

## Benefits Overview

**HEALTH, DENTAL & VISION INSURANCES**

Roswell Park offers a comprehensive insurance program to employees who are in a benefit-eligible status. Benefits are administered at Roswell Park and managed through the New York State Health Insurance Program (NYSHIP). Below is a brief outline of the health, dental and vision programs. Questions regarding these programs may be directed to a representative in Employee Benefits.

**Health Insurance**

Health insurance coverage begins eight (8) weeks following date of hire. Enrollment in health insurance through NYSHIP is optional. The use of participating providers with each plan will ensure the maximum benefit.

The “Choices” booklet lists the health insurance plans offered through NYSHIP. This book outlines the insurance plans that are available to benefit-eligible employees based on the county in which you reside and/or work.

Coverage and costs vary by plan, and Roswell Park pays a portion of the cost for coverage. The employee’s share of the premium is made via payroll deduction, on a pre-tax or after-tax basis. Employees will have the option to change their health insurance coverage each year during an option transfer period. The costs below represent the employee’s pre-tax/after-tax contribution made via biweekly payroll deduction. It is recommended that you compare the biweekly rates noted to the deductions in your paychecks and contact the Employee Services Office immediately with any issues or concerns.

2020 HEALTH INSURANCE RATES		
Health Insurance Carriers	Individual Coverage	Family Coverage
Empire Plan (Blue Cross & United Health Care)  <i>Choice Booklet pages 16-25</i>	Grade 9 or Below: \$44.63	Grade 9 or Below: \$196.04
	Grade 10 or Above: \$59.21	Grade 10 or Above: \$233.35
BCBS of WNY (Community Blue) <sup>1</sup>  <i>Choice Booklet pages 28-29</i>	Grade 9 or Below: \$37.79	Grade 9 or Below: \$161.91
	Grade 10 or Above: \$50.39	Grade 10 or Above: \$192.93
Independent Health <sup>1</sup>  <i>Choice Booklet pages 38-39</i>	Grade 9 or Below: \$37.43	Grade 9 or Below: \$158.50
	Grade 10 or Above: \$49.90	Grade 10 or Above: \$188.90

A “Summary of Benefits & Coverage” (SBC) is a simple and standardized comparison document required by the Patient Protection & Affordable Care Act (PPACA). To view a copy of the SBC for each NYSHIP plan, please visit [www.cs.ny.gov/sbc/index.cfm](http://www.cs.ny.gov/sbc/index.cfm). If you or your eligible dependents covered by NYSHIP do not have internet access

<sup>1</sup> Other HMO plans are available to employees who live outside the eight (8) counties of WNY. Please see NYSHIP Choice Book for these plans.

and would like to request a copy, you may call 1-877-769-7477 (press 1 for the Medical Program). If you have coverage under other employer-sponsored group health, you may be eligible to participate in the NYSHIP Opt-Out Program. Please refer to the “Choices” booklet for more details.

**Dental Coverage**

PEF employees are eligible for dental coverage to begin eight (8) weeks following your hire date. Coverage is provided through Emblem Health. There is no cost to the employee for this coverage. For additional information and a provider listing, visit the Emblem Health website at [www.emblemhealth.com](http://www.emblemhealth.com).

**Vision Coverage**

PEF employees are eligible for vision coverage to begin eight (8) weeks following your hire date. Coverage is provided by Davis Vision. There is no cost to the employee for this coverage. For additional information and a provider listing, visit NYSHIP online at [www.cs.ny.gov](http://www.cs.ny.gov) to link to the custom Davis Vision site for the New York State Vision Plan.

**Employee & Dependent Required Proofs**

Employees who enroll in health, dental and/or vision coverage must provide copies of the following documents for enrollees:

Self	Spouse	Domestic Partner	Child Under Age 26
1. Birth Certificate <u>or</u> Passport	1. Birth Certificate <u>or</u> Passport	1. Birth Certificate <u>or</u> Passport	1. Birth Certificate <u>or</u> Passport
2. Social Security Card (and Medicare Card, if applicable)	2. Social Security Number (and Medicare Card, if applicable)	2. Social Security Number (and Medicare Card, if applicable)	2. Social Security Number
	3. Copy of Marriage Certificate <u>and</u> , <i>if married &gt;1 year</i> , Proof of Current Joint Ownership or Financial Obligation (e.g. prior year’s tax return, current bank or mortgage statement, or homeowner’s policy)	3. PS425 Domestic Partner Application and acceptable proof as defined in application	3. For relationship of “Other,” PS457 Statement of Dependence and acceptable proof as defined in application

