

SUMMARY OF BENEFITS

PROVIDER / PLAN	DESCRIPTION	PREMIUM	ELIGIBILITY	ENROLLMENT	CONTACT
HEALTH INSURANCE - TRADITIONAL PLAN (Pre-Tax)					
<p>State of Florida Employees' Preferred Patient Care Plan (PPO)</p> <p><i>Blue Cross / Blue Shield</i></p>	<p>Plan has network and non network providers for physician and hospital services. Most services are covered at 80% when using network providers; 60% when using non-network providers. A six-month pre-existing condition exclusion applies.</p> <p>Co-pay primary care physician office visit - \$15.00 Co-pay specialist visit - \$25.00</p> <p>Deductibles apply to hospital inpatient services, physician office visits, outpatient services, and emergency room services. In network \$250.00 individual/\$500.00 family. Out of network \$750.00 individual/\$1,500.00 family.</p> <p>Maximum out-of-pocket per year is \$2,500 per individual and \$5,000 per family for covered services.</p> <p>Prescription Drug Retail Program (Caremark): \$10.00 for generic, \$25.00 for preferred brand drugs, \$40.00 for non-formulary drugs. Mail order: \$20.00 for generic, \$50.00 for preferred brand, \$80.00 non preferred brand.</p>	<p><i>Bi-weekly</i> <i>Full time:</i></p> <p><u>Individual</u> \$25.00 <u>Family</u> \$90.00</p> <p><i>Bi-weekly:</i> <i>Half time: .50</i> <i>FTE</i></p> <p><u>Individual</u> 111.54 <u>Family</u> 268.98</p>	Support, Administrative and Faculty, and their eligible dependents	<p>Complete:</p> <p>Health Insurance Enrollment Form with HR</p> <p>Must enroll within first 60 days of employment</p>	<p>Human Resources 904-620-2903</p> <p>People First 866-663-4735 https://peoplefirst.myflorida.com</p> <p>Please direct claims questions to provider</p> <p>BCBS of Florida 1-800-825-2583 https://www.bcbsfl.com</p> <p>Caremark Pharmacy Services 800-378-4408 https://www.caremark.com</p>
<p>Health Maintenance Organization (HMO)</p> <p><i>AvMed</i> <i>United Health Care</i></p>	<p>Select Primary Care Physician (PCP) from HMO provider network. May self refer to specialists.</p> <p>Co-pay primary care physician office visits - \$15.00 Co-pay specialist's visit - \$25.00</p> <p>Inpatient hospital admission \$250.00 co-payment; no charge for surgery.</p> <p>No pre-existing condition exclusion applies.</p> <p>Most HMOs provide limited or no coverage for services outside their service areas except in case of life-threatening emergencies.</p> <p>Prescription Drug Program: \$10.00 for generic, \$25.00 for formulary drugs, and \$40.00 for non-formulary drugs. Mail order: \$20.00 generic, \$50.00 preferred, \$80.00 non preferred brand</p>	<p><i>Bi-weekly</i> <i>Full time:</i></p> <p><u>Individual</u> \$25.00 <u>Family</u> \$90.00</p> <p><i>Bi-weekly:</i> <i>Half time: .50</i> <i>FTE</i></p> <p><u>Individual</u> 111.54 <u>Family</u> 268.98</p>	Support, Administrative, and Faculty and their eligible dependents	<p>Complete:</p> <p>Health Insurance Enrollment Form with HR</p> <p>Must enroll within first 60 days of employment</p>	<p>Human Resources 904-620-2903</p> <p>People First 866-663-4735 https://peoplefirst.myflorida.com</p> <p>Please direct claims questions to provider</p> <p>AvMed 1-800-882-8633 https://www.avmed.org</p> <p>United Healthcare 1-877-571-9864 https://www.myuhc.com</p>

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HEALTH INSURANCE - HEALTH INVESTOR HEALTH PLAN (HIHP) (Pre-Tax)					
<i>Blue Cross / Blue Shield State HIHP PPO Plan</i>	<p>Plan has in-network and non network providers for physician and hospital services. A six-month pre-existing condition exclusion applies.</p> <p>Deductibles apply to hospital inpatient services, physician office visits, outpatient services, emergency room services, and prescription drugs.</p> <p>Annual deductible: In-network \$1,250.00 individual; \$2,500.00 family. Non-network \$2,500.00 individual; \$5,000 family Plan pays 80% for in-network medical care, 60% non-network medical care after deductible is met.</p> <p>Annual out-of-pocket maximum: In-network \$3,000 individual; \$6,000 family. Non-network \$7,500 individual; \$15,000 family. After out of pocket costs reach these maximums, plan pays 100% for covered care in most cases up to allowable costs.</p> <p>Prescription Drug Retail Program (Caremark): After deductible is met, plan pays 70% for in-network generic and preferred brand. 0% for non network generic and preferred brand. 50% for in-network non-preferred brand and 0% for non-network non-preferred brand.</p>	<p>Bi-weekly Full time:</p> <p><u>Individual</u> \$7.50 <u>Family</u> \$32.15</p> <p>Bi-weekly: Half time: .50 FTE</p> <p><u>Individual</u> 94.04 <u>Family</u> 211.13</p>	Support, Administrative, and Faculty and their eligible dependents	<p>Complete:</p> <p>Health Insurance Enrollment Form with HR</p> <p>Must enroll within first 60 days of employment</p>	<p>Human Resources 904-620-2903</p> <p>People First 866-663-4735 https://peoplefirst.myflorida.com</p> <p>Please direct questions regarding claims, and specific procedures to provider</p> <p>Blue Cross and Blue Shield of Florida 1-800-825-2583 https://www.bcbsfl.com</p> <p>Caremark Pharmacy Services 800-378-4408 https://www.caremark.com</p>
