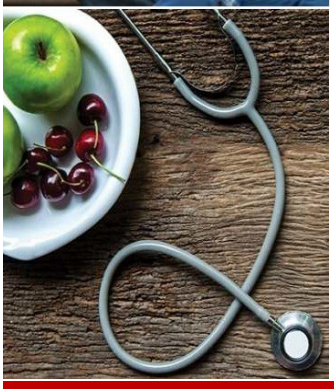


Benefits Guide

2024 Plan Year

CONTACT INFORMATION

Benefit	Carrier	Phone Number	Email or Website
Medical	ClaimDOC (for RBP Plans)	888.330.7295	Portal.claim-doc.com
Medical	UMR (for PPO Plan)	800.826.9781	www.umr.com
Pharmacy	Optum (all plans)	877.559.2955	https://www.optum.com/
Telemedicine	Teladoc (all medical plans)	800-362-2667	www.Teladoc.com (You must register first to access)
Health Savings and Flexible Savings Account	HealthEquity	HSA: 866.346.5800 FSA: 877.924.3967	https://my.healthequity.com/
Dental	Guardian Grp #568409	888.600.1600	www.guardianlife.com Network: Dentiguard PPO
Vision	Guardian Grp #568409	800.541.7846	www.guardianlife.com Network: Davis Vision
Life and Disability	Guardian Grp #568409	888.600.1600	www.guardianlife.com
Accident, Cancer and Hospital	Guardian Grp #568409	800.325.4368	www.guardianlife.com
Legal & Identity Theft	LegalShield	800.654.7757	www.legalshield.com
Medicare	Donny Cook	863.660.9515	dc@myadvocateagent.com
Employee Assistance Program (EAP)	Guardian (perk)	800.363.7055	https://worklife.uprisehealth.com/ Access Code: worklife
Will Prep	Guardian (perk)	877.433.6789	https://worklife.uprisehealth.com/ Access Code: worklife
HRIS/Payroll	UKG		https://ew44.ultipro.com/
COBRA	Health Equity	800.526.2720	https://my.healthequity.com/

Questions? Contact:

Diane Marki, Human Resources
dlmarki@seu.edu

OR

USI Benefit Resource Center
BRCsouth@usi.com
855-874-0835

INTRODUCTION

We at Southeastern University strive to provide you with a comprehensive employee benefits program as part of your overall compensation package.

We put together this guide to help you understand your benefits and to help you get the most out of them. We encourage you to review it thoroughly so you can identify which offerings are best for you and your family.

If you have questions about your benefits, reach out to Human Resources or use the contact information included in this guide to get the answers you need.

What Benefits does Southeastern University offer?

Southeastern University offers a variety of benefits. Choose any combination of benefits for you and your eligible dependents from the list below:

- Medical
- Dental
- Vision
- Voluntary Term Life
- Voluntary Short-Term Disability
- Accident
- Cancer
- Hospitalization
- Legal and Identity Theft

Southeastern University provides the following benefits at no cost to you:

- Teladoc (Telemedicine)
- Basic Life and AD&D
- Long-Term Disability
- Employee Assistance Program (EAP)

The information in this Benefits Summary is presented for illustrative purposes and is based on information provided by the employer. The text contained in this Summary was taken from various summary plan descriptions and benefit information. While every effort was taken to accurately report your benefits, discrepancies or errors are always possible. In case of discrepancy between the Benefits Summary and the actual plan documents, the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about this summary, contact Human Resources.

Eligibility

Who is eligible?

All regular full-time employees working 30 or more hours per week are eligible for benefits.

You may also enroll your eligible dependents, including:

- Legal spouse
- Children and step-children (to age 26, or age 30, as permitted by state law, as long as they meet the corresponding requirements for each plan)

Note: Proof of dependent eligibility is required and may be requested when you first enroll and/or if you change coverage mid-year due to a qualifying event.

When Can I Enroll?

- During new hire eligibility period
- During the annual enrollment period
- Within 30 days of a qualifying event

Note: If you do not enroll at one of the above times, you must wait for the next annual open enrollment period.

What is a Qualifying Event?

- Marriage
- Divorce or legal separation
- Birth or adoption of an eligible child
- Death of spouse or covered child
- Change in a spouse's work status that affects your benefits
- Change in your child's eligibility for benefits
- Receipt of Qualified Medical Child Support Order

When do my Benefits Start?

As a new full-time employee, your medical benefits become effective on your date of hire.

All other benefits will be effective on the first of the month following your date of hire. During annual open enrollment, benefit changes are effective on January 1, except for changes that require Evidence of Insurability approval (i.e., Voluntary Life and Short-Term Disability).

Note: all new hire elections must be submitted within 30 days of your hire date.

When Will You Start Taking Deductions from my Paycheck?

Deductions will begin the first paycheck in which your benefits become effective.

When Will My Coverage End?

For medical, dental, vision, accident, cancer, LegalShield, and hospital indemnity, coverage will stop on the last day of the month in which employment with SEU ends. All other benefits end on the last day of employment.

Why are some benefits deducted pre-tax?

Southeastern University has an IRS Section-125 plan. That means certain eligible benefit contributions for medical, dental, vision, accident, cancer, hospital indemnity, HSA and FSA are deducted from your paycheck before tax. This lowers the amount of your taxable pay which saves you money.

Other benefit contributions for Voluntary Life, Short-Term Disability, and LegalShield contributions are taken post-tax.

You must notify Human Resources within 30 days of a family status change/qualifying event or wait until the next annual enrollment period to make benefit changes.

MAKING YOUR SELECTION

There are limited opportunities to enroll and/or make changes to your benefit elections. Make your selections carefully! The choices you make now will be effective through the end of the plan year, as long as you remain eligible. (Meaning, no changes until open enrollment for the following year, unless you have a life or qualifying event.)

When you're first hired

You are eligible for medical benefits on the first day of full-time employment and all other benefits on the first day of the following month.

No paper forms to complete! You will make your elections in the UKG online portal by the due date specified by Human Resources (also to decline coverage in benefits).

