



# 2010-2011 Comprehensive Benefits Summary for Faculty Members on Regular Appointments of Half-time (.5 FTE\*) or More

**1. RETIREMENT:** The University's 403b retirement plan is one of the best offered by small private universities. Contributions may be invested with TIAA-CREF (Teachers Insurance and Annuity Association and the College Retirement Equities Fund) of New York City. Website: [www.tiaa-cref.org](http://www.tiaa-cref.org). There is a **one-year waiting period** before new employees may participate in the retirement plan (unless they have participated in a qualified retirement plan within the past year).

Once an employee is eligible, the University will contribute 7.5% of the employee's salary to his or her retirement account. The employee's elective deferrals of up to 6% of pay will be matched by the University, in an amount equal to 50% of the amount the employee elects to defer with a maximum University matching contribution equal to 3% of pay. See chart for PLU contribution calculation.

Employee's Contribution	PLU's Contribution
0%	7.5%
1%	7.5 + .5% = <b>8%</b>
2%	7.5 + 1% = <b>8.5%</b>
3%	7.5 + 1.5% = <b>9%</b>
4%	7.5 + 2% = <b>9.5%</b>
5%	7.5 + 2.5% = <b>10%</b>
6%	7.5 + 3% = <b>10.5%</b>

The TIAA-CREF Supplemental Retirement Accounts (SRA) provide employees with an opportunity to accumulate additional tax-deferred retirement savings on a voluntary basis. No waiting period is required. IRS restrictions do apply in calculating the maximum amount that may be tax-deferred.

**2. MEDICAL & VISION INSURANCE:** The University contributes 95% of the premium for the base plan (Alliant Select) towards the medical plan you select. This year's PLU monthly contribution is \$405.74. For those who elect "employee-only-coverage" on the Essentials Plan, PLU contributes \$310.91 towards premium and \$75 towards a Flexible Spending Account (FSA). The employee portion of the premium is deducted monthly from your pay on a pre-tax basis. Coverage for eligible dependents is available at the participant's expense. To provide a less costly option for employees with children, PLU will contribute more for dependent children's coverage on the Essentials Plan.

You may choose among three medical plan alternatives that give a variety of care options including HMO and community providers:

- **Alliant Select**
- **Alliant Plus**
- **Group Health Essentials**

Monthly insurance rates will change with premiums collected for June 2010 and generally each June thereafter. The University's annual contribution per enrolled employee is approximately \$4,868.

**3. DENTAL PLAN:** The University contributes 95% of the premium for the base dental plan (currently Willamette Dental) towards either dental plan you select. This year's PLU monthly contribution is \$42.47. The employee portion of the premium is deducted monthly from your pay on a pre-tax basis. Dependent coverage is available at the participant's expense. You may enroll in a dental plan even if you do not enroll in a medical plan. The annual value of the university's contribution towards the dental benefit is \$509.64 per enrolled employee.

You may choose between two dental plan options:

- **Washington Dental Service**
- **Willamette Dental of WA, Inc.**

**NOTE:** Employees who have group medical/dental insurance benefits from another source, whether through employment or otherwise, may not enroll on PLU's plans. (Example: individuals eligible for coverage under a spouse's plan elsewhere will need to decide if they want to enroll on that plan or on the PLU plan, but can't enroll on both.)

**4. LIFE INSURANCE:** The life insurance program is carried by The Hartford. The face value of the basic policy provided by the University is one times your annual salary, at an annual cost to PLU of approximately \$100 for each employee insured.

You may purchase supplemental term life insurance for yourself, your spouse and/or children through UNUM Life Insurance Company of America at reasonable group rates. You may also purchase dependent life insurance for \$1.20/month (\$5,000 coverage for spouse, \$2,500 coverage for a dependent child), sold as a unit for the whole family through The Hartford.

