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EMPLOYEE BENEFITS

NON-EXEMPT STAFF

The University of Tennessee at Chattanooga

Office of Human Resources
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Benefits Home Page: <http://www.utc.edu/Administration/HumanResources/Benefits/index.html>

University Policies/HR Policies & Procedures: <http://www.utc.edu/Administration/HumanResources/>

RETIREMENT
University of TN System Human Resource Policy 375

Non-exempt staff will enroll in the **Tennessee Consolidated Retirement System (TCRS)**

Tennessee Consolidated Retirement System (TCRS)

TCRS is a defined benefit plan, funded by University contributions. The member makes no contributions to the plan.

Vesting and Creditable Service

Higher education employees participating in TCRS are vested after 5 years of service. Members may earn service credit in TCRS for service with the state of Tennessee, the public school systems in Tennessee, or political subdivisions in Tennessee, which have elected to participate. Vested members may also establish credit in TCRS for up to 4 years of eligible military service.

Retirement Benefits

TCRS retirement benefits are computed under a formula using the average of the member's highest five consecutive years of salary and the years of service credited in TCRS. Vested members are eligible for regular retirement benefits at age sixty (60) or after completion of thirty (30) years of creditable service. Reduced early retirement benefits are available at age fifty-five (55) or after completion of twenty-five (25) years of creditable service.

Disability Benefits

Accidental disability retirement benefits are available immediately if a member is injured on the job. Ordinary disability retirement benefits are available to vested members, regardless of where the member is employed at the time the disability occurs.

Payout Methods

TCRS retirement benefits are payable in the form of a fixed annuity. Members are eligible to select a single life annuity or one of several joint and survivor annuities at retirement.

Cost-of-Living Increases

Adjustments in income to reflect increases or decreases in the CPI may be made annually. Such adjustment may not exceed 3%.

TAX DEFERRED INCOME

University of TN System Human Resource Policy 390

University faculty and staff may elect to divert portions of their pre-tax earnings into an IRS Code 403(b), 401(k)*, or 457 tax-deferred income plan or a combination of these plans. Enrollment in any of these plans allows an employee to set aside a portion of current earnings and receive the value of these earnings at a later date, usually after retirement. Income which is set aside in this manner, plus any accrued interest and investment earnings, is not taxed until actually received.

With a 403(b) plan, employees may establish an account with one or more of the 36 investment companies approved to write 403(b) contracts for University employees. With the 401(k) and 457 funds, employees may select from 11 different funds offered by Great West Life.

Employees may sign a new 401(k), 403(b) or 457 agreement as often as once per month. Agreement forms must be submitted to The Office of Human Resources by the end of the month preceding the month in which they are to become effective.

Employees may change company investment options or cancel an agreement for any plan at the beginning of any month. Agreement forms must be submitted to The Office of Human Resources by the end of the month preceding the month in which they are to become effective. Under the 401(k) and 457, employees may change investment options or transfer funds on-line through Great West Life website: <https://www.benefitscorp.com/circle/ParticipantLogin.asp>.

Participation in UT's tax-deferred income plans can be an important step toward ensuring economic independence after retirement. Among the benefits available to those who participate in these plans are the opportunities to...

- Automatically set aside a portion of pre-tax earnings through regularly scheduled payroll reductions,
- Choose one or more investment options for allocation of contributions
- Realize current income tax advantages, and
- Balance retirement income payout options designed to provide a hedge against inflation.

Additional information on the Tax Deferred Income plans and reduction agreement forms may be obtained via the Internet at <http://www.treasury.state.tn.us/dc/index.htm> and at The Office of Human Resources.

