At UMass Medical School we are passionate about quality health care. We believe it takes the best people to provide the best care – and that our employees deserve nothing less.

When each of us becomes healthier, we grow stronger as an institution. That means our health care benefits need to provide a balance between care when you’re sick and access to resources and providers that help you stay well. We also understand that our employees have a variety of health care needs; and there’s no single solution to meet the needs of all our employees.

For this reason, UMass Medical School offers its eligible employees a broad range of quality health insurance plan options that focus on wellness, prevention and access to top-rated health care facilities and physicians. In addition to dental and vision plans, choosing your health insurance plan during Open Enrollment is an important decision that impacts you and your family for the whole year. Use the information in this Benefits At-a-Glance to get an overview of your insurance plan options – so you can choose what’s best for you.

**NEW! THIS YEAR**
- Neighborhood Health Plan Prime is now called AllWays Health Partners Complete HMO.
- A lower copay of $150 for members who utilize freestanding facilities for eye procedures and GI endoscopies. Copays for procedures at hospital outpatient facilities would remain the same at $250 this fiscal year. Unicare copay for any procedure at a freestanding facility is $0.

**PROVIDER TIERING**
Continuing to migrate from individual to group-based tiering for all specialists, aligning with existing group-based tiering by some GIC carriers.

**OPEN ENROLLMENT**
**APRIL 3 THROUGH MAY 1**

*for benefit changes effective July 1, 2019.*

**NEW EMPLOYEES**
You must enroll within 10 calendar days of hire. Benefits begin on the first of the month following 60 days or two full calendar months, whichever comes first.

**QUALIFYING EVENTS**
Please contact Human Resources within 30 days of a qualifying event to enroll or make changes to benefits.
CHOOSEING THE BEST HEALTH INSURANCE PLAN
FOR YOU AND YOUR FAMILY

As you review the health insurance plan options available to you and your family, there are a number of things to consider. Follow these steps to help determine the right plan for you:

STEP 1: YOUR LOCATION.
Where you live determines the health insurance plan options available to you. Review the map in this Benefits At-a-Glance to determine which plans are available in your service area.

STEP 2: COMPILE A LIST OF YOUR DOCTORS, HOSPITALS AND FREQUENTLY TAKEN MEDICATIONS.
Be sure to include the same information for every family member you cover.

STEP 3: DETERMINE WHETHER YOUR PHYSICIANS AND FACILITIES ARE IN THE NETWORK.
If you have a physician or facility that you’d like to continue to use, be sure to find out if they are included in the plan network and identify their quality/cost tier assignment. Keep in mind that if your physician or facility leaves your health insurance plan’s network during the year, you must stay in the plan for the year. You can change to another plan during the next Open Enrollment. In the meantime, the health insurance plan will help you find another provider.

STEP 4: COSTS.
How much are you willing to pay for health care? In addition to your payroll contributions (premium payments), you’ll want to consider your other out-of-pocket costs, such as coinsurance.

Limited network plans help address differences in provider costs. You will enjoy the same benefits as the wider network plans, but will save money because limited network plans have a smaller network of providers (fewer doctors and hospitals).

STEP 5: CHOOSE THE PLAN BEST SUITED FOR YOUR UNIQUE CIRCUMSTANCES.
UMass Medical School, through the GIC, offers a variety of plan options to meet a variety of needs. The best health plan for you will depend on your individual needs and preferences. So, it’s important to understand how each plan works and what is most important to you.

IMPORTANT NOTES

» Check with your carrier to see if your provider is still in the network or if copays have changed. See Health Insurance Plan chart for carrier contact information.

» Integration of Medical and Behavioral Health Benefits is through your health insurance carrier.

» You will pay lower copays for providers with the highest quality and/or cost-efficiency scores (based on specific criteria and national and industry standards):

  ➔ Tier 1 (excellent) ➔ Tier 2 (good) ➔ Tier 3 (standard)

» Physicians for whom there is not enough data and non-tiered specialists are assigned a plan’s Tier 2 level.

» Keep in mind that if you change plans (i.e., change to a new plan carrier) you will incur a new deductible.

