

JULY 1, 2024 – JUNE 30, 2025 SALARIED





WELCOME

Lewis & Clark Community College (LCCC) would not be the success it is today without the dedication of our hardworking team members. We are proud to offer a comprehensive benefits package to support your physical, mental, and financial wellness.

This guide highlights the options available to you as a benefits-eligible team member.

Please take time to review this guide so you can make informed decisions and get the most from your benefits.



TIPS FOR USING THIS GUIDE

- View this guide on your computer, tablet, or smartphone. It's designed to let you easily navigate through your benefits!
- Use the icons at the top-left to jump to these sections:

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- Benefit Contacts
- 🚷 Provider Search Instructions
- \land Glossary
- ☑ When you see the **CURSOR ICON** [™] click or tap for more information.
- ☑ Open the **SEARCH BAR** to type in a key word you want to find:
 - On your computer: Type Ctrl + F.
 - On your smartphone: In the bottom menu, tap the three dots for more options, tap "Find in page." Then, tap on the top search bar to type in your search term.

TIPS FOR SAVING THIS GUIDE

- **On your computer:** Save the link as a bookmark on your browser.
- ✓ Add on your smartphone home screen:

On Android, tap the options menu.

On iPhone, tap the share icon. 🖒

- Select Add to Home Screen (you might need to scroll to find it).
- Give the guide a name you'll remember, then click Add.
- The icon will appear as a Red "A" on your home screen.



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COVERING YOU & YOUR FAMILY



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TEAM MEMBERS

Lewis & Clark Community College is proud to offer a comprehensive benefits package to eligible, full-time team members.

DEPENDENTS

Many of the plans allow you to cover your eligible dependents, which include:

- Legally married spouse
- Domestic partner
- Dependent children including:
 - Children up to age 26 regardless of student or marital status
 - Disabled children of any age who are (or become) physically or mentally incapable of self-support



WHEN CAN YOU ENROLL IN BENEFITS?

NEW HIRE

Enroll within your new-hire enrollment window.

Enroll with Human Resources

Closely review your options as a new hire

- All benefits begin on hire date except vision, it begins the first day of the month following hire date.
- Some benefits include special enrollment opportunities that are only available when you first enroll, so don't miss out!

OPEN ENROLLMENT

Enroll during the annual benefits open enrollment period.

Enroll on selfservice.lc.edu

Your annual opportunity to review & change your benefits

- 2025 Open Enrollment Dates will be announced Spring 2025
- The benefits you select become effective on **July 1**



QUALIFYING LIFE EVENT

Enroll within 30 days of a qualifying life event.

Contact Human Resources

"Qualifying life events" allow you to make a mid-year benefit change

Examples include:

- Marriage or divorce
- Birth or adoption of child
- You and/or your dependents become eligible or lose coverage with another group health plan
- Spouse's open enrollment
- Change in work status (parttime to full-time)



HEALTH BENEFITS

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MEDICAL BENEFITS



	PPO PLAN A	PPO PLAN B	HSA PLAN			
PLAN OPTIONS	IN-NETWORK*	IN-NETWORK*	IN-NETWORK*			
NETWORK	Open Access Plus	Open Access Plus	Open Access Plus			
PLAN BASICS						
Deductible Individual Family	\$1,000 \$2,000	\$3,500 \$7,000	\$3,500 \$7,000			
Coinsurance Member Pays Plan Pays	20% 80%	20% 80%	0% 100%			
Out-of-Pocket Maximum Individual Family	\$3,500 \$10,500	\$5,000 \$10,000	\$3,500 \$7,000			
WHAT YOU PAY TO SEE A DOCTOR						
Preventive Care 🗽	No charge	No charge	No charge			
Office Visits Primary Care Specialist	\$20 copay \$40 copay	\$20 copay \$40 copay				
Virtual Visits (MDLIVE) 🌂	\$20 copay	\$20 copay	0% after deductible			
Emergency Care Urgent Care ER	20% after deductible \$150 copay	20% after deductible \$150 copay				
WHAT YOU PAY FOR HOSPITAL SERVIC	ES					
Inpatient Surgery	20% after deductible	20% after deductible	0% after deductible			
Childbirth	20% after deductible	20% after deductible	0% alter deductible			
WHAT YOU PAY FOR TESTS & LAB WORK						
Minor Labs & Bloodwork	No charge	No charge	0% after deductible			
I maging (ex: MRI, CT, PET scan)	20% after deductible	20% after deductible	0% alter deductible			

*Out-of-network coverage is available on this plan. Please refer to the benefit summary for more information.



