

2023-2024

OPEN ENROLLMENT GUIDE



**KING'S
COLLEGE**
TRANSFORMATION. COMMUNITY. HOLY CROSS.


Creative Benefits, Inc.
strategies to insure your success



IMPORTANT REMINDERS

Medical ID Card

All employees enrolling in a medical plan will receive a new Medical ID card from Highmark Blue Cross Blue Shield. Your previous medical card can be discarded after you receive your updated ID card.

EXAMPLES OF NEW MEDICAL CARDS

Highmark Blue Cross Blue Shield medical ID card examples. The top card shows a subscriber named XXX123456789001 with a network of providers and a list of dependents. The bottom card shows a subscriber named XXX123456789001 with a network of providers and a list of dependents.

Enrollment for 2023-2024 Plan Year

This year we are holding an **active enrollment**. This means that if you do not actively enroll in benefits during open enrollment, then you won't have coverage in 2023-2024. No benefits will carry over. **Re-enrollment is required for all elections for the 2023-2024 plan year.** All employees **must** log into the Benefit Enrollment Portal Self-Service to submit their elections. If you do not log in and submit your elections, **you will not be enrolled in benefits for the 2023-2024 plan year.**

Employee Service Representatives

The ESR Team at Creative Benefits, Inc. can help with the following:

WE'RE HERE TO HELP!



questions or concerns about your benefits



a doctor bill for which you are not responsible



ordering a new ID card for you



a claim that was denied by your insurance



finding providers that are in your network

CONTACT INFORMATION

Hours of Operation: Monday - Friday, 7:30AM to 6:00PM EST

Phone: 844.231.8414

Email: ESR@creativebenefitsinc.com

When initially contacting us, please be prepared to provide your name, subscriber name and college, subscriber social security number or ID number, and date of birth.

MEDICAL BENEFITS



Highmark Blue Cross and Blue Shield

King's College will continue to offer the choice of three medical plans - the Value Plan, the Core Plan, and the Premier Plan. The Custom PPO and PPO programs give you the freedom to choose the doctor, specialist, or hospital to provide your care. The choice is yours, but there are advantages to choosing in-network providers, such as lower copays and reduced out-of-pocket expenses. *See page 4 for network details.*

To locate a participating doctor or facility, visit www.highmarkbcbs.com. For customer service, call **800.241.5704**.

| BI-WEEKLY MEDICAL BENEFIT PAYROLL DEDUCTIONS | | | |
|--|------------|-----------|--------------|
| | VALUE PLAN | CORE PLAN | PREMIER PLAN |
| Single | \$62.23 | \$93.89 | \$125.56 |
| Employee + Child(ren) | \$155.04 | \$232.55 | \$279.50 |
| Employee + Spouse | \$182.33 | \$262.03 | \$326.45 |
| Family | \$220.54 | \$328.63 | \$412.70 |

| | VALUE PLAN CUSTOM PPO - \$500 DED | CORE PLAN PPO - \$750 DED | PREMIER PLAN PPO - \$300 DED |
|---|---|---|---|
| IN-NETWORK COVERAGE | 13-COUNTY NETWORK | BLUECARD NETWORK | BLUECARD NETWORK |
| In-Network Member Deductible Responsibility | \$500 Single \$1,000 Family | \$750 Single \$1,500 Family | \$300 Single \$600 Family |
| Co-Insurance | 20% | 20% | 10% |
| Out-of-Pocket Maximum (deductible, co-insurance & copays are included) | \$6,600 Single \$13,200 Family | \$6,600 Single \$13,200 Family | \$6,600 Single \$13,200 Family |
| Primary Doctor Visit | \$25 copay | \$20 copay | \$20 copay |
| Specialist Visit | \$35 copay | \$30 copay | \$30 copay |
| Outpatient Mental Health | \$35 copay | \$30 copay | \$30 copay |
| Urgent Care | \$50 copay | \$50 copay | \$50 copay |
| Emergency Room (waived if admitted) | \$100 copay | \$100 copay | \$100 copay |
| Basic Radiology* | \$25 copay at Vision Imaging \$50 copay at all other facilities | \$25 copay at Vision Imaging \$50 copay at all other facilities | \$25 copay at Vision Imaging \$50 copay at all other facilities |
| Complex Radiology (i.e. MRI)* | \$75 copay at Vision Imaging \$150 copay at all other facilities | \$75 copay at Vision Imaging \$150 copay at all other facilities | \$75 copay at Vision Imaging \$150 copay at all other facilities |
| Physical, Speech & Occupational Therapy, Chiropractic Care (limits apply) | 20% after deductible | 20% after deductible | 10% after deductible |
| Durable Medical Equipment | 20% after deductible | 20% after deductible | 10% after deductible |
| Inpatient Hospital Care, Outpatient Surgery, Lab Services | 20% after deductible | 20% after deductible | 10% after deductible |
| OUT-OF-NETWORK COVERAGE | BLUECARD NETWORK/TIER 2 | OUT-OF-NETWORK | OUT-OF-NETWORK |
| Deductible | \$1,200 Single \$2,400 Family | \$2,000 Single \$4,000 Family | \$1,000 Single \$2,000 Family |
| Co-Insurance | 40% | 30% | 30% |
| Co-Insurance Maximum | \$8,000 Single \$16,000 Family | \$8,000 Single \$16,000 Family | \$5,000 Single \$10,000 Family |

*For further detail on the radiology program and Vision Imaging, please refer to page 5 of this booklet.

