Important Note:
The employee benefit programs described in this guide are effective in 2024. The information in this guide is a summary of IC's benefits, and every attempt has been made to ensure its accuracy. The actual provisions of each benefit program will govern if there is any inconsistency between the information in this guide and IC's formal plans, programs, policies, or contracts, or any subsequent change in such plans, programs, policies, or contracts.
We are pleased to provide you with a wide range of competitive benefits that are a vital part of your total compensation. You have the flexibility to select the health plan(s) that best meet your needs and elect additional benefits to protect your income, build financial security, and balance your work and personal life.

Please take the time to review this brochure to make sure you understand the benefits that are available to you and your family.

✓ MEDICAL: Choose among two (2) plan options from HealthComp.
✓ DENTAL: Choose between two (2) plan options from Guardian Dental. The coinsurance and premiums are the main differences in plans.
✓ VISION: As a benefit-eligible employee, your vision insurance is free to you. You can choose to add coverage for your dependents at your expense.
✓ FLEXIBLE SPENDING ACCOUNTS (FSAs) AND HEALTH SAVINGS ACCOUNT (HSA): Put aside pre-tax dollars for qualifying expenses with a Health FSA, Dependent Care FSA, or HSA (to enroll in an HSA, you must be enrolled in the Base Plan medical option).
✓ OTHER VOLUNTARY BENEFITS: You can purchase the following voluntary plans at competitive rates:
  • Critical Illness - Provides a cash benefit for a range of covered serious illnesses, such as Cancer, Stroke and Heart Attack, in addition to whatever your medical insurance may cover.
  • Accident - Provides a cash benefit for covered injuries, treatments and services, in addition to what your medical insurance may cover.
  • Hospital Indemnity - Provides a cash benefit when you are admitted to a hospital, whether or not the charges are covered by your medical insurance.

✓ LIFE INSURANCE
  • You are eligible to receive insurance coverage for a total of one times your annual salary at no cost to you. You are also eligible for Accidental Death and Dismemberment insurance, which is equal to an additional one times your annual salary. Minimal dependent coverage is also offered at no cost to you.
  • You can purchase additional coverage up to $500,000, with a guaranteed issue of $150,000. Additionally, you can purchase term life insurance coverage for your spouse, domestic partner, and/or dependents.

✓ LONG-TERM DISABILITY
  • As a full-time employee, you can elect long-term disability insurance through the Hartford. The disability insurance benefit pays 60% of your base salary.

✓ OTHER BENEFITS
  • The College offers many other benefits to employees, including Retirement, TelaDoc, Rightway Healthcare Concierge, MeMD, Wondr, LegalEase, AirEvac insurance, LifeLock Identity Theft Protection, BenefitHub Discount Program, and others. Please review this document for more information about these tools and resources.
WHO IS ALEX AND HOW CAN IT HELP ME?

We understand that making decisions around benefits is important to all of our employees, but at times can be both difficult and confusing.

To enhance your understanding and to make YOUR benefit experience easier, we are excited to offer ALEX, a virtual benefit counselor. ALEX is an interactive decision making support tool that can help you decide which benefit options are right for YOU! Think of it as your personal guide that helps you make important benefit decisions.

HERE ARE IMPORTANT THINGS TO KNOW ABOUT ALEX

It’s personalized, so you can see which plan makes the most sense for YOU, not your coworkers, or your boss.

It’s fun to use. There’s no boring insurance jargon or complicated legal jibber-jabber.

It’s confidential, so you can get the guidance you need without revealing all of your fascinating secrets.

It’s available all year! You can find out information about your benefits at any time and your significant other can use it as well!

*Please be aware that Alex is a support tool and NOT where you make your actual benefit elections

SEE HOW ALEX CAN HELP AT:

www.myalex.com/Illinois-college/2024
**MEDICAL AND PRESCRIPTION DRUG**

Illinois College offers two (2) coverage plans through HealthComp, which uses a Value Driven Health Plan. Below is a summary of the plan highlights. To search for preferred providers, visit [hconlinex.healthcomp.com](http://hconlinex.healthcomp.com). For full plan details, please visit [Connect2](#).

<table>
<thead>
<tr>
<th>PLAN NAME</th>
<th>BASE</th>
<th>BUY UP</th>
</tr>
</thead>
<tbody>
<tr>
<td>HRA*</td>
<td>N/A</td>
<td>$1,500 / $3,000</td>
</tr>
<tr>
<td>HSA*</td>
<td>$1,000 / $2,000</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**In Network Coverage**

<table>
<thead>
<tr>
<th></th>
<th>Deductible</th>
<th>$3,000 / $6,000</th>
</tr>
</thead>
</table>

**Embedded/Non-embedded Deductible**

<table>
<thead>
<tr>
<th></th>
<th>Plan pays 80%</th>
<th>Plan pays 80%</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Out-of-Pocket Max</th>
<th>$5,000 / $10,000</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th></th>
<th>$40 Copay</th>
<th>$60 Copay</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th></th>
<th>$300 Copay</th>
<th>$100 Copay</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th></th>
<th>$15 / $45 / Deductible, then $75**</th>
</tr>
</thead>
</table>

*The Buy Up Plan provides a Health Reimbursement Account (HRA) that will cover the first $1,500 of deductible expenses for Employee Only, and $3,000 for Employee + Spouse, Employee + Child(ren), and Employee + Family. These claims will be automatically paid by HealthComp, so no HRA card is required.

*The Base Plan provides a Health Savings Account (HSA) that will give you $1,000 for Employee Only, and $2,000 for Employee + Spouse, Employee + Child(ren), and Employee + Family for any qualified medical, dental and vision expenses.