MEDICAL BENEFITS



DI AN ODTIONS	PPO PLAN A	PPO PLAN B	HSA PLAN
PLAN OPTIONS	IN-NETWORK*	IN-NETWORK*	IN-NETWORK*
NETWORK	Open Access Plus	Open Access Plus	Open Access Plus
WHAT YOU PAY FOR PRESCRIPTION D	RUGS		
Retail Pharmacy (up to 30-day supply) Tier 1 2 3 4	\$10 \$50 \$100 \$150	\$10 \$50 \$100 \$150	
Mail Order (up to 90 day supply)	\$25 \$125 \$250	\$25 \$125 \$250	0% after deductible
Mail-Order (up to 90-day supply) Tier 1 2 3 4	Tier 4 limited to a 30-day supply	Tier 4 limited to a 30-day supply	
HEALTH SAVINGS ACCOUNT (HSA) FEA	ATURES		
Eligible for an HSA?	No	No	Yes! Plus, get contributions from Lewis & Clark Community College!
			Learn more on page 9. 🏷
YOUR MONTHLY COST			
Team Member	\$157.70	\$69.66	\$17.42
Team Member + Spouse	\$1,025.62	\$840.24	\$731.54
Team Member + Child(ren)	\$854.02	\$648.94	\$507.70
Team Member + Family	\$1,467.08	\$1,201.88	\$1,045.30

*Out-of-network coverage is available on this plan. Please refer to the benefit summary for more information.



HEALTH SAVINGS ACCOUNT



By enrolling in the HSA medical plan, you get access to a Health Savings Account (HSA), which can be used to pay for qualified healthcare expenses.

ELIGIBILITY

Anyone who fits all the following conditions may contribute to an HSA:

✓ IS enrolled in an HDHP medical plan.

x IS NOT enrolled in Medicare, Tri-Care, Medicaid, or a medical plan with copays (including the spouse PPO plan).¹

x IS NOT eligible to be claimed as a dependent on someone else's tax return.

HSA CONTRIBUTIONS

You can contribute up to the IRS annual maximum, which is based on your age and enrollment in the HSA medical plan. (*This limit includes Lewis & Clark Community College's contribution.*)

IRS Contribution Limits	UNDER AGE 55	AGE 55+
2024 (Individual Family)	\$4,150 \$8,300	\$5,150 \$9,300
2025 (Individual Family)	\$4,300 \$8,550	\$5,300 \$9,550

Lewis & Clark Community College contributes money to help you build savings!

	PER PLAN YEAR
2024-2025 College Contributions	Up to \$500

¹*Medicare & your HSA:* Because enrollment in Part A is backdated by six months, you should stop your HSA contributions six months prior to enrollment to avoid penalties. Consult with your tax advisor for guidance.

Back to your medical plan options. 🐐

THREE REASONS TO LOVE YOUR HSA

1. GET FREE MONEY!

The money Lewis & Clark Community College contributes is yours to keep.

2. TRIPLE TAX SAVINGS*

- Tax deductions when you contribute to your account
- Tax-free withdrawals to pay for qualified medical expenses
- Tax-free earnings

3. IT'S FLEXIBLE

You can use the money in your HSA for eligible health expenses, or you can save it and let it grow. Your HSA savings roll over year after year, and you can even use your HSA as retirement income at age 65 without penalty (normal income tax still applies).

*Please note that state taxes still apply in some states.

Visit HSAStore.com/learning-center.html and watch the videos below to learn more!