***There is a \$40 match for minimum contribution of \$40/month with the 401(k). (\$20/per pay period for biweekly paid employees.)**

GROUP INSURANCE
University of TN System Human Resource Policy 345

Non-exempt staff on regular full-time or regular part-time (75%+) are eligible to participate in the Group Insurance Program offered by the University. The program consists of a Basic Group Plan (including a choice among three health insurance plans) and various optional group insurance plans as follows:

Basic Group Insurance: (<http://www.state.tn.us/finance/ins/health.html>)

- (1) Health
 - (a) Preferred Provider Organization (PPO) : Blue Preferred (<http://www.bcbst.com/>)
 - (b) Health Maintenance Organization (HMO) : John Deere Select (United Health Care company) (<http://www.johndeerehealth.com/employer/tennstate/>)
 - (c) Point of Service (POS) : Cigna (<http://www.cigna.com/>)
- (2) Basic Term Life
- (3) Basic Accidental Death and Dismemberment

Optional Group Insurance:

- (1) Optional Life
 - (a) Term Life
 - (b) Universal Life
- (2) Optional Special Accidental Death and Dismemberment
- (3) Dental (Prepaid Plan: <http://www.assurantemployeebenefits.com/wps/portal>) (PDO Plan: <http://www.deltadentaltn.com/statetn/>)
- (4) Long Term Disability
- (5) Long Term Care

ENROLLMENT AND GUIDELINES

Enrollment in the Group Insurance Plan is not automatic. The employee must complete the State of Tennessee Insurance Enrollment Form within 30 days of the date of employment. If the employee

completes all applicable forms, **coverage will be effective on the first day of the calendar month following the completion of one month's active employment.**

Employees who do not enroll in a health insurance plan when they are first eligible will only be able to apply for health coverage at a later date by one of two methods:

Special Enrollment Provision, one of the following life changing circumstances:

- 1. Death of employee's spouse or ex-spouse**
- 2. Divorce from the employee's spouse**
- 3. Legal Separation**
- 4. Spouse's or ex-spouse's termination of employment (voluntary or non-voluntary)**
- 5. Reduction in number of spouse's work hours causing loss of eligibility for insurance**
- 6. Employer's discontinuation to the spouse's insurance coverage (total contribution, not partial; other than non-payment)**
- 7. Acquiring a new dependent (spouse, newborn or adoptee)**
- 8. Cancellation of TennCare coverage (other than non-payment)**

An employee who experiences any of the circumstances listed above may enroll in the University's group insurance program without having to provide medical evidence of insurability, provided the employee applies for coverage within 60 days of the occurrence of the circumstance. The employee will be required to submit documentation of the event that qualifies him/her for the special enrollment provision.

Late Application Procedures:

This process involves completion of a medical questionnaire and payment of a non-refundable application fee of \$60.00. Contact Office of Human Resources for the application/medical questionnaire.

Pre-existing Condition Requirement

Both the PPO and POS plans are subject to a 6-month pre-existing condition clause unless the employee can provide a certificate of prior coverage. The pre-existing condition requirement will be waived with a certificate of coverage provided there has not been a break in coverage of more than 63 days.

Types of Coverage

Single: Covers the employee only.

Family: Covers employee, spouse, and all unmarried dependent children including stepchildren.

Children may be covered until the end of the month of their 19th birthday. If the dependent is either a full-time student or claimed on the employee's federal income tax, they can be covered through the end of the month of their 24th birthday.

Split Contract: Covers the employee and eligible dependent children, excluding spouse, where both employee and spouse are employed by the State. If both employee and spouse are employed by the State in an eligible status, they must apply for their own coverage. No person eligible for coverage as an employee can be covered as a dependent.

ANNUAL ENROLLMENT

October 15 – November 15 each year; effective date of most changes January 1

During the annual transfer/enrollment period for group insurance, faculty and staff are provided the opportunity to review their current insurance coverage, evaluate available options, and make changes for the next calendar year. Eligible faculty and staff will receive information from the State of Tennessee and various insurance carriers regarding changes to insurance programs and the options available.

The changes eligible faculty and staff may make are:

- *Change Medical Insurance carrier (choice of PPO BlueCross/BlueShield, HMO John Deere (United Health Care company), POS Cigna)
- *Change Dental Insurance plan type (choices of Prepaid Plan or PDO)
- *Add Dental Insurance
- *Increase Optional Term and Group Universal Life Insurance
- *Add Optional Term and Group Universal Life Insurance for employee and family
- *Add Optional Special Accident Insurance coverage for employee and family
- *Change Long Term Disability plan type
- *Terminate Medical, Dental, Life, Optional Special Accident, or Long Term Disability Insurance

HEALTH INSURANCE

Non-exempt staff on regular full-time or regular part-time (75%+) are eligible to enroll in one of the following three health insurance plans. The University pays 80% of the health insurance premium, and the employee pays 20% of the premium cost. The employee portion of the premium is part of the flexible benefits plan and is deducted on a pre-tax basis.