This is a brief summary only. Refer to your plan document for complete details. If any discrepancies exist between the above and the plan document, the plan document will prevail.

NETWORKS

Custom PPO (Value Plan)

Network Providers:

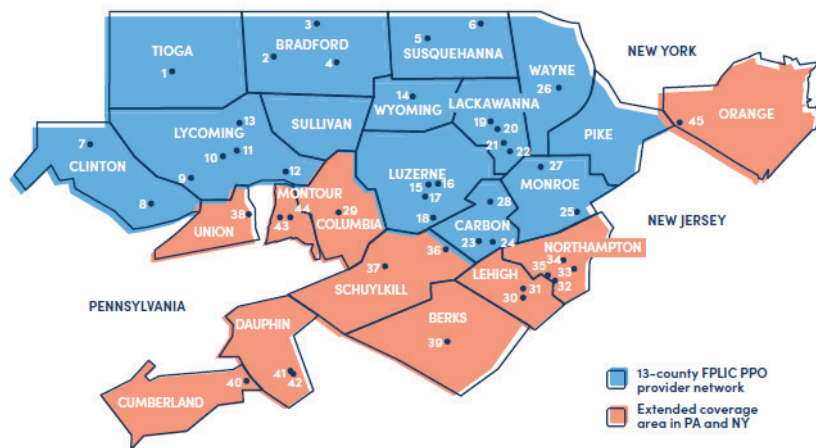
13-County FPLIC PPO Provider Network and Blue Distinction® Centers for Transplants.

BlueCard Network Providers:

BlueCard® PPO national network providers and any other non-participating providers.

Out-of-Network Providers:

Non-participating Blue Cross providers and facilities. Balance billing may apply.



FPLIC PPO Network Hospitals

| Counties | Tioga Bradford Susquehanna | Clinton Lycoming Sullivan | Luzerne Wyoming | Lackawanna | Carbon Monroe Pike Wayne |
|------------------|---|--|--|---|--|
| Hospitals | <ol style="list-style-type: none"> UPMC Wellsboro Troy Community Hospital Robert Packer Hospital Memorial Hospital--Towanda Endless Mountains Health System Barnes Kasson County Hospital | <ol style="list-style-type: none"> Bucktail Medical Center UPMC Lock Haven Geisinger Jersey Shore Hospital UPMC Williamsport UPMC Divine Providence UPMC Muncy Geisinger Medical Center Muncy | <ol style="list-style-type: none"> Tyler Memorial Hospital Wilkes-Barre General Hospital Geisinger Wyoming Valley Medical Center Department of Veterans Affairs Medical Center Lehigh Valley Hazleton, Hospital | <ol style="list-style-type: none"> Regional Hospital of Scranton Moses Taylor Hospital Geisinger Community Medical Center Lehigh Valley Hospital - Dickson City | <ol style="list-style-type: none"> St. Luke's Gnaden Huetten Campus St. Luke's Palmerton Hospital Lehigh Valley Hospital - Pocono Wayne Memorial Hospital St. Luke's University Hospital Monroe Campus Lehigh Valley Hospital - Carbon |

And, several hospitals and their participating doctors, located just beyond our 13-county service area:

| PA | |
|---|---|
| <ul style="list-style-type: none"> Geisinger-Bloomsburg Hospital Lehigh Valley Hospital - Coordinated Allentown St. Luke's University Hospital, Allentown Campus St. Luke's University Hospital, Bethlehem Campus St. Luke's University Hospital, Anderson Campus, Easton Lehigh Valley Hospital-Muhlenberg Lehigh Valley Hospital, Coordinated Bethlehem St. Luke's University Hospital, Miners Campus, Nesquehoning | <ul style="list-style-type: none"> Lehigh Valley Hospital - Schuylkill Evangelical Community Hospital, Lewisburg Penn State Health St. Joseph Medical Center - Reading Penn State Health Holy Spirit - Camp Hill Penn State Health Milton S. Hershey Medical Center Penn State Health Children's Hospital NEW FOR 2023: Geisinger Medical Center NEW FOR 2023: Geisinger Janet Weis Children's Hospital |
| NY | |
| <ul style="list-style-type: none"> Bon Secours Community Hospital, Port Jervis (Please note: This hospital is in network. Not all doctors affiliated with this hospital are in network.) | |

PPO (Core and Premier Plans)

In-Network Providers:

National BlueCard Network. Access to nationwide physicians and facilities.