\triangleright	HSA Basics
\triangleright	Tax Advantages
\triangleright	Eligible Expenses

THE IMPORTANCE OF PREVENTIVE CARE



GET THE MOST OUT OF YOUR MEDICAL PLAN

Your medical plan covers in-network preventive care services at no cost to you! Preventive care can help keep you healthy and identify minor issues early, when they're easier—and less costly—to treat.

WHAT IS PREVENTIVE CARE?

Preventive care includes a range of services to help keep you healthy. While regular (diagnostic) medical care focuses on treating illness, preventive care aims to keep you from getting sick in the first place.

WHAT IS NOT PREVENTIVE CARE?

If you see a doctor because you have symptoms or have been diagnosed with an illness, the services you receive are not preventive.

Your medical plan still provides coverage for these services, but they are not covered at 100%.

Note: Your medical plan may charge a fee if you receive services from an out-of-network provider or if the preventive service is not the primary purpose of your office visit.

SEE WHAT PREVENTIVE TESTS AND SCREENINGS ARE RECOMMENDED FOR YOUR AGE

Go to health.gov/myhealthfinder. 🎋

Call the insurance company to confirm which preventive services are covered under your medical plan.



VIRTUAL VISITS

MDLIVE

AN AFFORDABLE OPTION FOR QUALITY MEDICAL CARE

Visit with a doctor any day, any time, from your smartphone, computer or tablet. Telehealth is an easy and convenient option when you need care for yourself or your child in the middle of the night or while traveling.

WHAT DOES IT COVER?

- General health visit
- Behavorial Health
- Dermatology

*Fees subject to change.

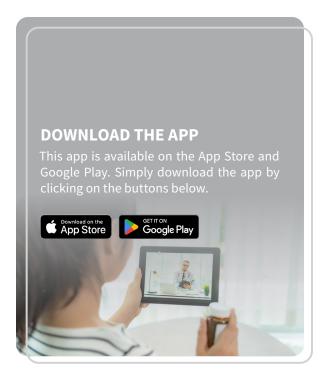
USE TELEHEALTH FOR:

Cold & Flu symptoms | Allergies | Pink eye | Respiratory Infection | Sinus + skin problems | Mental health counseling | And more!

GET STARTED!

Visit | *MDliveForCigna.com*

Call | 888-726-3171





HEALTHCARE ON THE GO

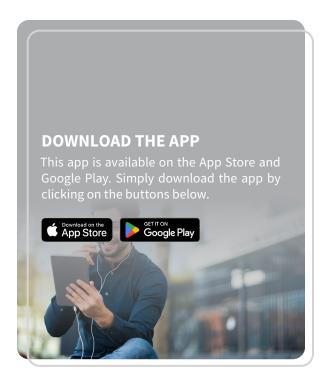
Life can take you many places. With the myCigna mobile app, you have easy access to your health care anytime and anywhere you need it.

MYCIGNA APP HIGHLIGHTS

- View, fax or email ID card information
- Access virtual care directly from your phone or tablet
- Manage and track claims
- Find in-network doctors and compare cost
- Review your coverage
- Track your account balances and deductibles

* * * * * * * * * * * * * * *

- Order your prescriptions from Express Scripts[®] Pharmacy, a Cigna Healthcare company, and get home delivery, the ability to view your order history online and more
- Compare prescription drug prices for retail and home delivery pharmacies





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TIPS TO SAVE MONEY

☑ SAVE THE EMERGENCY ROOM FOR TRUE EMERGENCIES

Only visit the emergency room if you have a life- or limb-threatening emergency. If you need care when your doctor's office is closed, check your area for an urgent care location or use virtual care instead.

USE IN-NETWORK PROVIDERS

Your medical, dental and vision costs increase greatly when you visit a provider who is not in your plan's network. Always confirm your provider is in your network, especially when being referred to another provider or facility for services.

GET YOUR ANNUAL CHECKUP

You and your dependents should visit the doctor annually for health screenings and tests. Your plan covers preventive services at 100%.

CHOOSE GENERIC PRESCRIPTIONS

Ask your doctor or pharmacist to give you generic prescriptions instead of brand-name. Generic drugs are cheaper and are just as effective.

