## New Faculty Orientation









#### **Meet Your Benefits Team**

- Caitlyn Sisler, Director of Benefits
- Collette Toussaint, Benefits Advisor
- Janet Metcalf, Benefits Advisor

# Submit Online Benefit Enrollment Form (Qualtrics) by end of day Tuesday

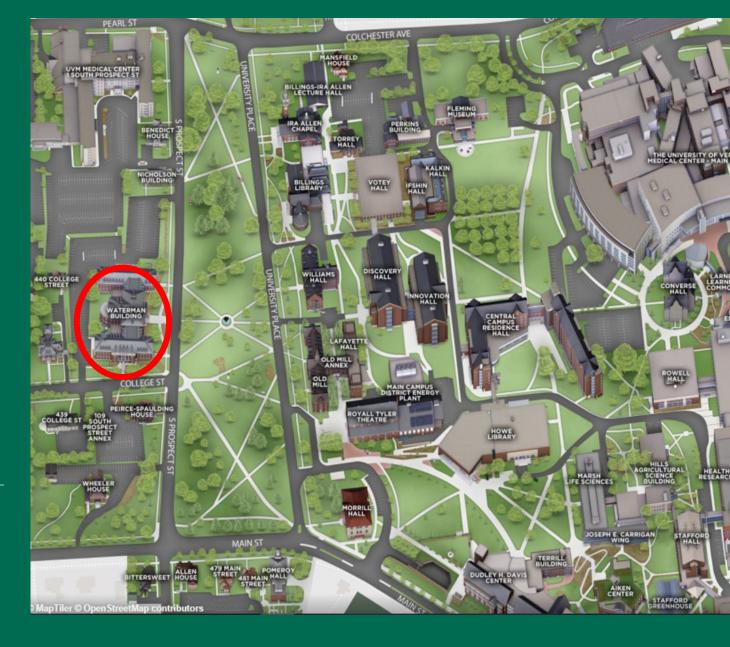
- One-on-one support in Williams Family Room
  - Monday 8am 4pm
  - Tuesday 8am 3pm
- Ongoing support for benefit questions:

HRInfo@uvm.edu or 802.656.3150

# Finding Human Resources www.uvm.edu/human-resources

- Office of Equal Opportunity
- Benefits
- Classification and Compensation
- Labor and Employee Relations
- Professional Development and Training

85 South Prospect Street, Waterman Building Burlington, VT 05473 802.656.3150 | HRInfo@uvm.edu



### First Day Checklists

- ✓ <u>Complete I-9 Form</u>: Provide UVM Rep or HR acceptable documents. This form must be completed within 3 business days from your start in order to continue working.
- ✓ <u>Set-up UVM NetID</u>
- ✓ <u>Set-up Duo Security</u>
- ✓ **Log into** PeopleSoft > Human Resources to:
  - Update W-4 (Contact Payroll@uvm.edu with questions.)
  - Set-up Direct Deposit (Contact Payroll@uvm.edu with questions.)
  - Add or update <u>personal information</u> and emergency contact information

- **✓** Apply for an Employee Parking Permit
- ✓ Enroll in Benefits





### Employee Benefits at UVM

- Medical insurance
- Dental insurance
- Vision insurance
- Life insurance
- Long-Term Disability insurance
- 403(b) Retirement savings
- Flexible Spending accounts



### **Medical Insurance**

Coverage begins on Your Date Of Hire.

Eligible Dependents:

- Spouse
- Children up to the age of 26

Summary of Benefits and Coverage Link



#### VHP Open Access Plan

(In-Network Coverage)

	_
Primary Care Provider (PCP) is required	\$10 copay for PCP; \$20 for specialist
Residence (for you and your dependents)	Worldwide
Diagnostic Services (x-rays, MRI, blood tests)	No copay
Annual Prescription Drug Deductible	\$100
Mail Order Prescription Program (Optum Rx)	
Annual Routine Eye Exam	\$20 copay
Major Oral Surgery (pre-authorization required)	\$20 copay
Preventative Care Office Visits	No copay
Outpatient Mental Health	No copay



