

EMPLOYEE BENEFITS GUIDE | 2024

January 1 - December 31, 2024



MOREHOUSE
COLLEGE

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INTRODUCTION

Morehouse College's most important asset is our people. That's why we offer you an exceptional benefits program with many options designed to meet your needs and the needs of your family. In this booklet, you will find summaries of Morehouse

College's medical, dental, vision, life, disability, flexible spending accounts, telemedicine, commuter benefits, life assistance program, and worksite benefits.

OPEN ENROLLMENT

Open enrollment begins on **November 6TH** and **runs through November 27th**. This is a **passive** enrollment. Since this is a passive enrollment, your benefits will automatically roll over, except for FSA.

Your benefits will be active starting January 1, 2024.

[CLICK HERE TO ENROLL](#)

MID-YEAR CHANGES

Once open enrollment ends, you can only change your benefits elections during your plan year if you experience a qualified “life event.” Examples may include getting married or divorced, having a baby or adopting, or gaining or losing coverage. ***You must notify human resources within 30 days of the mid-year event to be eligible to change your elections.***

ELIGIBILITY

All full-time employees are offered benefits. Spouses and dependent children of the employee are also eligible to participate in our benefit plans. Dependent children include your natural children, legally adopted children, step-children, and children for whom you have been appointed guardian up to the age of 26.

NEW HIRE

New hires have 30 days from their date of hire to enroll in benefits. Benefits are effective the first of the month following your date of hire.



KNOW WHERE TO GO

Virtual Visits	Convenience Care	Doctor's Office	Urgent Care	Emergency Room
Access telehealth services to treat minor medical conditions. Connect with a board-certified doctor via video or phone wherever or whenever is convenient to you!	Treats minor medical concerns. Staffed by nurse practitioners and physician assistants. Located in retail stores and pharmacies. Often open nights and weekends.	The best place to go for routine or preventive care, to keep track of medications, or for a referral to see a specialist	For conditions that aren't life-threatening. Staffed by nurses and doctors and usually have extended hours.	For immediate treatment of critical injuries or illness. Open 24/7. If a situation seems life-threatening, call 911 or go to the nearest emergency room.
<ul style="list-style-type: none"> • Colds and flu • Rashes • Sore throats • Headaches • Stomachaches • Fever • Allergies • UTIs and more 	<ul style="list-style-type: none"> • Colds and flu • Rashes or skin conditions • Sore throats, earaches, sinus pain • Minor cuts or burns • Pregnancy testing • Vaccines 	<ul style="list-style-type: none"> • General health issues • Preventive care • Routine checkups • Immunizations and screenings 	<ul style="list-style-type: none"> • Minor burns or injuries • Bumps and cuts • Sprains and strains • Animal bites • Stitches 	<ul style="list-style-type: none"> • Seizures • Heart attack • Severe bleeding or major trauma • Loss of consciousness • Chest pain • Stroke

TERMS TO KNOW



COINSURANCE

How the cost of a health or dental expense is shared between you and the plan after you pay your deductible.

COPAY

A set dollar amount you pay for an office visit or prescription drug. The remaining cost is covered by the plan.

DEDUCTIBLE

The amount of money you must pay for each family member's health or dental expenses each plan year before health or dental benefits are payable. Deductible amounts vary according to the benefit plan. After you have paid your deductible, future expenses are covered by the coinsurance amount. Copayments do not count toward the deductible.

OUT-OF-POCKET MAXIMUM

The most you will have to spend each plan year for each covered family member for the annual deductible and your coinsurance. Once you've met the out-of-pocket maximum on yourself or a covered dependent, the plan pays 100% of most remaining expenses for you or the dependent for the rest of that plan year up to the lifetime maximum.

MEDICAL OAP PLAN | CIGNA

Medical insurance helps you pay for preventive care, routine health needs, prescriptions, and advanced procedures by cost-sharing with your insurance provider.

Will you be covering family members on your medical plan?

