

BENEFIT

DETAILS (EFFECTIVE JULY 1, 2017 - JUNE 30, 2018)

MEDICAL INSURANCE

Three Plans to chose from: **1. Pacific Source Manged Care Plan** **2. Blue Coss Managed Care Plan** **3. Allegiance Managed Care Plan** The plans provide the same basic benefits but have differences in providers and plan requirements and premium costs.

Medical Plan Monthly Rates for 2017 - 2018

Monthly Premiums	Allegiance	Blue Cross Blue Shield	Pacific Source
Employee Only	\$798	\$748	\$837
Employee & Spouse	\$1,169	\$1,075	\$1,225
Employee & Child(ren)	\$1,045	\$994	\$1,096
Employee & Family	\$1,415	\$1,327	\$1,484
Survivor	\$798	\$748	\$837
Survivor & Child(ren)	\$1,045	\$994	\$1,096

The employer contribution for 2017 - 2018 is \$1054 per month for eligible active employees

Medical Plan Costs	Medical Plan In-Network
Annual Deductible	
Applies to all covered services, unless otherwise noted or copayment is indicated	\$750/Person \$1,500/Family
Copayment (on outpatient visits)	
Primary Care Physician Visit (PCP)	\$25 copay
Specialty Provider Visit	\$40 copay
Coinsurance Percentages	
(% of allowed charges member pays)	25%
Annual out -of-pocket maximum (Maximum paid by member in a benefit year: includes deductibles, copay and coinsurance)	\$4,000/Person \$8,000/Family

PRESCRIPTION DRUG PLAN

Prescription Drug Choices

(Included in Medical plan)

Navitus is your Pharmacy Plan:

- Any member enrolled in a medical insurance plan will automatically receive Navitus. There is no separate premium.
- No deductible for prescription drugs.



Drug Schedule of Benefits Tier Level	Retail (up to a 34 day supply)	Retail/Mail Order (90 day supply)
Tier 0 (certain preventive medicaitons (ACA, certain statins, metformin(Diabetes) and omeprazole)	\$0 Copay	\$0 Copay
Tier 1 (low cost, high-value generics and select brands that provide high clinical value.)	\$15 Copay	\$30 Copay
Tier 2 (preferred brands and select generics that are less cost effective)	\$50 Copay	\$100 Copay
Tier 3 (non-preferred brands and generics that provide the lease value because of high cost or low clinical value, or both)	50% Coinsurance (Does not apply towards Out-of-Pocket max)	50% Coinsurance (Does not apply towards Out-of-Pocket max)
Tier 4 (Specialty) (specialty medications for certain chronic illnesses or complex diseases. \$200 if filled at Specialty pharmacy)	50% Coinsurance (Does not apply towards Out-of-Pocket max)	N/A
Out of Pocket Max	Individual: \$2,150/year Family: \$4,300/year	

DENTAL INSURANCE

2 Plans to chose from: Basic Plan or Select Plan

	Basic Plan - Prever	Select Plan - Enhanced
Who may be Enrolled & Monthly Rates	<ul style="list-style-type: none"> ▪ Employee Only \$18 ▪ Employee & Spouse \$35 ▪ Employee & Child(ren) \$35 ▪ Employee & Family \$49 	<ul style="list-style-type: none"> ▪ Employee Only \$42 ▪ Employee & Spouse \$80 ▪ Employee & Child(ren) \$80 ▪ Employee & Family \$113
Maximum Annual Benefit	\$750 per covered indiv	\$1500 per covered individual
Preventative & Diagnostic Services	Twice per Benefits Year, Initial and Periodic oral Exam, Cleaning, Complete series of inraoral X-rays	Twice per Benefits Year, Initial and Periodic oral Exam, Cleaning, Complete series of inraoral X-rays Note: the above services do not count towards the annual maximum and included the Diagnostic & Preventive Maximum Waiver feature
Basic Restorative Services	Not covered	<ul style="list-style-type: none"> ▪ Amalgam filing ▪ Endodontic treatment ▪ Periodontic treatment ▪ Oral surgery
Major Dental Services	Not covered	<ul style="list-style-type: none"> ▪ Crown ▪ Root canal ▪ Complete lower and upper denture ▪ Dental implant ▪ Occlusal guards
Removal of impacted teeth	Not covered	Covered benefit
Orthodontia	Not covered	Available to covered Children and adults - \$1500 lifetime benefit