Out-of-Network Providers:

Non-participating Blue Cross providers and facilities. Balance billing may apply.

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RADIOLOGY BENEFITS

Vision Imaging of Kingston

King's College will continue to participate in Vision Imaging of Kingston's Preferred Member Program!

Take advantage of Diagnostic Imaging Services in Kingston, PA!

- Request an appointment online at www.visionimagingofkingston.com or call at (570) 714-7226.

Benefits of choosing Vision Imaging:

- **REDUCED COPAY** for all radiology services
- Same or next day appointments, as well as weekend appointments
- 24 hour turn around time on reports and results
- Walk-in X-Rays welcome
- Advanced Womens Imaging Program including new 3D equipment
- Open MRI available for claustrophobic patients
- On-site Radiologist
- Cinema vision television or music available with MRI machines
- Comfortable facility with friendly staff
- Free parking

Imaging services:

- | | |
|----------------------------|--------------------|
| • CT | • Nuclear Medicine |
| • DEXA | • PET / CT |
| • Interventional Radiology | • Ultrasound |
| • Mammography | • X-Ray |
| • MRI / Open MRI | |

Hours of Operation:

Monday to Thursday:
8:00AM to 6:00PM

Friday:
8:00AM to 5:00PM

Contact Information:

Address:
517 Pierce Street
Kingston, PA 18704

Phone:
570.714.7226

Fax:
570.714.6288



For more detailed information, please visit www.visionimagingofkingston.com.

PRESCRIPTION BENEFITS



Highmark Blue Cross and Blue Shield

When you enroll in one of the available medical plan options, you are automatically provided with prescription drug coverage. The prescription copay amounts are identified within the Prescription Plan Summary below.

| | VALUE PLAN | CORE PLAN | PREMIER PLAN |
|--|-----------------------------|-------------|--------------|
| RETAIL PHARMACY (30-DAY SUPPLY) | | | |
| Select Generics | \$0 copay | \$0 copay | \$0 copay |
| Generic Formulary | \$10 copay | \$10 copay | \$10 copay |
| Brand Formulary | \$35 copay | \$20 copay | \$20 copay |
| Non-Formulary Brand | \$55 copay | \$35 copay | \$35 copay |
| Specialty | 20% coinsurance up to \$150 | \$35 copay | \$35 copay |
| MAIL ORDER PHARMACY (90-DAY SUPPLY) | | | |
| Select Generics | \$0 copay | \$0 copay | \$0 copay |
| Generic Formulary | \$20 copay | \$20 copay | \$20 copay |
| Brand Formulary | \$70 copay | \$40 copay | \$40 copay |
| Non-Formulary Brand | \$165 copay | \$105 copay | \$105 copay |
| Specialty | 20% coinsurance up to \$150 | \$105 copay | \$105 copay |

Prescription Plan Highlights:

Mandatory Generic: The prescription drug plan requires a member take a generic prescription when available. If the member chooses to use the brand name of the drug when there is a generic equivalent, the member will be charged a copay plus the difference in the cost of the generic & brand name medication.

Preferred and Excluded Drugs: You can check how your drugs are covered on the Express Scripts Preferred Drug List and the Drug Exclusion List at highmarkbcbs.com or by contacting the Member Services Department at 1-800-241-5704. If you find that your medication is excluded, you will need to speak with your physician to discuss other covered alternatives.

Mail Order: Mail order is available for maintenance drugs. Maintenance medications are those prescribed for an extended period of time to treat a chronic condition (e.g. high blood pressure). Upon the **third fill** of a maintenance medication, you will be prompted to choose between the mail order program or continuing to refill your prescription at a retail pharmacy. For more information or to make your choice, please call 1-855-686-9786 or visit highmarkbcbs.com.

PLEASE NOTE: New or initial orders take 10-14 business days to process. Having a 2-week supply of your medication on hand when mailing a new order to Mail Order Pharmacy is recommended.

Prior Authorizations & Step Therapy: Certain medications require prior authorization by your physician or the use of a therapeutic alternative prior to the use of the medication that requires prior authorization.

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TELEMEDICINE

SwiftMD

Available to all members enrolled on the King's College medical plan!

Healthcare on Demand

SwiftMD is a telemedicine service that delivers quality health care directly to patients in need. Members enjoy access to high quality, convenient medical care over the phone or via video conferencing, 24 hours a day, 7 days a week -- while saving you money!