PREFERRED PROVIDER ORGANIZATION (PPO)

Employees enrolled in this plan may seek medical services from any physicians they choose. The insurance benefit is greater if the medical provider is a member of the PPO Blue Preferred network. Specific provisions of the plan include:

- \$300 annual individual or \$750 family deductible
- Physicians discount fees by 10%, limit fees to MAC (Maximum Allowable Cost)
- Pays 90% of discounted fees when using participating providers
- \$1300 annual individual or \$2600 family out-of-pocket in network
- Pays 70% of MAC when using non participating providers

PPO Health Insurance, BlueCross/BlueShield of Tennessee, 1-800-558-6213

HEALTH MAINTENANCE ORGANIZATION (HMO)

Employees enrolled in this plan must select a primary care physician (PCP) from the John Deere Health Care list of participating medical providers. All services received must be provided by the PCP, or upon referral by the PCP.

- Primary care physician (PCP) coordinates health care services
- No deductible, \$15.00 copay for PCP office visit
- \$20.00 copay for specialist office visit
- \$100.00 copay for hospital admission

HMO Health Insurance, John Deere Health Care, 1-877-366-0011
(United Health Care company)

POINT OF SERVICE (POS)

Employees enrolled in this plan may seek medical services from any physicians in the Cigna network of providers to receive the best benefit level. However, care received from a physician other than the chosen PCP will still be covered at a reduced benefit level after the employee meets a deductible.

- In-plan (HMO) option:
 - Primary care physician (PCP) coordinates health care services
 - No deductible, \$20.00 copay for office visit for PCP or \$25.00 copay for specialist
- Out of plan (PPO) option:
 - Preferred provider network
 - \$300 annual individual or \$750 family deductible
 - Pays 70% of discounted fees when using participating providers

POS Health Insurance, Cigna, 1-800-244-6224

All three Plans Prescription Drug Coinsurance/Copay: \$5/generic, \$20 preferred brand, and \$40/non-preferred brand. A benefit for certain eligible maintenance drugs is a 1 year prescription, filled 3 month supply and pay one copay.

Note: with the PPO or POS, the prescription drug copay does not count towards the \$300 or \$750 deductible.

HEALTH INSURANCE COMPARISON SHEET: Please go to website:
<http://www.utc.edu/Administration/HumanResources/Benefits/index.html#Health>, click on comparison of plans

BASIC TERM LIFE AND BASIC ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE

Employees enrolled in any of the health insurance plans receive basic term life and basic accidental death and dismemberment coverage as part of the group insurance program. The amount of coverage is based upon salary as indicated in the following tables. Each dependent is covered automatically for \$3,000 under the Basic Term Life Insurance.

Basic Term Life Insurance

<u>Employees with Base Salary*</u>	<u><Age 65</u>	<u>65-69</u>	<u>70-74</u>	<u>>Age 75</u>
Less than \$15,000	\$20,000	\$13,000	\$ 9,000	\$ 6,000
\$15,000 - \$17,499	22,000	14,300	9,900	6,600
\$17,500 - \$19,999	25,000	16,250	11,250	7,500
\$20,000 - \$22,499	30,000	19,500	13,500	9,000
\$22,500 - \$24,999	33,500	21,775	15,075	10,050
\$25,000 - \$27,499	37,000	24,050	16,650	11,100
\$27,500 - \$29,999	40,500	26,325	18,225	12,150
\$30,000 - \$32,499	44,000	28,600	19,800	13,200
\$32,500 - \$34,999	47,500	39,875	21,375	14,250
\$35,000 and over	50,000	32,500	22,500	15,000