<p>Health Maintenance Organizations (HMO)</p> <p><i>AvMed United Health Care State HIHP HMO Plans</i></p>	<p>Plan has HMO provider network for physician and hospital services. No pre-existing condition exclusion applies.</p> <p>Annual deductible: In-network only \$1,250.00 individual; \$2,500.00 family.</p> <p>Plan pays 80% for in-network medical care after deductible is met.</p> <p>Annual out of pocket maximum: In network individual \$3000.00; \$6000 family. After out of pocket costs reach these maximums, plan pays 100% for covered care in most cases up to allowable costs.</p> <p>Prescription Drug Program: after deductible is met, plan pays 70% for in-network generic and preferred brand, 50% for in-network non-preferred brand.</p>	<p>Bi-weekly Full time:</p> <p><u>Individual</u> \$7.50 <u>Family</u> \$32.15</p> <p>Bi-weekly: Half time: .50 FTE</p> <p><u>Individual</u> 94.04 <u>Family</u> 211.13</p>	Support, Administrative, and Faculty and their eligible dependents	<p>Complete:</p> <p>Health Insurance Enrollment Form with HR</p> <p>Must enroll within first 60 days of employment</p>	<p>Human Resources 904-620-2903</p> <p>People First 866-663-4735 https://www.peoplefirst.myflorida.com</p> <p>Please direct claims questions to provider</p> <p>AvMed 1-800-882-8633 https://www.avmed.org</p> <p>United Healthcare 1-877-571-9864</p>

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STATE GROUP LIFE INSURANCE – Prudential (Pre-Tax)					
State of Florida Group Life Insurance Plan <i>Prudential</i>	<p>Level term life insurance equal to 1.5 times annual salary. Includes Accidental Death & Dismemberment (ADD) provision. Also includes Accelerated Death Benefit (ADB). State pays 80% of your premium. At age 70, policy value decreases to 50%.</p> <p>Optional Term Life Insurance is available on a post-tax basis. May select up to five times salary. Employee pays full cost of premium.</p> <p>Death benefit will be paid to any beneficiary you name.</p> <p>Your insurance will cease if you terminate employment or become ineligible due to OPS employment. Conversion option to individual policy is available.</p>	Bi-weekly premium based upon formula using annual salary.	Support, Administrative, and Faculty	<p>Complete:</p> <p>Life Insurance Enrollment Form with HR</p> <p>Must enroll within first 60 days of employment</p>	<p>Human Resources 904-620-2903</p> <p>People First 866-663-4735 https://www.peoplefirst.myflorida.com</p>
FLEXIBLE REIMBURSEMENT ACCOUNTS (Pre-Tax)					
Medical Account	<p>Lets you pay for eligible medical expenses on a pre-tax basis.</p> <p>You elect to put money into the account based on the amount you expect to spend on eligible medical expenses during the Plan Year (January – December).</p> <p>Cannot change or cancel account during the Plan Year unless a qualifying status change is experienced.</p> <p>You may contribute a minimum of \$60 up to a maximum of \$5,000 per plan year.</p> <p>Submit invoices to People First on claim forms available at Human Resources. Claim filing deadline is April 15 of following year. Certain expenses are not eligible for reimbursement.</p> <p>Use it or lose it rule applies to both Medical and Day Care Account</p>	Varies per election	Support, Administrative, Faculty and their eligible dependents	<p>Complete:</p> <p>Flexible Spending Account Enrollment Form with HR</p> <p>Must enroll within first 60 days of employment</p>	<p>Human Resources 904-620-2903</p> <p>People First 866-663-4735 https://peoplefirst.myflorida.com</p>
Dependent Day Care Account	<p>Lets you pay for eligible dependent day care expenses on a pre-tax basis. Expenditures incurred for dependents older than 13 are not eligible.</p> <p>You may contribute a minimum of \$60 up to a maximum of \$5,000 per plan year if single or married, filing jointly. You may contribute \$2,500 per plan year if married, filing separately.</p>	Varies per election	Support, Administrative, and Faculty and their eligible dependents	<p>Complete:</p> <p>Same as above</p>	<p>Human Resources 904-620-2903</p> <p>People First 866-663-4735 https://peoplefirst.myflorida.com</p>

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LIMITED PURPOSE MEDICAL REIMBURSEMENT ACCOUNT (Pre-tax)					
