What is available to me?

What does this benefit cover?



What is my cost to participate in this plan?

INSURANCE BENEFITS

Health, Dental, Vision Plans: (Health is effective date of hire; Dental & Vision is effective first of the month following 30 days) Eligibility: Employees working 20+ hours per week

	The State Employees' Insurance Plans offer your choice of two plan options: Base Plan - \$1,800 individual/\$3,000 family	Medical Rates	(Monthly - Pi	·e-tax):				
	deductible and 80%/20% coinsurance (in-network) after							
	deductible is met (20% waived at UMMC providers including		Base Plan		Select	Plan		
	Merit Health Madison); RX - After calendar year deductible is				Horizon	Legacy		
	met: \$12 preferred generic copay, \$30 non-preferred generic							
1EDICAL & Rx INSURANCE,	copay, \$45 preferred copay, \$100 non-preferred copay, \$100	EE Only	\$0		\$41	\$20		
	specialty drug copay and\$75 individual deductible for certain		1	-				
ELEMEDICINE SERVICES	preventive medication.	FF + Ce e u e e	6425		¢525	6504		
CBS of MS	Select Plan - \$1,300 individual/\$2,600 family deductible (in- network) and 80%/20% coinsurance (in-network) after	EE + Spouse	\$425		\$525	\$504		
tate Employees' Health Insurance	deductible is met (20% waived at UMMC providers including			-				
	Merit Health Madison) \$25 PCP Office Visit Copay; RX-\$75	Family	\$648		\$748	\$727		
	prescription drug deductible then \$12 preferred generic copay,		4			¢100		
	\$30 non-preferred generic copay, \$45 preferred copay, \$100	EE + Child	\$110		\$211	\$190		
	non-preferred copya,\$100 specialty drug copay.	EE + Children	\$282		\$382	\$361		
	Telemedicine Services - \$10 visit not subject to annual deductible on Select Plan. \$49 visit until annual deductible is met							
	then \$10 on Base Plan.							
/ELLNESS/PREVENTIVE	Covered at 100% at a network provider and is not subject to annual	deductible. Cove	erage is based	on age and	gender. You	can find what	is covered at	
OVERAGE (Base or Select)	www.knowyourbenefits.dfa.ms.gov.							
	Preventive cleanings covered up to 100%. Calendar Year	Dental Rates (Monthly - Pre	e-tax):				
	Maximums:							
ENTAL BENEFITS	Low Plan - \$1,000, Network & Choice Plans - \$1,200. Lifetime			Low	<u>Network</u>	<u>Choice</u>		
lwavsCare	Orthodontic Maximum: \$1,000 Network & Choice Plans.	Employee Only		\$21.23	\$27.78	\$35.66		
	Network Plan requires participants to utilize a network provider.	Employee + 1 Family		\$40.91 \$71.90	\$53.57 \$94.21	\$68.69 \$120.79		
					Ş94.21	\$120.79		
	Annual eye exam covered by \$10 copay. \$25 lenses material	Vision Rates (N	/lonthly - Pre	-tax):				
ISION BENEFITS	(various lenses options available), frames every 24 months up to	Employee Only		\$7.60				
lwaysCare	\$150 retail allowance. Contact lenses every 12 months up to	Employee + 1		\$14.62				
	\$150 retail allowance.	Family		\$24.08				
ife and Disability Plans: (State Life is ef	fective date of hire; all others 30 days following DOH) Eligibility: Er	mployees worki	ng 20+ hours	per week				
	Desig Terms Life Demefit with 2 merupaking the state of the state							
TATE GROUP TERM LIFE AND	Basic Term Life Benefit up to 2x annual base salary (rounded to					UMMC pays half of the premium. The Employee's portion of the premium is \$.04		
	the highest \$1,000). An equal benefit amount of AD&D is	UMMC pays h	alf of the pren		mployee's p	ortion of the p	remium is \$.0	
AD&D INSURANCE		UMMC pays h	alf of the pren	nium. The E	mployee's p 10 incoverag		remium is \$.0	
AD&D INSURANCE	the highest \$1,000). An equal benefit amount of AD&D is included. \$30,000 minimum; \$100,000 maximum.	UMMC pays h	alf of the pren	nium. The E			remium is \$.0	
AD&D INSURANCE	the highest \$1,000). An equal benefit amount of AD&D is	UMMC pays h		nium. The E per \$1,00		e.	remium is \$.0	
AD&D INSURANCE Minnesota Life Insurance Company	the highest \$1,000). An equal benefit amount of AD&D is included. \$30,000 minimum; \$100,000 maximum.Employee - 1-6x annual base salary (rounded to the highest \$1,000), up to a maximum of \$600,000. Guarantee Issue of	UMMC pays h		nium. The E per \$1,00	0 incoverag	e.	remium is \$.0	