**Mail Order Pharmacy provides 90-day prescriptions for 33% off the 30-day supplies. Visit [www.Cap-RX.com](http://www.Cap-RX.com) to register for mail order pharmacy and to view the Prescription Formulary (to determine Tier 1, 2 or 3).**

<table>
<thead>
<tr>
<th>Family Plan Information:</th>
<th>Plan</th>
<th>Maximum Family Deductible</th>
<th>Maximum Family Out-of-Pocket Max</th>
</tr>
</thead>
<tbody>
<tr>
<td>Buy Up Plan</td>
<td>$6,000 (2 individuals)</td>
<td>$10,000</td>
<td></td>
</tr>
<tr>
<td>Base Plan</td>
<td>$8,000 (2 individuals)</td>
<td>$12,000</td>
<td></td>
</tr>
</tbody>
</table>

*Each member experiences claims as an individual as illustrated above; individual claims count toward the family maximum's

---

**PRESCRIPTION DRUG COVERAGE - All medical plans include a prescription drug benefit, which is counted toward the plan deductible.**

**When will I receive my medical ID card?**

You will receive your ID card two to three weeks after you submit your enrollment information. If you need medical coverage before receiving your ID card, contact the Office of Human Resources for your member information.
Teladoc Virtual Visits
Illinois College offers a virtual visit solution, powered by Teladoc, that lets you have a live consultation with an independently contracted board-certified doctor. Your visit can happen 24 hours a day, seven days a week by mobile app, online video, or phone. Instead of going to the office, you can have a virtual visit while at home, work or many other places. Plus, a virtual visit will be covered at no copay and is available to all benefit-eligible employees whether or not you are enrolled in a medical plan. Activate your account by downloading the Teladoc App.

GLOSSARY
Here’s a quick refresher on commonly used insurance terms:

ALLOWABLE CHARGE is the dollar amount typically considered payment in full by an insurance company and an associated network of health care providers.

COINSURANCE is the amount you pay, as a percentage of the allowed cost of your services, after you reach the deductible and until you reach the plan’s out-of-pocket maximum.

COPAYMENT (COPAY) is a fixed amount you pay for a health care service or prescription drug.

DEDUCTIBLE is the amount you pay before your insurance begins covering certain services, such as hospitalization or outpatient surgery.

DRUG FORMULARY is a list of prescription drugs, maintained by medical professionals, that practitioners use to identify drugs that offer the greatest overall value.

FLEXIBLE SPENDING ACCOUNT (FSA) refers to funds you contribute to spend toward eligible medical expenses. Only a certain amount can rollover each plan year, so you must use most of your election.

HEALTH REIMBURSEMENT ACCOUNT (HRA) refers to funds offered by Illinois College to pay for eligible medical expenses. This money is retained by Illinois College if not used.

HEALTH SAVINGS ACCOUNT (HSA) refers to funds contributed by Illinois College to pay for eligible medical expenses. You have the option to contribute additional funds. These funds are retained by you if not used.

OUT-OF-POCKETMAXIMUM is the most you pay per plan year for health care expenses, including prescription drugs. Once you reach this limit, the plan pays 100% for the remainder of the plan year.

OVER-THE-COUNTER (OTC) refers to an item purchased at a pharmacy that doesn’t require a prescription or medical order for purchase but is an eligible expense for FSA/HSA/HRA accounts.

PREMIUM is the amount you pay for insurance, using pre-tax or post-tax dollars via payroll deductions. Illinois College pays a portion of the premium.
1. WHAT IS A VALUE-DRIVEN HEALTH PLAN (VDHP)?
Value-Driven Health Plans use Medicare-based reference pricing to establish a fair price for medical services that is mutually beneficial to both the member and the provider. Used with MultiPlan’s PHCS for Value-Driven Health Plan Network, a VDHP delivers a better experience for plan members, and the providers that treat them.

2. HOW DOES HST SET PRICES?
HST’s pricing methodology are at the heart of a Value-Driven Health Plan and establishes the prevailing prices for medical services by using objective data such as:
- Medicare rates
- Cost data
- Average reimbursements/payments
- Medicare Provider Reimbursement Manual
- Other public and private data sources

3. HOW TO ACCESS CARE?
- Facilities: For inpatient and outpatient services, your Plan is open access, allowing you to choose any facility. VDHPs ensure that you are not over paying for your medical services. Here are a few examples of covered services: Hospitals, Surgery Centers, Emergency Room
- The PHCS Network for Value-Driven Health Plans will still be utilized for physician and other non-hospital provided services. Your out-of-pocket expenses will be less when you see a physician within the network.
- HST Connect mobile app and website can be used to find providers in both categories.

4. HOW DOES A VALUE-DRIVEN HEALTH PLAN WORK?
The flowchart below explains the process.
5. HOW DO I SEARCH FOR A PROVIDER?
Use HST Connect for access to quality, cost effective healthcare in the palm of your hand. The HST Connect mobile app features include:

- Search for a provider in-network or with high acceptance rates
- Compare quality ratings and pricing for specific procedures
- View deductibles, copays and other plan information
- Direct dial providers and get driving directions
- Prescription pricing estimates
- Look up information about procedures
- Submit balance bills directly to PAC through the app
- Access to HST’s Provider Acceptance Rates
- Communicate and receive notifications from Patient Advocacy Center (PAC)

PAC Contact Information
Monday – Friday
7:00 am – 5:00 pm PST
Phone: (888) 837-2237
E-mail: pac@hstechnology.com
Fax: (949) 891-0420

6. WHAT IS THE HST PATIENT ADVOCACY CENTER (PAC)?
PAC is an exceptional service HST offers to members of a VDHP if they receive an unexpected bill. PAC’s role is to educate, communicate, negotiate on behalf of, and represent the member in the rare instances of balance billing. A Patient Advocate will then contact the provider and act as a liaison between the provider and member. Members can feel confident that they have an advocate making sure they are being billed fairly for medical services and that they are receiving a fair price. PAC communicates with members via: HST Connect, emails, phone calls and text messages.