Please have your spouse and/or children's social security numbers and dates of birth handy when enrolling in the UKG site. (They must be listed in UKG to be covered/enrolled in any plan.)

Once registered, keep your Username and Password. You will need it each year for Open Enrollment.

At Open Enrollment

Open Enrollment is your annual opportunity to enroll or make changes to your elections. Benefits selected during Open Enrollment are effective annually each January 1st unless Evidence of Insurability (EOI) is required.

No paper forms to complete! You will make your Open Enrollment elections (or decline coverage) in the UKG portal by the due date specified by Human Resources.

If you registered as a new employee, simply log in with the same Username and Password. Be sure to keep your Username and Password, you will need it each year for Open Enrollment.

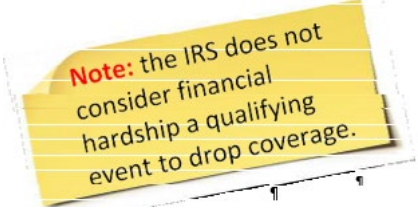
If you have a life event

Some life events allow you to change your coverage during the year.

If you experience a life event, you have 30 days from the date of the event to request changes and provide any required documentation. Some IRS-approved qualifying events are:

- Birth or adoption
- Marriage or Divorce
- Change in employment status or change in coverage under another employer-sponsored plan
- Loss or start of eligibility under Medicare or Medicaid

Log in to the UKG portal to submit your change request following a life event. These requests are subject to verification and approval.



Medical Plan Comparison

NEW for 2024: Southeastern University offers a choice of 3 medical plans: 2 plans are through ClaimDOC/HealthScope (RBP/Reference Based Pricing plans) and a PPO plan through UMR (United Healthcare network). The chart below provides a brief summary of some common services. **IMPORTANT: If you are considering the RBP plans, PLEASE REVIEW THE CARRIER INFORMATION, as this is a unique way to access medical care**).

Summary of Benefits	HSA Plan	Premium Plan	PPO Plan
Plan Coverage	**RBP Open Access (no network)**	**RBP Open Access (no network)**	**UHC Open Access Choice Plus Network**
Administrator	**HealthScope**		**UMR**
Member & Provider Services	**ClaimDOC**		**UMR**
Deductible (DED):	*Individual / Family (Non-embedded DED)* *$2,000 / $4,000*	*Individual / Family (Embedded DED)* *$500 / $1,000*	*Individual / Family (Embedded DED)* *$2,000 / $4,000*
Co-Insurance (COIN) after DED:	You'll Pay: 20% COIN	You'll Pay: 20% COIN	You'll Pay: 20% COIN
Out-of-Pocket Maximum = Copays+DED+COIN+RX	Individual / Family $3,250 / $6,500	Individual / Family $3,000 / $6,000	Individual / Family $5,000 / $10,000
Office Visits	PCP/ Specialist: 20% after DED	PCP: $0 copay; Specialist $40 copay	PCP: $40 copay; Specialist $80 copay
Prescription Drugs: Mail Order Copay (90 days)	Tier 1/2/3 After DED: $10/$35/$60 2.5x copay	Tier 1/2/3 $10/$50/$100 2.5x copay	Tier 1/2/3 $20/$50/$100 2.5x Copay
Specialty Drugs	After DED: $60 copay	$200 copay	20% to $250
Emergency Room (ER) and Urgent Care (UC)	ER & UC: 20% after DED	ER: $350 copay UC: $75 copay	ER: $500 copay UC: $200 copay
Lab / Xray /Major Diagnostics (In Independent Facility)	Lab/Xray/Complex: 20% after DED	LAB=$0; X-Ray=$50, Complex= 20% after DED	LAB=$0; X-Ray=$50, Complex= 20% after DED
Physician Fees: ER & Hospital	20% after DED	20% after DED	20% after DED
In & Out Patient Hospital & Services	20% after DED	20% after DED	20% after DED
Other:	N/A	N/A	Out of Network: DED: $6,000 / $12,000 COIN: 50% after DED OOPM: $12,000 / $24,000

Semi-Monthly (24) Payroll Deductions

Medical	HSA Plan	Premium Plan	PPO Plan
EE Only	$12.60	$49.99	$142.25
EE + Spouse	$257.11	$398.93	$536.39
EE + Child(ren)	$202.70	$365.68	$523.45
EE + Family	$477.44	$817.30	$970.99

Reference Based Pricing (RBP) FAQ

ClaimDOC
Fair Payment Solutions for Health Plans

Reference Based Pricing (or RBP) is a unique way to access medical care that can lower costs for you and SEU. The **HSA and Premium RBP plans** come with LOWER copays, deductibles, out of pocket costs and/or payroll deductions.

Why Choose the HSA or Premium RBP Plan?

- You have the freedom to choose your healthcare providers, there are no out-of-network penalties or benefit reductions!
- ClaimDOC's claim review and audit program determines the fair and reasonable costs for the medical services you receive.

How does using an RBP Plan work? It's SIMPLE! Call the ClaimDOC Member Advocate team and nominate (i.e. advise) which provider or facility you are using prior to having a healthcare service (surgery, treatment, labwork or test, office visit, etc). This process is called "PAVE the WAY."

The Member Advocate becomes your liaison, calls the provider directly and negotiates upfront with your doctor, facility or hospital for the best price PRIOR to you having the service done.

As long as your provider agrees to partner and submit your medical claims, you are only responsible for the patient responsibility on your Explanation of Benefits (EOB) that you receive from HealthScope Benefits.

Good news? You'll only need to nominate each provider or facility you use the initial (first)time. For visits to the provider after, they'll have your information on file and know where to submit claims to (HealthScope Benefits).

Next Steps = IMPORTANT if enrolling in HSA or Premium Plan (Keep this handy, see additional information in UKG!)