Limited Purpose Medical Reimbursement Account	<p>A Limited Purpose Medical Reimbursement Account lets you pay for dental, vision, and preventative services, expenses on a pre-tax basis. You must enroll in a Health Savings Account (HSA) and a HIHP Health plan.</p> <p>You may elect to put money into the account based on the amount you expect to spend on dental, vision and preventative service expenses during the plan year January - December.</p> <p>You cannot change or cancel the account during the plan year unless a qualifying status change is experienced.</p> <p>You may contribute a minimum of \$60.00 up to a maximum of \$5,000 per plan year.</p> <p>Submit claim forms to People First on claim forms available at Human Resources or People First. Claim filing deadline is April 15 of the following year. Certain expenses are not eligible for reimbursement.</p> <p>Use it or lose it rule applies.</p>	Variable contribution	Support, Administrative, Faculty, and their eligible dependents	<p>Complete:</p> <p>Flexible Spending Account Enrollment Form with HR</p> <p>Must enroll within first 60 days of employment</p>	<p>Human Resources 904-620-2903</p> <p>People First 866-663-4735 https://peoplefirst.myflorida.com</p>
HEALTH SAVINGS ACCOUNT (Pre-tax)					
Health Savings Account	<p>A health savings account lets you pay for eligible medical expenses on a pre-tax basis. You must enroll in a HIHP health plan.</p> <p>You may elect to put money into the account if you desire. Your contribution is not mandatory. You can change your contribution amount anytime during the plan year. You may contribute a minimum of \$0 up to a maximum of \$750.00 for single and \$1,500 for family.</p> <p>For active employees only, there will be a monthly employer contribution into the HSA of \$41.66 for single coverage or \$83.33 for family coverage, up to an annual contribution of \$500.00 or \$1,000 respectively in 2006.</p> <p>Submit invoices to People first on claim forms available at Human Resources or online. Certain expenses are not eligible for reimbursement. Account balances carry forward year to year.</p>	Variable contribution	Support, Administrative, Faculty, and their eligible dependents	<p>Complete:</p> <p>Flexible Spending Account Enrollment Form with HR</p> <p>Must enroll within first 60 days of employment</p>	<p>Human Resources 904-620-2903</p> <p>People First 866-663-4735 https://peoplefirst.myflorida.com</p>

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DENTAL (Pre-Tax)					
Comp Benefits (American Dental Plan) <i>Pre-paid</i>	Must select an ADP participating dentist. Includes limited vision and prescription benefit. Fees are listed on Patient Charge Schedule. No claim forms, deductibles, or annual maximums. Orthodontia for adults and children – 25% discount. Other specialists – 25% reduction from usual and customary fees.	Bi-weekly: <u>Individual</u> \$6.13 <u>Individual + 1</u> \$10.43 <u>Individual + 2 +</u> \$14.27	Support, Administrative, Faculty, and their eligible dependents	Complete Dental Insurance Enrollment Form with HR. Enroll within first 60 days of employment.	Human Resources 904-620-2903 Comp Benefits Member Services 1-800-342-5209 https://www.compbenefits.com
American Dental Plan <i>Indemnity</i>	Select dentist of your choice. Claims paid according to a stated Benefit Schedule. Deductible: \$50 individual; \$150 family/calendar year Annual dollar maximum: \$1,000 per person / year Pre-existing conditions may not be covered. Includes vision benefit; orthodontia not covered.	<u>Individual</u> \$7.37 <u>Individual + 1</u> \$11.04 <u>Individual + 2 +</u> \$14.73	Support, Administrative, Faculty, and their eligible dependents	Same as above	Human Resources 904-620-2903 ADP Member Services 1-800-342-5209 https://www.compbenefits.com
CIGNA <i>Pre-paid</i>	Must select a CIGNA participating dentist. No claim forms, deductibles, or annual maximums. Fees are listed on Patient Charge Schedule. Orthodontia for adults and children – pre-set charge. Specialty care – listed on Patient Charge Schedule.	<u>Individual</u> \$11.50 <u>Individual + 1</u> \$21.66 <u>Individual + 2 or more</u> \$28.63	Support, Administrative, Faculty, and their eligible dependents	Same as above	
Oral Health Services <i>Prepaid</i>	Must select OHS participating dentist. No claim forms, deductibles, or annual maximums. Diagnostic and preventive services covered at 100%. Basic restorative services covered at 90%. Major restorative services covered at 60%. Orthodontic services covered at 60%.	<u>Individual</u> \$6.01 <u>Family</u> \$15.82	Support, Administrative, Faculty, and their eligible dependents	Same as above	Human Resources 904-620-2903 OHS 1-800-943-6880 https://www.compbenefits.com
Oral Health Services <i>DPPO</i>	May select between in-network and out-of-network dentist. Deductibles and annual maximums apply. Claim forms are required. Diagnostic and restorative services covered at higher percentage when using in-network dentist. In-network orthodontic services covered at 50% (\$1,500 lifetime maximum benefit).	<u>Individual</u> \$14.68 <u>Family</u> \$32.44	Support, Administrative, Faculty, and their eligible dependents	Same as above	Human Resources 904-620-2903 OHS 1-800-943-6880 https://www.compbenefits.com