For complete plan details, view the 2019-2020 GIC Benefit Decision Guide on the UMMS Benefits website at umassmed.edu/hr/benefits or go to GIC’s website at mass.gov/gic.
SUMMARY OF BENEFITS

The Summary of Benefits to the right gives you a snap-shot of primary features of each health insurance plan. Before making your final decision you should review the plan documents or contact the health insurance plan you are considering to learn more about:

» Information on other health insurance plan benefits that are not described in this Benefits At-a-Glance;
» Whether your physicians and facilities are in the network; and
» Which copay tiers your physicians and facilities are in.

“Same Benefits for All Plans” is just that – these plan features are the same in all plans so there is no need to factor them in when determining the right plan for you.

HEALTH INSURANCE PLANS FOOTNOTES

1 UMass Memorial’s current Physician and Hospital agreement with Harvard Pilgrim Health Care and Fallon Health Plan expires on December 31, 2019 and we cannot confirm at this time whether UMass Memorial providers will continue their participation with Harvard Pilgrim Health Care and Fallon Health Plan beyond 2019.

2 Limited network plans help address differences in provider costs. You will enjoy the same benefits as the wider network plans, but will save money because limited network plans have a smaller network of providers (fewer doctors and hospitals).

3 Out-of-pocket maximums apply to medical and behavioral health benefits across all health insurance products.

4 $15 per visit for Centered Care PCP

5 Comprehensive. Without CIC, deductibles are higher and coverage is only 80% for some services. Out-of-network benefits – This plan determines allowed amounts for out-of-state providers; you may be responsible for a portion of the total charge. Use UniCare’s national network of providers to avoid these charges.

SAME BENEFITS FOR ALL HEALTH PLANS

<table>
<thead>
<tr>
<th>Preventive Services</th>
<th>Most covered at 100%; no copay</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eye &amp; GI Procedures at Freestanding Facilities in MA</td>
<td>$150*</td>
</tr>
<tr>
<td>*For UniCare, copay for any procedure at a freestanding facility is $0.</td>
<td></td>
</tr>
<tr>
<td>Telehealth Coverage</td>
<td>$15 per visit</td>
</tr>
<tr>
<td>Emergency Room Care</td>
<td>$100 per visit (waived if admitted)</td>
</tr>
<tr>
<td>High-Tech Imaging (e.g., MRI, CT and PET scans)</td>
<td>$100 per scan (maximum one copay per day; contact plan for details)</td>
</tr>
<tr>
<td>Out-of-Pocket Maximum</td>
<td>$5,000 Individual, $10,000 Family</td>
</tr>
<tr>
<td>Prescription Drug Administrator – Express Scripts*</td>
<td>1.855.283.7679 express-scripts.com/gicRx</td>
</tr>
<tr>
<td>Prescription Drug Deductible</td>
<td>$100 Individual, $200 Family</td>
</tr>
<tr>
<td>Prescription Drug</td>
<td>Tier 1 $10, Tier 2 $30, Tier 3 $65</td>
</tr>
<tr>
<td>Retail: up to a 30-day supply</td>
<td></td>
</tr>
<tr>
<td>Mail-Order</td>
<td>Tier 1 $25, Tier 2 $75, Tier 3 $165</td>
</tr>
<tr>
<td>Maintenance drugs: up to a 90-day supply</td>
<td></td>
</tr>
<tr>
<td>Employee Assistance Program</td>
<td>No cost</td>
</tr>
</tbody>
</table>
## HEALTH INSURANCE PLANS

### Listed from lower cost to higher cost

<table>
<thead>
<tr>
<th>PLAN TYPE</th>
<th>UniCare State Indemnity Plan/Community Choice</th>
<th>Health New England</th>
<th>Tufts Health Plan Spirit</th>
<th>Fallon Health Direct Care</th>
<th>Harvard Pilgrim Primary Choice Plan</th>
<th>UniCare State Indemnity Plan/PLUS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinton Hospital</td>
<td>PPO-TYPE</td>
<td>HMO</td>
<td>EPD (HMO-TYPE)</td>
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<td>HMO</td>
<td>PPO-TYPE</td>
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<tr>
<td>Health Alliance Hospital – Fitchburg</td>
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<td>Yes</td>
<td>Yes</td>
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<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Health Alliance Hospital – Leominster</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Marlborough Hospital</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>UMass Memorial – Memorial Campus</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>UMass Memorial – University Campus</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
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<td>Yes</td>
</tr>
<tr>
<td>UMass Memorial – Hahnemann Campus</td>
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<td>Yes</td>
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<td>Yes</td>
</tr>
<tr>
<td>UMass Memorial Medical Group Primary Care Physicians</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>UMass Memorial Medical Group Specialty Care Physicians</td>
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<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
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### Type of GIC Network Plan