1) First, nominate your Provider (called "Pave the Way") via online, email or mobile app

- ❑ Submit your form online: portal.claim-doc.com/guest
  - ❑ PIN: SE33801
  - ❑ Email your form to: membersupport@claim-doc.com
- ❑ Download the ClaimDOC Mobile App
- ❑ **Give us a call, speak to a ClaimDOC Member Advocate at 888.330.7295**

2) When you see your Provider:

- ❑ Present your ID card to the Front Desk representative
- ❑ The name of your medical plan is called the "Southeastern University Medical Plan"
- ❑ Your eligibility and benefits can be verified by calling HealthScope Benefits
- ❑ Your Provider then submits your claim to the HealthScope claims address or EDI Payer ID (located on the back of your card)
- ❑ If your Provider has questions or doesn't recognize your health plan, have the provider call **ClaimDOC at 1-888-330-7295**

3) When you receive your bill from the Provider:

- ❑ Review your provider bill and your Explanation of Benefits (EOB). The amounts billed should match…**you only pay the amount shown on the EOB** to your Provider
- ❑ In the rare event that the amounts don't match (and it appears you are being billed a higher amount), call ClaimDOC as soon as possible (888-330-7295 or submit to balancebills@claim-doc.com)
- ❑ ClaimDOC will call the Provider to dispute the charges on your behalf. **YOU ARE NOT RESPONSIBLE FOR PAYING AMOUNTS OVER THE EOB** (called 'balance billing.')

PPO Plan (UMR/United Network)

In addition to the ClaimDOC RBP plans, a traditional PPO plan will be offered thru UMR, using the United Healthcare Choice Plus network.

Prior to the 1/1/24 effective date, you can check the UMR/United Healthcare network to confirm that your doctor, facility or hospital is in-network:

Click on:

1. www.uhc.com
2. Find a doctor
3. Search as guest
4. Medical Directory
5. Employer Plan
6. Shopping around
7. "Choice Plus"
8. Enter zip code
9. Determine what kind of provider you are searching for
10. Enter distance to search

Note: Some services and/or medications may need pre-authorization or approval prior to a service or medication being filled.

Member Services: 800-826-9781

Member Portal (registration on 1/1/24 or after: www.umr.com

Pharmacy (Optum thru UMR): 877-559-2955

Additional Program (All Plans)

Ongoing Condition CARE:

Expert resources and one-on-one support to help those with one or more of the following conditions:

-ALS, Multiple Sclerosis, Myasthenia Gravis, Rheumatoid Arthritis
-Hypertension, heart failure, CAD
-Asthma, COPD
-Depression, anxiety (co-morbidity)
-HIV, Hep C, Sickle Cell Anemia
-Ulcerative Colitis, Crohn's Disease
-Cancer: breast, prostate, colorectal, lung
-Diabetes (types 1 and 2)
-Chronic Kidney Disease (CKD)

UMR CARE nurses can help you reduce your need for medications, lower your long-term health risks and avoid flare-ups that lead to ER visits.

Members who participate in this program receive:

- Resources to help you better understand your condition, education on alternative therapies outside of opioids or surgery and unhealthy habits that might be holding you back.
- One-on-one calls with a registered nurse who can motivate and guide you in taking actions to control your symptoms and improve your overall health
- Support and assistance to reduce or eliminate the need for medications

To get started:

Sign in to **umr.com** and from the **Health center**, select **Ongoing Conditions** and then select Enroll Now.

Call us toll-free at **866-575-2540**

Pharmacy Coverage and Savings

Optum Rx®

Pharmacy coverage is offered as a part of the medical plans under OptumRx through In-Network pharmacies only. Your copay is determined by the level or tier in which the drug is classified. Tiers, what drugs are covered and more information can be found by accessing the current drug list (formulary) at umr.com.

Check the Drug List Frequently

Check the Optum drug list (called "formulary list) frequently. The Drug List can change throughout the year but is posted each January and July. Changes to drug list or copay "can" happen during the year when:

- ❑ An RX becomes "over the counter,"
- ❑ If/when a generic becomes available or
- ❑ If an RX is excluded from the RX list entirely

Step Therapy, Pre-Authorization and Quantity Limitations

Some drugs have step therapy, quantity limitations or require pre-authorization…your doctor may need to contact Optum to submit info and/or records on your medical necessity prior to a prescription being filled.

If your prescription is not automatically filled, you'll receive communication from the pharmacy, Optum or your doctor indicating that additional steps are needed.

Pharmacy Savings

Use generics, when possible, for lower costs out of pocket. If a brand or non-formulary drug is required, always ask your doctor to write "DAW" (dispense as written) on the prescription. By writing "DAW" (dispense as written) or "medically necessary" on your brand or non-formulary drug prescription, it won't be substituted with a generic version at the pharmacy.

Did you know that you can obtain prescription drugs at local retailers at a reduced cost, and sometimes even free?

- Have your generic drugs filled at Walmart ($4 each) or certain medications at Publix for $7.50 (90 days)
- If it's a new prescription, ask your doctor for samples (especially if the RX is brand or non-formulary tiers)! Remember, you don't get a refund if the RX doesn't work for you.

Other Ways to Save:

- Compare the cost of prescriptions at **www.goodrx.com**.
- Check out Amazon and CostPlusRX for lower cost prescriptions
- Drug manufacturers' websites sometimes offer discount cards or savings programs on brand name drugs.
- **Remember, in order to receive the discounted price, you cannot use your insurance card!**

Teladoc (Included in medical plans)

Important: If you had registered for HealthiestYou or Teladoc prior to 1/1/2024, you must choose a different user name, but can continue to use the same password.

Teladoc is the on-demand healthcare solution that gives you access to medical care 24/7 by phone, online video or mobile app. Use Teladoc for medical advice and care when:

- ✓ **Your primary care doctor is not open.**
- ✓ **You are at home, traveling or do not want to take time off work to see a doctor.**
- ✓ **You need a prescription or refills.**

$0 Copay on the Premium and PPO Plans(PCP or General Medicine) per consult

Less than going to ER, or Urgent Care!

By phone

Just call **1.800.362.2667**

Online

Simply request a video consultation online at **www.teladoc.com**.