DentiCare <i>Pre-paid</i>	Must select a DentiCare participating dentist. No claim forms, deductibles, or annual maximums. Fees are listed on Patient Co-payment Schedule. Specialty care and orthodontic benefit available at 25% discount. Vision care available	<u>Individual</u> \$6.18 <u>Individual + 1</u> \$10.45 <u>Individual + 2 +</u> \$16.48	Support, Administrative, Faculty, and their eligible dependents	Same as above	Human Resources 904-620-2903 DentiCare 1-800-443-2995 https://www.assurant.com
DentiCare (Assurant) <i>Indemnity</i>	Select dentist of your choice. Deductible: \$50 individual per year. Annual dollar maximum: \$1,000 per person / year. Preventive care covered at 100%; basic care covered at 80%; major care covered at 25% first year, 50% second year. Lifetime orthodontia maximum \$1000. Vision care available.	<u>Individual</u> \$19.18 <u>Individual + 1</u> \$38.40 <u>Individual + 2 +</u> \$57.28	Support, Administrative, Faculty, and their eligible dependents	Same as above	Human Resources 904-620-2903 DentiCare 1-800-442-7742 https://www.assurant.com

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HOSPITAL INCOME – Alta Insurance Company (Pre-Tax)					
Alta	<p>For a selected benefit level and a given premium, the following hospital income plans will pay you cash benefits in the event you require hospitalization. Benefits are in addition to those you may receive from your group health plan.</p> <p>Preferred Provider Plus (PPP) is designed for participants in the State PPO Plan using in network facilities; however, the same benefits will apply in the event you use a non-preferred facility. This plan helps offset your out-of-pocket facility expenses.</p> <p>The 30/20 plan is a supplemental hospital insurance plan designed for participants in the State Self-Insurance Plan using non-network providers. It pays \$250 per admission plus 20% of the next \$12,500 inpatient hospital special charges.</p> <p>The State Insurance Supplement plan (SIS) provides reimbursement for specified hospital expenses. It is used where employees/dependents are based outside of Florida as a condition of employment, and employees/dependents that live in a county where network providers are not available.</p> <p>The 365 Plus plan is a hospital indemnity program designed to pay a fixed daily supplemental amount while confined to a hospital. This plan provides coverage 365 days per year. It is designed as a supplement for those choosing an HMO as their primary plan, or it can be used with other plans.</p>	<p>Bi-weekly:</p> <p>Individual and Family plans are available. See enrollment worksheet for rates.</p>	Support, Administrative, Faculty and their eligible dependents	<p>Complete:</p> <p>Hospital Insurance Enrollment Form with HR</p> <p>Enroll within first 60 days of employment</p>	<p>Human Resources 904-620-2903</p> <p>Capital Insurance Agency, Inc. 1-800-780-3100 https://www.capitalins.com</p>
HOSPITAL INCOME – Philadelphia American Life (Pre-Tax)					
The Gabor Agency, Inc. (Philadelphia American Life)	<p>A supplemental health insurance plan which pays \$100 to \$200 daily for each day of room and board charges you or your insured dependents are hospitalized, beginning with the first day, up to 365 days for each confinement. Option III adds an additional \$200 per day beginning with the fourth day and continuing through the tenth day of hospitalization.</p> <p>Option I \$100 daily benefit Option II \$200 daily benefit Option III \$100 daily benefit plus expanded rider</p>	<p><u>Individual</u> Option I \$4.79 Option II \$10.18 Option III \$6.46</p> <p><u>Employee +1</u> Option I \$9.60 Option II \$20.30 Option III \$12.93</p> <p><u>EE + 2 or more</u> Option I \$12.59 Option II \$26.76 Option III \$16.36</p>	Support, Administrative, Faculty and their eligible dependents	<p>Complete:</p> <p>Hospital Insurance Enrollment Form with HR</p> <p>Enroll within first 60 days of employment</p>	<p>Human Resources 904-620-2903</p> <p>The Gabor Agency, Inc. 1-800-330-6115 https://www.gaboragency.com</p>

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CANCER - AFLAC (Pre-Tax)					