AD&D INSURANCE Minnesota Life Insurance Company UPPLEMENTAL TERM LIFE AND	the highest \$1,000). An equal benefit amount of AD&D is included. \$30,000 minimum; \$100,000 maximum.Employee - 1-6x annual base salary (rounded to the highest \$1,000), up to a maximum of \$600,000. Guarantee Issue of \$200,000.	UMMC pays h		nium. The E per \$1,00	0 incoverag	e.	remium is \$.0	
AD&D INSURANCE Minnesota Life Insurance Company UPPLEMENTAL TERM LIFE AND AD&D INSURANCE	the highest \$1,000). An equal benefit amount of AD&D is included. \$30,000 minimum; \$100,000 maximum.Employee - 1-6x annual base salary (rounded to the highest \$1,000), up to a maximum of \$600,000. Guarantee Issue of \$200,000.Spouse - \$25,000, \$50,000, \$75,000, or \$100,000, not to exceed	UMMC pays h	Age Ba	nium. The Ei per \$1,00 anded Rates	0 incoverag	e.	remium is \$.0	
AD&D INSURANCE Minnesota Life Insurance Company UPPLEMENTAL TERM LIFE AND AD&D INSURANCE	the highest \$1,000). An equal benefit amount of AD&D is included. \$30,000 minimum; \$100,000 maximum.Employee - 1-6x annual base salary (rounded to the highest \$1,000), up to a maximum of \$600,000. Guarantee Issue of \$200,000.Spouse - \$25,000, \$50,000, \$75,000, or \$100,000, not to exceed 50% of employee coverage. Guarantee issue of \$25,000. Must	UMMC pays h	Age Ba	nium. The Ei per \$1,00 anded Rates	0 incoverag	e. s of salary	remium is \$.0	
STATE GROUP TERM LIFE AND AD&D INSURANCE Minnesota Life Insurance Company SUPPLEMENTAL TERM LIFE AND AD&D INSURANCE Jnum	 the highest \$1,000). An equal benefit amount of AD&D is included. \$30,000 minimum; \$100,000 maximum. Employee - 1-6x annual base salary (rounded to the highest \$1,000), up to a maximum of \$600,000. Guarantee Issue of \$200,000. Spouse - \$25,000, \$50,000, \$75,000, or \$100,000, not to exceed 50% of employee coverage. Guarantee issue of \$25,000. Must have Employee coverage to elect Spouse coverage. 	UMMC pays h	Age Ba	nium. The Ei per \$1,00 anded Rates	0 incoverag	e. s of salary	remium is \$.0	
AD&D INSURANCE Minnesota Life Insurance Company UPPLEMENTAL TERM LIFE AND AD&D INSURANCE	the highest \$1,000). An equal benefit amount of AD&D is included. \$30,000 minimum; \$100,000 maximum.Employee - 1-6x annual base salary (rounded to the highest \$1,000), up to a maximum of \$600,000. Guarantee Issue of \$200,000.Spouse - \$25,000, \$50,000, \$75,000, or \$100,000, not to exceed 50% of employee coverage. Guarantee issue of \$25,000. Must have Employee coverage to elect Spouse coverage.Child(ren) - \$5,000 from birth to 6 months; \$10,000 from 6		Age Ba	nium. The E per \$1,00 anded Rates Rates, base	0 incoverag s in multiple ed on the En	e. s of salary nployee's age	remium is \$.0	
AD&D INSURANCE Minnesota Life Insurance Company UPPLEMENTAL TERM LIFE AND D&D INSURANCE	 the highest \$1,000). An equal benefit amount of AD&D is included. \$30,000 minimum; \$100,000 maximum. Employee - 1-6x annual base salary (rounded to the highest \$1,000), up to a maximum of \$600,000. Guarantee Issue of \$200,000. Spouse - \$25,000, \$50,000, \$75,000, or \$100,000, not to exceed 50% of employee coverage. Guarantee issue of \$25,000. Must have Employee coverage to elect Spouse coverage. 		Age Ba	nium. The E per \$1,00 anded Rates Rates, base en) is the sa	0 incoverag s in multiple ed on the En	e. s of salary nployee's age		
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AD&D INSURANCE Minnesota Life Insurance Company UPPLEMENTAL TERM LIFE AND AD&D INSURANCE Inum ONG TERM DISABILITY INSURANCE Jnum NDIVIDUAL SHORT TERM	 the highest \$1,000). An equal benefit amount of AD&D is included. \$30,000 minimum; \$100,000 maximum. Employee - 1-6x annual base salary (rounded to the highest \$1,000), up to a maximum of \$600,000. Guarantee Issue of \$200,000. Spouse - \$25,000, \$50,000, \$75,000, or \$100,000, not to exceed 50% of employee coverage. Guarantee issue of \$25,000. Must have Employee coverage to elect Spouse coverage. Child(ren) - \$5,000 from birth to 6 months; \$10,000 from 6 months to age 26. Guarantee Issue of \$10,000. Must have Employee coverage to elect Child(ren) coverage. Income replacement at 30% or 60% of your salary up to \$6,000/month. Begins after 90th date of illness or injury and is payable until no longer disabled or up to age 65. Income replacement at 60% of your salary up to \$5,000/month. 	The cost of cor	Age Banded Age Banded ost for child(r verage is base	nium. The E per \$1,00 anded Rates Rates, base en) is the sa ch d on your sa a cha	0 incoverag s in multiple ed on the En me regardle ildren. llary. Your pi nge in salary he time the	e. s of salary nployee's age ss of the num remium will ch y. policy is issue	per of covered hange as you h	