- Limited
- Regional
- Limited
- Limited
- Limited
- Broad

### Monthly Rates

<table>
<thead>
<tr>
<th>Monthly Rates</th>
<th>Individual</th>
<th>Family</th>
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<tbody>
<tr>
<td>For Employees Hired Before July 1, 2003</td>
<td>$104.44</td>
<td>$255.80</td>
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<tr>
<td>For Employees Hired on or After July 1, 2003</td>
<td>$130.56</td>
<td>$319.76</td>
</tr>
</tbody>
</table>

### Telephone Number

- 1.800.442.9300
- 1.800.842.4464
- 1.800.870.9488
- 1.866.344.4442
- 1.800.542.1499
- 1.800.442.9300

### Website

- unicarestateplan.com
- hne.com/gic
- tuftshealthplan.com/gic
- fallonhealth.org/gic
- harvardpilgrim.org/gic
- unicarestateplan.com

### PCP Required?

- Yes
- No

### Referrals to Network Specialists Required?

- Yes
- No

### Plan Year Medical Deductible

<table>
<thead>
<tr>
<th>Individual</th>
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<tbody>
<tr>
<td>$400</td>
<td>$800</td>
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<tr>
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<tr>
<td>$500</td>
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### Primary Care Provider Office Visit

<table>
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<tbody>
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<tr>
<td>$20 per visit</td>
<td>$20 per visit</td>
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<tr>
<td>$15 per visit</td>
<td>$20 per visit</td>
</tr>
<tr>
<td>$20 per visit</td>
<td>$20 per visit</td>
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</tbody>
</table>

### Specialist Physician Office Visit

<table>
<thead>
<tr>
<th>Tier 1</th>
<th>Tier 2</th>
<th>Tier 3</th>
</tr>
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<tbody>
<tr>
<td>$30 per visit</td>
<td>$30 per visit</td>
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<tr>
<td>$60 per visit</td>
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<td>$60 per visit</td>
</tr>
<tr>
<td>$75 per visit</td>
<td>$75 per visit</td>
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### Retail Clinic and Urgent Care Center

<table>
<thead>
<tr>
<th>Individual</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>$20 per visit</td>
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<tr>
<td>$20 per visit</td>
<td>$20 per visit</td>
</tr>
<tr>
<td>$15 per visit</td>
<td>$20 per visit</td>
</tr>
<tr>
<td>$20 per visit</td>
<td>$20 per visit</td>
</tr>
</tbody>
</table>

### Outpatient Mental Health and Substance Abuse Care

<table>
<thead>
<tr>
<th>Individual</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>$20 per visit</td>
<td>$20 per visit</td>
</tr>
<tr>
<td>$20 per visit</td>
<td>$20 per visit</td>
</tr>
<tr>
<td>$15 per visit</td>
<td>$20 per visit</td>
</tr>
<tr>
<td>$20 per visit</td>
<td>$20 per visit</td>
</tr>
</tbody>
</table>

### Inpatient Hospital Care – Medical

- Tier 1 (excellent)
- Tier 2 (good)
- Tier 3 (standard)

<table>
<thead>
<tr>
<th>Individual</th>
<th>Family</th>
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<tbody>
<tr>
<td>$275 per admission</td>
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<td>$275 per admission</td>
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<tr>
<td>$275 per admission</td>
<td>$275 per admission</td>
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<td>$275 per admission</td>
<td>$275 per admission</td>
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</table>

### Outpatient Surgery

<table>
<thead>
<tr>
<th>Individual</th>
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</thead>
<tbody>
<tr>
<td>$110 per occurrence</td>
<td>$250 per occurrence</td>
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<tr>
<td>$250 per occurrence</td>
<td>$250 per occurrence</td>
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</table>

**For Unicare, check handbook for provider tiering at mass.gov/gic**
# Health Insurance Plans

Listed from lower cost to higher cost

<table>
<thead>
<tr>
<th>PLAN TYPE</th>
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<th>POS</th>
<th>HMO</th>
<th>POS</th>
<th>INDEMNITY</th>
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<tbody>
<tr>
<td>Clinton Hospital</td>
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<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Health Alliance Hospital – Fitchburg</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
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<td>✓</td>
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<td>✓</td>
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<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>