**5. DISABILITY INSURANCE:** After one year of employment, the University pays the premium for your The Hartford long-term disability (LTD) insurance at a typical annual per person cost of approximately \$210. The one-year waiting period may be waived for new employees who have had prior Group LTD coverage with no lapse in coverage and documentation of prior policy. In the event of long-term total or partial disability, the plan pays 60% of covered monthly salary to a maximum benefit of \$5,000 per month. Any deductible sources of income are subtracted from this payment. Benefits commence on the first of the month following 90 days of documented total or partial disability. In addition, the plan will make a monthly premium contribution to your retirement plan.

PLU also offers a buy-up supplemental long-term disability benefit that provides additional LTD coverage at employee expense, with the advantage of a group discount. You are eligible to apply for this benefit at the point when your PLU Group LTD base benefit starts. Rates vary individually based on age and benefits chosen.

**6. TUITION REMISSION, TUITION WAIVER, AND TUITION EXCHANGE:** The University has a strong commitment to life-long learning which it supports through the following tuition assistance programs and by offering a number of additional on- and off-campus professional development programs.

**Tuition Remission** - - The waiting period for tuition remission benefits for PLU courses is the beginning of the school term following completion of 90 days of service. Once this waiting period has been completed, an eligible employee and/or eligible dependents may apply for tuition remission. Tenured and tenure-track faculty are eligible for maximum tuition remission benefits for both themselves and eligible dependents as of their appointment date in a tenured or tenure-track position. Dependent eligibility is defined as a legal spouse, domestic partner (affidavit required), or a child who is under the age of 25, is unmarried, and is claimed as a dependent on the employee's IRS form 1040. The tuition remission benefit available at PLU is:

Employee Length of Service	Employee	Eligible Dependent
Less than 90 days	-0-	-0-
At least 90 days, and up to 1 full year	75%	25%
Over 1 full year, and up to 2 full years	90%	50%
Over 2 full years of service <b>or</b> tenured <b>or</b> tenure-track	90%	75%

Employees working at least half-time but less than full-time may multiply their full-time equivalence (FTE) by .75 or .90, depending on their length of service, to determine the percentage of remission. Tuition remission is also prorated for eligible spouses, domestic partners and dependent children. Graduate tuition remission is available to eligible employees, spouses and domestic partners and **may be considered taxable income** to the employee.

**Tuition Waiver** - - At the beginning of the school term following **completion of one year of service**, eligible employees may receive up to 12 credit hours of courses at 100% tuition remission during their entire length of service. While supervisor and vice president approvals are required, the courses need not be directly job-related.

**Tuition Exchange** - - The University participates in two programs which offer tuition exchange benefits for qualified dependents of eligible University employees.

- The Tuition Exchange, Inc., an association of over 600 institutions across the United States providing varying levels of tuition discounts. This benefit is available to full-time employees who have completed three years of service, and is based upon additional University criterion. The program is highly competitive and only a limited number of people typically receive the benefit each year. Website: [www.tuitionexchange.org](http://www.tuitionexchange.org)
- The Evangelical Lutheran Church in America (ELCA) Tuition Plan Program, a group of 24 colleges and universities related to the ELCA. Some of these institutions provide remission to qualified PLU dependents. This benefit is available to both full-time and part-time employees who have completed two years of service.

**7. EMPLOYEE ASSISTANCE PROGRAM (EAP):** The professional counselors at First Choice EAP provide a free problem assessment and referral service where you and your immediate family members can go for help in solving a variety of emotional, behavioral, family, relationship, financial, elder care and mental health or chemical dependency concerns. Complete confidentiality is assured. The annual cost to the University of providing employees with this benefit is approximately \$15,168 in total fees. Website: [www.FirstChoiceEAP.com](http://www.FirstChoiceEAP.com)

**8. REIMBURSEMENT ACCOUNTS:** Employees may elect to participate in a Section 125 Flexible Spending Account. Expenditures for dependent care costs and some health care expenses not covered by insurance may be withheld from pay on a pre-tax basis. Employees save Social Security tax in addition to federal income tax. Elections are made each spring for the following fiscal year and may not be changed unless there is an IRS-defined qualifying event. Employees who elect the Essentials Plan and who do not enroll dependents will receive a monthly contribution of \$75.00 towards a health care reimbursement account.