AD&D INSURANCE Minnesota Life Insurance Company UPPLEMENTAL TERM LIFE AND AD&D INSURANCE Jnum LONG TERM DISABILITY INSURANCE Unum	 the highest \$1,000). An equal benefit amount of AD&D is included. \$30,000 minimum; \$100,000 maximum. Employee - 1-6x annual base salary (rounded to the highest \$1,000), up to a maximum of \$600,000. Guarantee Issue of \$200,000. Spouse - \$25,000, \$50,000, \$75,000, or \$100,000, not to exceed 50% of employee coverage. Guarantee issue of \$25,000. Must have Employee coverage to elect Spouse coverage. Child(ren) - \$5,000 from birth to 6 months; \$10,000 from 6 months to age 26. Guarantee Issue of \$10,000. Must have Employee coverage to elect Child(ren) coverage. Income replacement at 30% or 60% of your salary up to \$6,000/month. Begins after 90th date of illness or injury and is payable until no longer disabled or up to age 65. 	The cost of cor	Age Banded Age Banded ost for child(r verage is base	nium. The E per \$1,00 anded Rates Rates, base en) is the sa ch d on your sa a cha	0 incoverag s in multiple ed on the En me regardle ildren. lary. Your pi nge in salary	e. s of salary nployee's age ss of the num remium will ch y. policy is issue	per of covered hange as you h	
AD&D INSURANCE Minnesota Life Insurance Company SUPPLEMENTAL TERM LIFE AND AD&D INSURANCE	 the highest \$1,000). An equal benefit amount of AD&D is included. \$30,000 minimum; \$100,000 maximum. Employee - 1-6x annual base salary (rounded to the highest \$1,000), up to a maximum of \$600,000. Guarantee Issue of \$200,000. Spouse - \$25,000, \$50,000, \$75,000, or \$100,000, not to exceed 50% of employee coverage. Guarantee issue of \$25,000. Must have Employee coverage to elect Spouse coverage. Child(ren) - \$5,000 from birth to 6 months; \$10,000 from 6 months to age 26. Guarantee Issue of \$10,000. Must have Employee coverage to elect Child(ren) coverage. Income replacement at 30% or 60% of your salary up to \$6,000/month. Begins after 90th date of illness or injury and is payable until no longer disabled or up to age 65. Income replacement at 60% of your salary up to \$5,000/month. Begins after 14th date of disability and is payable for up to 3 months. 	The cost of coordinates base	Age Banded Age Banded ost for child(r verage is base eed on Employ guarant	nium. The E per \$1,00 anded Rates Rates, base en) is the sa ch d on your sa a cha ee's age at t eed as long	0 incoverag s in multiple ed on the En me regardle ildren. lary. Your pi nge in salary he time the as premium	e. s of salary nployee's age ss of the num remium will ch r. policy is issues s are paid.	per of covered hange as you h d; Rates are	
AD&D INSURANCE Minnesota Life Insurance Company UPPLEMENTAL TERM LIFE AND AD&D INSURANCE Inum LONG TERM DISABILITY INSURANCE Jnum NDIVIDUAL SHORT TERM DISABILITY	 the highest \$1,000). An equal benefit amount of AD&D is included. \$30,000 minimum; \$100,000 maximum. Employee - 1-6x annual base salary (rounded to the highest \$1,000), up to a maximum of \$600,000. Guarantee Issue of \$200,000. Spouse - \$25,000, \$50,000, \$75,000, or \$100,000, not to exceed 50% of employee coverage. Guarantee issue of \$25,000. Must have Employee coverage to elect Spouse coverage. Child(ren) - \$5,000 from birth to 6 months; \$10,000 from 6 months to age 26. Guarantee Issue of \$10,000. Must have Employee coverage to elect Child(ren) coverage. Income replacement at 30% or 60% of your salary up to \$6,000/month. Begins after 90th date of illness or injury and is payable until no longer disabled or up to age 65. Income replacement at 60% of your salary up to \$5,000/month. Begins after 14th date of disability and is payable for up to 3 	The cost of coordinates base	Age Banded Age Banded ost for child(r verage is base eed on Employ guarant	nium. The E per \$1,00 anded Rates Rates, base en) is the sa ch d on your sa a cha ee's age at t eed as long	0 incoverag s in multiple ed on the En me regardle ildren. lary. Your pi nge in salary he time the as premium	e. s of salary nployee's age ss of the num remium will ch y. policy is issue	per of covered hange as you h d; Rates are	