M SHOP AROUND TO FIND THE BEST PRESCRIPTION PRICES

It can pay to shop around. Drug comparison tools like *GoodRx.com* and *SingleCare.com* can help you find the lowest cost for medication near you.

Note: GoodRx and SingleCare also offer discount cards and coupons, which can provide additional savings. However, you will not receive credit toward your plan deductible or out-of-pocket maximum if you use them. Talk with your doctor and pharmacist to determine the best option for you.

☑ TAKE ADVANTAGE OF THE MAIL-ORDER PHARMACY PROGRAM

Save time and money by using the mail-order prescription drug program for your maintenance prescriptions. Check with your insurance company for more details.



DENTAL BENEFITS



	DENTAL PPO PLAN				
PLAN OPTION	IN-NETWORK	OUT-OF-NETWORK*			
NETWORK	Total Cig	na DPPO			
PLAN BASICS					
Calendar-Year Deductible Individual Family	\$0 \$0	\$50 \$150			
Maximum Benefit for Preventive, Basic & Major Services	\$1,500 per pe	erson per year			
Maximum Orthodontia Benefit	\$1,000 per child per lifetime				
Out-of-Network Reimbursement	N/A	90th UCR*			
WHAT YOU PAY FOR SERVICES					
Preventive Services (cleanings, exams, x-rays)	No charge	No charge* (deductible waived)			
Basic Services (fillings, extractions, root canal treatment)	No charge	15% after deductible*			
Major Services (crowns, bridgework, implants)	You pay 40%	50% after deductible*			
Orthodontia (for children up to age 26)	You pay 50%	You pay 50%*			
YOUR MONTHLY COST					
Team Member	\$0	.00			
Team Member + Spouse	\$41.38				
Team Member + Child(ren)	\$48.40				
Team Member + Family	\$78	3.26			

*Be aware of balance billing if you use an out-of-network dentist. If your dentist is out-of-network and they charge more than what the plan allows, you are responsible for the extra charges. Save money by staying in-network! See Benefit Glossary on page 29 for more details.



Tip: Click here to find an in-network provider

VISION BENEFITS

VISION

	VSP VISION PLAN				
PLAN OPTIONS	IN-NETWORK*				
NETWORK	VSP Choice				
PLAN BASICS					
Eye Exam (once every 12 months)	\$20 copay				
Eyeglass Lenses Single Bifocal Trifocal (once every 12 months)	\$20 copay				
Frames (once every 12 months)	\$130 allowance, or \$150 allowance for featured frame brands + 20% discount on remaining amount				
Contact Lenses —instead of glasses (once every 12 months)	Up to \$60 copay + \$130 allowance				
YOUR MONTHLY COST					
Team Member	\$7.17				
Team Member + 1	\$10.39				
Team Member + Family	\$18.64				

*Out-of-network coverage available on this plan. Refer to the benefit summary for more information.

DISCOUNTS & SAVINGS

You are eligible for extra discounts and savings when you visit in-network providers! Learn more at *VSP.com*.

ADDITIONAL MATERIALS

- Get an extra \$20 on featured frame brands (bebe, Calvin Klein, Cole Haan, Dragon, and more)
- Up to 40% savings on lens enhancements
- Shop in-network through VSP's online retailer Eyeconic

LASER VISION CORRECTION

 Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities





FINANCIAL BENEFITS



LIFE INSURANCE



To help provide financial security for your family in the event of death or dismemberment, we provide basic term life and accidental death & dismemberment (AD&D) coverage at no cost to you.

Life Coverage Amount	\$25,000	
AD&D Coverage Amount*	\$25,000	

*The AD&D benefit is paid in addition to the life benefit if your death is due to an accident. A partial AD&D benefit may be paid in some instances such as loss of sight or paralysis. See plan summary for details.



KEEP YOUR BENEFICIARY INFORMATION UP TO DATE!

RELIANCE

Life and AD&D benefits are paid to the beneficiary on file, so make sure you keep your beneficiary information up to date!