Benefits that SwiftMD members enjoy include:

- 24/7/365 nationwide access to U.S. Board-Certified physicians
- Consults with doctors via phone or video conferencing, where doctor makes diagnosis and recommends treatment
- Doctor calls in prescription when appropriate
- Members can avoid unnecessary visits to the ER and long waits for an appointment at the doctor's office
- **NO COPAYS AND NO COST TO YOU!** Your employer is paying for your membership

Member Testimonials:

"The doctor that I spoke with was kind and had an excellent bedside manner."

"This service is amazing and convenient. I love it!"

"Especially on the occasion you are unable to get in to see your primary physician, SwiftMD is a tremendous service. Prompt service and professional knowledgeable staff that let you know you are in good hands."

To Access your SwiftMD Account:

Simply call our toll-free phone number (**1.877.999.7943**) when seeking health advice. Your membership will be verified, and then your appointment will be scheduled! You will receive a call back within 30 minutes of scheduling the appointment. Members can also access services by downloading the SwiftMD app.



For more detailed information, please visit www.swiftmd.com.

Some of the conditions treated through SwiftMD:

- Allergies
- Fever & Flu
- Headache
- Insect Bites & Stings
- Pink Eye
- Prescriptions, when appropriate
(Rx copays will apply)
- Rashes
- Sore Throat
- Upper Respiratory Infections
- Upset Stomach
- Urinary Tract Infections
- Vomiting
- Your Individual Medical Concerns



SwiftMD can work with groups to provide behavioral health counseling services as a part of the telehealth program. Members can access mental health support when they need to.

Services include:

- 24/7 access to master's level counselors via phone or videoconference
- Initial assessment and three visits at no cost to the member
- Referral to in-person care if needed
- Urgent/emergent help 24/7

The minimum qualifications for Behavioral Health counselors include:

- Master's level, state-licensed clinicians
- Trained in clinical assessments
- Substance abuse and domestic violence experience
- Care coordination and management

**Reach out for help by calling *1.877.999.7943* or
by downloading *the SwiftMD mobile app.***

*Your membership will be verified, and then your appointment will be scheduled!
You will receive a call back within 30 minutes of scheduling the appointment.*

FAQs

How can counseling services help?

After an initial assessment, counselors are typically available for a session within 72 hours of the initial call. They can help with loss, grief, change, transition or abuse. They have a master's degree and at least ten years' experience.

Is there a fee for using Behavioral Health consults?

The plan allows members to talk to a counselor for the initial assessment and up to three visits at no cost.

What if help is needed beyond the scope of this service?

If needed, counselors will refer members to the right local resources for their problem. The cost of these services is not included in this benefit.

Is this service just for people in crisis?

Counseling services provide assistance with a wide range of personal matters, such as self-improvement, parenting/family, marital/relationship, workplace issues, depression, anxiety, alcohol/drug abuse, gambling and more. Counseling services can help address personal problems early in an effort to prevent a crisis.

Is this service confidential?

This is a confidential service that provides access to experienced master's level professionals by phone 24/7. Counselors do not release information without members' signed consent except for emergency situations or to report child abuse.



Experienced counselors can help 24/7

- Conflicts at work or home
- Co-dependency
- Reliance on alcohol, tobacco, or drugs
- Eating disorders
- Marital, family, and relationship concerns
- Child or elder care matters
- Stress or anxiety
- Sexual, physical, or emotional abuse
- Difficulty communicating with people
- Depression or grief at home or work

KNOW YOUR BENEFITS

TELEMEDICINE VS. URGENT CARE VS. EMERGENCY ROOM

Explore the benefits of telemedicine over urgent care, and identify when it is best to visit the emergency room.



TELEMEDICINE

COST: \$0, available at no cost to all full-time eligible employees enrolled in medical benefits

CONVENIENCE: 24/7/365 access to U.S. Board-Certified physicians via phone call or video conference consultation

BENEFITS: Doctor will call within 30 minutes to make diagnosis, recommend treatment and call in prescriptions when appropriate

USE WHEN: Experiencing *routine, non-urgent* illnesses such as sinus infection symptoms, allergies and rashes, insect bites and stings, headache, fever and flu, pink eye, and urinary tract infections, etc.



URGENT CARE FACILITY

COST: \$50 copay

CONVENIENCE: Evening & weekend hours available and no appointment is necessary

BENEFITS: Enjoy shorter wait times and lower copayments than the ER

USE WHEN: Experiencing *non life-threatening* situation, but still *need immediate attention* (i.e. minor burns or injuries, sprains and strains, cough, cold, sore throat, ear infection, minor allergic reactions, fever or flu-like symptoms, rash or skin irritations, mild asthma, etc.)



EMERGENCY ROOM

COST: \$100 copay

CONVENIENCE: Longer wait times

BENEFITS: Access to hospital personnel

USE WHEN: Experiencing a *life-threatening* symptom, such as chest pain or sudden severe pain, difficulty breathing, severe bleeding, head trauma, loss of consciousness, sudden loss of or blurred vision and speech, etc.