			MEDICAL CENTI
What is available to me?	What does this benefit cover?	What is m	y cost to participate in this plan?
lexible Spending Accounts (Effective dat	l te of hire) Eligibility: Employees working 20+ hours per week		
LEXIBLE SPENDING ACCOUNT FSA) - MEDICAL ABC	Participants can set aside funds through payroll for pre-tax payned hearing, or vision expenses. Contribute any amount up to \$2,750 pe year; however, any amount left in the account after the grace perio	er year. Eligible expenses may	be incurred through March 15th of the following
LEXIBLE SPENDING ACCOUNT FSA) - DEPENDENT CARE ABC	Participants can set aside funds through payroll for pre-tax paymer Unused dollars cannot be rolled over and will be forfeited by the e		
ther Insurance Plans Available: (Effectiv	e first of the month following the approval of the carrier) Eligibili	y: Employees working 20+ h	iours per week
		Accident Rates (Monthly -	Pretax):
	Helps offset medical or out-of-pocket expenses that may add up after a covered off-the-job accident, such as emergency	Employee Only	\$12.61
CCIDENT INSURANCE	treatment, hospital stays, medical exams, broken bones, burns,	Employee + Spouse	\$18.46
	torn ligaments, transportation, and lodging. Cash benefits are paid directly to you.	Employee + Child(ren)	\$25.87
		Family	\$31.72
CRITICAL ILLNESS INSURANCE Aflac	Pays a lump sum benefit amount of \$15,000 or \$30,000 for Employee and \$7,500 or \$15,000 for Spouse upon diagnosis of a covered critical illness, such as cancer, heart attack, or stroke. Cash benefits are paid directly to you.		
IOSPITAL INDEMNITY NSURANCE Iflac	Helps offset medical or out-of-pocket expenses that may add up after a covered accident or illness. Lump sum payment for initial confinement, daily confinement, surgical, anesthesiology, and prescriptions. Cash benefits are paid directly to you. Low and High options available.	Hospital Indemnity Rates (Employee Only Employee + Spouse Employee + Child(ren)	Monthly): <u>High</u> <u>Low</u> \$33.10 \$12.88 \$65.48 \$25.40 \$45.12 \$18.12
BURIAL INSURANCE	Burial Insurance available for Employee, Spouse, Children, and	Family	\$77.48 \$30.64 Age Banded Rates
ransAmerica	Grandchildren.		
INANCIAL RETIREMENT PLANS (A		hiro Dotiromont Ago (Quui	th August of worked can lies for ampleuses becoming
tate of MS PUBLIC EMPLOYEES ETIREMENT PLAN	Eligiblity: Employees working 20+ hours per work. Effective date of members of PERS prior to 7/1/07 and 8 years vested service for e service at any age. Employees hired on or after 7/1/11 will have to compensation; Employee pays 9% of earned compensation. IRS Ma	mployees becoming member o have 30 years of service or s	rs of PERS on or after 7/1/07 or 25 years vested service age. UMMC pays 17.4% of earned
	\$290,00 as of July 1, 2021. PERS has an estimate calculator and o	ther information on their we	bsite at www.pers.ms.gov
itate of MS OPTIONAL RETIREMENT PLAN	Available to Employees working 20+ hours per week in category Control over investments. 100% vested immediately. UMMC pays 14 IRS Maximum combined Employee and Employer annual contributi	.75% of earned compensation	r; Employee pays 9% of earned compensation.
403(b) PLAN - TAX-SHELTERED ANNUITY	Available to all Employees. Supplemental retirement income. Cor participate and make changes any time of the year. The IRS maxin up" provisions: 15 years of service catch-up contribution of \$3,00 additional contribution of \$6,500 to the normal limit. Maximum a	num calendar year contributi 0 and 50+ catch-up allows er	ion is \$19,500. The plan allows for two "catch- nployees who are 50 years old or older to make an
457 PLAN - DEFERRED COMPENSATION PLAN	Available to all Employees. Supplemental retirement income. Cor participate and make change any time of the year. The IRS maxim increased using one of two "catch-up" provisions: Retirement Cat annual limit is doubled and creates a limit of \$39,000 or 50+ Catch-uc contribution of \$6,500 to the normal limit for a total of \$26,000. M	um calendar year contributio ch-up — if an employee is wit up provision allows employee	on is \$19,500. The annual limit can be hin 3 years of normal retirement age, the maximum s who are 50 years old or older to make an additional
DDITIONAL BENEFITS			
ligibility: All Additional Benefits are effe	ective Date of Hire		
AFETERIA DISCOUNTS	Available to all Employees. 20% discount on food and beverages 24 University cafeteria, Wiser cafeteria and Student Union cafeteria.	4 hours a day. Visa, MasterCar	d, and payroll deductions are accepted at the
PC DISCOUNTS	Available to all Employees. Discounted prices on Dell products (up Office 365 Apps such as Word, Excel and Powerpoint downloads are		

