

University of Massachusetts Medical School

BENEFITS GUIDE FOR POST DOCS

For Benefits Effective On/After January 1, 2011

Revised 10/19/10

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Post docs must be hired to work twenty (20) hours or more weekly to be eligible for benefits.

The following information is intended for use only as a summary of the benefit plans available to you as a post doc. Details are contained in the legal plan documents and individual plan details can be found on the Group Insurance Commission website at: WWW.MASS.gov/gic

Details pertaining to Sick Leave Bank, Tuition, Holidays, Personal Time, Sick and Vacation can be found in the University of Massachusetts Health School Policy and Procedure Manual.

In the event that there is any inconsistency between this summary and any legal printed documents, the legal documents govern. Copies of plan summaries are available in the Benefits Department or from the vendor(s).

I. WHEN DOES COVERAGE BEGIN?

For new post docs coverage begins on the first day of the month following 60 calendar days of employment, or two calendar months, whichever occurs first.

Effective Coverage Dates for New Post docs

Date of hire: January 2 to February 1 February 2 to March 2 March 3 to April 2 April 3 to May 2 May 3 to June 2 June 3 to July 3 July 4 to August 2 August 3 to September 2 September 3 to October 2 October 3 to November 2 November 3 to December 3 December 4 to January 1 Coverage begins on: April 1 May 1 June 1 July 1 August 1 September 1 October 1 November 1 December 1 January 1 February 1 March 1

Post docs who do not enroll in a health insurance plan when first eligible, may enroll during annual Open Enrollment. Coverage will begin July 1 following annual Open Enrollment.

II. HEALTH INSURANCE

The University is committed to providing our post docs the very best in health plan choices available. All plans provide comprehensive coverage and the flexibility to make the right choice for you and your family. Choices include Indemnity Plans, PPO's (Preferred Provider Option) plans and HMO's (Health Maintenance Organizations). *Coverage is effective on the first of the month following 60 days of employment.*

The plans currently offered include:

INDEMNITY PLANS	PPO PLANS
 UniCare State Indemnity Plan w/CIC – w/o CIC UniCare State Indemnity Plan Plus UniCare State Indemnity Community Choice 	 Navigator by Tufts Health Plan Harvard Pilgrim Independence Plan
HMO PLANS	EPO PLAN
 Fallon Select Fallon Direct Harvard Pilgrim Primary Choice Health New England NHP (Neighborhood Health Plan) 	• Tufts Health Plan Spirit
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For complete plan details, go to: <u>www.mass.gov/gic</u>. A GIC Benefit Guide can be obtained in the Benefits Department or accessed online on the Benefits website.

ENROLLMENT INFORMATION

- When to enroll You must enroll as a new hire during your first 31 days of employment, otherwise, you may enroll during the open enrollment period held annually every April/May. NOTE: Certain life change events (marriage, divorce, birth of child, adoption) may enable you to enroll other than as a new hire or during open enrollment. Check the Benefits website (Life Events section) for more information.
- Available to employees, spouses, same sex spouses* and dependent children up to the age of 26. A GIC Dependents Age 19-26 Application for Coverage form is required to cover dependents in this age bracket. *You must provide a copy of your marriage certificate if covering a spouse and/or birth certificates if covering any children.*
 - * As a result of the difference in state and federal tax laws regarding same sex marriage, coverage provided to a same sex spouse will result in additional taxable income for you – you should contact the Benefits Department for information.

NOTE: If you have health insurance coverage provided to you by another source, it is recommended you enroll in the Basic Life Insurance plan only. Enrollment in this plan will enable you to enroll in one of our plans outside of open enrollment for certain, specific circumstances.