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MENTAL HEALTH

Highmark Blue Cross and Blue Shield

Making time for your mental health

Your guide to Highmark BCBS's mental health resources

Mental health issues are different for everyone, which is why it's important to find the care option that's right for you. Whether you're considering medication, want to learn more about self-care, or just want to talk to someone, Highmark is here to help.



Below are some of the support systems, services, and care options available to you.

Who should I reach out to if I need help?

- Call your primary care physician.
- Schedule an in-person or telemedicine appointment with a mental health provider.
- Call a Highmark behavioral health specialist.
- Blues On Call™

How can I find the care that's right for me?

- For help finding an in-network doctor or facility, contact the My Care Navigator™ team by calling the phone number on the back of your member ID card.
- Download the Highmark Plan app to quickly and conveniently find in-network care nearby.
- Call the Member Service number on the back of your ID card to request to speak with a behavioral health specialist.
- Speak with a wellness coach at 1-800-650-8442, Monday-Friday 8:30am - 8:30pm ET for help with stress or sleep management.

What other services do I have access to?

- **Sharecare®** - personalized health programs and resources, plus Sharecare Windows for access to videos to help reduce stress and improve relaxation.
- **WholeHealth Living™** - discounts through the largest alternative medicine network in the nation.
- **Bright Heart Health** - substance use counseling and treatment through telemedicine.
- **Highmark Blue Shield Community Support** - a tool that connects people seeking help with local nonprofits and services in their communities.
- **Telemedicine through your doctor's office** - get access to a doctor you know and trust from your phone, tablet, or computer. Keep in mind that your doctor's office may not offer this option, so make sure to check with your health care provider.

Where can I go to learn more?

Every plan is a little different. For more information about available services and your specific benefits and costs for care, you can visit highmarkbcbs.com or call Member Services at .

If you or someone you know is in crisis, contact the Suicide Prevention Lifeline at 1-800-273-TALK (8255), or dial 911 in case of emergency.



DENTAL BENEFITS



Delta Dental

With Delta, you have three network levels from which to choose: in-network PPO; in-network Premier; or out-of-network.

Benefits may be subject to age or frequency limitations. If the charge for any dental treatment is expected to exceed \$300, have your dentist submit a dental treatment plan for review before treatment begins.

Go to www.deltadentalins.com to find an in-network dentist; select "Find a Dentist," and choose either the PPO or Premier networks. For Customer Service, please call **800.932.0783**.



| BI-WEEKLY DENTAL BENEFIT PAYROLL DEDUCTIONS | |
|---|---------|
| DELTA DENTAL PPO PLAN | |
| Single | \$10.51 |
| Employee + 1 | \$19.05 |
| Family | \$27.86 |

| | PPO AND PREMIER NETWORKS | OUT-OF-NETWORK |
|---|---|----------------|
| Benefits Maximum | Plan pays up to \$1,500 per calendar year per person | |
| Annual Deductible Waived for Diagnostic and Preventive | \$50 per individual per calendar year \$150 per family per calendar year | |
| Out-of-Network Reimbursement | Premier Network Contracted Fees (balance billing may occur) | |
| Exams, Bitewing X-Rays, Cleanings, Fluoride Treatments, Sealants | 0% | 0% |
| Amalgam and Composite Restorations, Periodontics, Endodontics, Oral Surgery | 0% after ded | 0% after ded |
| Crowns/Inlays, Bridges, Dentures | 40% after ded | 40% after ded |
| Orthodontic Benefits (dependents up to age 26) | 50% | 50% |
| Orthodontic Maximums | Plan pays up to \$1,500 per lifetime per dependent | |

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VISION BENEFITS



Vision Benefits of America

Your vision plan through VBA allows you to see any eyecare provider that's right for you. However, your out-of-pocket costs will be lower if you see a VBA participating doctor. *If you visit a doctor that is not in VBA's network, you will need to pay the full fee at the time of the service and then submit an itemized bill to VBA for reimbursement.*

To find a VBA doctor, visit www.vbaplans.com.

For Customer Service, call **800.432.4966**.



| BI-WEEKLY VISION BENEFIT PAYROLL DEDUCTIONS | |
|---|--------|
| VBA VISION PLAN | |
| Single | \$1.57 |
| Family | \$4.38 |

| | IN-NETWORK | OUT-OF-NETWORK |
|---|---------------------------------------|---------------------------|
| EXAMINATIONS (EVERY 12 MONTHS) | | |
| Exams | \$0 | Up to \$40 reimbursement |
| Materials | \$10 copay | N/A |
| STANDARD LENSES (EVERY 12 MONTHS) | | |
| Single Vision | \$10 copay ¹ | Up to \$40 reimbursement |
| Bifocal | \$10 copay ¹ | Up to \$50 reimbursement |
| Trifocal | \$10 copay ¹ | Up to \$75 reimbursement |
| Lenticular | \$10 copay ¹ | Up to \$100 reimbursement |
| CONTACT LENSES, EVALUATION & FITTING (IN LIEU OF GLASSES, EVERY 12 MONTHS) | | |
| Elective | Up to \$100 allowance | Up to \$100 reimbursement |
| Contact Fitting | 15% discount off UCR* | N/A |
| FRAMES (EVERY 12 MONTHS) | | |
| At Provider's Location | \$50 wholesale allowance ¹ | Up to \$50 reimbursement |