### Type of GIC Network Plan
- Regional
- Broad
- Broad
- Broad
- National

| For Employees Hired Before July 1, 2003 | Individual | $130.23 | $335.67 | $163.09 | $178.61 | $207.49 |
|                                         | Family     | $150.33 | $364.44 | $187.92 | $203.87 | $223.27 |
| For Employees Hired on or After July 1, 2003 | Individual | $162.80 | $419.59 | $187.92 | $230.87 | $259.36 |
|                                             | Family     | $187.92 | $455.66 | $203.87 | $247.86 | $288.92 |

### Summary of Benefits

#### Telephone Number
- 1.866.567.9175
- 1.800.870.9488
- 1.866.344.4442
- 1.800.542.1499
- 1.800.442.9300

#### Website
- allwayshealthpartners.org/gic-members
- tuftshealthplan.com/gic
- fallonhealth.org/gic
- harvardpilgrim.org/gic
- unicarestateplan.com

#### PCP Required?
- Yes
- Yes
- Yes
- Yes
- No

#### Referrals to Network Specialists Required?
- Yes
- Yes
- Yes
- Yes
- No

#### Plan Year Medical Deductible
- Individual
  - $500
  - $1000
- Family
  - $500
  - $1000

#### Primary Care Provider Office Visit
- $20 per visit
- Tier 1: $10
- Tier 2: $20
- Tier 3: $40
- $20 per visit
- Tier 1: $10
- Tier 2: $20
- Tier 3: $40
- $20 per visit

#### Specialist Physician Office Visit
- Tier 1
  - $30 per visit
- Tier 2
  - $60 per visit
- Tier 3
  - No Tier 3
- Tier 1
  - $30 per visit
- Tier 2
  - $60 per visit
- Tier 3
  - No Tier 3
- Tier 1
  - $30 per visit
- Tier 2
  - $60 per visit
- Tier 3
  - No Tier 3
- Tier 1
  - $30 per visit
- Tier 2
  - $60 per visit
- Tier 3
  - No Tier 3

#### Retail Clinic and Urgent Care Center
- $20 per visit
- $20 per visit
- $20 per visit
- $20 per visit
- $20 per visit

#### Outpatient Mental Health and Substance Abuse Care
- $20 per visit
- $10 per visit
- $20 per visit
- $20 per visit
- $20 per visit

#### Inpatient Hospital Care – Medical
- Tier 1 (excellent)
  - $275 per admission
  - No tiering

#### Outpatient Surgery
- $250 per occurrence
- $250 per occurrence
- $250 per occurrence
- $250 per occurrence
- $250 per occurrence

*For Unicare, check handbook for provider tiering at mass.gov/gic.*

---

**Enrolling**

**Eligibility**

**Summary of Benefits**

**Health Insurance Plans**

**Map Key**

**Optional Life Insurance / AD&D / LTD**

**Dental / Vision Insurance**

**Benefit Forms and Benefit Summaries**

---

*For Unicare, check handbook for provider tiering at mass.gov/gic.*
This map indicates which health insurance plans are available in each area.

**MAP KEY**

- **CC** UniCare State Indemnity Plan/Community Choice
- **HNE** Health New England
- **THPS** Tufts Health Plan Spirit
- **FDC** Fallon Health Direct Care
- **AHPH** AllWays Health Partners Complete (Formerly Neighborhood Health Plan)
- **THPN** Tufts Health Plan Navigator
- **FSC** Fallon Health Select Care
- **HP** Harvard Pilgrim Independence Plan
- **IP** UniCare State Indemnity Plan/Basic