American Family Life Assurance Company (AFLAC) <i>Cancer</i> <i>Cancer and Hospital Intensive Care Rider</i>	<p>This plan pays cash benefits for the direct and indirect costs of cancer treatment. Options include hospital confinement, radiation, surgical, chemotherapy, nursing services, anesthesia, prosthesis, ambulance, family lodging, extended care facility, outpatient surgery, bone marrow transplantation, hospice, and second surgical opinion.</p> <p>There are two levels available and riders may be added to each level. Riders are the Specified Disease Rider and First Occurrence Building Benefit Rider. No lifetime maximum.</p> <p>Coverage also provides a wellness benefit to reimburse you for certain cancer-screening tests.</p> <p>A Hospital Intensive Care Plan is also available and covers expenses for confinement in a hospital intensive care unit. This benefit is limited to 15 days per period of confinement. Purchased only as a rider to AFLAC cancer policy.</p>	<p>Bi-weekly:</p> <p><i>Basic plans/Riders:</i></p> <p><u>Individual</u> \$9.35 - \$18.75</p> <p><u>Employee + Children</u> \$10.85-23.10</p> <p><u>Family</u> \$15.25– \$32.20</p> <p><i>Hospital Intensive Care Rider</i></p> <p><u>Individual</u> \$4.35</p> <p><u>Family</u> \$8.32</p>	<p>Support, Administrative, Faculty and their eligible dependents</p> <p>Note: see the company's brochure for age limitations</p>	<p>Complete:</p> <p>Supplemental Cancer/Intensive Care Insurance Enrollment form with HR</p> <p>Enroll within first 60 days of employment</p>	<p>AFLAC Representative 1-800-992-3522 https://www.aflac.com</p>
CANCER – Colonial Life & Accident (Pre-Tax)					
Colonial Life and Accident Insurance Company <i>Cancer</i> <i>Cancer and Hospital Intensive Care Rider</i>	<p>This policy pays benefits specifically for the treatment of cancer and for certain cancer-screening tests.</p> <p>Pays \$1,000 first occurrence benefit for employee. Pays \$500 first occurrence benefit for dependent. Pays \$180 / day for first 10 days of hospital confinement and \$220 for next 60 continuous days. Pays total amount charged for room and board beginning on 71st continuous day. Pays \$130 / day for private duty nursing in a hospital. Pays \$30 / day for attending physician. Pays \$5,000 / year for radiation and chemotherapy.</p> <p>Wellness benefit pays the amount charged up to a maximum of \$50 per calendar year, for each insured, for the test, exam and office visit.</p> <p>Provides optional Hospital Intensive Care Plan. Pays \$350 / day for each day of confinement to a hospital intensive care unit for up to 45 days for each confinement. Purchased only as a rider to the Colonial Cancer Policy.</p>	<p>Bi-weekly:</p> <p><i>Basic Plan</i></p> <p><u>Individual</u> \$5.47</p> <p><u>Family</u> \$9.09</p> <p><i>Cancer and Hospital Intensive Care Rider</i></p> <p><u>Individual</u> \$6.98</p> <p><u>Family</u> \$12.24</p>	<p>Support, Administrative, Faculty and their eligible dependents</p>	<p>Complete:</p> <p>Supplemental Cancer/Intensive Care Insurance Enrollment Form with HR</p> <p>Enroll within first 60 days of employment</p>	<p>Colonial Life and Accident Insurance Company 1-800-858-0779 https://www.coloniallife.com</p>

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ACCIDENT / DISABILITY - Colonial Life & Accident (Pre-Tax)					
Colonial Life and Accident Insurance Company <i>Accident Plan</i>	This coverage provides cash benefits if you are in a covered accident on or off-the-job. Benefits are based on the type of injury sustained. The money is paid to you regardless of other insurance coverage, including hospitalization, Workers' Compensation, annual or sick leave.	<u>Individual</u> Variable <u>Employee, Spouse, Dependents</u> Variable <u>Dependent Only</u> Variable	Support, Administrative, Faculty and their eligible dependents Note: See company's brochure for age limitations	Call Human Resources to schedule appointment with Colonial agent Enroll within first 60 days of employment	Human Resources 904-620-2903 Colonial Life and Accident Insurance Company 1-800-858-0779 https://www.coloniallife.com
Colonial Life and Accident Insurance Company <i>Accident / Disability Plan</i>	This plan provides additional coverage for loss of wages, deductibles and co-payments, travel expenses for treatment and lodging and meals. You can enroll in plans that provide disability benefits ranging from \$400 to \$3,000 / month, based on your current salary. Benefit periods range from 6 months, 12 months, up to 24 months. Elimination periods start at 0/7 and up, meaning you wait 0 days for a covered accident and 7 days for a covered disability to be eligible for benefits.	<u>Employee, Spouse</u> Variable <u>Spouse + Deps.</u> Variable <u>Employee + Children</u> Variable <u>Spouse Only</u> Variable	Support, Administrative, Faculty and their eligible dependents Note: See company's brochure for age limitations	Call Human Resources to schedule appointment with Colonial agent Enroll within first 60 days of employment	Human Resources 904-620-2903 Colonial Life and Accident Insurance Company 1-800-858-0779 https://www.coloniallife.com
VISION (Pre -Tax)					
VisionCare	Plan benefits include vision exam, frames, lenses, and contact lenses (restrictions apply). Deductibles: \$10 exam and \$15 materials. Must select VisionCare network optometrist.	<u>Individual</u> \$3.48 <u>Family</u> \$8.94	Support, Administrative, Faculty and their eligible dependents	Complete Supp Vision Ins Enroll Form. Enroll within first 60 days of employment	Human Resources 904-620-2903 VisionCare 800-939-5369 https://www.compbenefits.com