VISION INSURANCE PLAN

Administered by Blue Cross Blue Shield of Montana

- Employee Only \$8.05
- Employee & Spouse. \$15.19
- Employee & Child(ren) \$15.99
- Employee & Family \$23.45

Service/Material	Coverage
Eyeglass Frames and Lenses: Once every benefit year in lieu of contact lenses	Up to \$300 allowance towards purchase of a frame and prescription eyeglass lenses, including single vision, bifocal, trifocal, progressive lenses; ultraviolet treatment; tinting; scratch-resistant coating; polycarbonate; anti-reflective coating. The Plan participant may be responsible for the charges at the time of service.
Contact Lenses: Once every benefit year in lieu of eyeglass frame and lenses	Up to \$150 allowance toward contact lens fitting and the purchase of Conventional, Disposable or Medically Necessary* contact lenses. The Plan participant may be responsible for the charges at the time of service.

**BASIC LIFE/AD&D
INSURANCE**

Administered by Standard Insurance Co.
1-800-759-8702; www.standard.com



Basic Life/AD&D Monthly Premiums

Basic Life/AD&D	\$15,000	\$ 1.49 for both
Basic Life	\$30,000	\$2.97 for both
Basic Life/AD&D	\$48,000	\$4.75 for both

**SUPPLEMENTAL TERM
LIFE INSURANCE &
SUPPLEMENTAL AD&D**

Choice of coverage: \$25,000 to \$300,000 for employee with or without AD&D. Cost based on age. Larger amounts can be applied for by individual proof of good health. Spouse limited to 50% of employee amount with maximum of \$50,000. Provided by The Standard Insurance Company.

**DEPENDENT LIFE
INSURANCE & OPTIONAL
DEPENDENT AD&D**

Choice of coverage: \$25,000 - \$50,000 for spouse. Larger amounts can be applied for by individual proof of good health. \$5,000 to \$30,000 for each child. Provided by The Standard Life Insurance Company.

**LONG TERM CARE
INSURANCE
(VOLUNTARY): Provided
by UNUM Life Insurance
Co.**

Pays income when employee/other family member requires assistance with basic care functions. Cost of insurance based on age and level of long-term care coverage. May be subject to Evidence of Insurability. Provided by UNUM Insurance.

**FLEXIBLE SPENDING
ACCOUNTS**

Account Types	Annual Amount	Qualifying Expense Examples
Medical FSAs	Minimum Contributions: \$120 Maximum Contributions: \$2,600	Medical expenses including deductibles, Coinsurance, copays, Rx expenses, chiropractic and naturopathic care. All dental and vision expenses that are not considered cosmetic.
Dependent Care FSAs	Minimum Contribution: \$120 Maximum Contribution: \$5,000	Costs for care provided to your child(ren) under age 13, or other dependents unable to care for themselves, and necessary for you to remain gainfully employed.
Adoption Assistance (Maximum listed is a lifetime maximum)	Minimum Contribution: \$120 Maximum Contribution: \$13,400	Adoption fees, court costs, attorney fees, medical examination costs, and related travel expenses.

LONG TERM DISABILITY (LTD)

Long Term Disability Monthly Premiums

Option 1	60% of pay/180 days waiting period	\$ 5.90
Option 2	66 2/3% of pay/180 days waiting period	\$11.75
Option 3	66 2/3% of pay/120 days waiting period	\$14.66

LTD coverage can help protect your income in the event you become disabled and unable to work. **Choices** includes three LTD options designed to supplement other sources of disability income that may be available to you:

- 60% of pay, following 180 days of disability
- 66-2/3% of pay, following 180 days of disability
- 66-2/3% of pay, following 120 days of disability

The three LTD options differ in terms of the amount of your pay they replace, when benefits become payable, and premium costs. Employees may increase coverage during annual enrollment. However, the increase in coverage will be subject to a pre-existing condition exclusion for disabilities occurring during the first 12 months that the increase in insurance is effective. Any coverage existing for at least 12 months prior to the increase will not be subject to the pre-existing condition exclusion.