If so, each of your family members would also be subject to the individual deductible, but if the family accumulates to the family deductible, no further deductible is required by any family member. Likewise, each of your family members would also be covered 100% if they reach the individual out-of-pocket maximum, but if the family accumulates to the family out-of-pocket maximum, no further family members are subject to expenses.

Medical Cigna	Open Access Plan	
	In-Network	Out-of-Network
Deductible Individual Family	\$350 \$700	\$1,000 \$2,000
Coinsurance (Member pays)	20%	50%
Out-of-Pocket Maximum Individual Family	\$2,500 \$5,000	\$10,000 \$20,000
Preventive Care	100% Covered	Not Covered
Office Visits Primary Care Specialist Virtual Visits	\$25 Copay \$35 Copay \$25 Copay	70% after Deductible 70% after Deductible Not Covered
Hospital Services Inpatient Hospital Outpatient Surgery	\$500 Copay, then 80% after Deductible \$250 Copay, then 80% after Deductible	\$500 Copay, then 50% after Deductible \$250 Copay, then 50% after Deductible
Emergency Room (Waived if admitted)	\$150 Copay	\$150 Copay
Urgent Care	\$25 Copay	\$25 Copay
Prescriptions (Retail)	Retail (30-Day Supply)	Mail Order (90-Day Supply)
Deductible	\$100 Individual / \$200 Family (Waived for Generic)	
Generic Brand Non-Pref Brand Specialty	\$15 Copay \$35 Copay \$60 Copay 20% Coinsurance; \$200 Max/Rx	\$15 Copay \$70 Copay \$180 Copay 20% Coinsurance; \$200 Max/Rx (30-Day Supply)
Medical Rates (Monthly)	Open Access Plan With Wellness	Open Access Plan Without Wellness
Employee Only Employee + Child(ren) Employee + Spouse Employee + Family	\$107.73 \$377.07 \$467.83 \$614.26	\$170.23 \$439.57 \$530.33 \$676.76

*For 2024, a Spousal surcharge of \$100 has been added to the Employee with Spouse and Employee with Family Tiers.

Please note: Copays are reduced by \$10 for all visits to any Morehouse Medical Associates location.

DENTAL | METLIFE

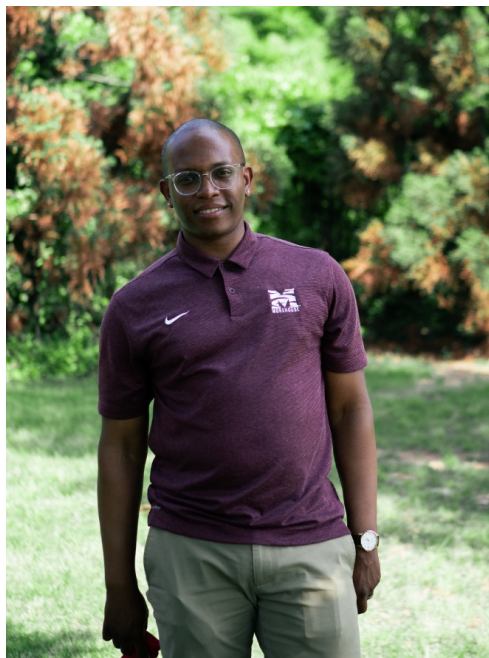
Good dental hygiene has substantial impact on your overall health. Prevent both oral conditions and other diseases through regular preventive dental care. **Refer to plan summary for out-of-network benefits details.**

Dental MetLife	Plan A In-Network	Plan B In-Network
Calendar Year Deductible		
Individual	\$50	\$50
Family	\$150	\$150
Preventive Services	100%	100%
Basic Services	80%	90%
Major Services	50%	60%
Orthodontia	50%	50%
Orthodontic Lifetime Maximum (Adult & Child)	\$1,500	\$2,000
Annual Plan Maximum	\$1,500	\$2,000
Dental Rates (Monthly)	Plan A	Plan B
Employee	\$27.00	\$37.00
Employee + Child(ren)	\$38.00	\$75.00
Employee + Spouse	\$54.00	\$85.00
Family	\$81.00	\$122.00