LIFE INSURANCE - (Post-Tax)					
The Gabor Agency, Inc. <i>Symetra</i>	Group Term Life Insurance: You may choose any amount of insurance according to plan schedule. Cash Value Life Insurance: Policies can provide cash and loan value, and may also be purchased for the employee's spouse and dependent children.	See Gabor Agency brochure for rates: <i>Insurance Plan For Employees of UNF</i>	Support, Administrative, Faculty and their eligible dependents	Call HR to schedule appointment with Gabor Agent. May enroll at any time. Must be full time.	Human Resources 904-620-2903 The Gabor Agency 1-800-330-6115 https://www.gaboragency.com
LONG TERM DISABILITY INSURANCE - 30 DAY WAITING PERIOD (Post-Tax)					
The Gabor Agency, Inc. <i>UNUM Life Insurance Company of America</i>	Provides income protection beginning with 31st day of disability. Benefit covers 2/3 of your base salary.	Bi-weekly: Premium is \$.94 per \$100.00 of monthly salary	Support, Administrative, Faculty and their eligible dependents only; must work at least 20 hours per week Effective date is first day of month following date of enrollment and payment of first month's premium.	Call HR to schedule appointment with Gabor Agent and complete Gabor Disability App. Enroll within 60 days of employment or during a Gabor open enrollment period.	Human Resources 904-620-2903 The Gabor Agency 1-800-330-6115 https://www.gaboragency.com

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LONG TERM DISABILITY INSURANCE - 90 DAY WAITING PERIOD – (Post -Tax)					
The Gabor Agency, Inc. <i>UNUM Life Insurance Company of America</i>	Monthly benefit begins on the 91 st day of disability. If disabled due to injury or sickness, you will be paid a monthly benefit equal to 66 2/3 % of your basic monthly earnings, less your benefits from other income. There is a pre-existing condition exclusion. If a period of disability begins before age 60, a monthly benefit is payable until you reach age 65. If a period of disability begins after age 60, monthly benefits are payable according to a schedule.	Bi-weekly: Premium is \$.61 per \$100.00 of monthly salary	Support, Administrative, Faculty and their eligible dependents Must work at least 20 hours per week. Effective date is first day of month following date of enrollment and payment of first month's premium	Call HR to schedule appointment with Gabor Agent and complete Gabor Disability App. Enroll within 60 days of employment or during a Gabor open enrollment period.	Human Resources 904-620-2903 The Gabor Agency 1-800-330-6115 https://www.gaboragency.com
LONG TERM CARE – UNUM Life Insurance Company (Post-Tax)					
The Gabor Agency, Inc. <i>UNUM Life Insurance Company of America</i>	Provides coverage for medically necessary services in a long-term care facility, assisted living facility, or in your home. You may be eligible for a monthly benefit if you become disabled, have satisfied an elimination period, and a physician has certified that you are unable to perform two or more activities of daily living (ADLs) or cognitive impairment. Plans: four levels of care are available. Facility monthly benefit amount: ranges from \$1,000 to \$6,000. Facility benefit duration: 3 years, 6 years, or unlimited duration.	As selected	Support, Administrative, Faculty, retired employees, and their spouses, parents, siblings, grandparents, children.	Call HR to schedule appointment with Gabor Agent and complete Gabor Long Term Care App. Enroll within first 60 days of employment. If you enroll outside of this window, you will be required to provide evidence of insurability.	Human Resources 904-620-2903 The Gabor Agency 1-800-227-4165 https://www.gaboragency.com
TAX SHELTERED ANNUITIES AND MUTUAL FUNDS – 403(b) (Pre-Tax)					
<u>Annuity Providers:</u> <i>ING Life Insurance Equitable Met Life Investors Northern Life Insurance Symetra TIAA – CREF VALIC</i> <u>Mutual Funds:</u> <i>Merrill Lynch The Vanguard Group Fidelity Investments</i>	An annuity is a voluntary, pre-tax payroll reduction plan that allows you to designate an amount of money each paycheck to be set aside for future retirement use. Dollars may be contributed on a pre-tax basis thus deferring contributions from federal income tax. You may stop or start your deferrals at any time without penalty. Any earnings accumulate without federal income tax until withdrawn. You can contribute any amount up to the maximum contribution allowed by the IRS. Each person's limit is based on age, but generally cannot exceed \$15,500 for 2007.	As selected	Support, Administrative, Faculty, Adjunct Faculty, OPS	Contact an agent from one of the sponsored annuity/mutual fund companies. Complete: Provider application and Salary Reduction Agreement Form May enroll at any time	Human Resources 904-620-2903 See the list of representatives and telephone numbers / web sites inside benefits package.