SICK LEAVE

Accrues upon employment. Available for use after 90 days. Employee earns sick leave based on the number of hours worked in a pay period.
 Full time employee accrues 8 hours of sick leave per month, or 3.69 for 80 hrs worked, or pro-rated according to the number of hours worked if less than full-time. Sick leave may be used for personal or family illness and medical or dental appointments.

VACATION LEAVE

Normally, each non-academic employee who has been continuously employed for a period of six months will be eligible to use annual vacation leave which accrues at the annual rate listed below based on years of employment:

Twelve-month employees with academic rank earn vacation leave at a rate of 21 days per year regardless of years of service

Non academic administrators, staff, and temporary employees accrue annual leave in accordance with the following schedule:

- 1 day through 10 years = 15 working days per year
- 10 years through 15 years = 18 working days per year
- 15 years through 20 years = 21 working days per year
- 20 years + = 24 Working days per year

<p>JUROR & WITNESS LEAVE</p>	<p>Leave with pay for jury duty or other required appearance before a court, legislative committee, or other public body. Employee's payment from the court for duty (not travel) is transferred to the University or the employee may elect to take annual leave.</p>
<p>MILITARY LEAVE Member of US military force who has been employed for six continuous months.</p>	<p>Leave with pay for jury duty or other required appearance before a court, legislative committee, or other public body. Employee's payment from the court for duty (not travel) is transferred to the University or the employee may elect to take annual leave.</p>
<p>HOLIDAYS</p>	<p>New Year's Day, Martin Luther King, Jr. Day, President's Day, Memorial Day, Independence Day, Labor Day, State General Election Day, Veterans Day, Thanksgiving Day & the day after Thanksgiving (Columbus Day exchange) & Christmas Day. The Board of Regents may exchange certain work days for the same number of legal holidays.</p>
<p>EMPLOYEE TUITION WAIVER Employee must be permanent, past the probationary period, and working at least three-quarters' time (.75 FTE)</p>	<p>Permanent employees, who are employed at least 3/4 time during the entire period of enrollment, may receive a fee waiver for a maximum of six (6) credit hours per fall and spring semester and four (4) credit hours per summer semester. The waiver is subject to administrative approval and is a waiver of the incidental fee portion of the fees assessed. Permanent employees employed at least 3/4 time for the entire academic year who are reemployed for the following academic year are eligible for the fee waiver during the intervening summer term. Class enrollment is limited to a "space available" basis</p> <p>Under federal law, tuition reductions granted to employees in a graduate status are considered as income & are subject to withholding taxes. Employees who terminate during the academic semester in which they receive a waiver will be required to reimburse the university for the value of the waiver.</p>
<p>DEPENDENT TUITION WAIVER Employee must be permanent, past the probationary period, and working at least three-quarters' time (.75 FTE) For Dependent waiver, employee must be permanent, and have at least 5 years of continuous employment of at least ¾ time.</p>	<p>The tuition waiver benefit for dependents will be for 50% of the residential tuition.</p> <p>Under federal law, tuition reductions granted to employees in a graduate status are considered as income & are subject to withholding taxes. Employees who terminate during the academic semester in which they receive a waiver will be required to reimburse the university for the value of the waiver.</p> <p>Additional details are available in the Guidelines for Administering Dependent Tuition Waiver Policy</p>

RETIREMENT PLANS

A new faculty or contract professional employee hired into a retirement eligible position must participate in the Optional Retirement Plan (TIAA-CREF) unless such employee has a fund balance with either PERS or TRS. In those instances, the employee elect to stay with PERS or TRS instead of joining the Optional Retirement Plan (contact Personnel Office for eligibility requirements).

