STEPS

- Set your payroll contribution in Paycom
- Log into www.tiaa-cref.com/washcoll to register as a new user or log into your account
- Review and update your investment elections and beneficiaries

7. RETIREMENT

- ELECT YOUR 403(B) CONTRIBUTION



TIP

2024
CONTRIBUTION
LIMIT: \$23,000
ADDITIONAL \$7,500
ALLOWED FOR
EMPLOYEES AGE 50
OR OLDER



[What Is A 403\(b\) Retirement Plan?](#)

WELLNESS BENEFITS



MOTIVATE ME through Cigna

Washington College partners with Cigna to offer the MotivateMe program that rewards you for healthy behaviors. The goal of this program is to provide personal insight into your health and well-being as well as discovering FREE health and wellness programs offered through your Cigna medical plan.

What does this mean for me? If you are on a Cigna medical plan, you have the opportunity to earn up to \$175 in gift cards!

You can access the MotivateMe incentive page on myCigna.com.



VirginPulse WELLNESS PORTAL—NEW FOR 2024

VirginPulse is a global leader in wellness. Enroll from your myCigna account and start enjoying the benefits of VirginPulse Wellness Portal. Start a journey focused on getting active, eating healthy, sleeping well or finding emotional balance.



Mindfulness has been shown to help people stress less, focus more, and sleep soundly, and HeadSpace is your personal guide. With hundreds of guided exercises for meditation, sleep, focus, and movement, their science-backed app can help you start and end your days feeling like your best self. As part of our commitment to supporting health & wellbeing, we've launched a partnership with HeadSpace. You have unlimited access to the entire HeadSpace library at no cost to you:

- Hundreds of guided meditations on stress, self-esteem, relationships and even content to use with kids
- Sleepcasts, music, and bedtime experiences for good nights and better mornings
- Start your day with The Wake Up: a new, bite-sized daily video series designed to make you smile
- Train your body and mind at the same time with Move Mode: quick workout videos and guided cardio

To enroll in HeadSpace for free:

Sign up, or log-in to your existing HeadSpace account via the landing page.

Verify by using your Washington College email & confirm by clicking "Verify" on the verification email.

Download the app & log-in.

WASHINGTON COLLEGE—JOHNSON FITNESS CENTER

The Fitness Center is available to employees, spouses/partners and children. Contact HR to register family members and obtain an ID for gym access at Public Safety. Fitness Center Hours:

Monday—Thursday, 6am—10pm; Friday, 6am—7pm; Saturday / Sunday, 10am—4pm

ADDITIONAL BENEFITS

EDUCATIONAL ASSISTANCE

Washington College offers several Tuition and Educational Assistance programs:

- Tuition waiver for employees
- Tuition waiver for dependents, spouses and domestic partners
- Tuition exchange for dependents
- Educational assistance for Employee (full-time employees only)

Upon hire, employees may participate in the Tuition Waiver program in the next academic semester. Part-time employees, their spouses and dependent children may participate and the benefit is prorated in proportion to the percentage of time worked in the previous anniversary year.

MEMBERSHIPS AVAILABLE

Washington College participates with several clubs and organizations that can provide savings for employees:

Credit Union Membership - Employees and their families may join the Johns Hopkins Federal Credit Union. The credit union offers savings and checking accounts, loans, certificates of deposit and IRA's. Deposits and loan payments may be conveniently made through payroll deduction

Holiday Club - Holiday Club Accounts are available through Peoples Bank of Kent County, Maryland. You may open a Holiday Club Account through direct deposit.

Blood Bank Membership - Washington College will cover the cost of the membership to join the Blood Bank of Delaware/Eastern Shore.

Kent County Family YMCA—Washington College employees receive a 10% discount.

IDENTITY THEFT ASSISTANCE

CLC Legal Identity Theft Recovery Service is provided through Unum. This service provides 24/7 access to anti-fraud experts who are available to guide employees through the resolution process and help remove the damage done by identity thieves. Reach out to Health Advocate, If you experience an identity theft incident.

Cigna members can register for free identity monitoring services. Visit myCigna.com for additional details.



EMPLOYEE ASSISTANCE PROGRAM (EAP)

We offer an EAP benefit through ComPsych, at no cost to you, to assist with work, life, and personal issues. The EAP has experienced and helpful specialists available to help with life's most important needs. The EAP specialists can help you with resources and information, providers, products and services in parenting, senior care, legal and financial services, home services, wellness, etc. The EAP services are completely confidential and are available to you and the family members in your household.



VIDEO RESOURCES

MEDICAL PLANS

- ▶ Medical Plans Explained
- ▶ Primary Care vs. Urgent Care vs. ER
- ▶ PPO Overview
- ▶ HDHP vs. PPO
- ▶ HDHP With HSA Overview
- ▶ Tips to Save on Prescription Drugs
- ▶ How To Stretch Your HealthCare Dollars

INSURANCE 101

- ▶ Benefits Key Terms Explained
- ▶ How To Read An EOB
- ▶ What Is A Qualifying Event?
- ▶ What is Balance Billing?
- ▶ What is MEDICARE?
- ▶ What is COBRA?

OTHER

- ▶ How To Budget (Financial Wellness)
- ▶ Managing Stress And Mental Health
- ▶ Mental Health FAQ
- ▶ Flu Shot
- ▶ About COVID-19 Vaccine
- ▶ Building An Emergency Fund



TAX ADVANTAGE SAVINGS ACCOUNTS

- ▶ What Is A Health Savings Account?
- ▶ What Is A Flexible Spending Account?
- ▶ What Is a 403(b) Retirement

ANCILLARY BENEFITS

- ▶ What Is Dental Insurance?
- ▶ What Is Vision Insurance?
- ▶ What Is Life And AD&D Insurance?
- ▶ What Is Disability Insurance?
- ▶ What Is Accident Insurance?
- ▶ What Is Critical Illness Insurance?
- ▶ What Is Paid Time Off?
- ▶ What Is An EAP?



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