On the go

You can download the Teladoc mobile app by visiting the **App Store** or **Google Play**.

Common Conditions Treated			
Allergies	Headaches/migraines	Sinus infections	Urinary tract infections
Bronchitis	Eye/ear infections	Stomachache/diarrhea	Cold/flu

Highly qualified, experienced doctors

When you use Teladoc, your medical questions will be answered by a highly qualified doctor. Teladoc doctors are:

- **Experienced**—with an average of over 10–15 years in practice.
- **Progressive**—using the latest technology to provide excellent care.
- U.S. **board certified** and **state licensed**.
- **Specially trained** in telemedicine.

Benefits of Teladoc

- Saves time and money
- Quicker recovery from illness
- Convenient prescriptions
- Choice of consultation method
- Great health means peace of mind

TELADOC.

Contact a Teladoc physician at 1.800.362.2667, or by visiting www.teladoc.com

Health Savings Accounts (HSA)

HealthEquity WageWorks

NEW VENDOR FOR 2024: SEU will move to HealthEquity for HSA accounts. (Accounts will no longer be administered by Cigna for 2024.)

To contribute and receive the SEU contribution, you must approve/authorize the transfer of your account/funds to HealthEquity for 2024. Should you not transfer your account to HealthEquity, the account is no longer with Cigna and is considered a 'free agent,' where fees may apply.

See UKG for further details/next steps on the process to transfer to HealthEquity. You will receive a NEW card from HealthEquity for 2024. UKG has additional info regarding the authorization form required to transfer the funds on your behalf.

Why enroll in an HSA?

A health savings account (HSA) is your personal account funded to help you save for future medical expenses including the deductible, coinsurance, and even vision and dental expenses! **You must be enrolled in the HSA health plan to be eligible**. There are certain advantages to putting money into these accounts, including favorable tax treatment and the ability to roll unused funds over from year to year. And…in the event of separation of employment, you may continue to use this account for qualifying expenses.

Who Can Have an HSA?

An employee can create and contribute to an HSA provided that:

The employee has enrolled in a High Deductible Health Plan

- The employee is not covered under a spouse's non-High Deductible Health Plan.
- The employee is not enrolled in Medicare or Tricare
- The employee cannot be claimed as a dependent on someone else's tax return

HSA Contributions (SEU increased contribution to $41.67 semi-monthly into your HSA account)

In addition, you can make a contribution to your health savings account each year that you are eligible.

Contributions from all sources can be no more than the IRS limit of:

Employee-only coverage $4,150 in 2024
Family coverage: $7,750 in 2024

Note:

- Individuals ages 55 and older can also make additional "catch-up" contributions up to $1,000/year
- Contributions to the account must stop once you are enrolled in Medicare. However, you can keep the money in your account and use it to pay for medical expenses tax-free.

Can couples establish a "joint" account and both make contributions to the account, including "catch-up" contributions?

"Joint" HSA accounts are not permitted. Each spouse should consider establishing an account in their own name. This allows you both to make catch-up contributions when each spouse is 55 or older. The maximum for both accounts combined would be the family maximum plus any "catch-up" contribution permitted.

What expenses are eligible for reimbursement from my HSA?

HSA dollars may be used for qualified medical expenses incurred by the account holder and his or her spouse and dependents. Qualified medical expenses are outlined within IRS Section 213(d). In summary the IRS Section 213(d) states that "*the expense has to be primarily for the prevention or alleviation of a physical or mental defect or illness*".

See this link for an IRS list:
https://www.irs.gov/pub/irs-pdf/p502.pdf

What expenses are NOT eligible for reimbursement from my HSA?

The following expenses may not be reimbursed from an HSA:

- Premiums for Medicare supplemental policies
- Expenses covered by another insurance plan
- Expenses incurred prior to the date the HSA was established
- Over-the-counter drugs purchased without a prescription (except insulin)

Can I use my HSA dollars for non-eligible expenses?

Money withdrawn from an HSA account to reimburse non-eligible medical expenses is taxable income to the account holder and subject to a 20 percent tax penalty - unless over age 65, disabled or upon death of the account holder

HSA Plan Usage-Frequently Asked Questions

When can I start using my HSA dollars?
You can use your HSA dollars immediately following your HSA account activation and once contributions have been made. You cannot pay an amount greater than your current balance at the time of payment.

How do I pay my physician or network facility at time of service with my HSA dollars?
You may request that the network provider submit your claim to your health plan. You should make sure that your provider has your most up-to-date insurance information. Once the medical claim has been processed, if applicable, out-of-pocket expenses will be billed. At this time, you may choose to use your HSA Debit card to pay for any out-of-pocket expenses, or you may choose to pay with your own money and receive reimbursement at a later date. You should always ask that your medical claim be submitted to the health plan before you seek reimbursement from your HSA. This procedure will ensure that provider discounts are applied. Also, remember to keep all medical receipts and Explanation of Benefits (EOBs) for tax purposes.

What happens when my HSA funds run out?
You will be financially responsible for any eligible medical expenses that fall within the coverage gap. Once you have used all funds in your HSA account, you can contribute additional funds, up to the IRS maximum or pay out of pocket for those expenses.

What if I have HSA dollars left in my account at year-end?
The money is yours to keep. There is NO "use it or lose it" provision! It will continue to be available for you and your health care costs next year.

What happens to my HSA dollars if I leave Southeastern University?
The funds are yours to keep. You may elect one of the following options:

- Leave your funds in your current HSA account
- Transfer your funds to an HSA with your new employer
- Transfer your funds to another qualifying account within 60 days

Can I use the money in my account to pay for my dependents' medical expenses?
You can use the money in your account to pay for medical expenses for yourself, your spouse or your dependent children. You can pay for the unreimbursed expenses of your spouse and dependent children even if they are not covered by your HDHP.

Can I shift my IRA funds to my HSA?
Owners of individual retirement accounts that are enrolled in a high-deductible health plan can shift IRA funds to an HSA without facing a tax penalty. The IRS allows a one-time transfer that does not exceed your maximum HSA contribution limit.