You can change your beneficiary information at any time on your benefit enrollment platform.







LIFE INSURANCE

OPTIONAL LIFE AND AD&D (EMPLOYEE-PAID)

Optional life and AD&D insurance provides an extra layer of financial security for your family.

You can give your loved ones greater peace of mind in the face of unforeseen circumstances by purchasing voluntary coverage at competitive group rates.

LIFE AND AD&D COVERAGE OPTIONS

Team Member Benefit	\$10,000 increments up to \$750,000 <i>(not to exceed 7x annual salary)</i> Guarantee Issue: \$150,000*
Spouse Benefit	\$10,000 increments up to \$750,000 (not to exceed 100% of team member's election) Guarantee Issue: \$100,000
Child Benefit (ages 14 - 20, or 26 if unmarried, full-time student)	\$2,500 increments up to \$10,000 Guarantee Issue: \$10,000

Note: Your cost for voluntary life and AD&D varies by age and coverage amount (Spousal rates are based on the age of the employee). You can see your cost when you enroll online. Subject to carrier renewal.



THINGS TO KNOW

A **"guarantee issue" amount** is the dollar amount of coverage you can be approved for without completing a health questionnaire—also commonly referred to as Evidence of Insurability (EOI). Guarantee issue amounts typically only apply during your initial enrollment period when hired.



NEW TEAM MEMBERS:

Don't miss out on your guaranteed issue opportunity!

If you wish to enroll or increase your coverage after your initial enrollment period, you will need to answer a medical questionnaire and may be declined for health reasons.



DISABILITY INSURANCE

Disability benefits replace a portion of your income if you're unable to work due to a non-work-related injury or sickness. Lewis & Clark Community College provides long-term disability coverage at no cost to you. You have two different options based on your eligibility.

LONG-TERM DISABILITY (SUN LIFE)

Eligibility	Less than 2 years of service
Benefit amount	50% of your salary up to \$2,500 per month
When are benefits payable?	After 120 days of disability due to an accident or illness
Maximum benefit duration	Up to your Social Security Normal Retirement Age (SSNRA)

LONG-TERM DISABILITY (SURS)

Eligibility	At least 2 years of service & off work more than 60 days	
Benefit amount	50% of the basic compensation at the occurence date*	
When are benefits payable?	After 60 days of disability due to an accident or illness	
Maximum benefit duration	Up to your Social Security Normal Retirement Age (SSNRA)	



THE IMPORTANCE OF DISABILITY INSURANCE

Chances of missing work due to illness, injury, or pregnancy are greater than most realize.



people will experience a disabling condition in their working years.*

If you couldn't work and earn an income, how would you pay your bills? Disability insurance can help!

Source: Council for Disability Awareness. Working years defined as age 20 through retirement age.

Pre-existing condition exclusions: These policies will not cover conditions that were existing prior to your coverage date. Please review your plan summary for full details.

**Subject to the Maximum Pensionable Earning limit for Tier II Members.



RETIREMENT SAVINGS

MANDATORY RETIREMENT PLAN

Team members contribute 8.85% of their monthly pay to the State Universities Retirement System (SURS). L&C full-time team members do not contribute to Social Security, only the Medicare portion.

Team members must choose from the Traditional, Portable or Retirement Savings Plan (RSP) through the State Universities Retirement System (SURS) within the first 6 months of employment. If a choice is not made, the team member will automatically be placed in the SURS Traditional plan. Descriptions of the plans are mailed to the team member's home.

The choice will govern the benefits available to you for life and cannot be changed or revoked.

For more information, visit *surs.org* or call 800-275-7877.

DEFERRED COMPENSATION AUTO ENROLLMENT

(For Team Members certified on or after July 1, 2024)

Team members will be automatically enrolled after 30 days of employment. A rate of 3% will be deducted before taxes from each paycheck, and applied to your SURS Lifetime Income Strategy (LIS). If you don't wish to participate, you must actively OPT OUT.

Team members previously certified with SURS prior to July 1, 2024 can OPT IN by logging into the SURS member site to access "Enroll in the SURS DCP".