7. WILL MY CURRENT PROVIDERS ACCEPT VDHPS?
Providers are required to adhere to your benefit plan. If a provider has questions, they can confirm your coverage by calling the phone number on your identification card. If an agreement can not be made, alternative accepting providers in your area will be recommended.

8. WHAT HAPPENS IF A PROVIDER BALANCE BILLS ME?
If a provider bills you for an amount above the patient responsibility identified on your Explanation of Benefits (EOB), don’t pay the bill! Instead, contact our Patient Advocacy Center (PAC) and a Patient Advocate will take over your case and deal directly with the provider so you don’t have to.

9. HOW DO I KNOW HOW MUCH I WILL BE CHARGED FOR MY PROCEDURE?
By utilizing HST Connect you can view your estimated cost up front. You will be responsible for your copay, deductible and coinsurance up to the annual out-of-pocket max.
SPENDING, SAVINGS, AND REIMBURSEMENT ACCOUNTS

FLEXIBLE SPENDING ACCOUNT (FSA)

By allowing you to set aside money directly from your paycheck before taxes are taken out, Flexible Spending Accounts (FSAs) are a great way to save money for eligible expenses and to lower your taxable income. You can use that tax-free money to pay for eligible out-of-pocket health care and covered dependent care expenses. IC offers the following FSA options, administered by Marpai:

Health FSA
- Pay for eligible medical, dental, and vision care expenses such as copays, coinsurance, deductibles, medical supplies and equipment, mental health and substance abuse treatment, orthodontia, and eyeglasses and contact lenses for yourself and your eligible dependents.
- Contribute up to $3,200 per year.
- You are not required to participate in the Illinois College group health plan to participate in the FSA.
- If you enroll in the Basic plan, you’re not eligible for the Health FSA.

Dependent Care FSA
- Pay for eligible dependent care (for a child under age 13) or adult care expenses, including day care, care for a disabled spouse or dependent, after-school care, and many types of summer camps. This account is NOT for a dependent’s health expenses.
- Contribute up to $5,000 per family per year ($2,500 if you are married and filing taxes separately).

Estimate carefully with an FSA
Per IRS regulations, FSAs are use-it-or-lose-it accounts, which means you will forfeit any amount in excess of $640 at the end of the Plan Year. Only $640 will rollover to the next calendar year (Health FSA only). You have until December 31, 2024, to incur eligible expenses and until March 31, 2025 to submit requests for reimbursement.

Managing your FSA
You can easily manage your FSA by visiting https://msave.maestrohealth.com/Page/Home. On the website, you can check your FSA balance, file claims, enroll in direct deposit for reimbursements, and learn more about eligible expenses.

When it comes to spending, not all FSAs are the same
- With the Health FSA, you can spend up to the full amount of your annual election as soon as your account has been set up.
- With the Dependent Care FSA, you can be reimbursed only up to the amount in your account at the time you request reimbursement.
- All eligible expenses must be incurred on or after January 1, 2024.
SPENDING, SAVINGS, AND REIMBURSEMENT ACCOUNTS

HEALTH SAVINGS ACCOUNT (HSA)

If you enroll in the Basic Plan, you can contribute to a Health Savings Account (HSA) to help pay for current and future eligible health care expenses. An HSA is similar to an FSA, but with some important differences.

How does an HSA work?

• Your HSA enrollment begins the first day of coverage, January 1, 2024.
• Once your HSA is open, IC will make a tax-free contribution to your HSA totaling $1,000 annually if you are enrolled in individual coverage or $2,000 annually if you are enrolled in one of the other coverage levels. IC contributions will be made on a monthly basis.
• You can also make pre-tax contributions via payroll deductions (up to federal limits). If you do not wish to make your own contributions, make a $0 election. You can make changes to your annual election anytime during the plan year.
• You can withdraw that money, tax-free, to pay eligible out-of-pocket medical expenses, as well as dental and vision expenses, or you can save that money for future health care expenses.
• You will receive a debit card to use with your HSA from mSave, the HSA administrator.
• You can invest your funds after your balance reaches at least $1,000 in your choice of investment options, all of which enable you to generate tax-free earnings.

Who is eligible for an HSA?

• You must be a resident of and work and pay taxes in the United States.
• You cannot be covered under a non-HDHP plan (such as a spouse’s HMO plan) or the Buy Up plan.
• You cannot be enrolled in Medicare.
• Neither you nor your spouse, if you are married, can be enrolled in a Health FSA.

HELPFUL TIP: With an HSA, the money in the account is yours to keep. Unlike an FSA, your funds don’t expire, which means you can roll your money over from year to year.

Important: If you use the $1,000 or $2,000 HSA contribution from Illinois College toward expenses not counted toward your medical plan deductible (like dental, vision, or OTC purchases), you will be responsible for the additional portion of the medical plan deductible.

<table>
<thead>
<tr>
<th>Coverage Level</th>
<th>HSA Contribution under Age 55</th>
<th>HSA Contribution for Age 55+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
<td>$4,150: Includes $3,150 employee contribution + $1,000 IC contribution</td>
<td>$5,150: Includes $4,150 employee contribution + $1,000 IC contribution</td>
</tr>
<tr>
<td>Family</td>
<td>$8,300: Includes $6,300 employee contribution + $2,000 IC contribution</td>
<td>$9,300: Includes $7,300 employee contribution + $2,000 IC contribution</td>
</tr>
</tbody>
</table>

2022 HSA MAXIMUM CONTRIBUTIONS
HEALTH AND WELFARE

SPENDING, SAVINGS, AND REIMBURSEMENT ACCOUNTS

HEALTH REIMBURSEMENT ACCOUNT (HRA)
If you enroll in the Core medical plan, Illinois College will open a Health Reimbursement Account (HRA) to help pay for eligible health care expenses incurred in the plan year. The HRA reimburses a portion of deductible expenses.