Public Service Loan Forgiveness As an employee of a state agency, you may qualify for this loan forgiveness program managed by the U.S. Department of Education. Information can be found at https://studentaid.gov/manage-loans/forgiveness-cancellation/public-service/questions. Questions should be directed to U.S. Dept. of Education.

What is available to me?



CELLULAR SERVICE DISCOUNTS Available to all Employees. Discounts from AT&T, Sprint, and Verizon **CREDIT UNION** Available to all Employees. Favorable interest rates and insured accounts for savings and borrowing. **COLLEGE SAVINGS PLANS** Available to all Employees. Payroll deductions available for Mississippi college savings. (MPACT/MACS) WORK/LIFE BENEFITS EMPLOYEE ASSISTANCE PROGRAM Available to all Employees and their household members. Free, confidential employee assistance available 24/7 for short term counseling and work- life services for personal and family matters. (EAP) HOLIDAYS Available to Full-Time Employees. UMMC recognizes ten paid holidays per calendar year. Available to Employees working 20+ hrs per week. **Continuous Service** Accrual Per Month Accrual Per Year Provided for vacation and personal business accrued per month 144 hours 1-36 months 12 hours worked based on years of service, increasing with years of service. PAID PERSONAL LEAVE 37-96 months 14 hours 168 hours Pro-rated for part-time employees. Leave is subject to approval by 97-180 months 16 hours 192 hours Manager. Over 180 months 18 hours 216 hours There is no maximum limit to the accumulation of personal leave. Upon termination, Employees are paid for not more than 30 days (240 hours) of personal leave. Unused personal leave in excess of 30 days (240 hours) will be applied as service credit for retirement purposes if participating in PFRS Available to Employees working 20+ hrs per week. **Continuous Service** Accrual Per Month Accrual Per Year Provided for your illness or illness of immediate family member, 1-36 months 8 hours 96 hours accrued per month worked, based on years of service, decreasing PAID MAJOR MEDICAL LEAVE 37-96 months 7 hours 84 hours with years of service. Pro-rated for part-time employees. 97-180 months 72 hours 6 hours Over 180 months 5 hours 60 hours There is no maximum limit to the accumulation of major medical leave. Upon termination, unused leave will be applied as service credit for retirement purposes if participating inPERS. Available to Employees employed at least 12 months with at least 1,250 hours worked in prior year. Up to 12 weeks leave for your illness, birth or FAMILY MEDICAL LEAVE adoption of a child, or illness of an immediate family member. *Major medical leave and personal leave must be used, then leave without pay Available to Full-time and Part-time Employees employed at least 12 months with at least 1,250 hours worked by the date on which the leave is **DONATED LEAVE** donated. Applies to "Catastrophic and Life-Threatening Injury or Illness". Up to 90 days (720 hours) lifetime maximum for you or an immediate family member. Major medical leave and personal leave must be completely exhausted prior to receiving leave donations. JURY DUTY LEAVE Available to all Employees. Leave with pay to be a witness, juror, or litigant. MILITARY LEAVE Available to Employees in National Guard or other Armed Services Reserve Unit. Up to 15 paid working days leave for active duty or annual training. Available to all Employees. Employee Wellness Program that promotes awareness and education, provides motivation for positive behavior changes, **EVERYDAY WELLNESS** and influences campus practices and policy to support a healthy environment. **QUICK CARE CLINIC** Available to UMMC Employees and their families. Within 24 hours' notice