HEALTH INSURANCE RATES EFFECTIVE JULY 1, 2010 (Includes \$5,000 Basic Life Insurance)				
	INDIVIDUAL (25%)		FAMILY (25%)	
PLANS	BI-WEEKLY	MONTHLY	BI-WEEKLY	MONTHLY
Fallon Community Health Plan – Direct Care	\$52.72	\$105.43	\$125.31	\$250.62
Fallon Community Health Plan – Select Care	\$63.06	\$126.12	\$150.14	\$300.29
Harvard Pilgrim Independence Plan	\$76.23	\$152.46	\$184.97	\$369.93
Harvard Pilgrim Primary Choice	\$60.68	\$121.35	\$146.98	\$293.95
Health New England	\$52.61	\$105.21	\$129.14	\$258.28
NHP Care Plan (Neighborhood Health Plan)	\$52.55	\$105.09	\$137.83	\$275.66
Tufts Health Plan Navigator	\$73.34	\$146.68	\$176.86	\$353.71
Tufts Health Plan Spirit	\$58.39	\$116.77	\$140.54	\$281.08
UniCare State Indemnity Plan Basic with CIC (Comprehensive)	\$115.23	\$230.46	\$267.68	\$535.35
UniCare State Indemnity Plan Basic without CIC (Non- Comprehensive)	\$96.71	\$193.42	\$224.71	\$449.42
UniCare State Indemnity Plan/Community Choice	\$51.69	\$103.37	\$122.84	\$245.68
UniCare State Indemnity Plan/PLUS	\$70.98	\$141.96	\$168.21	\$336.41

EMPLOYEE SHARE OF GIC HEALTH INSURANCE PREMIUMS

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• Health insurance deductions begin one month prior to effective date.

OPTIONS FOR INTERIM HEALTH INSURANCE COVERAGE DURING THE 60-DAY WAIT

COBRA-If you were covered under a group health insurance plan through your previous employer, you may elect COBRA.

B Waiver-If a new employee, or his/her covered dependent, incurs unplanned and urgent medical expenses during his/her new hire waiting period, he/she may apply to buy GIC health coverage at the full cost premium for that period of time (60 or more days, depending on the date of hire). The total claims expenditure must exceed the full cost premium for the hiatus period. New employees who begin employment on the 16th of a month or later will not be charged premium for that month, new employees who begin employees who begin employment on or before the 15th of a month shall be charged the full premium cost for the month. To apply for retroactive health insurance, the employee must write to the GIC's Director of Operations to request the coverage. If approved by the health plan, coverage shall become effective as of the employee's first day of active employment, subject to his or her timely payment of the full cost health insurance premium for the entire hiatus period.

MA Health Connector Plans-Several health insurance plans are available for purchase through the MA Health Connector during the waiting period to pay for on an after-tax basis. Instructions are included in the packet that you received when you completed your new hire paperwork.

III. OPTIONAL LIFE INSURANCE

Optional Life Insurance is offered to you as a voluntary plan through The Hartford. The cost is based on your age, salary and the amount of insurance coverage you elect. *Coverage is effective on the first of the month following 60 days of employment if you enroll as a new hire.*

In addition, you are also provided with \$5,000 of life insurance with your health insurance plan through the Group Insurance Commission.

PROVISIONS

- Up to 8x annual salary (up to \$1.5M maximum) without evidence of insurability (new hire)
- Accidental death and dismemberment
- Effective date of coverage first day of the month following 60 days of employment
- Portable upon termination
- Option available to convert to permanent whole or universal life policy/plan

ENROLLMENT INFORMATION

• When to enroll - You may enroll as a new hire during your first 31days of employment without having to provide evidence of insurability. If you choose to enroll at a later date, you must prove evidence of good health.

OPTIONAL LIFE INSURANCE RATES			
ACTIVE POST DOC AGE	SMOKER RATE Per \$1,000 of coverage	NON-SMOKER RATE Per \$1,000 of coverage	
Under 35	\$0.09	\$0.05	
35-44	0.13	0.06	
45-49	0.24	0.09	
50-54	0.38	0.15	
55-59	0.58	0.23	
60-64	0.88	0.34	
65-69	1.57	0.83	
70 and over	2.81	1.30	

Rates include accidental death and dismemberment coverage.

Employees who have a qualified family status change during the year may enroll in or increase their coverage without any medical review in an amount up to 4x salary within 31 days of the qualifying event. Family status changes include: marriage, birth or adoption of a child, divorce and death of a spouse.