How does an HRA work?
Your HRA claims will automatically be processed by HealthComp when you have a claim that applies to the deductible. The one exception to this is Tier 3 prescriptions that apply to the deductible; these claims will need to manually be submitted for reimbursement. The claims that are automatically processed will be paid to the provider lowering your deductible responsibility. The HRA is funded 100% by Illinois College, and funds not used are returned to Illinois College at the end of the claim submission period. Eligible expenses must be incurred January 1, 2024 through December 31, 2024. Illinois College will give you $1,500 as an individual or $3,000 if you are enrolled with dependents. If an employee enrolls after January 1, this amount will be pro-rated based the month coverage begins.

Paying for Services with an FSA or HSA
When you enroll in the Basic plan with the HSA or enroll in an FSA, you will receive a debit card, allowing for easy, convenient payment at participating providers and merchants. Although you do not need to file for reimbursement when using your card, you may be required to submit documentation, so please save your receipts.

- Use your debit card at the point of sale to pay the provider directly.
- If the provider doesn’t accept a debit card, either pay for expenses out-of-pocket and submit receipts for reimbursement.
DENTAL

As a benefit-eligible employee, you may participate in the dental program, which includes dentists in the Guardian network. Dental coverage provides for key preventative services and helps offset potentially expensive dental procedures.

Make the most of your plan

Locate participating dentists by visiting www.guardiananytime.com and clicking on "Find a Provider." Although you may use non-participating dentists, you’ll pay more than you would if you used a participating dentist.

When you visit a participating dentist, you don’t have to complete claim forms, and you cannot be billed for the difference between your dentist’s rate and Guardian’s allowed charges (negotiated rates for services).

Employees can select among two (2) plan options: the Base plan or the BuyUp plan. The information below reflects a summary of plan coverage. For full plan details, please visit Connect2.

<table>
<thead>
<tr>
<th>Benefits</th>
<th>Base Plan In-Network</th>
<th>Base Plan Out-of-Network</th>
<th>Buy-Up Plan In-Network</th>
<th>Buy-Up Plan Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible (Single / Family)</td>
<td>$50 / $100</td>
<td>$50 / $100</td>
<td>$50 / $100</td>
<td>$50 / $100</td>
</tr>
<tr>
<td>Preventive</td>
<td>80% (Ded Waived)</td>
<td>80% (Ded Waived)</td>
<td>100% (Ded Waived)</td>
<td>100% (Ded Waived)</td>
</tr>
<tr>
<td>Basic</td>
<td>50%</td>
<td>50%</td>
<td>90%</td>
<td>80%</td>
</tr>
<tr>
<td>Major</td>
<td>50%</td>
<td>50%</td>
<td>60%</td>
<td>50%</td>
</tr>
<tr>
<td>Annual Maximum</td>
<td>$1,000</td>
<td></td>
<td>$1,500</td>
<td></td>
</tr>
<tr>
<td>Orthodontia</td>
<td>Not Covered</td>
<td>Not Covered</td>
<td>50% up to $1,000 (Children Only)</td>
<td></td>
</tr>
</tbody>
</table>

*Guardian Dental plans provide a maximum rollover benefit, which allows employees to save unused claims dollars for future years. To qualify for a Maximum Rollover Account (MRA), you must have a paid claim (not just a visit) and must not have exceeded the paid claims threshold during the benefit year.

When will I receive my dental ID card?
You will receive an ID card for dental coverage two to three weeks after you submit your enrollment information. If you need to use this benefit before receiving your ID card, call the Office of Human Resources to obtain your member number.

Need Assistance? Call the Guardian Helpline
(888)600-1600, weekdays, 8A-830P EST. Reference plan number 00532427.
VISION CARE

Illinois College offers vision insurance to benefit-eligible employees. The College covers 100% of the employee premium, so the coverage is free to you as a benefit-eligible employee. You can pay for additional coverage for your spouse, domestic partner, or child(ren). The vision benefit plan is provided through Guardian. For full plan details, please visit Connect2.

<table>
<thead>
<tr>
<th>Benefits</th>
<th>In-Network (VSP Choice Network)</th>
<th>Out-of-Network</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exam</td>
<td>$20 Copay</td>
<td>Up to $39</td>
<td>Every 12 Months</td>
</tr>
<tr>
<td>Lenses</td>
<td>$20 Copay</td>
<td>Single Vision – Up to $23</td>
<td>Every 12 Months</td>
</tr>
<tr>
<td>- Single Vision</td>
<td></td>
<td>Lined Bifocal – Up to $37</td>
<td></td>
</tr>
<tr>
<td>- Lined Trifocal</td>
<td></td>
<td>Lined Trifocal – Up to $49</td>
<td></td>
</tr>
<tr>
<td>Frames</td>
<td>Covered at 100% up to $130</td>
<td>Up to $46</td>
<td>Every 24 Months</td>
</tr>
<tr>
<td>(20% off amount over $130)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contacts (Medically Necessary)</td>
<td>Covered at 100%</td>
<td>Up to $210</td>
<td>Every 12 Months</td>
</tr>
<tr>
<td>Contacts (Elective) (In lieu of lenses)</td>
<td>$130 Allowance</td>
<td>Up to $100</td>
<td>Every 12 Months</td>
</tr>
</tbody>
</table>

When will I receive my vision ID card?
You will receive an ID card for vision coverage two to three weeks after you submit your enrollment information. If you need to use this benefit before receiving your ID card, call the Office of Human Resources to obtain your member number.
CRITICAL ILLNESS, ACCIDENT, AND HOSPITAL INDEMNITY COVERAGE

Illinois College offers voluntary benefits through Guardian, including supplemental Critical Illness, Accident, and Hospital Indemnity insurance. The below information is intended as a summary of plan coverage and is not the official plan document. For full plan details, please visit Connect2.