Basic Special Accident and Dismemberment

<u>Employees with Base Salary*</u>	<u>Employee</u>	<u>Spouse Only</u>	<u>Spouse & Child(ren)</u>	<u>Each Child</u>
Less than \$15,000	\$40,000	\$24,000	\$16,000	\$ 4,000
\$15,000 - \$17,499	44,000	26,000	18,000	4,000
\$17,500 - \$19,999	50,000	30,000	20,000	5,000
\$20,000 - \$22,499	60,000	36,000	25,000	5,000
\$22,500 - \$24,999	67,000	40,000	27,000	6,000
\$25,000 - \$27,499	74,000	44,000	30,000	7,000
\$27,500 - \$29,999	81,000	49,000	32,000	8,000
\$30,000 - \$32,499	88,000	53,000	35,000	9,000
\$32,500 - \$34,999	95,000	57,000	38,000	9,000
\$35,000 and over	100,000	60,000	40,000	10,000

Basic Term Life Insurance and Basic Special Accident Insurance, Fort Dearborn Life Insurance Company, 800-348-4510

**MONTHLY BASIC GROUP INSURANCE PREMIUMS
2006**

Employee premiums for the Basic Group Insurance Program, including health, term life and accidental insurance are based on salary and coverage selected as indicated in the following tables.

PPO – “Preferred Provider Option” - Blue Cross/Blue Shield of Tennessee

POS – “Point of Service Plan” - Cigna East

HMO – “Health Maintenance Organization” – John Deere Select Health Care (United Health Care company)

<u>COVERAGE</u>	<u>ANNUAL SALARY</u>	<u>MONTHLY PREMIUMS</u>			<i>Employer</i>
		<u>PPO</u>	<i>Employee</i> <u>POS</u>	<u>HMO</u>	
01Single Family Split	Less than \$15,000.00 (Term Life \$20,000)	\$ 88.68 \$221.71 \$132.82	\$ 70.57 \$176.52 \$105.74	\$ 65.30 \$163.36 \$ 97.85	\$354.71 \$885.60 \$530.89
02Single Family Split	\$15,000.00 - \$17,499.99 (Term Life \$22,000)	\$ 89.24 \$222.29 \$133.38	\$ 71.13 \$177.10 \$106.30	\$ 65.86 \$163.94 \$ 98.41	\$354.71 \$885.60 \$530.89
03Single Family Split	\$17,500.00 - \$19,999.99 (Term Life \$25,000)	\$ 90.08 \$223.19 \$134.25	\$ 71.97 \$178.00 \$107.17	\$ 66.70 \$164.84 \$ 99.28	\$354.71 \$885.60 \$530.89
04Single Family Split	\$20,000.00 - \$22,499.99 (Term Life \$30,000)	\$ 91.47 \$224.66 \$135.64	\$ 73.36 \$179.47 \$108.56	\$ 68.09 \$166.31 \$100.67	\$354.71 \$885.60 \$530.89
05Single Family Split	\$22,500.00 - \$24,999.99 (Term Life \$33,500)	\$ 92.45 \$225.70 \$136.64	\$ 74.34 \$180.51 \$109.56	\$ 69.07 \$167.35 \$101.67	\$354.71 \$885.60 \$530.89
06Single Family Split	\$25,000.00 - \$27,499.99 (Term Life \$37,000)	\$ 93.42 \$226.73 \$137.65	\$ 75.31 \$181.54 \$110.57	\$ 70.04 \$168.38 \$102.68	\$354.71 \$885.60 \$530.89
07Single Family Split	\$27,500.00 - \$29,999.99 (Term Life \$40,500)	\$ 94.40 \$227.78 \$138.65	\$ 76.29 \$182.59 \$111.57	\$ 71.02 \$169.43 \$103.68	\$354.71 \$885.60 \$530.89
08Single Family Split	\$30,000.00 - \$32,499.99 (Term Life \$44,000)	\$ 95.38 \$228.81 \$139.66	\$ 78.24 \$183.62 \$112.58	\$ 72.00 \$170.46 \$104.69	\$354.71 \$885.60 \$530.89
09Single Family Split	\$32,500.00 - \$34,999.99 (Term Life \$47,500)	\$ 96.35 \$229.84 \$140.63	\$ 78.94 \$184.65 \$113.55	\$ 72.97 \$171.49 \$105.66	\$354.71 \$885.60 \$530.89
10Single Family Split	\$35,000.00 and over (Term Life \$50,000)	\$ 97.05 \$230.58 \$141.36	\$ 76.87 \$185.39 \$114.28	\$ 73.67 \$172.23 \$106.39	\$354.71 \$885.60 \$530.89

Note: Split Coverage covers the employee and eligible dependent children, excluding spouse, where both employee and spouse are employed by the State.