IV. LONG-TERM DISABILITY INSURANCE

Employees may choose to participate in a long-term disability program offered by Unum. The employee pays the entire cost of the plan. *Coverage is effective on the first of the month following 60 days of employment.*

BASIC FEATURES

- A tax-free benefit that pays 50% of gross monthly salary to age 65, after 90 days of continuous disability;
- A benefit for mental health disabilities and for partial disabilities;
- A rehabilitation and return-to-work assistance benefit.

ENROLLMENT INFORMATION

• When to enroll - You may enroll as a new hire during your first 31days of employment without having to provide evidence of insurability. If you choose to enroll at a later date, you must prove evidence of good health.

LONG TERM DISABILITY RATES			
ACTIVE EMPLOYEE AGE	EMPLOYEE MONTHLY RATES Per \$100 of Monthly Earnings		
Under 20	\$0.09		
20-24	0.09		
25-29	0.11		
30-34	0.15		
35-39	0.19		
40-44	0.38		
45-49	0.55		
50-54	0.77		
55-59	0.98		
60-64	0.89		
65-69	0.41		
70 and over	0.23		

V. SICK LEAVE BANK

The *Sick Leave Bank* is designed to assist staff members and continue their pay when they are out of work due to an injury or illness.

Post docs are encouraged to enroll in the Sick Leave Bank upon hire as there is no financial cost to join. A donation of 16 hours of sick time is required for enrollment.

A post doc must be a member of the SLB a minimum of six months before s/he can request time from the Bank. Once on an approved Family Medical Leave, all accrued vacation, personal, sick and compensatory time must be used and the post doc must be absent without pay for five days before being eligible to draw from the Bank. If approved, your pay will be continued in 20 day increments to a maximum of 480 hours.

VI. DENTAL INSURANCE

Dental insurance is offered to you through Delta Dental. To enroll, you must complete an enrollment form. *Coverage is effective on the first of the month following 60 days of employment.*

Basic Plan	Plus Plan
 100% preventive care 50% basic restorative 40% major restorative 	 100% preventive care 80% basic restorative 60% major restorative
• \$750/person/year	 \$1,500/person/year \$1,500 ortho – lifetime* *Only for children
UMMS pays the entire cost of the plan.	Post docs share the premium costs for the plan. \$ 5.52 bi-weekly - single \$ 22.09 bi-weekly – family

For complete plan details go to: www.deltadentalma.com

ENROLLMENT INFORMATION

- When to enroll You must enroll as a new hire during your first 31days of employment, otherwise, you may enroll during the open enrollment period held annually every November/December. NOTE: Certain family status changes may enable you to enroll other than as a new hire or during open enrollment. Check the Benefits website (Life Events section) for more information.
- Available to employees, spouses and dependent children up to age 26. You must notify the Benefits Department when your dependent turns age 19 or 23.

VII. VISION INSURANCE

Vision insurance is offered to you through VSP. VSP offers an extensive network of MD's and OD's and a large selection of frames. *Coverage is effective on the first of the month following 60 days of employment.*

The plan contains the following provisions:

- \$10 COPAY FOR EYE EXAMINATIONS WITH A VSP PROVIDER
- \$25 COPAY FOR PRESCRIPTION GLASSES WITH A VSP PROVIDER
- NO COPAY FOR CONTACT LENS CARE WITH A VSP PROVIDER

BI-WEEKLY RATES	INDIVIDUAL PLAN	FAMILY PLAN
BI-WEEKLI HATES	\$3.00	\$8.28

For complete plan details, go to: www.vsp.com or call 1-800-877-7195.

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ENROLLMENT INFORMATION

You must enroll as a new hire during your first 31days of employment, otherwise you may enroll during the open enrollment period held annually every fall (mid-October thru mid-November).

VIII. FLEXIBLE SPENDING ACCOUNTS

Flexible spending accounts allow you to pay eligible health care or dependent care expenses with pre-tax dollars. Your taxable income is reduced by the amount you contribute. Both plans are administered by Benefit Strategies.

If you enroll in the Health Care Spending Account, you will receive a debit card that may be used anywhere that accepts debit cards to purchase eligible expenses. If you enroll in the Dependent Care Assistance Program, you must submit claims with evidence of payment and you will be reimbursed via check or direct deposit (if you elect this option).

