

## **Benefits at a Glance**

## July 1, 2024 - June 30, 2025

# Benefits Eligible Full-time and 4/5th Faculty Appointments

Benefit Type	Plan Options	Coverage Level	<b>Annual Premium</b>	Description
Medical Plans CIGNA	OAP HSA (HDHP)	Employee Employee+Spouse Employee+Child Employee+Children Family	\$1,170.24 \$4,635.00 \$3,007.92 \$4,080.60 \$6,974.40	Individual Deductible: \$1,600/\$3,000 (In/Out of Network), Family Deductible: \$3,200/\$6,000 (In/Out of Network). Participant must pay their deductible before the plan will pay for office visits, prescriptions, and all other services. Once deductible is met \$0 PCP Office Visit Copay, \$30 Specialist Office Visit Copay, \$250 ER Copay, Prescription Drug Copays: \$0/\$25/\$45.
	OAP-IN (HMO)	Employee Employee+Spouse Employee+Child Employee+Children Family	\$1,776.48 \$6,844.44 \$4,161.96 \$5,332.80 \$9,157.20	In-network coverage only. Individual Deductible: \$500, Family Deductible: \$1,500. \$20 PCP Office Visit Copay, \$35 Specialist Office Visit Copay, \$250 ER Copay, Prescription Drug Copays: \$10/\$25/\$45.
	OAP (PPO)	Employee Employee+Spouse Employee+Child Employee+Children Family	\$2,649.36 \$9,265.44 \$5,618.52 \$7,618.28 \$13,665.36	Individual Deductible: \$750/\$2,000 (In/Out of Network), Family Deductible: \$2,250/\$4,000 (In/Out of Network). Coinsurance may apply for some services. \$25 Office Visit Copay, Prescription Drug Copays: \$10/\$25/\$45
Voluntary Benefits CIGNA	Accident Insurance Critical Illness Hospital Indemnity	Employee Employee+Spouse Employee+Child Employee+Children Family	Employee-paid per age/coverage. Rates available on the benefits website.	Supplemental benefit plans designed to provide additional protection for unexpected illnesses and expenses.
HSA Bank of America	Health Savings Account	-	Employee / Employer	Health Savings Account available to those who elect the <u>OAP HSA</u> . Loyola's annual contribution to the HSA is \$500 if enrolled as an individual, \$1,000 if enrolled with dependents (prorated for new hires).
Dental Plans MetLife	PPO Dental	Employee Two Party Family	\$436.44 \$874.44 \$1,520.40	Dental PPO Plan—In-Network and Out-of-Network benefits for preventive, basic and major services. Orthodontia benefits for children up to age 26. Deductible and coinsurance may apply.
	Co-Pay Dental	Employee Two Party Family	\$257.71 \$540.87 \$971.62	Dental Copay Plan—In-Network and Out-of-Network benefits for preventive, basic and major services. Orthodontia benefits for children up to age 26. Services covered based on fee schedule.
Vision Plans VSP	Core - Exam Only	Employee	Employer Paid	Core Vision—\$10 In-Network Copay for annual well-vision exam only. Glasses/contact lenses are excluded.
	Buy-up	Employee Two Party Family	\$135.48 \$200.64 \$370.44	Vision Buy-Up—In-Network and Out-of-Network benefits for well-vision exam and glasses/contact lenses.

Life Insurance Symetra	Core Life Insurance	Employee Only	Employer Paid	Option 1: 1x annual earnings (rounded up to the next higher \$1,000) to max of \$50,000 Option 2: 1 x annual earnings (rounded up to the next higher \$1,000) to a max of \$250,000.
	Supplemental Life Insurance	Employee Only	Employee-paid per age/coverage	Incremental coverage of \$25k, \$50k, \$100k or \$150k for employee.
	Spouse & Dependent Life	-	\$27.96	Spouse — \$10,000 benefit Dependent Child — \$5,000 (age 6 months to age 26)
Disability Insurance Symetra	Core Long-Term Disability	Employee Only	Employer Paid	66.67% of first \$12,749 of pre-disability earnings up to \$8,500 per month; after 180 day waiting period
	Long-Term Disability Buy-up	Employee Only	Employee-paid per wage calculation	66.67% of first \$12,749 pre-disability earnings up to \$8,500/month; after 90 day wait period.
FSA Optum Financial	Flexible Spending Accounts	-	Employee Funded	Employees set aside pre-tax dollars payroll deduct to pay for eligible expenses health care and dependent care expenses. Annual limits are set by the IRS each year.
Flex Credits	N/A	-	Employer Paid	\$1,000 of base flex credits provided. Additional credits provided after 6 years of employment.
403(b) TIAA	Loyola University Maryland Retirement Plan	-	Employee 2% Employer 9%	The University will contribute to the retirement plan after the faculty member has completed 1 year of continious employment, worked 1,000 or more hours, and is age 21 years or older. Faculty may choose to make pre-taxed payroll contributions on a voluntary basis with no age or service requirements. NOTE: The waiting period may be waived if the eligible faculty member satisfied the 1 year waiting period and 1,000 hours at a 4-year higher education institution immediately preceeding (just before) their Loyola hire date. To determine if the waiver applies, the faculty member must send the Retirement Verification Form to their previous employer for completion. The form is available at <a href="https://www.loyola.edu/department/hr/benefits/retirement">www.loyola.edu/department/hr/benefits/retirement</a>
Acentra	Employee Assistance Program	-	Employer Paid	Provides professional and confidential assessment, referrals or short-term problem solving to eligible participants and their family members.
Tuition Remission	N/A	-	Employer Funded	Available to full-time faculty and their legal spouses and dependent children. 4/5th, half-time, and part-time faculty are eligible for tuition remission for their own education on a prorated basis. Refer to the benefits and wellness webpage for full program details, including waiting periods and course restrictions. NOTE: The 3 year waiting period for dependent tuition remission can be waived if the full-time faculty member satisfied the 3 year waiting period at a 4-year higher education institution immediately preceeding (just before) their Loyola hire date. To determine if the waiver applies, the faculty member must send the Dependent Tuition Remission Waiver to their previous employer for completion. The form is available at <a href="https://www.loyola.edu/department/hr/benefits/tuition">www.loyola.edu/department/hr/benefits/tuition</a> .

#### **ADDITIONAL BENEFITS RESOURCES**

Benefits and Wellness Webpage

https://www.loyola.edu/department/hr/benefits/health-wellness



### IF YOU HAVE QUESTIONS OR NEED ADDITIONAL INFORMATION

Contact your HR Business Partner at <a href="mailto:humanresources@loyola.edu">humanresources@loyola.edu</a>
Contact Benefits & Wellness Unit at 410-617-1365

#### **NOTES:**

- 1. The annual medical plan premiums reflect the wellness compliant premiums.
- 2. Benefits for newly hired eligible faculty are effective on the first of the month following or coinciding with their date of hire.
- 3. This communication highlights some of the benefit plans available. Your actual rights and benefits are governed by the official plan documents. If any discrepancy exists between this communication and the official plan documents, the official plan documents will always govern. The University reserves the right to change any benefit plan without notice.

updated 6/17/2024