

BENEFITS AT A GLANCE

ALL CLASSIFIED SERVICE EMPLOYEES REPRESENTED BY CSEA

BINGHAMTON UNIVERSITY

| BENEFIT | DESCRIPTION | ELIGIBILITY | EFFECTIVE DATE | BI-WEEKLY PREMIUM |
|------------------------------------|--|--|--|--|
| Health Insurance/ Prescriptions | <p>Plan Options – NYSHIP Choices Book</p> <p>New York State Empire Plan: Anthem Blue Cross - Hospitalization United HealthCare - Major Medical/Surgical Carelon - Mental Health/Substance Abuse CVS/Caremark - Prescription Plan Administrator</p> <p>For more information go to: https://www.cs.ny.gov/employee-benefits/login/ Provider search: www.empireplanproviders.com</p> <p>Health Maintenance Organizations (HMO): Hospitalization and medical/surgical care by designated primary care physicians</p> <p>For more information and to search providers visit: HMO Blue - http://www.excellusbcbs.com/wps/portal/xl MVP - www.mvphc.com CDPHP - www.cdp.php.com</p> <hr/> <p>Allows eligible employees who have other employer-sponsored group health insurance, to opt out of the NYSHIP coverage in exchange for an incentive payment.</p> | <p>Full-time employees with appointments that are expected to last 3 months or longer.</p> <hr/> <p>Part-time employees need to work at least half-time on a regularly scheduled basis</p> <hr/> <p>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</p> | <p>28 calendar-day waiting period from date of appointment</p> | <p>*NYS EMPIRE PLAN: GRADE 9 or BELOW Individual \$ 60.23 Family \$ 272.67 GRADE 10 or ABOVE Individual \$ 80.31 Family \$ 324.22</p> <p>*HMO BLUE: GRADE 9 or BELOW Individual \$ 58.77 Family \$ 248.57 GRADE 10 or ABOVE Individual \$ 78.36 Family \$ 296.28</p> <p>*MVP: GRADE 9 or BELOW Individual \$ 87.54 Family \$ 245.35 GRADE 10 or ABOVE Individual \$107.07 Family \$ 293.19</p> <p>*CDPHP GRADE 9 or BELOW Individual \$ 98.03 Family \$ 248.45 GRADE 10 or ABOVE Individual \$ 117.29 Family \$ 296.86</p> <p>* Bi-weekly (per paycheck) cost effective January 1. 2025</p> |
| OPT-OUT Program | | | | |

| BENEFIT | DESCRIPTION | ELIGIBILITY | EFFECTIVE DATE | COST |
|---|---|--|---|---|
| Dental and Vision | <p>Partial reimbursement for services through participating and non-participating providers.</p> <p>For more info go to: www.cseaebf.com;</p> <p>CSEA Employee Benefit Fund: 800-323-2732</p> | Must be at least half-time and eligible to receive health insurance | 28 day waiting period from date of appointment. | No premium cost; jointly funded by CSEA and New York State. |
| Retirement Systems | <p>Options</p> <p>ERS (Employees' Retirement System): Defined benefit plan; benefits are based on final average salary* and years of employment.</p> <p>For more detailed info go to: http://www.osc.state.ny.us/retire/index.htm</p> <p>*As defined by TIER</p> | <p>Membership for full-time permanent employees is mandatory.</p> <hr/> <p>Membership for part-time and full-time temporary employees is optional.</p> | <p>Permanent employees: membership is effective on the date of appointment.</p> <hr/> <p>Vested after 5 years of full-time service.</p> <hr/> <p>Temporary and part-time employees: Membership is effective upon the receipt of application at ERS.</p> | <p>Effective April 1, 2013, Tier 6 employee, contribution sliding scale based on salary:</p> <p>\$45,000 and under: 3% \$45,000.01 – \$55,000: 3.5% \$55,000.01 – \$75,000: 4.5% \$75,000.01 – \$100,000: 5.75% More than \$100,000: 6%</p> |
| Disability Coverage and Life Insurance | Not provided by the University, but may be purchased individually through the union. For more info go to: www.cseaebf.com | | | |
| Tax Deferred Annuities & Roth After-Tax 403(b) Options | After-tax and deferred tax retirement savings/investment plans http://www.suny.edu/benefits/vsp/ | Upon employment. | Choice of employee. | Employee contributions through salary reduction subject to IRS limitations. No employer contribution. |
| New York State Deferred Compensation | <p>Voluntary savings program designed to provide funds in retirement. After-tax and deferred tax options available.</p> <p>For more information or to enroll go to: www.nysdcp.com or call 1-800-422-8463</p> | Upon employment. | Choice of employee. | Employee contributions through salary reduction subject to IRS limitations. No employer contribution. |
| Paid Parental Leave | NYS provided 12 weeks of Paid Parental Leave to bond with a newly born, adopted or fostered child | Employees working at least 50% part-time | Upon employment | No cost to employee |
| Tuition Assistance | <p>Partial assistance is available through the CSEA/NYS Partnership for Education & Training:</p> <p>For more info go to: www.cseaebf.com</p> <p>or (based on funding) the SUNY Tuition Waiver Program at State operated campuses.</p> <p>Fees are not covered by Tuition Assistance.</p> <p>For further information visit:</p> <p>https://binghamton.edu/offices/human-resources/benefits/tuition-assistance.html</p> | <p>Appointment must cover period of support.</p> <hr/> <p>Must be on payroll by specified date (varies).</p> | Upon employment. | No cost to the employee for this benefit. |

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|--------------------------------------|--|--|---|---|
| Flexible Spending Accounts | <p>Dependent Care Advantage Account: A portion of salary is designated by employee to cover child, elder and dependent care expenses with tax-free dollars.</p> <p>Health Care Advantage Spending Account: A portion of salary is designated by employee to cover unreimbursed health-related expenses with tax-free dollars.</p> <p>Adoption Advantage Option: A portion of salary is designated by employee for expenses related to the adoption of an eligible child.</p> <p>Visit http://www.flexspend.ny.gov/ and select Enrollment Information for details</p> | <p>Must be receiving regular bi-weekly paychecks.</p> <p>Must be annual salaried employee and eligible for health insurance.</p> | <p>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.</p> | <p>The employee determines the amount to be deducted up to IRS- established maximum allowance</p> <p>Funds are "use it or lose it" by 12/31 each plan year</p> <p>Enrollment does not automatically carry over each plan year</p> |
| Holidays* | Eligible for up to 13 holidays per year | | | |
| Vacation* | Generally full-time employees earn at the rate of one-half day per pay period, after the completion of 13 pay periods of employment. (13 days/year for first 7 years then 20 days/year thereafter). Part-time employees who work a regular schedule of at least half time, earn accruals on a pro-rated basis. One bonus vacation day for each year of completed service for the second through seventh years of employment. | | | |
| Sick Leave* | Full-time employees earn at the rate of one-half day per pay period. (Total of 13 days/year) Part-time employees who work at least half time earn on a pro-rated basis. | | | |
| Personal Leave* | Five (5) days each year on personal leave anniversary date. | | | |
| 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 | | | |

New employees cannot be placed on the payroll or issued parking permits or ID cards until they have completed their I-9s and the required personnel/payroll forms indicated in their offer letter.

Employees paid on an **hourly basis do not qualify for Attendance Rules Coverage (holidays, vacation, sick leave, personal, etc.) until completion of 19 consecutive pay periods of at least half-time service.*