Can I borrow against the money in my HSA?
No. You may not borrow against it or pledge the funds in it. For more information on prohibited activities see Section 4975 of the Internal Revenue Code.

Are the premiums from my paycheck contributed to my HSA Account?
No, just like with other plans there is a monthly premium which must be paid to have the plan. Contributions made to your HSA account are in addition to any premium paid for the plan.

Flexible Spending Account (FSA)

HealthEquity WageWorks

NEW VENDOR FOR 2024: SEU will move to HealthEquity for FSA accounts. (Accounts will no longer be administered by Cigna for 2024 elections.). You will receive a new FSA card for your 2024 election.

If you have a balance from 2023, this amount can be used from 1/1/24 to 3/15/24 (called the 'grace period'). Cigna will administer the 2023 grace period balance to 3/31/24. If not used by 3/15/24, any amounts are forfeited.

What is a Flexible Spending Account?

A Medical flexible spending account (FSA) is your personal account funded with your pre-tax dollars to help you save for future healthcare expenses including the copays, deductibles, coinsurance and even vision and dental expenses.

The Dependent Care FSA is for dependent care services (children under the age of 13) who live with or are dependent on you . Care must be needed so that you and spouse can go to work. Care must be given during normal business working hours and cannot be provided by another of your dependents.

Who is eligible for an FSA?

- Medical FSA: Anyone not enrolled in the HSA (HDHP)
- Dependent Care FSA: Anyone with eligible dependent care expenses

How does the FSA work?

As an employee, you agree to set aside a portion of your pre-tax salary in an account, that money is deducted from your paycheck over the course of the year.

The amount you contribute to the FSA is not subject to Social Security (FICA), federal, state, or local income taxes — effectively adjusting your annual taxable salary.

The taxes you pay each paycheck and collectively each plan year can be reduced significantly, depending on your tax bracket., As a result of the personal tax savings you realize, your spendable income will increase.

Is the FSA Program Right for Me?

It's easy to determine if an FSA will save you money. Prior to enrollment, determine your annual election amount by estimating the expenses that you know will occur during the year.

These include out-of-pocket expenses for yourself, and anyone claimed as a dependent on your taxes. If you had $100 or more in recurring or predictable expenses, the accounts could help you stretch your dollars.

Estimated Annual Expenses & Tax Savings	
Total Medical+Vision+Dental Expenses	$
Total Dependent Care Expenses	+
Total Expenses	$
Annual Tax Savings (see below)	$
Number of Pay Periods	/
Estimated Savings Amount Per Paycheck	$

Pre-Tax Savings Estimate Table	
Annual Household Earnings	**Estimated Tax Rate**
< $30,000	25%
$30,000—$40,000	29%
$40,000—$70,000	31%
> $70,000	33%
** Based on Social Security, federal, and state income taxes. Rates are estimates based on national averages and may not reflect your actual tax rate.*	

2024 Contribution Limits (PENDING); 2023 shown:

- $3,050 for Medical FSA
- $2,500 for Dependent FSA if filing separately (or $5,000 if married and filing jointly)

IMPORTANT:

1. If you have unused funds at the end of the 2024 plan year (12/31), you have an additional 2 ½ months (to March 15th) of the following plan year to use remaining funds. This is known as a "grace period"
2. At the end of the grace period, if funds are not used from the 2024 plan year, they are forfeited. This is known as "use it or lose it."
3. **You must enroll/re-enroll each year to participate.**
4. **You must still retain all receipts as you may be asked to substantiate any expenses**

Dental Insurance

Guardian

Southeastern University offers a two PPO plans through Guardian using the DentiGuard Preferred network. Both plans allow you to use in-network or out-of-network benefits. Please review the benefit summary/certificate of coverage for further details.

Dental PPO		Low Plan, You'll Pay:	High Plan, You'll Pay:
Preventive Services: Includes exams & cleanings (2x/12mo), xrays, flouride treatment, sealants			
	In Network	Covered @ 100%	Covered @100%
	Out of Network	100%*	100%*
Basic Services: Includes fillings, perio care & surgery, extractions, root canals, repair of crowns, bridges & dentures			
	In Network	50% after DED	20% after DED
	Out of Network	50% after DED*	20% after DED*
Major Services: Includes crowns, bridges, dentures, inlays/onlays, veneers and anesthesia (Note Low Plan revision below)			
	In Network	75% after DED	50% after DED
	Out of Network	75% after DED*	50% after DED*
Ortho Services:			**Child(ren) to Age 19**
	In Network	No Benefit	50% (to $1500 lifetime max)
	Out of Network	No Benefit	50%* (to $1500 lifetime max)
DEDUCTIBLE (DED)		Individual/Family	Individual/Family
	In Network	$75/$225	$50/$150
	Out of Network	$75/$225	$50/$150
MAXIMUM ANNUAL BENEFIT (Carrier Pays):			
	In Network	$1,000	**NEW: $1,500**
	Out of Network	Same as above	Same as above
Wait Periods		NONE when first eligible or if added at open enrollment	

Semi-Monthly (24) Payroll Deductions				
Dental	**EE Only**	**EE+Spouse**	**EE+Child(ren)**	**EE+Family**
Low Plan	$12.17	$28.04	$26.93	$42.78
High Plan	$21.61	$49.74	$52.18	$81.15

*If **out-of-network dentists** are used, you will be responsible to pay the difference between Guardian's allowed amount and what the dentist may charge.

ROLLOVER Benefit: Both dental plans have the 'rollover' benefit included (it is member specific). If you have LESS than $500 in claims in the year, Guardian will add $350 to your annual benefit the following year if using an in-network dentist ($250 for out of network providers). Call Member Services or check your last 2022 EOB to see if you qualify for this benefit in 2023.

TIP: For services over $300 (like root canals, crowns and bridges), always ask your provider for a "pre-determination" to be done PRIOR to having the service(s) completed. Although it may mean another visit to the dentist, **it will give you an idea of what will be covered by the carrier and no surprises when you receive the bill**!