VISION | METLIFE

Protect your sight and enjoy those sunsets even more with vision insurance. Receive both preventive and materials coverage. **Refer to plan summary for out-of-network benefits details.**



Vision MetLife	PPO In-Network
Exams	\$0
Lenses	
Single	\$0 Copay
Bifocals	\$0 Copay
Trifocals	\$0 Copay
Frames	\$250 Allowance, then 20% off Remaining Balance
Contact Lenses	
Elective	\$250 Allowance
Medically Necessary	\$0 Copay
Frequency of Services	
Exams/Lenses/Frames/Contact Lenses	12/12/12/12 Months
Vision Rates (Monthly)	
Employee	\$2.19
Employee + Child(ren)	\$4.39
Employee + Spouse	\$4.39
Family	\$6.58

FLEXIBLE SPENDING ACCOUNTS (FSAs) | WEX

Save tax dollars and tap into future savings through an FSA. Determine your per paycheck contribution in the beginning of the year, and then spend those funds on qualified health expenses or dependent care expenses as needed before the plan year ends.

2024 FSA Maximum Contributions

Health Care FSA: \$3,200*



Who can participate?

Employees not enrolled in a medical plan or employees enrolled in the company Open Access medical plan.

What happens at the end Of the year?

You can roll over up to \$640* to the following year. You can use the funds for any qualified healthcare expense.

Dependent Care FSA: \$5,000



Who can participate?

Any employee

Contribution Limits: If you decide to participate in the Dependent Care FSA, you can contribute up to \$5,000 per year. However, if you are married and file separate tax returns, you may contribute up to \$2,500 a year.

What happens at the end of the year?

Any leftover funds will be lost.

You can use the funds for any qualified dependent care expenses.

*2024 IRS predicted maximum.

To access your FSA accounts, please visit the Wex website at www.wexinc.com.

2½ Month Grace Period

Morehouse has elected to offer an extension for the Health Care FSA. What this means to you as a participant under the Health Care FSA plan is as follows:

- Although the plan year runs from **January 1, 2024 – December 31, 2024**, you can still incur expenses after December 31, 2024, and get reimbursed.
- The plan will allow a “grace period” through March 15, 2025, allowing you to incur expenses 2 and 1/2 months after the plan year ends on December 31, 2024. If you have not had the opportunity to incur expenses during the plan year, this provision allows you additional time to incur expenses to be submitted.
- You will still have until March 31, 2025, to submit claims for services that qualify under the plan year.
- Eligible expenses will be those received from January 1, 2024 – March 15, 2025. Remember, any amounts remaining in the account are forfeited if you do not submit qualified claims to Wex by March 31, 2025, for the 2024 plan year.

COMMUTER BENEFITS | WEX

A commuter benefit plan is a great way to reduce your commuting expenses by allowing you to set aside pre-tax dollars for qualified expenses you incur while commuting to work.

The 2024 pre-tax maximum contribution set by IRS guidelines for the commuter benefit is \$315.

You may utilize this benefit to pay for transportation to and from work tax-free. Typical eligible expenses include train, bus, subway, and ferry transportation. Up to \$315 per month can be contributed on a pre-tax basis.



GROUP LIFE | METLIFE

Group Life insurance provides financial support in the untimely passing of a covered participant.

100% Employer-paid.



Benefit Amount: 1x your earnings up to a maximum of \$100,000

Guarantee Issue: \$100,000

Spouse: \$10,000

Child – Age 15 Days to 26: \$5,000

Child – Under 14 Days: \$500

VOLUNTARY LIFE AD&D | METLIFE

- Employees can elect Voluntary Life and AD&D for themselves, their spouse, and their children.
- The cost is based on the amount you purchase and your age at the time of purchase.
- If your spouse is also a benefits-eligible employee at Morehouse, then spousal coverage cannot be purchased on them.
- Please be advised that should you reach age 65, your coverage will reduce by 35%. Should you reach age 70, your coverage will reduce by 50%.