**RETIREMENT**

**New York State & Local Employees’ Retirement System (NYSERS)**

The New York State & Local Employees’ Retirement System (NYSERS) is a defined benefit plan that uses a formula based on an employee’s years of service, age at retirement, and final average salary to calculate the retirement benefit. Employees enrolled in NYERS on or after April 1, 2012, belong to Tier 6. Employee contributions are deducted on a pre-tax basis from their biweekly paychecks for the length of their service. Effective April 1, 2013, the contribution rate for Tier 6 employees is variable based on salary. The variable contribution rates are:

Annual Wage	Contribution Rate
\$45,000 or less	3%
\$45,000.01 to \$55,000	3.5%
\$55,000.01 to \$75,000	4.5%
\$75,000.01 to \$100,000	5.75%
More than \$100,000	6%

After 10 years of creditable service, an employee is considered vested and has earned the right to receive a pension even if the employee should separate from employment at Roswell Park. Employees who separate before completing 10 years of full-time service may also choose to withdraw their contributions.

Employees working in full-time, permanent positions are required to join NYSERS. However, employees in temporary full-time, temporary part-time, permanent part-time or student/training positions have the option to join but are not required.

If you are not required to join and wish to decline NYSERS membership at this time, you will need to complete the “Acknowledgement of Waiver of Membership in NYSERS” form.

For enrollees, you will be receiving a welcome packet from the NYSERS shortly after your membership date. More information may also be obtained online at [www.osc.state.ny.us/retire](http://www.osc.state.ny.us/retire).

**Deferred Compensation Plan**

The New York State Deferred Compensation Plan (NYSDCP) is a State-sponsored voluntary retirement savings plan. All employees have the option to participate in the NYSDCP 457(b). If you have an existing 401(k) or 403(b) plan, you have the option to rollover your funds into this plan. Employees may elect to contribute a flat dollar amount or a percentage of their gross wages to be deducted pre-tax or after-tax from their biweekly paychecks. The minimum deferral cannot be less than 1% of the employee’s gross salary or less than \$10 per pay period. Employees may cancel or change their deferral amounts at any time by completing a deferral change form. The deferral limit for contributions is determined annually by the Internal Revenue Service. The Age 50 and Over Catch-Up provision allows participants who are age 50 and over or who will become 50 during the calendar year to make additional contributions. Please visit the NYSDCP website at [www.nysdcp.com](http://www.nysdcp.com) for additional information.

**OTHER BENEFITS**

**Flexible Spending Accounts**

The Flex Spending Account (FSA) is a valuable employee benefit that allows employees to pay for eligible health care and dependent care expenses with pre-tax money. Under this program, there are two benefits:

- The Health Care FSA allows you to set aside up to \$2,700 in pre-tax salary to pay for out-of-pocket medical expenses for you, your spouse and any tax dependents. Your coverage will begin 60 days after you enroll in the plan.
- The Dependent Care FSA allows you to set aside up to \$5,000 in pre-tax salary for out-of-pocket childcare and/or elder dependent care expenses. Enrollees are eligible for an employer contribution, and the amount contributed is based on an employee’s salary.

- Adoption Advantage Account - Eligible employees may contribute up to \$14,080 in the Adoption Advantage Account. Contributions are made through pre-tax payroll deductions and may be used for expenses related to the adoption of an eligible child.

Employees must use all the money in their account by the end of the calendar year. Money does not roll over into the new plan year. As a new hire, you have 60 days from your date of hire to enroll at [www.flexspend.ny.gov](http://www.flexspend.ny.gov) or by calling 1-800-358-7202. Once enrolled, you may contact our plan administrator, FBMC, for more information at 1-800-342-8017 or visit their website at [www.myfbmc.com](http://www.myfbmc.com).

### **New York's 529 College Savings Program**

The 529 college savings program is a tax-advantaged savings plan offered through New York State that can help you save for college tuition, certain room-and-board expenses, books, supplies, and other qualified higher-education expenses. For more information or to enroll in the program, please call 1-800-420-8580 or visit their website at [www.ny529atwork.com](http://www.ny529atwork.com).

### **Corporate Transit Pass Program**

The Corporate Transit Pass program is a money-saving transportation benefit which allows employees to buy transit passes with pre-tax dollars. In participating, employees receive a \$20.00 reduction to the cost of the NFTA transit pass which brings the **pre-tax** employee cost down to \$55.00 per month. The enrollment form must be submitted to the Employee Benefits Office by the 5<sup>th</sup> of the month prior to when the transit pass is needed. For example, those wishing to receive a pass for September 2018 must submit their form to Employee Benefits by August 5, 2018.

\*Employees who are over the age of 65 and/or are disabled are eligible for a reduced rate of \$45.00 per month. Approval for this discounted rate must be obtained through the NFTA. Applications for this benefit may be made by submitting a completed Reduced-Fare Application to the NFTA at: NFTA-Metro Reduced Fare Program, 181 Ellicott Street, Buffalo, New York 14203. For additional information for the Reduced Fare Program please contact the NFTA at 716-855-7216.