Retirement Choices

As an eligible employee of the MUS you *may have a choice^a between* retirement plans:

- [Montana University System Retirement Plan \(MUS-RP\)](#)
- [Montana Public Employees' Retirement system \(PERS\) - Defined Benefit or Defined Contribution](#)
- [Teachers' Retirement System \(TRS\)](#)

Mandatory participation when hired at half time or greater for 2 consecutive semesters.

Exception: Non-US citizens are not required to participate until the beginning of their third year of employment at half-time or greater.

Faculty and Professional Staff

As a member of the MUS-RP, contributions are calculated based on your gross compensation, before any pre-tax deductions. This means your contributions are made on a pre-tax basis and grow tax deferred until you withdraw the funds. At that time, you pay taxes on the amount you withdraw.

Total contributions to the MUS-RP is 13%

- 7.044% Employee
- 5.956% Employer

Exception: Eligible faculty who were immediately prior participants in Teachers' Retirement System (TRS) may choose to continue in TRS Defined Benefit Plan. Employee contributes 8.15% of gross pay; employer contributes 11.15%. Five (5) year vesting requirement.

In addition to contributions to the MUS-RP, your employer contributes to the following:

- 4.72% to the Teachers' Retirement System (TRS) Unfunded-Liability Mandate

Classified Staff

Employees, other than faculty or professional staff, are covered by either the Public Employees' Retirement System (PERS) or TIAA-CREF. Individuals employed in covered positions who work at least 960 hours in any fiscal year must become members.

As a member of the MUS-RP, contributions are calculated based on your gross compensation, before any pre-tax deductions. This means your contributions are made on a pre-tax basis and grow tax deferred until you withdraw the funds. At that time, you pay taxes on the amount you withdraw.

Total contributions to the MUS-RP are 16.33%

- 7.9% Employee
- 8.43% Employer

In addition to contributions to the MUS-RP, your employer contributes to the following:

- 0.04% to the Education Fund

DEFERRED COMPENSATION 457(b)

EMPOWER Retirement administers the plan. Employee may tax defer voluntary contributions up to maximum allowed by IRS code. (457b)

TAX SHELTERED ANNUITIES 403(b)

Employee may participate in a voluntary tax deferred or tax sheltered annuity retirement plan up to the maximum limit allowed by the Internal Revenue Code. Funds are withheld from the paycheck before federal and state taxes are computed thus deferring taxation until retirement or receipt of the funds. Invest with MetLife, VALIC, TIAA or VOYA. (403b)

<p>ELIGIBILITY FOR COVERAGE</p>	<p>A person employed by a unit of the Montana University System, Office of the Commissioner of Higher Education, or other agency or organization affiliated with the Montana University System or the Board of Regents of Higher Education is eligible to enroll in the Employee Benefits Plan if qualified under one of the following categories:</p> <ol style="list-style-type: none"> 1. Permanent faculty or professional staff members regularly scheduled to work at least 20 hours per week or 40 hours over two weeks for a continuous period of more than six months in a 12-month period. 2. Temporary faculty or professional staff members scheduled to work at least 20 hours per week or 40 hours over two weeks for a continuous period of more than six months in a 12-month period, or who actually do so regardless of schedule. 3. Seasonal faculty or professional staff members regularly scheduled to work at least 20 hours per week or 40 hours over two weeks for a continuous period of more than six months in a 12-month period, or who actually do so regardless of schedule. 4. Academic or professional employees with an individual contract under the authority of the Board of Regents which provides for eligibility under one of the above requirements. <p>Note: Student employees who occupy positions designated as student positions by a campus are not eligible to join the MUS Plan.</p>
<p>EFFECTIVE DATE OF COVERAGE</p>	<p>FTE of .5 or greater for 6 months or longer. If eligible, benefits coverage begins on 1st day of employment; or, as otherwise mandated by the Affordable Care Act. Election coverage must be made within 30 days of employment, or default coverage will be elected on the employee's behalf.</p>