The **GoodFit** Benefit Book website outlines the eligible expenses. The annual cost to the university for providing program administration is approximately \$6,698 in total fees. Website: [www.afadvantage.com](http://www.afadvantage.com)

**9. SOCIAL SECURITY AND MEDICARE BENEFIT PROGRAM:** The University matches your contribution each year with a contribution into your Social Security retirement account. A rough computation of the cost of this contribution can be made by multiplying .0765 times your annual salary, up to \$106,800 in earnings in calendar year 2010. The University's contribution on salaries above \$106,800 can be determined by multiplying that portion by .0145.

**10. WORKER'S COMPENSATION:** The University pays approximately 66% of the premium for your state industrial insurance which covers you in the event of on the job injury or work-related illness. At current rates the University will contribute \$299.28 for the calendar year 2010 for each full-time salaried employee.

**11. TRAVEL INSURANCE:** Employees are covered for up to \$150,000 in accidental death and dismemberment insurance when traveling on University business. In addition, there is a **24-hour Travel Insurance Program** that provides on-call professionals to assist employees with medical and travel emergencies, when they are 100 miles or more from home/campus on pre-approved travel related to the business and curriculum of the University.

**12. VACATION:** Although faculty members do not accumulate vacation in the same sense as do staff, the number of days of released time due to breaks and recesses averages at least 12 for the nine-month school year.

**13. HOLIDAYS:** The number of University-observed holidays varies slightly each year. During fiscal year 2010-2011, there will be 13 paid holidays during the period September 2010 through May 2011. It should be noted that the specific days on which the holidays are celebrated are not counted in item #12 above.

**14. MEDICAL LEAVE:** Any regular faculty member (tenure or tenure-track) in a "with benefits" employment status who has completed at least one year of employment with PLU may request from the applicable academic administrator a Family/Medical Leave of Absence (which may be paid or unpaid) for up to one academic semester, or up to twelve weeks, whichever is greater. Eligibility for these medical leaves, and their terms and conditions are explained in the Faculty Family/Medical Leaves of Absence Policy.

**15. TRANSPORTATION INCENTIVES:** The University encourages employees to care for the environment and reduce traffic congestion by using alternative transportation to get to work. PLU and Commute Smart encourages the use of alternative transportation methods by offering preferential parking for carpoolers, an annual transit pass (a small portion of which is paid by the employee), PLU Zipcars for business or personal use and an Emergency Ride Home program, among other benefits. Website: [www.plu.edu/commute](http://www.plu.edu/commute)

**16. DOMESTIC PARTNER:** The University provides benefits to eligible same sex and opposite sex domestic partners of "with benefits" employees on the same basis that benefits are extended to legal spouses. A signed affidavit is required. See Domestic Partner Policy and Guidelines on HR website for more information.

**17. MISCELLANEOUS:** No attempt has been made to calculate the value of the University's payment for unemployment compensation, emergency death benefits, or the value an individual might receive from the use of a university identification card to obtain free or discounted admission to the various facilities, productions and events.

**NOTE:** The above descriptions provide only a summary of benefits. To obtain a more thorough explanation of these benefits, please refer to the **Good Fit** Benefit Book website, the Faculty Handbook, the Personnel Policies and Procedures Manual, and to Summary Plan Descriptions. Pacific Lutheran University reserves the right to amend or revise any and all benefits in order to comply with regulatory changes and/or to meet the University's objectives. In the event of any question, the plan document will prevail.

(Dec 2010)