*Usual, Customary and Reasonable as determined by VBA

¹A \$10 copayment is applied to the total cost of the lenses and/or frames ordered from a VBA Member Doctor only. The copayment does not apply to the vision examination or contact materials.



Schedule a complimentary hearing evaluation and save over 40% on premium aids with the latest technology. Call **855.203.7979** to learn more.



Save up to \$1,000 on Custom Bladeless LASIK using Wavelight with featured in-network providers. Schedule your free consultation today! Call **877.437.6105**.

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LIFE/AD&D INSURANCE & LONG TERM DISABILITY



Guardian

If you have questions about any of the following insurance plans, please contact Creative Benefits, Inc. at **844.231.8414** or esr@creativebenefitsinc.com. Please remember to review your beneficiary information and update as necessary.

Your Employee Assistance Program is through Guardian. For additional information regarding this benefit, contact your Human Resource Department.

LIFE/ACCIDENTAL DEATH & DISMEMBERMENT - PAID BY KING'S COLLEGE

| | |
|----------------------------------|---|
| Eligible Class | All eligible employees: Full time employees and faculty |
| Life Benefit | 1.5x salary to \$100,000 |
| Accidental Death & Dismemberment | 1.5x salary to \$100,000 |
| Reduction Schedule | To 67 percent at age 70; to 45 percent at age 75; to 30 percent at age 80 |
| Waiver of Premium | Included |
| Conversion/Portability | Included |
| Accelerated Death Benefit | Included |
| Benefits Terminate | Upon retirement or termination |

IMPUTED INCOME: Under Section 79 of the Internal Revenue Code, employer provided group term life coverage will generate additional taxable income to the employee if covered for more than \$50,000.

LONG TERM DISABILITY - PAID BY KING'S COLLEGE

| | |
|-----------------------------------|---|
| Eligible Class | All eligible employees: Full time employees and faculty |
| LTD Benefit | 60% to \$6,000 monthly |
| Benefit Duration | To age 65 |
| Benefits Begin After | 180 days |
| Pre-Existing Condition Limitation | 3/12 - A pre-existing condition is defined as one where you sought treatment in the last 3 months prior to being covered. |

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VOLUNTARY LIFE INSURANCE

Guardian



If you have questions about any of the following insurance plans, please contact Creative Benefits, Inc. at **844.231.8414** or esr@creativebenefitsinc.com.

VOLUNTARY LIFE BENEFIT - PAID BY EMPLOYEE

| | |
|-------------------------------|---|
| Life Benefit | Employee: \$10,000 increments up to \$300,000 (Guarantee Issue: \$50,000 for newly eligibles); not to exceed 5x base annual earnings |
| | Spouse: \$10,000 increments up to \$300,000; not to exceed 100% of employee election. (Guarantee Issue: \$10,000 for newly eligibles) |
| | Child (14 days—26 if FT student): A policy for a child can be taken out in the amount of \$10,000 |
| Reduction Schedule | To 67 percent at age 70; to 45 percent at age 75; to 30 percent at age 80 |
| Portability/Conversion Option | Termed coverage can be continued on an individual basis should you leave. (Termed rates also age banded) |
| Accelerated Death of Benefit | 75% of the amount of the life insurance benefit is available to you if terminally ill, not to exceed \$300,000. |
| Waiver of Premium | If it is determined that you are totally disabled, your life insurance benefit will continue without payment of premium, subject to certain conditions. |

Employees can opt to purchase additional life insurance through payroll deductions. The rates are age-banded, therefore your rates will change only when you move from one age-band to another. Employees and dependents who are currently enrolled and who do not wish to make any changes will continue to be enrolled for the upcoming plan year.

Please note that employees have to elect coverage for themselves in order to be eligible to elect dependent coverage. Please see the Human Resources Department or go to <http://www.kings.edu/hr/benefits> to obtain the necessary forms for enrollment in this voluntary benefit.

Guardian Employee Assistance Program (EAP)

Guardian's comprehensive UpriseHealth Employee Assistance Program, available through Integrated Behavioral Health, provides you and your family members with confidential, personal, and web-based support on a wide variety of important and relevant topics.