Vision Insurance

Guardian

Southeastern University offers a voluntary vision plan through Guardian using the Davis national network. This vision plan provides coverage both in and out of network, the chart below provides a brief overview. Check out the vison discount list for other copay discounts offered by Davis Vision to include lens options, extra glasses, sunglasses and Lasik surgery! Please review the benefit summary & certificate for further details.

Vision (Davis Network)	In-Network	Out-of-Network
Frequency		
Exam	Once every 12 months	
Lenses or contact lenses	Once every 12 months	
Frame	Once every 24 months	
Exams	$10 copay	$50 allowance
Lenses		
Single Vision	$0 copay	$48 allowance
Lined Bifocal	$0 copay	$67 allowance
Lined Trifocal	$0 copay	$86 allowance
Lenticular	$0 copay	$126 allowance
Progressive (Stand/Prem/Custom)	$50/$90/$140-$175	NA
Coating (Stand/Prem/Custom)	$35/$48/$60	NA
High Index Lenses	$55	NA
Plastic Photosensitive Lenses	$65	NA
Polarized Lenses	$75	NA
Contact Lenses (in lieu of frames/glasses)		
Medically Necessary	$15 copay	$210 allowance
Elective	$130 allowance	$105 allowance
Frames		
	Up to $130 after Copay 20% off the balance	$48 allowance

Semi-Monthly (24) payroll deductions	**EE Only**	**EE+Spouse**	**EE+Child(ren)**	**EE+Family**
Vision	$3.60	$6.05	$6.17	$9.75

Basic Life and AD&D

Southeastern University provides all full-time eligible employees an employer-paid Basic Life and AD&D benefit through Guardian. The chart below provides an overview. Please review the benefit summary/cert for further details.

	Basic Life and AD&D Insurance
BENEFIT OUTLINE:	
Employee Life Benefit	$50,000
Employee AD&D Benefit	$50,000
Age Reduction Schedule (Benefit terminates at retirement)	Initial benefit reduces to: 65% at age 65, 40% at age 70, 25% at age 75, and 15% at age 80
Wavier of Premium (if disabled)	If it is determined that you are totally disabled, your life insurance benefit will continue without payment of premium, subject to certain conditions. Should this policy change to another carrier and you are disabled, you'll need to continue the policy directly with Guardian for the life benefit to remain in place.
Living Care/Accelerated Benefit	75% of the amount of life insurance benefit is available to you if you are terminally ill, but not to exceed $10,000
Conversion	Yes

Will Prep Services

Will Prep Services offer support & guidance to help you properly prepare the documents necessary to secure your family's financial security.

This is an online service which includes planning documents, a resource library and access to professionals (for a small fee) to help with issues related to:

- Advanced Care Directives
- Financial Power of Attorney
- Wills and Living Wills
- Guardianship and Conservatorship
- Executors and Probate
- Healthcare Power of Attorney
- Trusts
- And more!

Contact:
worklife.uprisehealth.com
Access Code: worklife
or 877-433-6789

Voluntary Term Life Insurance

All full-time eligible employees working 30+ hours per week are offered the option to purchase term life insurance coverage through a Guardian group plan. Spouses and unmarried dependent children may be enrolled as long as the employee also elects coverage. Children can be covered up to age 26 (if FT student). The chart below provides an overview. Please review the benefit summary/cert for further details.

	Voluntary Life Insurance
BENEFIT OUTLINE:	
Employee Life	Increments of $10,000, max $300,000
Employee Guarantee Issue*	$200,000
Spouse Life	Increments of $5,000 up to 50% of employee election, max $150,000
Spouse Guarantee Issue*	$50,000
Child Life	Increments of $1000, max to $10,000
Child Guarantee Issue*	$10,000
Benefit Reduction Schedule	Initial benefit reduces to: 65% at Age 65; 40% at Age 70; 25% at age 75; 15% at age 80
Conversion	Yes. If your employment ends, you may convert this policy to an individual policy without evidence of insurability.
Portable	Yes. You'll need to contact Guardian within 30 days of termination to enroll in an individual policy and pay for your individual policy (directly with Guardian)

Guarantee Issue
When you first become eligible for benefits, you can elect up to the guarantee issue amounts shown without Evidence of Insurability (called EOI).

Open Enrollment = Incremental Guarantee Issue for Employees
Guardian offers an incremental guarantee issue at open enrollment each year. Employees may increase their current benefit up to $50k (without EOI), not to exceed the total guarantee issue amount of $200,000.

Amounts over Guarantee Issue
Benefit amounts over the guarantee issue above will require EOI. Guardian will approve or decline the amount based on medical information obtained on the EOI. **Important: Where EOI is required, your paycheck deductions for the EOI election will not be begin until notification from Guardian that the EOI benefit election is approved. Premium deductions begin on approval date and going forward.**

EMPLOYEE CONTRIBUTIONS
Rates vary based on age and the amount of coverage you elect. Your semi-monthly deduction will be shown in the UKG portal. (Note: spouse age is based on employee age).

Short Term Disability Insurance

Southeastern University offers all full-time eligible employees working 30+ hours per week the option to purchase voluntary Short Term Disability Insurance. In the event you become disabled from a non-work-related injury or sickness, disability benefits are provided by Guardian as a replacement source of income. Please review the benefit summary/cert for further details.

***Guaranteed Issue**
As with voluntary life insurance, the short-term disability also has **guaranteed approval** (no medical questionnaire/EOI to complete) **when you first become eligible to enroll in benefits** (after your waiting period).

Enrolling at a Later Date
If you enroll later than when you first become eligible for benefits, it is no longer considered guarantee issue and you will be required to complete a medical questionnaire (also known as an Evidence of Insurability (or EOI) form. Guardian reserves the right to decline coverage based on medical information obtained on the EOI.

Your bi-weekly paycheck deductions for the EOI election will not be begin until notification from Guardian that the EOI benefit election is approved. Premium deductions begin on approval date and going forward.