Employee: \$10,000 Increments; up to \$500,000 or 5x annual earnings

Guaranteed Issue: Up to \$250,000

Spouse: \$5,000 Increments; up to \$100,000 maximum, not to exceed 100% of employee election

Guaranteed Issue: \$50,000

Child(ren) (15 Days to Age 26): \$1,000 Increments; up to \$10,000 maximum

Child(ren) (14 Days & Under): \$500



VOLUNTARY DISABILITY | METLIFE

Accidents and illnesses happen and often when we least expect them. Ensure you are financially prepared to stay afloat in the midst of a medical condition with disability insurance.

Voluntary Short-Term Disability (STD)

Benefit Percentage:	60%
Benefit Weekly Amount:	\$1,500
Duration:	11 Weeks
Elimination Period:	14 Days for Accident / Illness

Voluntary Long-Term Disability (LTD)

Benefit Percentage:	60%
Benefit Weekly Amount:	\$6,000
Duration:	SSNRA
Elimination Period:	90 Days

WORKSITE BENEFITS | AFLAC

Accident*

The group accident policy provides a cash benefit for out-of-pocket expenses associated with an accidental injury and can help protect hard-earned savings should an on or off-the-job accident occur.

	Monthly Cost
Employee Only	\$13.85
Employee + Spouse	\$22.83
Employee + Child(ren)	\$30.79
Family	\$39.77

Critical Illness*

This specified disease coverage offers the protection you need to concentrate on what is most important: your treatment, care, and recovery. Please note rates for Critical Illness are age-banded and will be displayed correctly in PlanSource.

Employee: \$10,000 or \$20,000
Spouse: 100% of the employee's initial benefit
Child(ren): 100% of the employee's initial benefit

Hospital Indemnity

Hospital indemnity complements your present major medical coverage by providing cash benefits that can be used to help pay out-of-pocket expenses associated with a hospital confinement.

	Monthly Cost
Employee Only	\$21.96
Employee + Spouse	\$40.20
Employee + Child(ren)	\$32.46
Family	\$50.70

***If your spouse is also a benefits-eligible employee at Morehouse, then spousal coverage cannot be purchased on them.**

TELEMEDICINE | CIGNA

Your life is an adventure, and telemedicine affords you the convenience of receiving medical care while on the go. Instead of spending your day and dollars at an urgent care facility, connect with a board-certified doctor over the phone or video chat to receive immediate and cost-effective care wherever life's journey may take you.



LIFE ASSISTANCE PROGRAM (LAP) | COMPSYCH

Morehouse provides all of its employees with a Life Assistance Program (LAP) that will assist you with personal problems and/or work-related problems that may impact your job performance, health, and mental and emotional well-being. This is a private and confidential program, and ComPsych will not share information or data with Morehouse College about those who utilize the program.

You are entitled to three face-to-face visits per year per incident to help resolve issues relating to:

- Legal questions or concerns
- Marital or family conflicts
- Financial problems
- Alcohol or drug issues
- Stress, depression, and other emotional problems





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CONTACTS

Contact your Client Advocate to help you get the most from your group insurance plans. Dyra Boseman is ready to answer any of your benefits-related questions with complete confidentiality.



Dyra Boseman
Client Advocate
OneDigital

Phone: 1.404.846.4087
dboseman@onedigital.com



Medical & Telemedicine | Cigna

1.888.842.4462

www.mycigna.com

Dental, Vision, Life, & Disability | MetLife

1.800.942.0854

www.metlife.com

Worksite Benefits | Aflac

1.800.992.3522

www.aflac.com

FSAs & Commuter Benefits | Wex

1.866.451.3399

www.wexinc.com

LAP | ComPsych

1.800.538.3543

www.cignabehavioral.com/cgi