DEFERRED COMPENSATION PLAN – 457(b) (Pre-Tax)					
<i>AIG VALIC ING T. Rowe Price Nationwide Great West Safeco</i>	The 457(b) deferred compensation plan is a retirement savings plan that allows you to supplement any existing retirement and pension benefit by saving and investing pre-tax dollars through voluntary salary deferral. Contributions and any earnings on contributions grow tax-deferred until money is withdrawn. Each person's limit is based on age, but generally cannot exceed \$15,500 for 2007.	As selected	Support, Administrative, and Faculty, Adjunct Faculty, OPS	Contact Deferred Compensation Office at 1-877-299-8002 or 850-413-3162 or visit www.florida457.com to enroll. May enroll at any time	Human resources 904-620-2903

PROVIDER / PLAN	DESCRIPTION	PREMIUM	ELIGIBILITY	ENROLLMENT	CONTACT
RETIREMENT PLANS: Florida Retirement System (FRS) - USPS, Faculty, A&P Employees					
Pension Plan Investment Plan	<p>The FRS is a non-contributory retirement plan for the employee. The University contributes 9.85% each pay. Two plans are available:</p> <p><u>Pension Plan:</u> Monthly benefit is based on a formula using years of service, value per year, and final average compensation. Investment choices are made on your behalf. It provides a monthly payment for life. Normal retirement is age 62 with 6 years of service or 30 years of service. Enrollees are eligible for the Deferred Retirement Option Plan (DROP).</p> <p><u>Investment Plan:</u> Benefits are based upon your investment choices. Final account balance consists of investment gains/losses on employer contributions. You are vested after 1 year of service and you may choose to receive your account balance through a variety of options. You are not eligible for DROP.</p>	N/A	Support, Administrative, Faculty	<p>USPS members must select between Pension Plan and Investment Plan</p> <p>Must complete enrollment form within six months of hire date</p>	<p>Human Resources 904-620-2903</p> <p>Division of Retirement https://www.myflorida.com/frs</p>
RETIREMENT PLANS: Optional Retirement Program (ORP) – Faculty, A&P Employees					
ING MetLife Investors TIAA-CREF VALIC	<p>The ORP is a defined contribution pension plan. It provides full and immediate vesting of all contributions.</p> <p>The University contributes a percentage of your earnings each pay period (10.42%). You may also contribute up to 10.42 % of your salary in a variety of investment options.</p> <p>There is no age or length of service requirement to begin receiving annuity payments. Lifetime monthly annuity income at retirement is based on amount of funds contributed, investment earnings or losses of funds, and the type of annuity selected.</p>	As selected	Administrative and Faculty	<p>Complete:</p> <p>Optional Retirement Program Enrollment form and Salary Reduction Agreement Form</p> <p>Enrollment must occur within first 90 days of employment, <u>or you are automatically enrolled in FRS.</u></p>	<p>Human Resources 904-620-2903</p> <p>Division of Retirement https://www.myflorida.com/frs</p> <p>See list of providers and telephone numbers / web sites in benefits package</p>
LEGAL INSURANCE (Post-Tax)					
Signature LegalCare U.S. Legal Services Inc.	<p>Services include adoptions, will and trusts, real estate, administrative hearings, attorney office work, matrimonial matters, etc.</p> <p>Same services as above.</p>	<p>Bi-weekly:</p> <p><u>Individual</u> \$6.13 <u>Family</u> \$7.93</p> <p><u>Individual or Family</u> \$9.93</p>	<p>Support, Administrative, and Faculty</p> <p>9 month faculty rates: <u>Individual</u> \$8.17 <u>Family</u> \$10.57</p> <p>9 month faculty rates: <u>Individual or Family</u> \$10.75</p>	<p>Complete:</p> <p>Signature LegalCare application</p> <p>U.S. Legal Enroll Form</p> <p>May enroll at any time</p>	<p>Human Resources 904-620-2903</p> <p>Signature Legal 1-800-848-2012 https://www.legalcareplan.com</p> <p>U.S. Legal Svcs. 904-737-3366 www.uslegalservices.net</p>

PROVIDER / PLAN	DESCRIPTION	PREMIUM	ELIGIBILITY	ENROLLMENT	CONTACT
U.S. SAVINGS BONDS – POST TAX					
	Savings Bonds may be purchased through payroll deduction. They are purchased for 50% of the face value of the bond. They offer competitive, market-based rates, and freedom from state and local income taxes.	Variable, depending on the amount of the bond	Support, Administrative, Faculty	Complete: U.S. Savings Bond Payroll Authorization Form May enroll at any time	Human Resources 904-620-2903 National Bond & Trust Company 800-426-9314
DIRECT DEPOSIT					
	The use of direct deposit is a condition of employment. May take 2 – 4 pay cycles to become effective. Employees may request an exemption based on a hardship.	N/A	All employees	Complete: State of Florida Direct Deposit Authorization Form	Human Resources 904-620-2903