	Short Term Disability
BENEFIT OUTLINE:	
Employee Definition	All Eligible FT employees working 30+ hours/week
Benefit Percentage	60%
Minimum Weekly Benefit	$25
Maximum Weekly Benefit	$1,000
Elimination Period	30 days for both Accident & Sickness
Duration of Benefit	Up to 24 weeks (including elimination period)
Pre-Existing Condition Limitation	3 months lookback / 12 month wait period (If you received advice, treatment, were prescribed or on medication, tested or under care 3 months prior to the effective date: there is a 12 month wait period for that condition)

EMPLOYEE CONTRIBUTIONS
Rates vary based on your salary. Your semi-monthly payroll deductions will be shown in the UKG portal. To calculate your semi-monthly deduction, the rate formula is as follows:
(Note: if your salary is over $86,666.66, then note $86,666.66 as your salary below)

$_____Annual Salary / 52 x .60 = $_____Weekly Benefit Amount

$_____Weekly Benefit Amount /10 x .165 = $_____Semi-Monthly Premium

Examples

Annual Salary	**Premium/check**
$20,000	$3.81
$30,000	$5.71
$40,000	$7.62
$50,000	$9.52
$86,666.66	$16.50

Long Term Disability Insurance

Guardian

Southeastern University provides all full-time eligible employees working 30week a Long Term Disability benefit. In the event you become disabled from a non-work-related injury or sickness, disability benefits are provided by Guardian as a replacement source of income. Please review the benefit summary/cert for further details.

***Guaranteed Issue**
This benefit is **guaranteed approval** (no medical questionnaire/EOI to complete). You are enrolled in this benefit **when you first become eligible for benefits** (after your wait period).

	Long Term Disability
BENEFIT OUTLINE:	
Employee Definition	All Eligible FT employees working 30+ hours/week
Benefit Percentage	60%
Maximum Monthly Benefit	$6000
Definition of Disability	Loss of Duties and Earnings
Own Occupation Period	Own occupation: 24 months; After 2 years: any occupation (you will continue to receive benefits if you cannot work in any occupation based on training, experience and education)
Elimination Period	180 days
Duration of Benefit	Later of age 65 or SSNRA
Pre-Existing Condition Limitation	3 months lookback / 12 month wait period (If you received advice, treatment, were prescribed or on medication, tested or under care 3 months prior to your effective date: there is a 12 month wait period for that condition)

Accident, Hospital Indemnity & Cancer

Guardian

Accident Insurance

If you and your family are active, chances are, you're no stranger to a hospital emergency room. Even with medical insurance, a fall while bicycle riding or your child's sprained ankle at soccer practice can cost you a bundle in out-of-pocket expenses!

Are you financially prepared for all of the medical and non-medical costs of treatment and recovery from a serious injury? No matter what kind of medical coverage you have, you will have out-of-pocket costs that could really set you back financially.

Guardian pays you cash benefits based on your covered injuries, treatments and services. Payments go directly to you, and you can pay for other expenses, such as traveling to the hospital, childcare and lost income from missed work.

Hospital Indemnity

Hospital indemnity can cover some of the costs associated with a hospital stay, letting you focus on recovery.

Even with the medical coverage you have, you will also have out-of-pocket costs that could really set you back financially. Guardian pays you cash benefits when you or a family member are admitted to the hospital if sick or injured.

Payments go directly to you, and you can pay for deductibles, coinsurance and copays, also other expenses, such as traveling to the hospital, childcare and lost income from missed work.

Both HSA and Non-HSA Hospital Indemnity plans help protect your savings and pays you:

- Hospital & ICU admissions ($1500 per admission, max 2 per year per covered)
- Hospital ($100) & ICU ($200) per day, max 31 days per year per covered.

The Non-HSA plan also includes:

- Outpatient surgery ($750/$1500), max 1 day per year per covered
- Diagnostic tests: $250 per day, max 1 day per year, per covered

Cancer Insurance

Health care costs are on the rise. Even with medical insurance, you're still responsible for co-payments, deductibles and other out-of-pocket costs, so a serious illness like cancer could really set you back financially.

If you or a family member was diagnosed with cancer, could you handle the extra expenses?

Cancer helps protect your savings:

- Cancer Insurance supplements your medical plan— **no matter what type of other coverage you have**
- Cancer pays you cash benefits based on each eligible diagnosis and services you have during treatment
- The cash benefits are paid directly to you — you decide how to use them
- Cancer Screening Benefit – if you get an annual cancer screening, Guardian will pay out $50 per year, per covered individual
- 30 day benefit waiting period (when first diagnosed)
- Pre-existing limitation: 12-month look back, 12-month wait period

Semi-monthly (24) pp deductions	Accident Plan	Cancer Low Plan	Cancer High Plan
EE Only	$7.00	$5.06	$10.06
EE + SP	$11.83	$9.93	$19.73
EE + Child(ren)	$11.82	$6.03	$12.14
EE + Family	$16.66	$10.90	$21.80

Semi-Monthly (24) payroll deductions	Hospital Plan HSA Only	Hospital Plan Non-HSA
EE Only	$5.00	$15.29
EE + SP	$18.55	$29.94
EE + Child(ren)	$15.25	$24.56
EE + Family	$24.29	$39.21

Please review the benefit summaries for details and exclusions, it includes payable benefits to you and family members based on illness and/or conditions.

Employee Assistance Program (EAP)

Southeastern University provides an employer paid life EAP benefit through Guardian called Uprise Health for full-time benefit-eligible employees and their dependents. The summary below provides an overview.

Guardian · uprisehealth

We're Here to Help

- Emotional well-being
- Family and relationships
- Legal and financial matters
- Healthy lifestyles
- Work and life transitions

EAP Benefits

- Access to EAP professionals 24 hours a day, seven days a week
- Provides information and referral resources
- Service for employees and eligible dependents
- Robust network of licensed mental health professionals
- Three face-to-face sessions* with a counselor (per household per calendar year)
- Legal assistance and financial resources
  - Online will preparation
  - Legal library & online forms
  - Financial tools and resources
- Resources for:
  - Substance use and other addictions
  - Dependent and elder care resources
- Access to a library of educational articles, handouts and resources via *mutualofomaha.com/eap*

What to Expect

You can trust your EAP professional to assess your needs and handle your concerns in a confidential, respectful manner. Our goal is to collaborate with you and find solutions that are responsive to your needs.