HEALTH CARE SPENDING	DEPENDENT CARE ASSISTANCE
ACCOUNT (HCSA)	PROGRAM (DCAP)
 Effective first of the month following 60 days of employment Defer \$500-\$5,000 per year pre-tax Use for co-pays, deductibles, non-covered expenses Examples of expenses include: Physician office visits Prescription drug co-pays Eyeglasses Orthodontia and dental benefits not covered by your plan Over the counter medications with physician certification 	 Effective upon hire when you enroll Defer up to \$5,000 per family per year pre-tax For purposes of the dependent care plan, an "eligible dependent" must be under age 13. However, if a dependent is mentally or physically handicapped, he or she will remain a qualified dependent for dependent care irrespective of age. Examples of expenses include: Child care centers Babysitters Nursery schools Day camp

For further details go to www.benstrat.com or call 1-877-FLEXGIC.

ENROLLMENT INFORMATION

• When to enroll - You must enroll as a new hire during your first 31 days of employment, otherwise, you may enroll during the open enrollment period held annually every November/December. NOTE: certain family status changes may enable you to enroll other than as a new hire or during open enrollment – contact the Benefits Department for information.

NOTE: The IRS requires that any unused funds at plan year end be forfeited. You should estimate your contributions carefully.

IX. STATE EMPLOYEE RETIREMENT SYSTEM (SERS)

All post docs participate in the State Retirement System (SERS). The State Board of Retirement manages the State Retirement Plan for all state employees.

Post docs contribute 9% of their income plus an additional 2% for wages over \$30,000 per year. Contributions are withheld from employee's base salaries. These contributions are tax deferred and *in lieu of the Federal Social Security Program.*

The Plan provides for a monthly retirement benefit and is designed to reward long service employees. Actual benefits are based on years of service, pension-eligible pay and age at retirement. Post docs must have a minimum of ten years of full-time creditable service to be vested in the State Retirement Plan.

Contact the Department or the State Board of Retirement for details. Telephone: 617-367-7770; 800-392-6014 (In MA only) State Board of Retirement website: <u>www.state.ma.us/treasury/srb/htm</u>

X. VOLUNTARY RETIREMENT SAVINGS PLANS

The University of Massachusetts offers two different voluntary retirement savings plans.

403(b) Plans

You may also defer some of your own income to a 403(b) plan, up to IRS limit of \$16,500 if you are under 50 years old or \$22,000 if you are 50 years old or over for calendar year 2011. The 403(b) companies are *Fidelity, TIAA-CREF and VALIC.*

457(b) Plan

If you meet eligibility requirements, you may also defer some of your own income to a 457(b) up to the IRS limit of \$16,500 if you are under 50 years old or \$22,000 if you are 50 years old or over for calendar year 2011. The 457(b) provider is **Great-West Retirement Services**.

Voluntary retirement plan information and enrollment is available by going to http://www.massachusetts.edu/treasurer/403%28b%29enhancements.html.

XI. TUITION BENEFITS

TYPE	ELIGIBILITY	BENEFIT
TUITION WAIVER University of Massachusetts Amherst, Boston,	Regular full-time employee, spouse or domestic partner and dependent children up to age 25 of both employees and their domestic partners; regular part-time employees; and employees on sabbatical, health leave or approved leave of absence.	Up to full tuition may be waived for undergraduate or graduate courses at any University of Massachusetts campus. (Excluded from this policy are continuing education courses and the health doctoral program at the University of Massachusetts Medical School) for regular full-time post doc