Your EAP can assist with:

Health — Healthy Living, Stress Management, Mental Health, Diet and Fitness, Overall Wellness

Family — Parenting Support, Child and Elder Care, Learning Programs, Special Needs Help

Financial — Legal Issues, Will Preparation, Taxes and Debt, ID Theft Services, Financial Planning Tools and Assistance

Obtain support and guidance online or by phone:

- Unlimited access to support and helpful resources via the website
- Able to consult with a professional counselor via telephone
- Face-to-face counseling sessions with an IBH network provider — up to three sessions are free of charge
- Free initial 30-minute consultation with an attorney, with a 25% discount on attorney services thereafter

CONTACT:

Website: worklife.uprisehealth.com

Access Code: worklife

Phone: 800.386.7055

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WELLNESS

Blue365 through Highmark

Get rewarded for taking small steps every day that can add up to big changes in your health.

Blue365

Whether you want to lose weight and maximize your energy or manage stress and improve your mood, here's a great low-cost way to meet your goals. Blue365 provides discounts and membership opportunities allowing you to jumpstart your wellness journey.

Get great savings on all of the things you need for a healthy lifestyle with Blue365. Simply register at **blue365deals.com** for offers like 20% off at Reebok.com and \$29 monthly gym memberships that include 24/7 access to live and on-demand classes. It's exclusively for members, so make sure to have your member ID handy when you sign up.

Once you've registered at **blue365deals.com**, you'll receive weekly deals in your inbox.

Get offers from these brands and more:

fitness your way
by Tivity Health

Reebok

jenny
CRAIG

GARMIN

SKECHERS

TruHearing

KIND

QualSight
LASIK



This is a brief summary only. Refer to your plan document for complete details. If any discrepancies exist between the above and the plan document, the plan document will prevail.

FLEXIBLE SPENDING ACCOUNTS

Flex Facts



Healthcare Spending Account

This account will reimburse you with pre-tax dollars for healthcare expenses not reimbursed under your medical plan. In general, expenses incurred to treat a medical condition or to alleviate pain are eligible for reimbursement. **The annual contribution maximum for the medical spending account is \$3,050 per year.** When choosing your annual election amount, please keep in mind the rollover provision for 2023/2024 is \$610. The amount you elect for the year is deducted on a pre-tax basis for this purpose (deductions are made in equal increments over the course of the year). There is a **\$300 minimum** contribution that needs to be made per year.

Some examples of eligible expenses are:

- Office visit and prescription copays
- Dental expenses, including orthodontia payments
- Eye Exams and Materials, Laser Eye Surgery
- Certain over-the-counter items i.e.: contact lens solutions, band aids
- Over-the-counter (OTC) medications

Dependent Care Spending Account

This account will reimburse you with pre-tax dollars for daycare expenses for your children and other qualifying dependents so that you and your spouse may go to work or school. Up to **\$5,000** may be set aside on a pre-tax basis (or **\$2,500** if you are married and file separate returns). Eligible Dependents include children under age 13 and children or other dependents of any age who are physically or mentally unable to care for themselves and who qualify as dependents on your federal tax return. There is a **\$300 minimum** contribution that needs to be made per year.

Eligible expenses include:

- Daycare, including nursery school or preschool; Before and after school programs
- Adult daycare
- Summer day camp

Debit Cards

You will receive a debit card that can be used to pay for eligible expenses. However, if a purchase amount does not match a copay amount, you will be asked to substantiate a claim. If you do not respond to the request, your debit card will be deactivated. **You can also submit a paper claim for reimbursement and have the amount deposited into your checking or savings account.**

Important note for current FSA participants: King's College continues to include the rollover provision allowing up to \$570 of unused Medical FSA funds from 2022/2023 to rollover into their 2023/2024 account with no restriction for accessing those funds in 2023/2024. Please note: your rollover funds will be available on your Flex Facts debit card as of 7/1/2023.

Run Out Claims: Employees have 90 days after the end of the plan year to submit for expenses incurred in 2022/2023.

To check your balance, visit www.flexfacts.com, call 877.94.FACTS (32287), or download the mobile app.

RETIREMENT BENEFITS

TIAA



The Retirement Benefits at King's College are provided by TIAA. If you have questions, please contact TIAA at **800.842.2252**.

A summary of this valuable benefit is as follows:

- New employees may begin participating the first of the month following date of hire. However, there is a one year waiting period for eligibility for the employer contribution.
- Once eligibility begins, participants are fully vested.
- For new hires that have a current active account, where contributions were made within the past 12 month period, the one year waiting period to receive the employer contribution is waived.
- Mandatory enrolled in the plan is 2 years or age 30, whichever comes later.
- The ability to open a Roth 403B is now available to all eligible employees.
- Changes to your contributions can be made at any time by contacting the Human Resources office.
- The IRS allowable maximum contribution for 2023 is \$22,500.