# PLU's Good Fit Medical Plan Options effective 6/1/2010

	Alliant Select	Alliant Plus		Group Health Essentials
<b>Providers</b>	In Network – Group Health and Virginia Mason	In Network – Group Health and Virginia Mason	Out of Network – First Choice, or any licensed provider	In Network – Group Health only
<b>Deductible</b> Deductible does not apply to preventive care, prescription drugs or vision exams/ hardware.	\$200/individual, \$400/family	Deductible combined, whether for in or out of network care: \$350/individual, \$700 /family		\$1,000/individual, \$2,000/family
<b>Out-of-Pocket (OOP) Maximum</b>	\$2,000/individual \$4,000/family	OOP Maximum combined for in and out of network care: \$2,000/individual; \$4,000/family		\$2,000/individual \$4,000/family
<b>Lifetime Maximum</b>	Unlimited	Unlimited	Unlimited	Unlimited
<b>Office Calls (Visits)</b>	\$20 copay, then 100%	\$15 copay, then 90%	\$20 copay, then 80%	\$20 copay, then 80%
<b>Hospitalization</b>				
Emergency Room	\$75 copay-in network / \$125 non-network	\$75 copay-in network / \$125 non-network	\$125 non-network	\$75 copay-in network / \$125 non-network
Outpatient	100%	90%	80%	80%
Inpatient	100%	90%	80%	80%
<b>Preventive Care</b>	Not subject to deductible Paid in full after \$20 copay on office calls	Not subject to deductible Paid at 90% after \$15 copay on office calls	Not subject to deductible Paid at 80% after \$20 copay up to \$300/person, \$600/family per year	Not subject to deductible Paid at 80% after \$20 copay on office calls
<b>Prescriptions</b>	Not subject to deductible Generic \$15 copay / 30-day supply Brand \$30 copay / 30-day supply Mail Order 90-day supply for 2 copays (for those on GH's list)	Not subject to deductible Generic \$15 copay / 30-day supply Brand \$30 copay / 30-day supply Mail Order 90-day supply for 2 copays (for those on GH's list)	Not subject to deductible Generic \$20 copay / 30-day supply Brand \$35 copay / 30-day supply Mail Order Not available	Not subject to deductible Generic \$15 copay / 30-day supply Brand \$30 copay / 30-day supply Mail Order 90-day supply for 2 copays (for those RX GH's list)
<b>Vision</b>	Not subject to deductible	Not subject to deductible	<b>Subject to deductible</b>	Not subject to deductible
Eye Exam	1 per 12 months (\$20 copay applies)	1 per 12 months (\$15 copay applies)	1 per 12-months (subject to \$20 copay and 80%)	1 per 12 months (\$20 copay applies)
Hardware	Not subject to deductible Covered up to \$150 in 24-month period	Not subject to deductible Covered up to \$150 in 24-month period	Not subject to deductible Covered up to \$150 in 24-month period	Not subject to deductible Covered up to \$150 in 24-month period
<b>Chiropractic</b>	10 visits per year (\$20 copay applies)	10 visits per year (\$15 copay applies)	80% (\$20 copay applies)	10 visits per year (\$20 copay applies)
<b>Hearing Benefit</b>	\$1,000 every 36 months	\$1,000 every 36 months		\$1,000 every 36 months
<b>Most other benefits</b>	80%	80%	80%	80%
<b>Out of network</b>	None except emergencies	N/A	See above	None, except emergencies

Monthly Rates	Alliant Select	Alliant Plus	GH Essentials	
	<b>PLU's contribution - \$405.74</b>			<b>PLU's contribution</b>
<b>Employee Only</b>	<b>\$21.35</b> (was \$20.79)	<b>\$26.47</b> (was \$25.72)	<b>\$5.00</b>	\$310.91 plus <b>\$75.00/mo (\$900/year)</b> deposited to Flexible Spending Account
<b>With a Spouse/ Domestic Partner</b>	<b>\$450.49</b> (was \$438.60)	<b>\$460.78</b> (was \$448.52)	<b>\$227.61</b> (was \$221.25)	<b>\$405.74</b> (was \$395.02)
<b>With a Spouse/DP + 1 child</b>	<b>\$669.72</b> (was \$652.04)	<b>\$682.62</b> (was \$664.48)	<b>\$360.66</b> (was \$347.79)	<b>\$434.86</b> (was \$426.28)
<b>With Spouse/DP + 2 or more children</b>	<b>\$888.94</b> (was \$865.47)	<b>\$904.46</b> (was \$880.43)	<b>\$491.33</b> (was \$471.58)	<b>\$466.35</b> (was \$460.28)
<b>With 1 child</b>	<b>\$240.57</b> (was \$234.22)	<b>\$248.31</b> (was \$241.68)	<b>\$43.22</b> (was \$38.90)	<b>\$434.86</b> (was \$426.28)
<b>With 2 or more children</b>	<b>\$459.75</b> (was \$447.61)	<b>\$470.14</b> (was \$457.63)	<b>\$173.85</b> (was \$162.65)	<b>\$466.35</b> (was \$460.28)

This is a brief comparison of the **Good Fit** medical plans' major benefit provisions. It is not intended to provide you with a full description. If you have questions about a particular benefit, please contact PLU's Human Resources at x7185.