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Dartmouth,	Waiting Period	and/or eligible family members. A
Lowell, and Worcester	Available upon hire	regular part-time post doc or family
Lowell, and worcester		member may be granted up to seven
		tuition-free credits for courses.
	Regular full-time employees and their	
Tallian Danisation	spouses, domestic partners and dependent	A regular full-time post doc and their
Tuition Remission	children up to age 25 of both employees	spouse, domestic partner and
	and their domestic partners; regular part-	dependent children up to age 25 is
	time employees; and employees on work	eligible for full tuition remission when
Massachusetts State or	related illness or injury leave of absence	enrolled in a full-time day program.
Community College	and employees on an approved unpaid	regular full-time post doc and family
commanity conoge	leave of absence enrolled at any	member is eligible for 50% tuition
	Massachusetts State Community College,	remission when enrolled in an
	State College or University pursuing an	evening education program. A
	undergraduate or graduate degree,	regular part-time post doc and family
	excluding the health doctoral program at	member is eligible for 50% tuition
	the University of Massachusetts Medical	remission when enrolled in a full-time
	School.	day program and; a regular part-time
	Waiting Period	post doc and family member is
	Available after six months of full-time	eligible for 25% tuition remission
	employment or twelve month of part-time	when enrolled in an evening
	service as of the enrollment date.	education program.
	Service as of the enrollment date.	outouton program.

<u>Tuition Assistance</u> Public or Private School or College	For full-time benefited employees who attend an accredited college or institution. Course must be related to present position and post doc must receive a grade of "C" or better. Post doc must maintain full-time status for the duration of course. GED or CLEP exams are eligible. This benefit can be used in conjunction with the Tuition Remission or Tuition Waiver. Waiting Period Available after six months of full-time employment prior to start of course.	A regular full-time post doc may receive up to \$200 per semester up to a maximum of \$400 each academic year.
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NOTE: All tuition forms must be requested, completed and submitted to Human Resources prior to enrolling in a class and submitted to the college/university upon registration.

XII. PAID TIME OFF

Post Docs receive their annual accrual of sick, vacation and personal time upon hire. A Post Doc hired on July 1 receives 120 hours of vacation, 120 hours of sick and 24 hours of personal time. Paid time off is prorated if a post doc is hired after July 1. Vacation time and personal time do not roll over to the following year. Sick time does roll over to the following year.

XIII. OPEN ENROLLMENT DATES

As a new hire you may enroll in any plan during the first 31days of employment. If you do not enroll as a new hire, you must wait until the open enrollment periods noted below.

NOTE: Certain family status changes may enable you to enroll other than as a new hire or during open enrollment. Please go to the Benefits website (Life Events section) for more information.

April/May (effective July 1)

Health Insurance MetLaw Sick Leave Bank

October/November (*effective January 1*)

Dental Insurance Vision Insurance Health Care Spending Account Dependent Care Assistance Program Sick Leave Bank Childcare Assistance

XIV. BENEFITS CONTACT INFORMATION

Contacts

Benefits.umms@umassmed.edu http://inside.umassmed.edu/hr/benefits/

Benefits-Health, Life, Dental, Vision Anita Garabedian (508) 856-2282

Leaves of Absence, Benefits Patti Hannam (508) 856-2036

Workers Compensation

 Deb George
 (508) 85

 Jen Laramie
 (508) 85

(508) 856-3580 (508) 856-3984 Retirement/Retirement Savings Plans Linda Misale (508) 856-2281

Benefits Manager Katie Temple (508) 856-1897

Benefits/Workers Comp Fax (508) 856-2058

Other Information

GIC-Health/Life Insurance Plans UNUM Provident-LTD Plan State Retirement Board UMMS Policies	1-617-727-2310 1-877-226-8620 1-617-367-7770	www.mass.gov/gic www.maemployeesltd.com www.state.ma.us/treasury/srb.htm www.http//inside.umassmed.ed
Delta Dental	1-800-872-0500	www.deltamass.com
VSP	1-800-877-7195	www.vsp.com
Credit Union-UMass College 5	1-800-852-5886	
Metropolitan Life/MetPay	1-508-856-1209	Program Code: 05T-M-104

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	1-800-438-6388	
MetLaw	1-800-438-6388	www.metlife.com/mybenefits
Benefit Strategies	1-877-FLEXGIC	www.benstrat.com
UFUND-529 College Savings	1-800-FIDELITY	www.fidelity.com/ufund
Employee Discount Plans		http://inside.umassmed.edu/purch/
Social Security	1-800-772-1213	www.ssa.gov

For questions regarding this summary, contact the Benefits Department at (508) 856-2282 or (508) 856-2036.