Customer Service: (800) 247-2583



### **United Academics Plan Options & Costs**



#### **2024 Schedule of Monthly Costs for Medical Insurance**

United Academic Full-time & UAPT Grandfathered BCBSVT - VHP Open Access Plan

#### **Employee's Monthly Cost**

Base Salary	Band	Employee Cost	UVM Cost	Employee	Employee plus Spouse	Employee plus Children	Employee plus Family
less than \$15,000	Α	4.80%	95.20%	\$55.55	\$111.10	\$115.46	\$160.26
\$15,001 to \$20,000	В	7.20%	92.80%	\$83.32	\$166.65	\$173.19	\$240.39
\$20,001 to \$30,000	С	9.60%	90.40%	\$111.10	\$222.20	\$230.92	\$320.52
\$30,001 to \$40,000	D	12.00%	88.00%	\$138.87	\$277.75	\$288.65	\$400.65
\$40,001 to \$50,000	E	14.40%	85.60%	\$166.65	\$333.29	\$346.38	\$480.78
\$50,001 to \$60,000	F	16.80%	83.20%	\$194.42	\$388.84	\$404.11	\$560.91
\$60,001 to \$70,000	G	19.20%	80.80%	\$222.19	\$444.39	\$461.84	\$641.04
\$70,001 to \$80,000	Н	21.60%	78.40%	\$249.97	\$499.94	\$519.57	\$721.17
\$80,001 to \$90,000	- 1	24.00%	76.00%	\$277.74	\$555.49	\$577.30	\$801.30
\$90,001 to \$100,000	J	26.40%	73.60%	\$305.52	\$611.04	\$635.03	\$881.43
\$100,001 - \$110,000	K	28.80%	71.20%	\$333.29	\$666.59	\$692.76	\$961.56
\$110,001 - \$120,000	L	31.20%	68.80%	\$361.07	\$722.14	\$750.49	\$1,041.69
\$120,001 - \$130,000	M	32.40%	67.60%	\$374.95	\$749.91	\$779.36	\$1,081.76
\$130,001 - \$140,000	N	33.60%	66.40%	\$388.84	\$777.69	\$808.22	\$1,121.82
\$140,001 - \$150,000	0	34.80%	65.20%	\$402.73	\$805.46	\$837.09	\$1,161.89
\$150,001 - \$999,999+	Р	36.00%	64.00%	\$416.62	\$833.24	\$865.95	\$1,201.95
Employer + Employee monthly premium:				\$1,157.27	\$2,314.55	\$2,405.42	\$3,338.76

### Find a Doctor

- Find Doctors and Hospitals in the Vermont Service Area
  - Check boxes:
    - PCP
    - Accepting New Patients
  - Enter your zip code
- National BCBS Doctor and Hospital Finder
  - Enter your zip code
  - Plan prefix = ZIU







### **Medical Insurance Waiver**

You may be eligible to receive \$1,000 annually in lieu of medical insurance coverage. You will be paid on a prorated basis each pay period.

#### You are not eligible for the \$1,000 waiver if:

- You are already a covered spouse/dependent on UVM Medical Plan.
- You are employed by and have medical coverage through UVM Medical Center or Health Network.
- You or your dependents have COBRA.
- United Academic members in the first two consecutive semesters.



### **Dental Insurance**

Coverage begins 6 months from your Date Of Hire.

 Eligible Dependents: Spouse and Children up to the age of 26.

TWO Plan Options:

Base Plan is FREE!

High Option Plan has a cost-share.







### **Dental Insurance Plan Options**



<b>Coverage Highlights</b>	<b>Base Option</b>	<b>High Option</b>
Annual Deductible/Person	\$25 (all procedures)	\$25 (does not apply to preventative care)
Annual Limit	\$750	\$2,000
Preventative (Cleanings)	100%	100%
Restorative (Fillings)	80%	80%
Major Restoratives (Implant)	50%	60%
Ortho (lifetime limit)	\$500	\$1,500
Employee	MONTHLY Dental Premiu	ms
Employee Only	Free	\$10.75
Employee + Spouse	Free	\$21.29
Employee + Child(ren)	Free	\$23.31
Family	Free	\$34.55

2024 Dental Comparison Chart Link



### Voluntary Vision Insurance

- Coverage begins on Your Date Of Hire.
- Eligible dependents:
   Spouse and Children up to the age of 26.
- No card required.
- Member ID will be:99 + UVM employee ID

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VS	

Benefit	Copay	Description
Vision Exam (once every plan year)	\$0	Covered in Full
Prescription Glasses:		
Lenses (every plan year)		Single vision, bifocal, lined trifocal or lenticular lenses and standard progressive are covered in full.
Frame (every other plan year)	\$20 copay	\$150 allowance for wide selection of frames, \$200 allowance for featured frame brands and 20% off the amount over the allowance.
Contacts (instead of glasses)		
Contact Lenses (every plan year)	\$60 max copay (fitting and evaluation)	\$150 allowance for contacts. When contact lenses are obtained, the covered person shall not be eligible for lenses and
		frames again for one plan year.