**SURROUNDING STATES**

- **New York**
  - THPN*
  - HP*
  - IP
- **New Hampshire**
  - PLUS
  - THPN*
  - HP*
  - IP
- **Maine**
  - PLUS
  - THPN*
  - HP*
  - IP
- **Rhode Island**
  - PLUS
  - THPN
  - HP
  - IP
- **Connecticut**
  - CC
  - HNE
  - THPS
  - FDC
  - AHPH
  - PLUS
  - THPN
  - FSC
  - HP
  - IP
- **Berkshire**
  - CC
  - HNE
  - THPS
  - FDC
  - AHPH
  - PLUS
  - THPN
  - FSC
  - HP
  - IP
- **Franklin**
  - CC
  - HNE
  - THPS
  - FDC
  - AHPH
  - PLUS
  - THPN
  - FSC
  - HP
  - IP
- **Worcester**
  - CC
  - HNE
  - THPS
  - FDC
  - AHPH
  - PLUS
  - THPN
  - FSC
  - HP
  - IP
- **Middlesex**
  - CC
  - HNE
  - THPS
  - FDC
  - AHPH
  - PLUS
  - THPN
  - FSC
  - HP
  - IP
- **Essex**
  - CC
  - HNE
  - THPS
  - FDC
  - AHPH
  - PLUS
  - THPN
  - FSC
  - HP
  - IP
- **Suffolk**
  - CC
  - HNE
  - THPS
  - FDC
  - AHPH
  - PLUS
  - THPN
  - FSC
  - HP
  - IP
- **Plymouth**
  - CC
  - HNE
  - THPS
  - FDC
  - AHPH
  - PLUS
  - THPN
  - FSC
  - HP
  - IP
- **Barnstable**
  - CC
  - HNE
  - THPS
  - FDC
  - AHPH
  - PLUS
  - THPN
  - FSC
  - HP
  - IP
- **Hampshire**
  - CC
  - HNE
  - THPS
  - FDC
  - AHPH
  - PLUS
  - THPN
  - FSC
  - HP
  - IP
- **Hampden**
  - CC
  - HNE
  - THPS
  - FDC
  - AHPH
  - PLUS
  - THPN
  - FSC
  - HP
  - IP
- **Norfolk**
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  - FDC
  - AHPH
  - PLUS
  - THPN
  - FSC
  - HP
  - IP
- **Bristol**
  - CC
  - HNE
  - THPS
  - FDC
  - AHPH
  - PLUS
  - THPN
  - FSC
  - HP
  - IP
- **Dukes**
  - CC
  - HNE
  - THPS
  - FDC
  - AHPH
  - PLUS
  - THPN
  - FSC
  - HP
  - IP
- **Nantucket**
  - CC
  - HNE
  - THPS
  - FDC
  - AHPH
  - PLUS
  - THPN
  - FSC
  - HP
  - IP

*Not every city and town are covered in this county or state; contact the health insurance carrier to find out if you live in the service area. The product also has a limited network of providers in this county or state; contact the health insurance carrier to find out which doctors and hospitals participate.*
OPTIONAL LIFE INSURANCE AND ACCIDENTAL DEATH & DISMEMBERMENT / LONG TERM DISABILITY INSURANCE

OPTIONAL LIFE INSURANCE AND ACCIDENTAL DEATH & DISMEMBERMENT (AD&D)

Optional Life Insurance is offered to you as a voluntary benefit 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 or two full calendar months, whichever comes first, if you enroll as a new hire. In addition, you are also provided with $5,000 of basic life insurance with your health insurance plan through the Group Insurance Commission.

BASIC FEATURES

» May elect up to 8x annual salary (up to $1.5 million maximum) without Evidence of Insurability as a new hire
» Accidental death and dismemberment included
» Portable upon termination
» Option available to convert to permanent whole or universal life policy

ENROLLMENT INFORMATION

When to enroll – You may enroll as a new hire during your first 10 days of employment without having to provide evidence of medical insurability. If you choose to enroll at a later date, you must prove evidence of medical insurability.

LONG TERM DISABILITY (LTD) 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 or two full calendar months, whichever comes first, if you enroll as a new hire.

PROVISIONS

» A tax-free benefit of 55% of your gross monthly salary
» A benefit for mental health disabilities and for partial disabilities
» A rehabilitation and return-to-work assistance benefit
» A dependent care expense benefit

ENROLLMENT INFORMATION

When to enroll – You may enroll as a new hire during your first 10 days of employment without having to provide evidence of medical insurability. If you choose to enroll at a later date, you must prove evidence of medical insurability.

