<table>
<thead>
<tr>
<th>BENEFIT</th>
<th>DESCRIPTION</th>
<th>ELIGIBILITY</th>
<th>EFFECTIVE DATE</th>
<th>BI-WEEKLY PREMIUM</th>
</tr>
</thead>
</table>
Annual Salary BELOW $44,312  
Individual $ 43.71  
Family $ 192.68  
Annual Salary of $44,312 OR ABOVE:  
Individual $ 58.29  
Family $ 229.33  

*HMO BLUE:*  
Annual Salary BELOW $44,312  
Individual $ 40.76  
Family $ 170.56  
Annual Salary of $44,312 OR ABOVE:  
Individual $ 54.35  
Family $ 203.38  

*MVP:*  
Annual Salary BELOW $44,312  
Individual $ 71.11  
Family $ 181.98  
Annual Salary of $44,312 OR ABOVE:  
Individual $ 85.23  
Family $ 217.43  

*CDPHP:*  
Annual Salary BELOW $44,312  
Individual $ 86.80  
Family $ 246.07  
Annual Salary of $44,312 OR ABOVE:  
Individual $ 100.79  
Family $ 282.28  

* OPT-OUT Program | Allows eligible employees who have other employer-sponsored group health insurance, to opt out of the NYSHIP coverage in exchange for an incentive program. | Must be covered under an employer-sponsored group health insurance plan through other employment of your own or a plan through your spouse, domestic partner or parent as the result of their employment | | * Bi-weekly cost effective 1/1/19 |
<table>
<thead>
<tr>
<th>BENEFIT</th>
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<th>ELIGIBILITY</th>
<th>EFFECTIVE DATE</th>
<th>COST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dental Insurance</td>
<td>Partial reimbursement for services through participating and non-participating providers.</td>
<td>At least half-time and eligible to receive health insurance</td>
<td>First of the month after six calendar months of employment.</td>
<td>Paid for by New York State.</td>
</tr>
<tr>
<td>Vision Care</td>
<td>Financial assistance in meeting cost of eye exams and glasses/contact lenses.</td>
<td></td>
<td>56 day waiting period.</td>
<td></td>
</tr>
<tr>
<td>Retirement Systems</td>
<td>Options&lt;br&gt;ERS (Employees' Retirement System): Defined benefit plan; benefits are based on final five years average salary and years of employment.</td>
<td>Membership for full-time employees is mandatory.</td>
<td>Vested after 10 years of full-time service.</td>
<td>Effective April 1, 2013, Tier 6 employee, contribution is a sliding scale between 3-6% based on salary:</td>
</tr>
<tr>
<td></td>
<td>OPTIONAL RETIREMENT PROGRAM: TIAA, VOYA, Valic, or Fidelity: Defined contribution plan; benefits are based on employer and employee contributions and the success of the investments. Employer contribution is 8% of salary for first seven years of service; 10 % of salary thereafter.</td>
<td></td>
<td></td>
<td>$45,000 and under: 3%&lt;br&gt;$45,000.01 – $55,000: 3.5%&lt;br&gt;$55,000.01 – $75,000: 4.5%&lt;br&gt;$75,000.01 – $100,000: 5.75%&lt;br&gt;More than $100,000: 6%</td>
</tr>
<tr>
<td>Group Life and Accident Insurance</td>
<td>Optional term life, accidental death and dismemberment insurance; includes coverage for spouse and dependents.</td>
<td>All M/C employees</td>
<td>First day of pay period following the pay period in which enrollment form is submitted.</td>
<td>Premiums determined by amount of coverage purchased.</td>
</tr>
<tr>
<td>Flexible Spending Accounts</td>
<td>Dependent Care Advantage Account: A portion of salary is designated by employee to cover child, elder and dependent care expenses with tax-free dollars.</td>
<td>Must be receiving regular bi-weekly paychecks.</td>
<td>New employees become eligible after completion of 60 consecutive days of state service, and must enroll within 60 days of hire date or during annual open enrollment period.</td>
<td>The employee determines the amount to be deducted up to IRS-established maximum allowance</td>
</tr>
<tr>
<td></td>
<td>Health Care Advantage Spending Account: A portion of salary is designated by employee to cover unreimbursed health-related expenses with tax-free dollars.</td>
<td>Must be annual salaried employee and eligible for health insurance.</td>
<td></td>
<td>Funds are “use it or lose it” by 12/31 each plan year</td>
</tr>
<tr>
<td></td>
<td>Adoption Advantage Option (available 1/1/19): A portion of salary is designated by employee for expenses related to the adoption of an eligible child.</td>
<td></td>
<td></td>
<td>Enrollment does not automatically carry over each plan year</td>
</tr>
</tbody>
</table>
| **Tax Deferred Annuities & Roth After-Tax 403(b) Options** | After-tax and deferred tax retirement savings/investment plans  
|---|---|---|---|---|
| **New York State Deferred Compensation** | Voluntary tax-deferred savings program designed to provide funds in retirement.  
For more information or to enroll go to:  
[www.nysdcp.com](http://www.nysdcp.com) or call 1-800-422-8463 | Upon employment. | Choice of employee. | Employee contributions through salary reduction subject to IRS limitations. |
| **Long Term Disability Insurance** | Monthly income benefit equal to 60 percent of covered monthly salary, not to exceed $7,500 a month; also provides a monthly annuity premium benefit.  
For more information go to:  
[http://www.suny.edu/insurance/ltd/](http://www.suny.edu/insurance/ltd/) | Full-time or part-time M/C employees who are disabled for six consecutive months. | First of the month following one year anniversary.  
If you were covered by a previous employer within the last 3 months with a similar plan, the waiting period may be waived. | No cost to employee. |
| **Tuition Assistance** | Partial assistance is available through SUNY Tuition Waiver (based on funding).  
Fees are not covered by Tuition Assistance.  
[http://www.binghamton.edu/human-resources/employee-benefits/tuition-assistance.html](http://www.binghamton.edu/human-resources/employee-benefits/tuition-assistance.html)  
MC Training/Development Program:  
[https://www.goer.ny.gov/Training_Development/Management_Confidential/index.cfm](https://www.goer.ny.gov/Training_Development/Management_Confidential/index.cfm) | Appointment must cover period | Upon employment. | No cost to the employee for this benefit. |
| **Holidays** | Eligible for up to 12 holidays per year. | | | |
| **Vacation and Sick Leave** | Both are earned at the same rate, 1.75 days per calendar month. | | | |
| **Paid Family Leave** | Effective 1/1/19: Provides job-protected, paid leave for eligible employees to bond with new child, care for family member with serious health issue & assist with family pressures when military service abroad is necessary  
Funded through contributions taken as payroll deductions  
| **Important Payroll Information** | The State of New York compensates employees biweekly based on a Thursday to Wednesday work week. New York State employees are subject to a two week “lag” payroll system which means you are paid two weeks after the end of a two-week pay period.  
For more information:  
[http://osc.state.ny.us/payroll/files/gettingpaid_2013.pdf](http://osc.state.ny.us/payroll/files/gettingpaid_2013.pdf) | The State of New York compensates employees biweekly based on a Thursday to Wednesday work week. New York State employees are subject to a two week “lag” payroll system which means you are paid two weeks after the end of a two-week pay period.  
For more information:  
| **New employees cannot be placed on the payroll or issued parking permits or ID cards until they have completed their I-9’s and the required personnel/payroll forms indicated in their offer letter.** | | | | |