CRITICAL ILLNESS

Critical Illness insurance provides a cash benefit for a range of covered serious illnesses such as Cancer, Stroke and Heart Attack, in addition to whatever your medical insurance may cover. Payments are made directly to you and can be used for any purpose. You may choose coverage options for yourself, a spouse/domestic partner and/or child(ren). The plan includes limitations for pre-existing conditions. Coverage continuation is included in the plan if you terminate employment.

<table>
<thead>
<tr>
<th>Benefit Amount Up To 50% of Employee Amount to a Maximum of $5,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benefit Amount</td>
</tr>
<tr>
<td>$5,000 Employee</td>
</tr>
<tr>
<td>$10,000 Employee</td>
</tr>
<tr>
<td>$2,500 Spouse</td>
</tr>
<tr>
<td>$5,000 Spouse</td>
</tr>
</tbody>
</table>

Premiums based on your current age; child cost is included with your election; *Benefit reductions may apply for 70+ years (see plan).

ACCIDENT

Accident insurance provides a cash benefit for covered injuries, treatments and services, which occur outside of employment, in addition to whatever your medical plan may cover. Payments are made directly to you. Coverage continuation is included in the plan if you terminate employment.

<table>
<thead>
<tr>
<th>Your Monthly premium</th>
<th>$15.06</th>
</tr>
</thead>
<tbody>
<tr>
<td>You and Spouse</td>
<td>$25.60</td>
</tr>
<tr>
<td>You and Child(ren)</td>
<td>$26.50</td>
</tr>
<tr>
<td>You, Spouse and Child(ren)</td>
<td>$37.04</td>
</tr>
</tbody>
</table>

HOSPITAL INDEMNITY

Hospital Indemnity insurance provides a cash benefit when you are admitted to a hospital, whether or not these charges are covered by your medical plan. Benefit payments are made directly to you and can be used for any purpose. Coverage continuation is included in the plan if you terminate employment. The plan includes limitations for pre-existing conditions. Monthly premiums do not increase with age. Applicants over age 69 are not eligible. Spouse rate is based on your age.

<table>
<thead>
<tr>
<th>Your monthly premium</th>
<th>&lt;50</th>
<th>$17.14</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>50-59</td>
<td>$23.11</td>
</tr>
<tr>
<td></td>
<td>60-64</td>
<td>$36.94</td>
</tr>
<tr>
<td></td>
<td>65-69</td>
<td>$51.93</td>
</tr>
<tr>
<td>You and Spouse/Domestic Partner</td>
<td>&lt;50</td>
<td>$34.61</td>
</tr>
<tr>
<td></td>
<td>50-59</td>
<td>$46.13</td>
</tr>
<tr>
<td></td>
<td>60-64</td>
<td>$74.23</td>
</tr>
<tr>
<td></td>
<td>65-69</td>
<td>$102.64</td>
</tr>
<tr>
<td>You and Child(ren)</td>
<td>&lt;50</td>
<td>$28.71</td>
</tr>
<tr>
<td></td>
<td>50-59</td>
<td>$34.68</td>
</tr>
<tr>
<td></td>
<td>60-64</td>
<td>$48.51</td>
</tr>
<tr>
<td></td>
<td>65-69</td>
<td>$63.50</td>
</tr>
<tr>
<td>You, Spouse/Domestic Partner and Child(ren)</td>
<td>&lt;50</td>
<td>$46.18</td>
</tr>
<tr>
<td></td>
<td>50-59</td>
<td>$57.70</td>
</tr>
<tr>
<td></td>
<td>60-64</td>
<td>$85.81</td>
</tr>
<tr>
<td></td>
<td>65-69</td>
<td>$114.21</td>
</tr>
</tbody>
</table>

Need Assistance? Call the Guardian Helpline (888)600-1600, weekdays, 8A-830P EST. Reference plan number 00532427.
LIFE INSURANCE
Illinois College offers life insurance benefits through Guardian, including basic life insurance for you and your family, Accidental Death and Dismemberment insurance, and supplemental plans for you and your dependents. The below information is intended as a summary of plan coverage and is not the official plan document. For full plan details, please visit Connect2.

Basic Life Insurance and Accidental Death and Dismemberment
IC helps you protect your beneficiaries by providing complimentary group term life insurance and accidental death and dismemberment with benefits that are equal to a combined value of two times your annual base salary, rounded to the nearest $1,000. This insurance becomes effective the first day of the month after your hire date.

Dependent Term Life Insurance
IC pays for term life insurance coverage of $5,000 for a spouse or domestic partner and $2,500 per child. This insurance becomes effective the first day of the month after your hire date. This coverage is offered to your spouse and child(ren) without requiring them to provide evidence of good health.

Supplemental Life and AD&D Insurance
If you’d like additional protection, you can purchase optional term life insurance through payroll deduction. The additional life insurance benefit maximum is $500,000. Coverage can be purchased in increments of $10,000. Evidence of insurability isn’t required upon initial enrollment, provided you stay under $250,000. Evidence of insurability is required for enrollment at a later date for increased coverage over $250,000.

Beneficiaries
It’s important to designate at least one beneficiary for your life insurance policy. Designations are made in the HRIS system, Paycom.

Dependent Life Insurance
In order to apply for dependent life insurance, you must also elect coverage. You may enroll in Supplemental Life Insurance for your spouse/domestic partner and child(ren) within your first 30 days of eligibility.

You may elect up to no more than half of your elected voluntary benefit for your spouse/domestic partner. Evidence of insurability will be required for coverage over $50,000.

You may also obtain up to $10,000 per child (birth to 19 or age 26, if a student; unmarried) with no evidence of insurability.

Portability
If you leave IC, you may continue Basic, Supplemental, and Dependent Life Insurance with a portability or conversion option through Guardian.
LONG-TERM DISABILITY AND RETIREMENT
Illinois College offers Long-Term Disability and Retirement benefits for our benefit-eligible employees. The below information is intended as a summary of plan coverage and is not the official plan document. For full plan details, please visit Connect2.