EMPLOYEE ASSISTANCE PROGRAM (EAP)					
Corporate Care Works	Provides employees and their families with free, short-term counseling for personal or work related issues. Total confidentiality and anonymity is provided to those who call the EAP for consultation. A licensed counselor is available 24 hours a day.	N/A	Support, Administrative, Faculty	N/A	CCW 904-296-9436 1-800-327-9757 www.corporatecareworks.com
TUITION BENEFIT					
	Full time employees in a budgeted position for at least six months may enroll in up to six credits per semester. Part time employees (.50 FTE) in a budgeted position for at least six months may enroll in up to three credit hours per semester. Also, full time employees in a budgeted position for at least six months are eligible to have their spouse or dependent children enroll in up to three credit hours per semester per family. This program is not available to part-time, OPS or temporary personnel.	N/A	Support, Administrative, Faculty. Must be employed for at least six months.	Enrollment forms are available in the Office of Records and Registration	Human Resources 904-620-2903 http://www.unf.edu/registrar/
FACULTY & STAFF TRAINING AND DEVELOPMENT PROGRAMS					
	Various seminars are offered throughout the year. Computer training is offered through Computing Services for Fall and Spring terms.	N/A	Employee only	As applicable See UNF website: www.unf.edu	Computing Services 904-620-2820
DISCOUNT CARDS FOR FLORIDA ATTRACTIONS					
	Discount cards for various theme parks and hotels are available in the Office of Human Resources.	N/A	Employees and their eligible dependents	N/A	Human Resources 904-620-2903
FLORIDA PRE PAID COLLEGE PROGRAM					
Florida Prepaid College Plan Florida College Investment Plan	Save through payroll deduction for your child's education by locking in today's prices. There are two tax-free college plans available: Florida Prepaid College Plan and Florida College Investment Plan. Three different tuition plans, a dormitory plan, and a plan covering local fees are offered.	Varies	Support, Administrative, Faculty	Open enrollment every October through January	1-800-552-GRAD www.floridaprepaidcollege.com

PROVIDER / PLAN	DESCRIPTION	PREMIUM	ELIGIBILITY	ENROLLMENT	CONTACT
FACILITIES / SERVICES					
Dottie Dorion Fitness Center	Free fitness orientations and physical assessments. Knowledgeable fitness trainers who can develop workouts and assist members in their workout routines. State-of-the art fitness equipment.	No charge for full-time budgeted employees. Part time employees, OPS employees, and dependents of full time staff/faculty may purchase memberships.	Full time, part time, Adjunct Faculty, and OPS employees.	Apply at Center; requires UNF ID card	Dottie Dorion Fitness Center 904-620-2853
Aquatic Center	Indoor Olympic style heated pool. Offerings include aqua aerobics, swim lessons, diving classes, water safety, SCUBA certification, parent / infant classes. Available seven days per week. Hours vary for special events, holidays, and during semester break.	No charge; however, nominal fee is charged in order to include family members.	All employees; may also purchase family memberships Adjunct Faculty also eligible. OPS may join for alumni rates	Apply at Center; requires UNF ID card Memberships may be purchased for periods of either four months or one year	Aquatic Center 904-620-2854
Thomas G. Carpenter Library	Library houses more than 600,000 books, journals, newspapers, government documents, micro-format materials, and audiovisual resources. Services include reference and information services, interlibrary loans and copying facilities.	Free to faculty and staff	All employees	Requires UNF ID card	Carpenter Library 904-620-2616 www.unf.edu/library
Parking Services	Any motor vehicle parked on University property during designated hours must display a valid University parking decal or permit. Decals/permits may be purchased at the Cashier's Office.	Rates vary per lot location	All employees	Annual permits must be purchased in August; semester permits may be purchased all other times Daily parking permit also available	Parking Services 904-620-2815
Community First Credit Union	Services include checking and savings accounts, home banking access, overdraft protection, certificates of deposit, money market deposit account, IRAs, loan services, credit cards, mortgages. Various locations serving Jacksonville, Orange Park, Beaches, St. Augustine	N/A	All employees	Contact any branch	CFCU 904-354-8537 www.communityfirstfl.org

Updated 03/05/07