# PLU's Good Fit Dental Plan Options effective 6/1/2010

	Washington Dental Service (WDS)		Willamette Dental of WA, Inc.
<b>Provider Network</b>	<i>In network</i>	<i>Out of network</i>	All care must be obtained from a Willamette Dental Clinic. There are more than 25 locations throughout Washington including: <ul style="list-style-type: none"> <li>• Federal Way: 181-South 333<sup>rd</sup> Street, Suite C-100</li> <li>• Lakewood: 9307 Bridgeport Way S.W.</li> <li>• Olympia: 3773-C Martin Way, Suite 105</li> <li>• Puyallup: 702 South Hill Park Drive, Suite 201</li> <li>• Renton: 1000 Oaksdale Avenue SW, Suite 100</li> <li>• Seattle: 133 Dexter Avenue North</li> <li>• Silverdale: 3505 Anderson Hill Road</li> <li>• Tacoma: 5401-6<sup>th</sup> Avenue, Suite 101</li> <li>• Tumwater: 6120 Capital Boulevard South</li> </ul> Call 1-800-359-6019 for a complete locations list.
	A WDS Preferred Provider	A WDS Premier Provider (to limit your balance to PLU's coinsurance difference and ensure direct billing)	
	Go to <a href="http://www.deltadentalwa.com">www.deltadentalwa.com</a> or call <b>1-800-554-1907</b>		
<b>Deductible –</b> Annual calendar year Waived for Class 1?	\$50 <i>Yes</i>	\$100 <i>Yes</i>	No deductible N/A
<b>Office call copayments</b>	None	None	\$15 (Missed appointment = \$30) Specialist = \$30 ER during office hours = \$50 ER after office hours = \$70
<b>Class I – Preventive Care</b> Cleanings, x-rays, fluoride treatments	100%	90%	100%
<b>Class II – Basic Care</b> Fillings, extractions	80%	60%	100% for fillings & extractions 100% for root canals 100% for surgical extractions, bone surgery and root planing
<b>Class III – Major Care</b> Inlays, onlays & dentures	50%	30%	\$150 copay/tooth for bridges & crowns \$275 complete denture (upper or lower) \$150/tooth (pontic, cast, bridge pontics) \$75, \$90, \$125 copay root canals \$50 copay for surgical extractions Implants – see updated schedule for copays
<b>Class IV – Orthodontics</b>	None	None	Applies toward orthodontic copayment: <ul style="list-style-type: none"> <li>• Initial orthodontic exam \$25</li> <li>• Study models and X-rays \$125</li> <li>• Cast presentation \$0</li> </ul> Orthodontic service \$1,500 copay
<b>Calendar Year Maximum</b> Per covered individual	\$1,500	\$1,500	No annual maximum except for TMJ at \$1,000 per year to a lifetime maximum of \$5,000
<b>Waiting Periods</b>	None	None	None

## Monthly Rates, after PLU's contribution of \$42.47 (at 95% of Willamette Dental Plan) –

Employee only	\$8.63 (was \$5.60)	\$2.23 (no change)
With a Spouse/Domestic Partner	\$58.18 (was \$52.20)	\$47.43 (no change)
With a Spouse/DP and Child or Children	\$118.72 (was \$109.15)	\$101.23 (no change)
With a Child or Children	\$68.11 (was \$61.54)	\$ 56.28 (no change)

This is a brief comparison of the Good Fit dental plans' major benefit provisions. It is not intended to provide you with a full description. If you have questions about a particular benefit that is not covered here, please contact the carrier or call PLU's Human Resources at x7185