LONG TERM DISABILITY RATES

<table>
<thead>
<tr>
<th>ACTIVE EMPLOYEE AGE</th>
<th>EMPLOYEE MONTHLY RATES per $100 of Monthly Earnings</th>
<th>ACTIVE EMPLOYEE AGE</th>
<th>EMPLOYEE MONTHLY RATES per $100 of Monthly Earnings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under Age 25</td>
<td>$0.08</td>
<td>50-54</td>
<td>$0.57</td>
</tr>
<tr>
<td>25-29</td>
<td>$0.10</td>
<td>55-59</td>
<td>$0.70</td>
</tr>
<tr>
<td>30-34</td>
<td>$0.14</td>
<td>60-64</td>
<td>$0.67</td>
</tr>
<tr>
<td>35-39</td>
<td>$0.17</td>
<td>65-69</td>
<td>$0.38</td>
</tr>
<tr>
<td>40-44</td>
<td>$0.35</td>
<td>Age 70 and over</td>
<td>$0.22</td>
</tr>
<tr>
<td>45-49</td>
<td>$0.47</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Rates include Accidental Death and Dismemberment coverage.

State employees who have a qualified family status change during the year may enroll in or increase their coverage without evidence of medical insurability 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.
DENTAL AND VISION INSURANCE

New employees must enroll within 10 calendar days of hire. Benefits begin on the first of the month following 60 days or two full calendar months, whichever comes first.

You may enroll and make plan changes during the Open Enrollment period that occurs each April/May with coverage effective July 1. Once enrolled, you may add or delete dependents if you have a qualifying event.

DENTAL INSURANCE – CIGNA DENTAL

Good oral health is important, not only to your teeth and gums, but to your overall health. That is why it’s so important to see your dentist on a regular basis. You may elect dental coverage in one of our two dental plans. UMMS pays the entire cost of the Basic Plan for Individual and Family coverage. If you enroll in the Plus Plan, both you and UMMS share in the cost.

<table>
<thead>
<tr>
<th>BENEFIT</th>
<th>BASIC PLAN</th>
<th>PLUS PLAN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Deductible*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual</td>
<td>$50</td>
<td>$25</td>
</tr>
<tr>
<td>Family Maximum</td>
<td>$150</td>
<td>$75</td>
</tr>
<tr>
<td>Annual Plan Maximum**</td>
<td>$750 per person</td>
<td>$1,500 per person</td>
</tr>
<tr>
<td>Preventive Care Services</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Basic Restorative Services</td>
<td>50%</td>
<td>80%</td>
</tr>
<tr>
<td>Major Restorative Services</td>
<td>40%</td>
<td>60%</td>
</tr>
<tr>
<td>Orthodontia Maximum</td>
<td>No coverage</td>
<td>$1,500 per person, up to age 19</td>
</tr>
</tbody>
</table>

* Waived for Preventive Care.
** If you change plans effective 7/1/19, keep in mind that the Annual Plan Maximum is by calendar year. For example, if a covered person has reached the Annual Plan Maximum under the Plus Plan and switches to the Basic Plan, no additional reimbursement under the Basic Plan will be allowed, until the beginning of the next calendar year.

EMployee COST

<table>
<thead>
<tr>
<th>BASIC PLAN</th>
<th>PLUS PLAN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
<td>No cost</td>
</tr>
<tr>
<td>Family</td>
<td>No cost</td>
</tr>
</tbody>
</table>

For complete plan details, view the Cigna Plan Summaries available on the UMMS Benefits website at umassmed.edu/hr/benefits.

VISION INSURANCE – GUARDIAN VISION

UMMS offers an optional vision plan through Guardian, providing affordable eye care for you and your family. The plan provides:

- $10 copay for routine eye exam in-network
- $25 copay for eye glasses in-network
- Copay for elective contact lenses varies depending on fitting and evaluation

EMployee COST

<table>
<thead>
<tr>
<th>BASIC PLAN</th>
<th>PLUS PLAN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
<td>$2.94 bi-weekly</td>
</tr>
<tr>
<td>Family</td>
<td>$8.10 bi-weekly</td>
</tr>
</tbody>
</table>

For complete plan details, view the Guardian Plan Summary available on the UMMS Benefits website at umassmed.edu/hr/benefits. To check providers in the network, go to GuardianAnytime.com.

Benefit Forms
umassmed.edu/hr/benefits/forms
Benefit Summaries
umassmed.edu/hr/benefits/benefitssummaries