

TEMPORARY EMPLOYEE

7/1/26 - 6/30/27

Benefits are effective the 1st of the month following an employee's date of hire or qualifying event.

Blue Cross Blue Shield of RI

***Qualifier – Must be scheduled to work 30 hours a week within the initial measurement period.**

RWU offers four medical plan options.

Details about each plan are located on the HR Website along with a side-by-side comparison of each plan.

PLAN A: BlueCHiP Flex

Employee % Contribution	Individual Bi-Weekly Cost	Family Bi-Weekly Cost
23.5%	\$105.73	\$285.82

In-Network Deductible

\$6,000 Individual: Employee pays first \$750 per year; University pays remainder*

\$12,000 Family: Employee pays first \$1,500 per year; University pays remainder*

* Paid through a Health Reimbursement Account (HRA). See the HR Website for HRA Plan Summary for details.

Out-of-Network Deductible and Coverage

See the BlueCHiP Benefit Summary and the HRA Plan Summary for details.

PLAN B: HealthMate Coast-to-Coast

Employee % Contribution	Individual Bi-Weekly Cost	Family Bi-Weekly Cost
23.5%	\$110.72	\$298.93

In-Network Deductible

\$6,000 Individual: Employee pays first \$750 per year; University pays remainder*

\$12,000 Family: Employee pays first \$1,500 per year; University pays remainder*

* Paid through a Health Reimbursement Account (HRA). See the HR Website for HRA Plan Summary for details.

Out-of-Network Deductible and Coverage

See the HealthMate Benefit Summary and the HRA Plan Summary for details.

PLAN C: Blue Choice

Employee % Contribution	Individual Bi-Weekly Cost	Family Bi-Weekly Cost
23.5%	\$101.12	\$273.27

In-Network Deductible

\$6,000 Individual: Employee pays first \$750 per year; University pays remainder*

\$12,000 Family: Employee pays first \$1,500 per year; University pays remainder*

* Paid through a Health Reimbursement Account (HRA). See the HR Website for HRA Plan Summary for details.

Out-of-Network Deductible and Coverage

PLAN D: Blue Choice VALUE

Employee % Contribution	Individual Bi-Weekly Cost	Employee % Contribution	Family Bi-Weekly Cost
14%	\$57.42	17%	\$188.35

In-Network Deductible

\$7,000 Individual: Employee pays first \$1,750 per year; University pays remainder*

\$14,000 Family: Employee pays first \$3,500 per year; University pays remainder*

* Paid through a Health Reimbursement Account (HRA). See the HR Website for HRA Plan Summary for details.

Out-of-Network Deductible and Coverage

See the Blue Choice Benefit Summary and the HRA Plan Summary for details.

Additional Benefits:

- ❖ 403(b) with TIAA
 - Temporary employees are eligible to immediately contribute to the retirement plan without the RWU match.
- ❖ New employees will begin to accrue sick and safe leave pursuant to the “Healthy and Safe Families and Workplaces Act Policy of RI” upon hire, but shall not be permitted to use such leave until the ninety-first (91) day following hire.
- ❖ Worker’s Compensation Coverage
- ❖ Free Parking

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

See the Benefit Plan Documents and Benefit Policies located on the HR Website for detailed information regarding eligibility, coverage, restrictions and other requirements.

UPDATED JULY 1, 2026