

BENEFITS AT A GLANCE

ALL CLASSIFIED SERVICE EMPLOYEES REPRESENTED BY PBA-NYS

BINGHAMTON UNIVERSITY

BENEFIT	DESCRIPTION	ELIGIBILITY	EFFECTIVE DATE	BI-WEEKLY PREMIUM
<p>Health Insurance/ Prescriptions</p> <p><i>All health insurance plans are administered by the NY State Department of Civil Service Employee Benefits Division</i></p>	<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 style="color: red;">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 style="color: red;">For more information and to search providers visit: HMO Blue – http://www.excellusbcbcs.com/wps/portal/xl MVP – www.mvphealthcare.com CDPHP – www.cdphp.com</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>	<p>28 calendar-day waiting period from date of appointment.</p>	<p style="background-color: yellow;">*NYS EMPIRE PLAN:</p> <p>GRADE 9 or BELOW Individual \$ 65.99 Family \$ 298.75</p> <p>GRADE 10 or ABOVE Individual \$ 87.99 Family \$ 355.24</p> <p style="background-color: yellow;">*HMO BLUE:</p> <p>GRADE 9 or BELOW Individual \$ 62.02 Family \$ 262.05</p> <p>GRADE 10 or ABOVE Individual \$ 82.70 Family \$ 312.37</p> <p style="background-color: yellow;">*MVP:</p> <p>GRADE 9 or BELOW Individual \$ 130.14 Family \$ 287.91</p> <p>GRADE 10 or ABOVE Individual \$151.59 Family \$ 344.09</p> <p style="background-color: yellow;">*CDPHP</p> <p>GRADE 9 or BELOW Individual \$ 113.41 Family \$ 276.16</p> <p>GRADE 10 or ABOVE Individual \$ 134.47 Family \$ 329.89</p>
<p>OPT-OUT Program</p>	<p>Allows eligible employees who have other employer-sponsored group health insurance, to opt out of the NYSHIP coverage in exchange for an incentive program</p>	<p>Must be covered under an employer-sponsored group health plan through other employment of your own or a plan through your spouse, domestic partner or parent as a result of their employment</p>		<p style="background-color: yellow;">* Bi-weekly (per paycheck) cost effective January 1, 2026</p>

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<p>NYS Dental</p> <p>NYS Vision Care</p>	<p>Partial reimbursement for services through participating and non-participating providers. For more information go to: https://www.suny.edu/insurance/dental/</p> <p>Financial assistance in meeting cost of eye exams and glasses/contact lenses. For more information go to: https://www.suny.edu/insurance/vision/</p>	<p>Must be at least half-time and eligible to receive health insurance</p>	<p>28 calendar-day waiting period from date of appointment.</p>	<p>Paid for by New York State.</p>
<p>Retirement System</p>	<p>NYSLRS PFRS – State University Police Plan Defined benefit plan; benefits are based on final average salary* and years of employment.</p> <p>*As defined by TIER</p> <p>For more information go to: http://www.osc.state.ny.us/retire/publications/vol1823/index.php</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 NYSLRS application .</p>	<p>Employee contribution is based on salary, as follows:</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> <p>NOTE: Pensionable salary is capped at the Governor’s annual salary of \$250K for PFRS membership.</p>
<p>Disability Coverage and Life Insurance</p>	<p>Not provided by the University, but may be purchased individually through the union.</p>			
<p>Tuition Assistance</p>	<p>Partial assistance is available through the Tuition Waiver program (Based on funding) at State operated campuses. Registration fees are not covered https://www.binghamton.edu/offices/human-resources/benefits/tuition-assistance.html</p>	<p>Appointment must cover period of support.</p>	<p>Upon employment.</p>	<p>No cost to the employee for this benefit.</p>
<p>Flexible Spending Accounts</p>	<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> <hr/> <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>

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SUNY Voluntary 403(b) Savings Plan	After-tax and deferred tax retirement savings/investment plans http://www.suny.edu/benefits/vsp/ <i>Enrollment & changes made by employee via SUNY Retirement at Work online</i>	Upon employment.	Choice of employee.	Employee contributions through salary reduction subject to IRS limitations. No employer contribution.
New York State Deferred Compensation 457 Plan	Voluntary savings program designed to provide funds in retirement. <i>For more information or to enroll go to: www.nysdcp.com or call 1-800-422-8463</i>	Upon employment.	Choice of employee	Employee contributions through salary reduction subject to IRS limitations. No employer contribution.
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*	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.