LONG-TERM DISABILITY
If you are unable to work for over 90 calendar days due to illness or injury, you can protect you and your family from serious financial hardship with IC’s group Long-Term Disability (LTD) coverage.
• The plan pays for 60% of your monthly pre-disability earnings (tax-free), up to a maximum of $7,500 per month, for as long as you are determined by the LTD carrier to be disabled, up to a maximum benefit period, which is determined by your age when your disability begins.
• The College pays 50% of the premium for disability insurance.
• Please note that if coverage is not elected when your employment begins, you will be required to provide evidence of insurability prior to enrollment. The College recommends you carefully consider whether to participate in this benefit for your financial protection.
• Coverage begins the first day of the month after your hire date.

Pre-existing conditions
If you elect LTD coverage and have a pre-existing medical condition, you will not be eligible for coverage for that condition and/or related conditions unless you meet certain requirements. See plan document for additional details.

RETIREMENT PLANS
Illinois College is pleased to provide programs to help you save for retirement. We offer retirement plans that provide tax-advantages to you through TIAA-CREF. Please visit www.tiaa.org for more information.

Automatic enrollment
All eligible employees (those expected to work more than 1,000 hours per year, over 21 years old) are required to contribute 5% of their pre-tax earnings to the TIAA retirement account. IC matches with a 5% contribution. Employees who aren’t expected to work over 1,000 hours in their first year will experience a 1-year, 1,000 hours worked wait period for participation.

Additional savings options
In addition to the mandatory plan, IC offers two additional ways to save for your retirement. Eligible employees can contribute in these plans.
• A Pre-Tax option, in which your contributions are deducted from your paycheck before you pay taxes.
• A ROTH option, in which you make your payroll contributions after taxes, so your withdrawals during retirement are tax-free.

457(b) Deferred Compensation Plan
Certain highly compensated staff members may be eligible for a 457(b) Deferred Compensation Plan. If you are eligible for this plan, you will receive information from the Office of Human Resources.
OTHER BENEFITS, PERKS, AND SERVICES

MEDICAL EMERGENCY AIR TRANSPORTATION INSURANCE

Illinois College is pleased to provide Medical Emergency Air Transportation Insurance through the AirMedCare Network. Membership ensures no out-of-pocket expenses for medically necessary flights if flown by an AMCN provider. Membership also covers all dependents who use your home address as their primary address, and there is no limit to the number of transports each year.

Annual Premiums

<table>
<thead>
<tr>
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<th>Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Year Membership</td>
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</tr>
<tr>
<td>3 Year Membership</td>
<td>$170</td>
</tr>
<tr>
<td>5 Year Membership</td>
<td>$275</td>
</tr>
<tr>
<td>10 Year Membership</td>
<td>$520</td>
</tr>
</tbody>
</table>

Premiums will be deducted in July, August and September payrolls only, and enrollment will only be available once per year during annual open enrollment.

LEGALEASE LEGAL INSURANCE

LegalEase offers a variety of services for benefit-eligible employees, regardless of enrollment status. This insurance offers paid-in-full coverage for the common legal matters, set hours for specific legal matters, financial coaching with 10 hours of advice from certified financial counselors, and ID theft prevention and recovery assistance. The plan offers a network of 20,560+ lawyers across the US.

All benefit-eligible employees can access the Legal Library, which includes access to the following at no cost:

- Legal Corner DIY Resources
  - Online access to videos, articles, forms, budgeting tools, and live chat financial coaching
  - Free and unlimited certified financial coaching
  - Monthly online webinars covering legal and financial aspects of estate planning, eldercare, how to buy or sell a home, etc.
- KOFER Financial website with financial resources including videos, budgeting tools, etc.
- An unlimited amount of 30-minute consultations
- 15% discounted hourly rate if an attorney is retained

Services Available with Enrollment

In addition to the services listed above, employees who enroll will receive full coverage for any legal service they may require. Services available include the following. A detailed list of coverage is available on Connect2 and this website.

Premium Cost

To access the full services, employees will pay a premium of $19.68 per month. This provides coverage for you, your spouse and eligible dependents up to age 26.
OTHER BENEFITS, PERKS, AND SERVICES

RIGHTWAY HEALTHCARE CONCIERGE
As a Maestro member, you have access to Rightway Healthcare Concierge for you and your family at no cost to you. Rightway can help you with a variety of healthcare needs:
• Find you the best doctor and book your appointments
• Create tailored care plans and figure out next steps
• Provide upfront pricing on medical and pharmacy visits
• Explain medical bills and dispute charges on your behalf, if applicable

MEMD
As a Maestro member, you have access to free behavioral telehealth services for a variety of concerns including depression, anxiety, stress management, and addiction. Employees can connect with a provider online and receive a diagnosis and personalized treatment plan, including prescriptions for common medications, when medically necessary. MeMD can help when you need medical attention or behavioral health support after-hours or when your regular provider is not available.

MeMD schedules therapy appointments Monday through Friday from 9:00a to 7:00p. Many patients can meet with a therapist in as little as 24 hours of requesting an appointment. The program is available to employees and dependents (ages 16 to 26 for children) who are actively enrolled in one of the three IC medical plans.

WONDR
As a Maestro member, you have access to Wondr, which is a free 100% digital program that helps you lose weight by changing how you eat instead of what you eat. The program is broken into three simple stages that build on each other for lifelong, lasting results.
• WondrSkills: learn simple, repeatable skills through weekly master classes for 14 weeks
• WondrUp: Reinforce and practice WondrSkills through weekly, personalized curriculum
• WondrLast: Build momentum toward your healthiest self in the maintenance phase of the program

EMPLOYEE ASSISTANCE PROGRAM
Illinois College sponsors an employee assistance program available to you and your dependents. Services include, but are not limited to, personal counseling, couples’ counseling, psychiatric care, and drug/alcohol counseling. Currently, six (6) visits per fiscal year (June 1 – May 31) are available at a discounted $30 per session. Employees should contact the Chesley Health and Wellness Center for a referral and additional details.