Employee MONTHLY Pre-tax Premiums			
Employee Only	\$7.26		
Employee + Spouse	\$14.51		
Employee + Child(ren)	\$13.68		
Family	\$22.77		

VSP Benefits Summary Link



### Life Insurance



Employee Options					
Amount of Coverage	Premium Cost-Share	Medical History Statement Required?			
	Basic Coverage				
\$10,000	Free	No			
\$50,000	Cost-share is based on salary and amount of	No, if you enroll today			
2X base salary	coverage selected	No, if you enroll today			
S	upplemental Coveraç	ge			
3X – 7X base salary	Cost-share is based on age, salary and amount of coverage selected	Yes			

Dependent Options						
(Employee E	(Employee Election Must Be \$50,000+)					
Amount of Coverage	Premium Cost-Share	Medical History Statement Required?				
S	pousal Coverage					
\$20,000	Cost-share is based on spouse	No, if you enroll today				
½ of Employee's Coverage	age and amount of coverage selected	Yes, if the coverage amount is over \$50,000				
Child Coverage						
\$10,000 per child	Yes	No, if you enroll today				

Life Insurance Highlights Link
Medical History Statement Link



### **Long-Term Disability Insurance**



- Coverage begins after1 year
- 60% or 70% of your Salary
- Retirement Protection
- PremiumPre-Tax orPost-Tax

Long	Term	Disability	Rates
	Cost P	er Paycheck	

SEMI-MONTHLY PAY	60% Benefit	70% Benefit	60% Benefit	70% Benefit	UVM Cost	UVM Cost
12-month positions	Without Retirement	Without Retirement	With Retirement   With Retirement		Without Retirement	With Retirement
Annual Salary	Protection	Protection	Protection	Protection	Protection	Protection
\$15,000-20,000	\$ 1.48	\$ 3.07	\$ 1.96	\$ 3.55	\$ 3.45	\$ 4.56
\$20,001-30,000	\$ 2.11	\$ 4.38	\$ 2.79	\$ 5.06	\$ 4.92	\$ 6.52
\$30,001-40,000	\$ 2.95	\$ 6.13	\$ 3.91	\$ 7.09	\$ 6.89	\$ 9.13
\$40,001-50,000	\$ 3.80	\$ 7.88	\$ 5.03	\$ 9.12	\$ 8.86	\$ 11.73
\$50,001-60,000	\$ 4.64	\$ 9.64	\$ 6.15	\$ 11.14	\$ 10.83	\$ 14.34
¢50,001,70,000	¢ 5.40	¢ 11 20	\$ 7.26	¢ 12.17	\$ 12.80	\$ 16.05
\$70,001-80,000	\$ 6.33	\$ 13.14	\$ 8.38	\$ 15.19	\$ 14.77	\$ 19.56
\$80,001-90,000	\$ /.1/	\$ 14.89	\$ 9.50			> 22.10
\$90,001-100,000	\$ 8.02	\$ 16.64	\$ 10.62	\$ 19.25	\$ 18.70	\$ 24.77
\$100,001-110,000	\$ 8.86	\$ 18.40	\$ 11.73	\$ 21.27	\$ 20.67	\$ 27.38
\$110,001-120,000	\$ 9.70	\$ 20.15	\$ 12.85	\$ 23.30	\$ 22.64	\$ 29.99
\$120,001-130,000	\$ 10.55	\$ 21.90	\$ 13.97	\$ 25.32	\$ 24.61	\$ 32.59
\$130,001-140,000	\$ 11.39	\$ 23.65	\$ 15.09	\$ 27.35	\$ 26.58	\$ 35.20
\$140,001-150,000	\$ 12.23	\$ 25.41	\$ 16.20	\$ 29.37	\$ 28.55	\$ 37.81
\$150,001-160,000	\$ 13.08	\$ 27.16	\$ 17.32	\$ 31.40	\$ 30.52	\$ 40.42
\$160,001-170,000	\$ 13.92	\$ 28.91	\$ 18.44	\$ 33.43	\$ 32.48	\$ 43.02
\$170,001-180,000	\$ 14.77	\$ 30.66	\$ 19.56	\$ 35.45	\$ 34.45	\$ 45.63
\$180,001-190,000	\$ 15.61	\$ 32.41	\$ 20.67	\$ 37.48	\$ 36.42	\$ 48.24
\$190,001-200,000	\$ 16.45	\$ 34.17	\$ 21.79	\$ 39.50	\$ 38.39	\$ 50.85
\$200,001 and over	\$ 16.88	\$ 35.04	\$ 22.35	\$ 40.52	\$ 39.38	\$ 52.15