08/05

OPTIONAL INSURANCE PROGRAMS

Faculty and exempt staff on regular full-time and regular part-time (75%+) appointments are eligible to participate in the Optional Insurance Programs. Employees who do not enroll when first eligible, may choose to enroll during the annual enrollment period, October 15th through November 15th, with an effective date of January, February, or March 1st. Proof of good health is required. Premiums are paid by the employee.

Two optional life insurance plans (term and universal) are available. A new employee may elect as much as three times his or her base annual salary without having to show proof of good health. Coverage of up to five times the base annual salary or \$300,000, whichever is less, is available with proof of good health. If an employee wishes to apply for coverage, the employee must apply by the end of the first calendar month of employment. Premiums are based on the age and the amount of coverage desired. **Coverage is effective the first day of the month following the completion of 3 months of employment.**

Term Life Plan

This plan offers a death benefit only. Premiums will increase with age. Spouse and eligible dependent children, to age 24, are eligible for coverage. The employee need not participate in order to purchase spouse coverage. Term coverage for dependent children coverage is available as a term rider.

Term Life Premium Rates (monthly premium rates per \$1,000 of coverage)			
Age Last Birthday	Employee Monthly Rate*	Spouse Monthly Rate*	
Under 30	\$0.054	\$0.054	
30 – 34	0.058	0.058	
35 – 39	0.074	0.074	
40 – 44	0.111	0.111	
45 – 49	0.189	0.189	
50 – 54	0.317	0.317	
55 – 59	0.493	0.493	
60 – 64	0.769	0.769	
65 – 69	1.275	1.275	
70 – 74	1.778	1.778	
75 – 79	2.732	2.732	
80 and over	4.937	4.937	

Choices Available:

For spouse: \$5,000, \$10,000 or \$15,000 coverage for spouses at any age. Spouses below the ages of 55 are eligible for up to 1x the employees Annual Base Salary, subject to an overall maximum of \$30,000

For Children: Term insurance for \$2,500 coverage for \$.25 premium per month or \$5,000 coverage for \$.50 premium per month.

Does not include \$.30 monthly administration cost. Rate schedule also applies to spouse coverage.

Universal Life Plan

This plan offers a death benefit, a cash accumulation and loan provision, and a paid-up policy feature. Premiums will not increase with age. The employee need not participate in order to purchase spouse coverage. Term coverage for dependent children coverage is available as a term rider.

Universal Life Premium Rates

(monthly premium rates per \$1,000 of coverage)

Age Last Birthday	Employee Monthly Rate*	Age Last Birthday	Employee Monthly Rate*
15	\$0.20	46	\$1.21
16	0.21	47	1.30
17	0.22	48	1.42
18	0.23	49	1.55
19	0.24	50	1.69
20	0.25	51	1.85
21	0.26	52	2.04
22	0.27	53	2.26
23	0.28	54	2.51
24	0.30	55	2.48
25	0.31	56	2.64
26	0.33	57	2.77
27	0.35	58	2.91
28	0.36	59	3.04
29	0.38	60	2.83
30	0.41	61	2.97
31	0.43	62	3.12
32	0.45	63	3.28
33	0.48	64	3.44
34	0.53	65	3.61
35	0.56	66	3.80
36	0.60	67	3.99
37	0.64	68	4.19
38	0.68	69	4.41
39	0.72	70	4.64
40	0.79	71	4.88
41	0.84	72	5.14
42	0.89	73	5.42
43	0.96	74	5.71
44	1.04	75	6.03
45	1.11		

Choices Available:

For spouse: \$5,000, \$10,000 or \$15,000 coverage for spouses at any age. Spouses below the ages of 55 are eligible for up to 1x the employees Annual Base Salary, subject to an overall maximum of \$30,000

For Children: Term insurance for \$2,500 coverage for \$.25 premium per month or \$5,000 coverage for \$.50 premium per month.