Your EAP benefits are provided through your employer. There is ***no cost*** to you for utilizing EAP services. If additional services are needed, your EAP will help locate appropriate resources in your area.

Life's not always easy. Sometimes a personal or professional issue can get in the way of maintaining a healthy, productive life. Your Employee Assistance Program (EAP) can be the answer for you and your family.

An EAP Counselor is available 24/7:

Contact:

https://worklife.uprisehealth.com/

Access Code: worklife
Or 800-386-7055

Legal and Identity Theft Services

The LegalShield® Membership Includes:

- 24/7 legal access for covered situations
- Mobile App for easy access
- Unlimited Legal advice on personal legal issues
- Letters/calls made on your behalf
- Contracts/documents reviewed
- Preparation of wills/trusts
- Assistance with traffic violations
- Trial defense (if named defendant/respondent in a covered civil lawsuit)
- Speeding ticket Assistance
- IRS audit assistance
- Uncontested Divorce, Separation, Adoption or Name Change (90 days after enrollment)
- 25% Preferred Member Discount (Bankruptcy, criminal charges, DUI, personal injury, etc.

The IDShield Membership Includes:

- Social Media Monitoring
- Dedicated U.S. Licensed Private Investigators
- IDShield Plus Mobile App
- Full Service Restoration to pre-theft status
- $1 million fraud reimbursement
- Continuous Credit Monitoring with 3 credit bureaus
- Security Monitoring of SSN, credit cards, bank accounts, credit score tracking
- Consultation Services with 24/7 live support for covered emergencies
- $5 Million Service Guarantee. We'll do whatever it takes for as long as it takes to help recover and restore your identity

IDShield plans are available at individual or family rates. The family rate covers monitoring for the participant (employee), participant's spouse/partner and up to 10 dependent children under the age of 18. Consultation and restoration services are provided to dependent children age 18 to 26.

Semi-Monthly (24) Payroll Deduction	LegalShield	IDShield	Combined
Individual	$7.97	$4.47	$12.45
Family (up to 8 minors)	$7.97	$9.47	$15.45

The LegalShield plan covers the participant (employee), participant's spouse and dependent children under 26 years of age.

LegalShield®

Benefits Mobile App

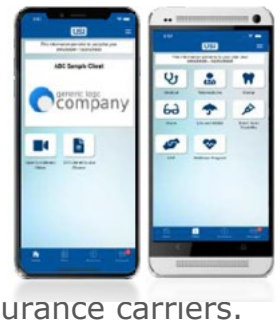
The USI Benefits mobile app (MyBenefits2Go) gives you on-the-go access to all the Southeastern University benefit and insurance plan details, HR contact information and more!

The mobile benefits app provides a quick and simple way for you and your enrolled dependents to access benefit summaries and other important information about our group plans. The app also offers the ability to take photos of ID cards to store on the phone, as well as a way to easily locate carrier and HR contact information—all in one place—24/7 and on the go. The MyBenefits2Go mobile app is free and available for iPhone and Android platforms. App benefits include:

- **Staying Organized**
  The app gives you access to benefit plan information and ID cards—all in one place.

- **Keeping Up-to-Date**
  The app automatically connects you with the most updated plan information.

- **Lightening Wallets**
  The app allows you to take and access images of your ID cards. Images are stored on the phone itself; no personal health information is transmitted or saved.



- **Getting In Touch**
  The app provides you with a single location to find contact information for the Human Resources team and the Benefit Resource Center, as well as insurance carriers.

Check Out the App
Download the mobile app to your smartphone. Scroll through the intro pages and, prompted, **enter the SEU code S49180** to see your plan information.

Call the Benefit Resource Center ("BRC"), We're Here To Help!

We speak insurance. Our Benefits Specialists can help you with:

- Deciding which plan is the best for you
- Benefit plan & policy questions
- Eligibility & claim problems with carriers
- Information about claim appeals & process
- Allowable family status election changes
- Transition of care when changing carriers
- Claim escalation, appeal & resolution
- Medicare basics with your employer plan
- Coordination of benefits
- Finding in-network providers
- Access to care issues
- Obtaining case management services
- Group disability claims
- Filing claims for out-of-network services

Benefit Resource Center

BRCSouth@usi.com | Toll Free: 855-874-0835

If Your Employment Ends with SEU

Should you leave SEU, please contact Human Resources as soon as possible **before your termination date** for an "Exit/Termination of Employment" package. Then:

1. Forms: Complete the necessary forms and information needed in the package: this includes verification of address **for w-2's, Cobra and 403(b) information kit.**

2. COBRA: If you and/or dependents are covered on a Southeastern University medical, dental, vision and/or FSA plans: you'll receive Cobra notice and election information from the Cobra Administrator (Wage Works) after your employment ends. Cobra information is sent to the employee home but is for employee, spouse and child(ren).

   Note that spouse and/or children can elect Cobra coverage independent from employee. For other coverage options, you can: a) check **www.healthcare.gov** to determine if you, and/or your family qualify for subsidies under the Health Insurance Marketplace in your state OR b) check www.ehealthinsurance.com for other plan quotes.

3. If you have group life or **supplemental life insurance** from Guardian, **you can 'port' or 'convert' coverage** to an individual plan. Information and forms to complete are available on the UKG intranet website.

   Note: Form and payment for the premium must be submitted to Guardian within 31 days of when your current life/supplemental life coverage ends.

4. 403(b): You may transfer, cash out or leave your 403(b) plan account with Southeastern University. You will receive information regarding the contact representative for your retirement account during your exit interview. Contact Human Resources to assist you with this process.