for an appointment, Monday – Friday, 8am – 5pm, located at University Physicians Lakeland Medical and University Physicians Grant Ferry. Services include urgent care, screening and management visits for high blood pressure, diabetes, and high cholesterol, wellness visits, school and sports physicals, minor lacerations, sprains and strains, coordination of subspecialty care and referral as appropriate. Available to all Employees. UMMC employees can get priority scheduling with available providers in specific specialties such as dermatology, ENT, family **Employee Rapid Access** medicine, women's health(Grant's Ferry), general surgery, orthopedics, plastic surgery and urology. Call 4-CARE(4-2273) and select option 2. UMMC 2 YOU Available to employee and dependents covered on BCBS of MS State and School Employees' Health Insurance Plan. UMMC Telehealth services lets nurse practitioners examine and treat patients remotely, in real time, using online streaming video technology and interactive tools. Treat conditions such as allergies, asthma, bronchitis, cellulitis, cold & flu, constipation, diarrhea, ear infection, fever, gout, headache, infections, insect bites, joint aches & pains, poison ivy, rashes, skin inflammation, sore throat, and urinary tract infection. Can prescribe recommended medications if needed.

SCHOLARSHIPS & TUITION REIMBURSEMENT



UMMC SCHOLARSHIPS FOR UMMC CHILDREN	Available to children of Full-Time Employees of UMMC, The University of Mississippi Main Campus (Oxford), and The University of Mississippi Satellite Centers (Tupelo & Desoto) employed for at least 12 months prior to application. Children of retired as Full-Time Employees with 10 years or service or those Employees who die while in service are also eligible.	tuition for students in undergraduate	Employed after7/1/1977 ull A tuition scholarship representing 50% of tuition costs per semester (for each paren at employed) for students in undergraduate graduate, and professional programs at UMMC. It has to be a UMMC program
	The tuition scholarship is automatically renewable until completio	n of the program.	
UM (Ole Miss) SCHOLARSHIPS FOR UMMC CHILDREN	Available to children of Full-Time Employees of UMMC, The University of Mississippi Main Campus (Oxford), and The University of Mississippi Satellite Centers (Tupelo & Desoto). Children of retired Full-Time Employees with 10 years of service or employees that die while in service are also eligible.	Employed priorto 7/1/1977 A tuition scholarship representing ful tuition for students enrolled at The University of Mississippi.	Employed after7/1/1977 I A tuition scholarship representing 50% of tuition costs per semester (for each paren employed) for students enrolled at The University of Mississippi.
	The recipient must not be more than 24 years of age and must be of completes the requirements for a baccalaureate degree or is approximately a		
UM (Ole Miss) EMPLOYEE TUITION REIMBURSEMENT	Employee must be employed prior to registration and have apprehours per course.	oval of the department head. Tuition	will be waived for two courses, up to four
			will be waived for two courses, up to four

This benefits enrollment guide is designed to provide you with an overview of the benefits available through UMMC. Summary Plan Documents will provide the details of the features, benefits, limitations and exclusions for all the available plans. The actual benefits and benefit descriptions are governed solely by the relevant plan documents and contracts. If there are any discrepancies between this document and the plan document, the plan document will prevail. UMMC retains the right to amend, change or modify benefits at any time.

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