Loyola University Maryland FY12 Annual Benefits Premiums Benefit Year July 1, 2011 – June 30, 2012

Annual premiums are pre-taxed and pro-rated over the plan year (7/1 - 6/30). To calculate the pay period deduction, divide the annual premium by 24 (if you are an administrator or faculty member) or 26 (if you are a staff member). The University also provides to the employee a base amount of \$1,000 in Flex Credits to offset the cost of benefits. Flex Credits are considered taxable income to the employee.

Medical Options - Annual Cost

·	Employee	Two Party	Family
Carefirst BlueCross BlueShield PPO	\$ 1,354.80	\$ 5,377.97	\$ 8,073.50
BlueChoice HMO	\$ 1,292.21	\$ 5,177.95	\$ 7,386.38
Dental - Annual Cost			
	Employee	Two Party	Family
MetLife PPO Plan	\$ 318.84	\$ 638.64	\$ 1,108.20
MetLife Copay Plan	\$ 207.12	\$ 434.40	\$ 780.72
Vision - Annual Cost			
	Employee	Two Party	Family
VSP Buy-UP	\$ 98.91	\$ 146.66	\$ 270.77

Life Insurance - Supplemental life insurance elections are based on your age as of July 1. To calculate the pay period deduction, divide the annual premium by 24 (if you are an administrator or faculty member) or 26 (if you are a staff member).

Age	29 or under	30 - 34	35 - 39	40 – 44	45 - 49	50 - 54
□ \$25,000	13.20	19.80	26.40	29.70	45.00	69.00
□ \$50,000	26.40	39.60	52.80	59.40	90.00	138.00
□ \$100,000	52.80	79.20	105.60	118.80	180.00	276.00
□ \$150,000	79.20	118.80	158.40	178.20	270.00	414.00
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Age	55 - 59	60 - 64	65 - 69	70 – 74	75 - 79	80 or older
□ \$25,000	129.00	184.80	353.10	570.90	570.90	570.90
□ \$50,000	258.00	369.60	706.20	1,141.80	1,141.80	1,141.80
□ \$100,000	516.00	739.20	1,412.40	2,283.60	2,283.60	2,283.60
□ \$150,000	774.00	1,108.80	2,118.60	3,425.40	3,425.40	3,425.40

^{*}Current employees must provide medical approval when electing any level of optional life as a new or increased benefit. A Statement of Health Form must be completed and submitted to the benefits unit.

Dependent Life Insurance

Dependent children are eligible from age 15 days to 19 years (25 years if a full-time student). Spouses may be insured to age 70.

To calculate the pay period deduction, divide the annual premium by 24 (if you are an administrator or faculty member) or 26 (if you are a staff member).

Employee's Annual Premium: \$28.80

Benefit Amount - \$10,000.00 Spouse / \$5,000.00 Child(ren)

Short-Term Disability (LTD Buy-Up)

Short-Term Disability begins the first day of the month following three (3) months of continuous disability and provides replacement income at the rate of 66 % percent of salary. To calculate the pay period deduction, divide the annual cost by 24 (if you are an administrator or faculty member) or 26 (if you are a staff member).

Current employees must provide medical approval when electing short-term disability as a new benefit. A Statement of Health must be completed and submitted to the benefits unit.

Use this calculation if you <u>are</u> receiving Loyola's Retirement Plan Contribution.

Base Wage	Divide by	Multiply by	Annual Cost
\$	100	0.194	\$

Use this calculation if you are not receiving Loyola's Retirement Plan Contribution.

Base Wage	Divide by	Multiply by	Annual Cost
\$	100	0.158	\$

Flexible Spending Accounts

You <u>must</u> make a new election each benefit year during open enrollment, even if you are already participating. To calculate the pay period deduction, divide the annual election by 24 (if you are an administrator or faculty member) or 26 (if you are a staff member).

Health Care Flexible Spending Account (annual maximum \$5,000.00)

Dependent Care Flexible Spending Account (annual maximum \$5,000.00)

QUALIFIED LIFE EVENT CHANGES

A Qualifying Life Event is an event defined by the Internal Revenue Service (IRS) that allows you to change your benefits (medical, dental, vision, life insurance, disability, flexible spending accounts).

Employees have 30 days from the start of their life event to enroll on-line at https://inside.loyola.edu. Supporting documentation verifying the life event is required. If the life event is not reported within the stated timeframe, the employee must wait until the next open enrollment period to make changes to their benefits. The Open Enrollment season is in April each year but the start of the plan year is July 1st.

The following are considered Qualified Life Events:

- Change in your legal marital status (i.e., marriage, legal separation, divorce, or death of your spouse)
- Birth or adoption of a child or placement for adoption
- Death of a dependent
- Change in your dependent's eligibility
- Change in employment status (for employee, spouse, or employee's dependent) that affects eligibility for health insurance benefits
- Spouse's open enrollment season

Please Note: A qualifying event must be *consistent* with the request to add, drop, or make a change that affects your tax-sheltered health, dental, or vision premiums and Flexible Spending Account for your un-reimbursed medical account.

BENEFITS UNIT CONTACTS

www.loyola.edu/hr

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BENEFIT DEDUCTION CODES

Once the employee enrolls in a plan, the related deduction code(S) will appear in the deduction column on the paycheck. The following are the deduction codes.

BENEFIT PLANS	DEDUCTION CODES
CareFirst BlueCross BlueShield PPO BC PPO LDA Coverage (for Legally Domiciled Adults) BC PPO LDA Imputed Income (for Legally Domiciled Adults) BlueChoice HMO MetLife Dental PPO Plan MetLife Dental PPO LDA (for Legally Domiciled Adults) MetLife Dental Copay Plan VSP Buy- Up Plan Vision Buy-up LDA (for Legally Domiciled Adults) Short-Term Disability Supplemental Life Insurance Dependent Life Insurance Health Care Flexible Spending Account Dependent Care Flexible Spending Account	PPO1, PPO2, PPO3 PLDA PINC HMO1, HMO2, HMO3 DM1, DM2, DM3 DMPL DC1, DC2, DC3 VP1, VP2, VP3 VLDA STD, STDR LIF DLI HC DC

HEALTH PLAN CONTACTS

<u>CareFirst PPO</u> * ID CARDS WILL BE MAILED DIRECTLY TO YOUR HOME – FOR NEW E	ENROLLMENT AND CHANGES
Customer Service	800-626-0173
Argus Pharmacy Member Services	800-241-3371
Website	<u>www.carefirst.com</u>
BlueChoice HMO* ID CARDS WILL BE MAILED DIRECTLY TO YOUR HOME – FOR NEW	IN ENDOLLMENT AND CHANCES
Customer Service	
Argus Pharmacy Member Services	
Website	
website	<u>www.caremst.com</u>
MetLife Dental *YOU WILL NOT RECEIVE AN ID CARD. PROVIDE YOUR METLIFE DEN	NTIST WITH THE GROUP NUMBER BELOW
Customer Service	
Website	<u>www.metlife.com</u>
Group #	113743
Vision Service Plan (VSP) *YOU WILL NOT RECEIVE AN ID CARD. PROVIDE YOUR V.	
Customer Service	
Website	
Group #	
Group #	12093416-0004-0002 (Buy-Op)
Flexible Spending Accounts (FSA)	
Hirsch Financial Services (HFS)	
Customer Service	410-771-1331
Website	www.hfsbenefits.com
Benelogic – Enroll in your benefits	
Benefits On-line Enrollment	
Customer Service	
Website	<u>www.loyola.benelogic.com</u>