* Does not include \$1.00 monthly administration cost. Rate schedule also applies for spouse coverage.

OPTIONAL SPECIAL ACCIDENT INSURANCE

This plan provides coverage for accidental death and dismemberment. Premiums are paid completely by the employee. Benefits are paid for dismemberment for one of the following:

- Loss of a hand by total severance at or above the wrist
- Loss of a foot by total severance at or above the ankle joint
- Total loss of the sight of an eye

Benefits will be paid for dismemberment if the loss occurred within 90 days of the accident, provided coverage was in effect on the date of the accident. The principal sum indicated below will be paid for the loss of life or loss of more than one member; one-half the principal sum will be paid for the loss of one member. **Coverage becomes effective on the first of the month following one full calendar month of employment.**

The amount of coverage is based upon salary as indicated in the following table.

Annual Earnings*	Principal Sum*		Spouse and Child(ren)		Mo.Premium	
	Employee	Spouse Only	Spouse	Child Only	Single	Family
Less than \$3,000	\$ 6,000	\$ 4,000	\$ 2,000	\$ 1,000	\$0.17	\$0.23
\$3,000 < \$4,000	9,000	5,000	3,000	1,000	0.26	0.33
\$4,000 < \$5,000	12,000	7,000	4,000	2,000	0.35	0.45
\$5,000 < \$6,000	15,000	9,000	5,000	2,000	0.44	0.56
\$6,000 < \$7,000	18,000	11,000	7,000	2,000	0.52	0.68
\$7,000 < \$8,000	21,000	13,000	8,000	3,000	0.61	0.79
\$8,000 < \$9,000	24,000	15,000	10,000	3,000	0.70	0.91
\$9,000 < \$10,000	27,000	17,000	11,000	3,000	0.78	1.02
\$10,000 < \$12,500	32,000	19,000	13,000	3,000	0.93	1.19
\$12,500 < \$15,000	38,000	23,000	15,000	4,000	1.10	1.42
\$15,000 < \$17,500	44,000	26,000	18,000	4,000	1.28	1.64
\$17,500 < \$20,000	50,000	30,000	20,000	5,000	1.45	1.87
\$20,000 and over	60,000	36,000	25,000	5,000	1.74	2.24

*Excludes bonuses, overtime or other special compensation

DENTAL INSURANCE

Non-exempt staff on regular full-time and regular part-time (75%+) are eligible to participate in the Dental Insurance plan. Premiums are paid totally by the employee, and are part of the flexible benefits plan and may be deducted on a pre-tax basis. **Coverage becomes effective on the first of the month following one full calendar month of employment.**

Employees may participate in one of the two dental plans described below:

Prepaid Plan (Assurant Dental Plan): A designated dentist must be selected from the list of participating providers. All dental care is provided by the selected dentist, unless referred to a specialist.

Plan Benefits Include:

- Select a Dentist for each family member
- No deductibles
- No claim forms
- No maximum benefit levels
- Pre-existing conditions are covered
- 25% Discount on all Orthodontic Services
- No Age or Dollar Maximum Restrictions on Orthodontics

<u>Monthly Premiums:</u>	Employee	\$ 8.90
	Employee + 1	\$15.78
	Employee + Family	\$21.70
Member Services	1-800-443-2995	
	http://www.assurant.com	

Preferred Dental Organization (PDO) Plan (Delta Dental Plan): In this plan a preferred dentist, or any other dentist, can be used.

Plan Benefits Include:

- Maximum benefit with preferred dentist
- No deductible with preferred dentist
- \$100 calendar year deductible per individual, if non preferred dentist is used
- \$1000 annual maximum per person per calendar year
- Waiting period for certain services

<u>Monthly Premiums:</u>	Employee	\$15.12
	Employee + 1	\$28.67
	Employee + Family	\$45.53
Member Services	1-800-223-3104	
	http://www.deltadentaltn.com/statetn	

