

# **Benefits Overview for Public Safety**

#### Blue Cross and Blue Shield of RI

PLAN A: BlueCHiP

| Employee %   |                | Family         |
|--------------|----------------|----------------|
| Contribution | Bi-Weekly Cost | Bi-Weekly Cost |
| 20%          | \$43.49        | \$115.79       |

\$0 Preventive Care Visit

\$0 Office Visit at PCMH [1]/\$30 Primary Care Office Visit Co-pay, \$50 Specialist Visit \$200 ER Co-pay

\$50 Walk-in Co-pay

\$7 Generic/\$25 Preferred Brand Name/\$40 Non-Preferred Brand Name/\$65 Specialty Drugs

# In-Network Deductible: [2]

\$ 6,000 Individual—Employee pays first \$250 per year; University pays remainder \$12,000 Family - Employee pays first \$500 per year; University pays remainder

Out of Network Deductible and Coverage [2]: See Summary of Benefits in the BlueCHiP Plan for details. This information is located on the RWU HR Website.

### PLAN B: HealthMate Coast to Coast

| Base Salary         | Employee %<br>Contribution | Individual<br>Bi-Weekly Cost | Family<br>Bi-Weekly Cost |
|---------------------|----------------------------|------------------------------|--------------------------|
| Less than \$35,000  | 17%                        | \$39.97                      | \$106.43                 |
| \$35,000 or Greater | 20%                        | \$47.02                      | \$125.22                 |

\$25 Office Visit Co-pay, \$40 Office Visit Co-pay for Specialist

\$150 ER Co-pay

\$50 Walk-in Co-pay

\$7 Generic/\$25 Preferred Brand Name/\$40 Non-Preferred Brand Name/\$65 Specialty Drugs

# In-Network Deductible: [2]

\$ 6,000 Individual—Employee pays first \$650 per year; University pays remainder \$12,000 Family - Employee pays first \$1,300 per year; University pays remainder

Out of Network Deductible and Coverage [2]: See Summary of Benefits in the HealthMate Plan for details. This information is located on the RWU HR Website.

**Wellness Incentive:** Receive a cash credit for participating in certain wellness activities if enrolled in an RWU medical plan:

4% of the annual insurance premium for individual coverage 3% of the annual insurance premium for family coverage

[1] PCMH is a Blue Cross authorized Patient Centered Medical Home

[2] Review HRA plan for further information

Public Safety November 1, 2017

### **Delta Dental of RI**

# PLAN A:

| Employee %   | Individual     | Family         |
|--------------|----------------|----------------|
| Contribution | Bi-Weekly Cost | Bi-Weekly Cost |
| 20%          | \$2.88         | \$9.31         |

## **PLAN B:**

| Base Salary         | Employee % Contribution | Individual<br>Bi-Weekly Cost | Family<br>Bi-Weekly Cost |
|---------------------|-------------------------|------------------------------|--------------------------|
| Less than \$35,000  | 17%                     | \$2.45                       | \$7.91                   |
| \$35,000 or Greater | 20%                     | \$2.88                       | \$9.31                   |

\$1,200 per person annual maximum benefit

100% Preventative and minor restorative services

50% Periodontal and major restorative services

50% Orthodontics for dependent children up to \$1,200 lifetime maximum

50% Single Tooth Implants and Tissue Regeneration

No deductible

#### **Buyback:**

\$1,300 annual buyback available if individual health and dental insurance is waived \$3,500 annual buyback available if family health and dental insurance is waived

100% Employer paid Term Life Insurance (\$50,000 death benefit)

100% Employer paid Short and Long Term Disability Insurance

Short Term Disability will supplement Rhode Island Temporary Disability Insurance for 24 weeks Long Term Disability will pay up to 60% of your base pay if disabled for more than 26 weeks

403(b) with TIAA-CREF or VALIC Retirement

Contribute 5% of salary and RWU will contribute 8% of salary

2-year waiting period to receive the match

Immediate vesting

Immediate employee contributions

Accrue up to 13 paid vacations days in 1<sup>st</sup> year. Thereafter, accrued vacation days increase and vary depending upon years of service and date of hire (see collective bargaining agreement for details). Incentive vacation

Accrue up to 15 paid sick days per year

15 paid holidays per year

3 or 5 paid bereavement days depending on relationship of deceased

Tuition Benefits after 6 months of continuous employment

Flexible Spending Plan for Unreimbursed Healthcare, Day Care and Transportation Expenses

Worker's Compensation

Free Parking

See Collective Bargaining Agreement, specific plans and policies for detailed information regarding Eligibility, coverage, restrictions and other requirements.