Long-Term Disability Insurance

#### **Waiver of Waiting Period:**

- Rehires who meet the "3 and 2" rule.
- New employees insured within 3 months of UVM employment, under a similar LTD policy.
- Proof of previous coverage required for waiver:
  - Former employer paystub
  - Email from past employer
  - Individual Policy Document







### 403(b) Retirement Savings Plan

- Employees can participate in this benefit at any time
- Maximum contributions for 2024
  - \$23,000 (age 50+ Catch up, \$7,500)

	FACULTY
Minimum Contribution	3% pre-tax salary
Employer Contribution	10%
Waiting Period	2 years/4 consecutive semesters

- Exceptions to waiting period:
  - Proof of active retirement account from immediate prior non-profit or government employer (typically a 403(b) account, or similar)
  - Title of Assistant Professor, Associate Professor or Full Professor
  - "3 and 2" Rule

### 403(b) Retirement Savings Plan

#### Step 1:

Create a UVM Account with a vendor:

**TIAA** 

or

**Fidelity** 



Complete <u>403(b) Salary</u> <u>Reduction Form</u>

Step 2:

Note: UVM employee
and employer
contributions are
effective upon completed
enrollment; not
retroactive to your date
of hire



Submit to HRinfo@uvm.edu

- 1.Completed 403(b) Salary Reduction Form
- 2.Proof of active UVM account (screenshot)
- 3.Required Proof for Waiver Should Include:
- Your Name
- Immediate Previous Employer's name (nonprofit or govt employer)
- Show the account is still funded/active balance







#### 2024 Salary Reduction 403(b) Retirement Plan Participation Agreement

2024 IRS Maximum 403(b) Contribution = \$23,000

Empl ID: 1234567

#### 1. Employee Section

Last Name: Cat	First Name: Rally
Date of Birth (MM/DD/YYYY): 01/01/1980	Date of Hire (MM/DD/YYYY): 8/19/2024

#### 2. Type of Agreement – choose all that apply



New Enrollment (attach proof of UVM account with vendor – one for <u>each</u> vendor with which you are investing. Proof must include your name, UVM's name and the vendor name)



Request to Waive Waiting Period (attach proof of active 403(b) account with most recent employer, which includes your name, the employer's name and the vendor name)



Waive/Cancel 403(b) Participation (If you are receiving the UVM contribution, it will also cease)

IMPORTANT: If you wish to elect any special catch-up contributions you need to complete a separate "403(b) Retirement Catch-Up Option Request" form. These catch up forms must be completed annually.

For questions, please contact a UVM Benefit Advisor at hrinfo@uvm.edu.



3. D	Deferral Election  aid: X Semi-Monthly (twice a month)	i-Weekly	(every other week)
Payrol	I Date to begin my salary deduction (MM/DD/YYYY): 09/15/2	2024	(see payroll schedule and benefit form deadlines) Found on the UVM HRS/Benefits website
X	Before Tax Reduction	percentag of your t	ge per pay period. Total compensation, please discuss with a <u>UVM</u>
	After Tax (ROTH) Reduction%		

100 %

NOTE: Upon your eligibility, UVM will contribute to your pre-tax plan only, if enrolled in a UVM account.

#### 4. Retirement Vendor Election and Distribution

Vendor			Distribution		
	Fidelity Investments			%	
X	TIAA	+	100	%	
	TIAA (GSRA-employee only contributions)	+		%	

For Human Resources Use Only				
	HR Info Team Verification Initials: Date:			
	Benefit Advisor Verified Initials: Date:			
	PS Entry			



### **Vendor Representatives to UVM**

#### Fidelity Investments: Paul Bolles, Workplace

Planning and Guidance Consultant

To schedule an appointment, choose one of the options below:

- Go to: <a href="http://getguidance.fidelity.com">http://getguidance.fidelity.com</a>
- Or call 800-642-7131
- UVM Plan #52744

#### TIAA: Hajira Buttar, Financial Consultant

To schedule an appointment, choose one of the options below:

- Go to: <a href="http://www.tiaa.org/uvm">http://www.tiaa.org/uvm</a>
- Or call 800-732-8353
- UVM Plan #150984



### Retirement Health Savings Plan

- UVM contributions after one year of full-time service
  - \$1,150/year
  - \$1,550/year for UA
- Enrollment is automatic
  - Qualified healthcare expenses at retirement age
  - Employees may contribute after-tax funds
- Employer contributions are vested after 15 years of service

Retirement Health Savings Plan Overview Link







### Flexible Spending Accounts



Quick Q&A	Health Care FSA	Dependent Care FSA		
How much can I contribute for 2024?	\$3,200	\$5,000 (or \$2,500 if married and filing taxes separately)		
What can I use FSA dollars for?	Medical, Dental, or Vision out-of-pocket expenses	Daycare, summer day camp or before/after school care for children under 13.		
How much of my FSA election can I use on day one of the plan year?	Full amount elected	Only the amount contributed to paycheck to date		
At the end of a plan year what balance may be rolled to the next year?	\$640	\$0		
How long do I have to spend FSA dollars on services?	Date of Hire – December 31, 2024			
How long do I have to submit paperwork for reimbursement of 2023 expenses?	March 31, 2025			

Flexible Spending Brochure Link



Health Care FSA: Priya is hired on 7/31/2024 with 10 payrolls remaining in 2024

- Priya pledges \$1,000 for a Health Care FSA account. \$100 will be withheld pretax from each check.
- They would have access to the full pledge amount of \$1,000 for claims dated between 7/31 to 12/31.
- If Priya has \$400 in eligible health expenses in 2024:
  - \$1,000 \$400 = \$600 (\$600 would rollover into 2025)
- If Priya only has \$100 in eligible health expenses in 2024:
  - \$1,000 \$100 = \$900 (\$260 would be forfeited and \$640 would rollover into 2025)
- FSA funds may also be used for eligible expenses for your spouse or dependents.





Example

Dependent Care FSA: Max is hired on 7/31/2024 with 10 payrolls remaining in 2024

• Max pledges \$3,000 for a Dependent Care FSA account. \$300 will be withheld pretax from each check.

 Max would have access to \$300 each payroll until the pledge is fulfilled.

Claims between 7/31 to 12/31 would be eligible.

No rollover for Dependent Care Accounts.

No payment for services that haven't been incurred.



**Example** 



### **Benefits Elections:**

Complete Qualtrics Benefit Enrollment Form by end of day Tuesday

• Form will be emailed to you from <a href="mailto:onboarding-hr@uvm.edu">onboarding-hr@uvm.edu</a>

After this week, you may change benefits:

Annual Benefits Open Enrollment (effective 1/1)

Qualified Life Events (Marriage, Divorce, Birth, Adoption, Change in Spouse's employment status, etc.) Proof must be submitted within 20 days of qualified life event.



### **Employee Resources**

- UVM's Employee Wellness
- UVM's Diversity Programs & Initiatives
- UVM's Cultural Resource Guide

- UVM Campus Map
- UVM Directory

- How to change your lived name and/or pronouns: <u>Lived Name & Pronoun Recognition</u>
- How to request accommodations: <u>Accommodations at UVM</u>
- How to locate gender-inclusive bathrooms: <u>UVM Gender-Inclusive Bathrooms Map</u>
- Personal safety tips from UVM Police: <u>Safety Tips</u>
  - UVM Police Phone Number: 802-656-3473
  - Receive CatAlert notifications
  - Stay safe on campus with the LiveSafe App: <u>LiveSafe App</u>



### **CATCard Benefits**

- Where to get a CATCard: <u>CATCard Service Center</u>
- CATCard grants you access to:
  - CAT\$cratch (UVM prepaid debit account)
  - <u>UVM Campus Recreation</u>
  - **UVM Dining Options**
  - Green Mountain Transit (Bus)
  - UVM Howe Library
  - Burlington Fletcher Free Library
  - Libby (eBooks and Audiobooks)
  - Staff Council Discounts
    - Enjoy a variety of offers from local, national, and international companies focusing on those that have a local Vermont presence.

### **Additional Benefits**

- Tuition Remission
- New York Times Subscription
- Headspace Subscription
- <u>LinkedIn Learning</u>
- Commuter Benefit Program
- Local Fitness & Nutrition Discounts
- VT BlueCross Member Discounts
- Staff Emergency Loan Fund
- Staff Professional Development Fund