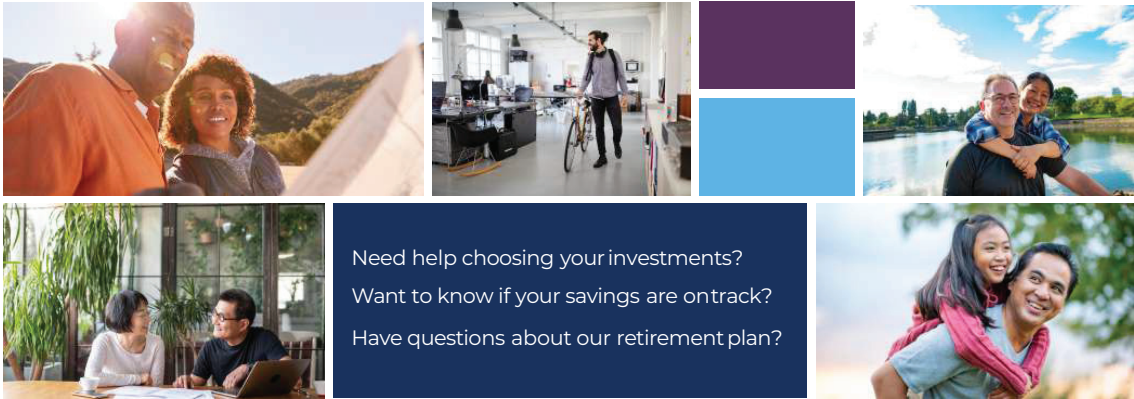


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RETIREMENT BENEFITS

CAPTRUST

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- Construct your **Retirement Blueprint®**

CAPTRUST is available to provide you with individual, unbiased investment advice, and to assist you with your Retirement Plan investment decisions. This service is available at no additional cost as part of your Retirement Plan retirement benefits.



Scan here to learn more about
the Retirement Blueprint



CAPTRUST

Call **800.967.9948** or visit www.captrustadvice.com

VOLUNTARY BENEFITS

Colonial Life



If you have questions about any of the following plan options or if you would like to obtain pricing, please contact Bob Roth at Colonial Life at **302.235.3088**.

ACCIDENT - PAID BY EMPLOYEE

| | |
|--------------------|--|
| What It Does | Covers the extra expenses associated with an accidental injury—including deductibles, copays and coinsurance. |
| How It Works | The covered individual receives a pre-defined, lump-sum benefit paid directly to the employee if a covered accident occurs, regardless of actual costs incurred. |
| Coverage Options | Coverage is available to employees, as well as your spouse and children. |
| Guaranteed Issue | All coverage is guaranteed issue. |
| Covered Conditions | Benefits paid according to a schedule of benefits for injuries including fractures, burns, lacerations, tendon/ligament tears, dental emergencies, amputations, emergency room, hospitalization and intensive care, etc. |

CRITICAL ILLNESS - PAID BY EMPLOYEE

| | |
|-------------------------|--|
| What It Does | Manages the financial impact of a serious illness or event, like stroke or a heart attack — so employees can focus on getting well. |
| How It Works | Employees receive a lump sum payment based on your chosen coverage amount, once diagnosed with a covered condition. |
| Coverage Amount | Employee — \$5,000 to \$50,000; \$1,000 increments; Spouse — 50% of employee coverage amount; Child — 10% of employee coverage amount |
| Guaranteed Issue | If you did not elect coverage when first eligible, medical questions will be required. If you are newly eligible to this benefit, medical questions will not be required for up to \$10,000. |
| Covered Conditions | Heart attack (Myocardial Infarction), Stroke, End Stage Renal (Kidney) Failure, Major Organ Failure, Coronary Artery Disease. Includes a Health screening benefit (\$50 per covered person, per calendar year) |
| Pre-Existing Limitation | 12/12 — A benefit may not be paid if you sought medical advice, or were treated for a condition, in the 12 months prior to your effective date of coverage, and which the date of diagnosis occurs in the first 12 months of the plan. |

CANCER - PAID BY EMPLOYEE

| | |
|-------------------------|---|
| What It Does | Covers the extra expenses associated with cancer screening and cancer treatment. |
| How It Works | The covered individual is provided benefits to help pay for the indirect costs associated with cancer. |
| Coverage Options | Coverage is available to employees, as well as your spouse and children. |
| Covered Conditions | Benefits are paid out according to a schedule of benefits for hospitalization and specified outpatient related services. |
| Pre-Existing Limitation | 12 Month Look Back — A benefit may not be paid if you sought medical advice, or were treated for a condition in the 12 months prior to your effective date of coverage. |

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Provided by Creative Benefits, Inc.

31 North Gates Avenue | Kingston, PA | 18704

Toll Free: 866.306.0200

www.creativebenefitsinc.com