NORTON LIFELOCK IDENTITY THEFT PROTECTION INSURANCE
Layered online& device protection for you & your family! Illinois College employees have the option of adding voluntary cyber safety through Norton Lifelock. They offer device security, online, privacy, and identity protection. This can cover protections such as antivirus, malware, or protection to financial data and possible fraudulent exposure, and it comes with a million dollar protection package and cyber crime coverage. You may purchase this coverage for yourself or your dependents in either the Essential, Premier, and Premier Plus packages.

BENEFITSHUB EMPLOYEE DISCOUNT PROGRAM
Illinois College offers access to thousands of amazing, customized discounts that you cannot find anywhere else. You will find deals on travel, restaurants, shopping, family care, car rentals, your favorite local establishments and much more!
OTHER BENEFITS, PERKS, AND SERVICES

GUARDIAN EMPLOYEE ASSISTANCE PROGRAM
In addition to the local Employee Assistance Program, Guardian offers confidential personal support, across everything from stress management and nutrition to handling legal or financial issues. See Connect2 for information on how to access this service.

WILL PREP
Employees have access to WillPrep Services through Guardian. Services range from a library of online planning documents to accessing experienced professionals that can help you with the more complicated details. See Connect2 for information on how to access this service.

IDENTIFICATION CARDS FOR FREE CAMPUS ACCESS
All employees are issued an Illinois College personal identification card. This ID card provides employees with several benefits and privileges including:
  • Use of Schewe Library services;
  • Access to the staff dining plan; and
  • Access to the Bruner Athletic Complex. (Spouse/domestic partner and dependent children may obtain ID cards through the Facilities Management Office located in the Campus Services Building)

NOTARY SERVICES
For the convenience of employees, a Notary Public service is available at no charge in the Office of the President, and the Development and Alumni Relations Office.

COLLEGE PARKING
You are eligible to purchase permit parking on campus. Permit parking information and parking rules and regulations are available in the Public Safety Office. Because of increased demand for on-campus parking, there is strict enforcement of parking rules, including fines for rule violation. After obtaining a parking permit, you are expected to be familiar with and observe the rules governing the use of parking facilities.

DINING HALL AND FOOD SERVICE
Meals are available to employees at a reasonable cost at all campus dining locations. A meal pass may be purchased by employees at a reduced cost.

DISCOUNTED ATHLETIC EVENT TICKETS
You and your immediate family may attend some campus athletic events and cultural events without cost. Currently, the College allows IC faculty and staff and their children under 18 free admission to athletic events. Spouses, domestic partners, and children over 18 are admitted at a modest cost. Contact the Athletics Department for more information.

IC STORE DISCOUNT
As an IC employee, you are entitled to a 10% discount at the IC Store on most merchandise. You may also purchase textbooks at the store, but no discount fee is applicable.
VOLUNTARY CONTRIBUTIONS

IC FUND RECURRING GIFT
Consider a monthly gift to the IC Fund to inspire students and let them know they are supported by faculty and staff.

By giving to the IC Fund, you are:
• Helping students in the areas of greatest need.
• Supporting scholarships, internships, academic programs, and athletic opportunities.
• Making a difference campus-wide by contributing to the goal of $1,000 per student.

Signing up is EASY. Just choose your amount and it will be automatically deducted. A gift of $84/month will place you at the IC Society Level. Any amount makes a year-round impact on students.

PRAIRIELAND UNITED WAY (PLUW) – $4,500 CAMPAIGN GOAL
This year, Illinois College has raised about $3,000 toward the $465,000 PLUW goal. Thank you to everybody who donated to our campaign last year! This year, our goal is to raise $4,500 in donations in 2023. Please consider giving to Prairieland United Way; the need this year is greater than ever.

Why Support Prairieland United Way?
• 100% of all personal contributions go to support local programs. (Overhead costs and salaries are supported by corporate foundation grants.)
• United Way funds are especially important to our agencies because local funds are used to match and secure state and federal grants. In 2020-2021, $1,076,741 was brought into our community in grants.
• Many programs would not be possible at all if not for United Way funding. This year’s allocation supported 30 programs in the Morgan, Cass, Scott and northern Greene county areas. Last year, PLUW received $428,220 in requests. 78% was funded, which left over $93,000 unfunded.
• PLUW supports 24 agencies, and their programs serve individuals of all ages; from mentoring and education to crisis and intervention. For more information visit http://www.prairielandunitedway.org/

How can your donations help?
• Just a one-time donation of $25 can feed a homebound senior citizen one hot and one cold meal a day for 5 days.
• $50 will provide tutoring for 486 children.
• $15/month would provide counseling for a child victim of sexual assault.
• Just $10/week provides child victims of domestic violence with necessary counseling.
• Just $4/paycheck would provide a child with a week of after school care.

AAUP (Faculty Only)
Faculty can voluntarily deduct their AAUP membership dues from payroll. The College will send their membership fee directly to AAUP each month.
HOW TO ENROLL

All benefit-eligible employees must complete their new hire benefit enrollment in Paycom within the first week of employment. The meeting is typically scheduled on your behalf by your supervisor and is part of your first day onboarding plan.

When enrolling, remember to do the following:

- Bring eligible dependent information with you on your first day, including supporting documentation (see acceptable documentation on the page 20 of this enrollment packet).
- Review the confirmation statement at the end of your enrollment election process in Paycom to make sure your elections are correct.

Paycom Instructions

Access the Open Enrollment portal in Paycom by clicking your bell icon to see your required actions or by clicking directly on Benefits -> 2024 Benefits Enrollment.

Changing your benefits during the year

IRS regulations limit when you can make changes to your benefits during the year. Once you’ve submitted your benefits elections, you cannot change your medical, dental, vision care, or FSA elections outside the annual Open Enrollment period, which takes place each fall, unless you experience an IRS-defined change in status as listed on page 18. Changes in enrollment must be consistent with the change in status.

If you experience one of these life events, please visit Paycom to submit the Life Event: Benefits-> Qualifying Events.

New employees must complete their enrollment within 30 days of their hire date.
### Health Insurance (HealthComp)

<table>
<thead>
<tr>
<th>Category</th>
<th>Monthly</th>
<th>Biweekly</th>
<th>Employer (Monthly)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Base</strong></td>
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</tr>
<tr>
<td>Employee</td>
<td>$65.30</td>
<td>$32.65</td>
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<tr>
<td>Employee/Spouse</td>
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<tr>
<td>Employee/Child(ren)</td>
<td>$306.97</td>
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<tr>
<td>Family</td>
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<td>Biweekly</td>
<td>Employer (Monthly)</td>
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<td>$61.03</td>
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<tr>
<td>Employee/Spouse</td>
<td>$541.51</td>
<td>$270.76</td>
<td>$1,566.04</td>
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<td>Employee/Child(ren)</td>
<td>$447.81</td>
<td>$223.91</td>
<td>$1,404.87</td>
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<tr>
<td>Family</td>
<td>$904.03</td>
<td>$452.02</td>
<td>$2,315.50</td>
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</table>

### Vision (Guardian - VSP)

<table>
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<th>Biweekly</th>
<th>Employer (Monthly)</th>
</tr>
</thead>
<tbody>
<tr>
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<td>$0.00</td>
<td>$0.00</td>
<td>$6.64</td>
</tr>
<tr>
<td>Employee/Spouse</td>
<td>$3.81</td>
<td>$1.91</td>
<td>$6.64</td>
</tr>
<tr>
<td>Employee/Child(ren)</td>
<td>$4.01</td>
<td>$2.01</td>
<td>$6.64</td>
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<tr>
<td>Family</td>
<td>$9.98</td>
<td>$4.99</td>
<td>$6.64</td>
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</table>

### Dental (Guardian)

<table>
<thead>
<tr>
<th>Category</th>
<th>Monthly</th>
<th>Biweekly</th>
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</thead>
<tbody>
<tr>
<td><strong>Low Plan</strong></td>
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<td></td>
</tr>
<tr>
<td>Employee</td>
<td>$29.58</td>
<td>$14.79</td>
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<tr>
<td>Employee/Spouse</td>
<td>$58.82</td>
<td>$29.41</td>
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<tr>
<td>Employee/Child(ren)</td>
<td>$62.46</td>
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<tr>
<td>Family</td>
<td>$94.87</td>
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<tr>
<td><strong>High Plan</strong></td>
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<tr>
<td>Employee</td>
<td>$48.38</td>
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<tr>
<td>Employee/Spouse</td>
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<tr>
<td>Employee/Child(ren)</td>
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</tr>
<tr>
<td>Family</td>
<td>$149.98</td>
<td>$74.99</td>
</tr>
</tbody>
</table>
1. Is there a deadline for submitting my benefit elections?
Yes. You must select your benefit choices within 30 days of your hire date.

2. What documentation do I need to provide for my dependents?
Supporting documentation includes the following:
- Spouse: Copy of valid marriage certificate
- Registered domestic partner: IC’s Statement of Domestic Partnership
- Dependent child: Copy of birth certificate, adoption documents, or proof of legal guardianship

3. When will I get my medical, dental, vision, and HSA/FSA cards?
You will receive your ID cards two to three weeks after you submit your enrollment documentation. If you need to use a benefit before receiving your ID card, call the Office of Human Resources to obtain your member information. You will receive a single card from Guardian for your elected benefits.

4. What if I miss the deadline?
If you do not finalize your benefit elections within 30 days, you will not be able to enroll until the next annual Open Enrollment period (occurring each fall), unless you experience an IRS-defined change in status, such as a birth or change in marital status. Enrollment changes must be consistent with the change in status and must be submitted within 30 days of the status change.

5. When will my coverage start?
All coverage elected during your onboarding session are active the first day of the month following your hire date.

6. When will the new premiums for my elections begin and be withheld from my paycheck?
Depending on your hire date, your first paycheck may include premiums for two months. If this will be an issue, please contact the Office of Human Resources to discuss.

7. I have medical, dental, and/or vision coverage outside of IC. Can I defer my enrollment in the IC-sponsored plans for these benefits until my current coverage ends?
Yes, you can. Here’s what you’ll need to do:
- Do NOT elect IC coverage for these benefits in Paycom during Open Enrollment.
- When your current benefits are ending, submit a letter from your former employer or insurance carrier to the Office of Human Resources stating that you were enrolled in medical, dental, and/or vision coverage, and the date that the coverage terminates. If you are enrolling a spouse/domestic partner and/or children, their names will also need to be listed in the letter.
- Complete a Life Event submission in Paycom within 30 days of the date your current coverage ends. The Life Event form can be found at Benefits-> Qualifying Events.

8. How do I enroll my domestic partner?
You must complete the Illinois College Statement of Domestic Partnership, which can be accessed on Connect2.

9. What events are considered life events to make benefit changes after initial enrollment and outside of Open Enrollment?
Some qualifying reasons include:
- Marriage/Registering a domestic partnership
- Divorce/Ending a domestic partnership
- Birth/Adoption
- Change in number of dependents
- Death
- Change in employment status
- Dependent losing eligibility—dependent child reaching the maximum age of 26
- Dependent gaining eligibility
ONLINE
Visit Connect2: Staff (or Faculty) -> Human Resources -> Benefits to view Summary Plan Descriptions for benefit programs.

HAVE INDIVIDUAL QUESTIONS?
Call: 217-245-3002 or 217-245-3498
In-Person: Appointments available by Zoom upon request
Email: ichr@ic.edu