403(B) + 457(B) ELECTED RETIREMENT PLANS

(Benefits in addition to SURS retirement annuity.)

Team Members have an additional option for retirement savings: pre-tax and/or Roth IRA annuities and mutual fund platforms are available through Penserv.

Payment towards these additional plans are processed via payroll deduction.





ADDITIONAL BENEFITS





EMPLOYEE ASSISTANCE PROGRAM

Problems are just a part of everyday life. You and your household members have access to an Employee Assistance Program (EAP) to help with the everyday challenges of life that may affect your health, family life and desire to excel at work.

You and the members of your household have unlimited access to consultants by telephone and resources and tools online, and up to **8 counseling sessions** per year, per person, per issue *(virtual or in-person)*.

FOR 24/7 ASSISTANCE:

Call | 800-413-8008 (push 2) Visit | mbh-eap.com/members

AN EAP CAN ADDRESS THE FOLLOWING:



CARING WORKPLACE PROGRAM

Senior Solutions provides team members the Caring Workplace program where an Eldercare Specialist will help you assess your loved one's needs and provide expert counsel in selecting the best eldercare options and support services to address the issues of aging.



CONTACT: Heather Spindler, Eldercare Specialist Call | 314-802-5106 or 888-388-1930 Email | hspindler@standrews1.com Visit | standrewsseniorsolutions.com



PET INSURANCE

FIGQ

YOUR PET DESERVES THE BEST MEDICAL CARE

We offer Pet Insurance through Figo! UnitedHealthcare has teamed up with Figo to provide customized plan options.

HOW TO CUSTOMIZE YOUR PLAN

- 1. Choose a plan with the deductible and reimbursement levels that meet your needs.
- 2. Add optional power-ups like dental and wellness coverage.

CONNECT & EXPLORE

Call 888-246-6918

Email | Support@FigoPetInsurance.com

Enroll | Lewis and Clark Community College Pet Insurance Enrollment

Download

Google Play

COVERED MEDICAL CONDITIONS INCLUDE:

- Emergency and hospitalization
- Hereditary conditions
- Knee conditions
- Cancer treatments
- Prescriptions
- Exam and consultation fees
- Imaging
- Surgery
- And more!





PAID TIME OFF

HOLIDAYS

Following below is a listing of typical paid holidays off each calendar year beginning with the first day of employment:

- New Year's Day
- Martin Luther King Day
- Spring Recess (first Monday of Spring Break)
- Good Friday
- Memorial Day
- Juneteenth
- Independence Day
- Labor Day
- Election Day (when applicable)
- Veterans Day
- Thanksgiving Day
- Friday after Thanksgiving
- Christmas Day

The Board of Trustees may annually establish other paid days off as holidays during the year including, but not limited to the period between Christmas and New Year's Day.

VACATION

Full-time employees accrue vacation time on a bi-monthly payroll basis throughout the year. The accrual of vacation time is based upon completed years of service as of the employment anniversary date.

Completed Years of Service Accrued Vacation Time

- Less than 5 Years | 15 Days/Year (112.5 Hours per Year, or 4.69 Hours/Pay Period)
- **5 Years or more** | 20 Days/Year (150 Hours per Year, or 6.25 Hours/Pay Period)

PERSONAL DAYS

A new team member hired before June 30th of the calendar year will receive two (2) personal days upon hire; a new team member hired July 1^{st} – December 31^{st} will receive one (1) personal day upon hire. Following an eligible team member's first year of hire, two (2) days will be allocated at the beginning of each calendar year, and can accrue up to a maximum of four days.



PAID TIME OFF

FLOATING HOLIDAY

A new team member hired before June 30th of the calendar year will receive one (1) floating holiday (7.50 hours) upon hire; a new team member hired July 1st - December 31st will receive one-half floating holiday (3.75 hours) upon hire. Following an eligible team member's first year of hire, one day (7.50 hours) will be allocated at the beginning of each calendar year.

SUMMER SCHEDULE

The College operates on a reduced work-week during the summer months, consistent with Policy 208. From the first business day in the pay period beginning May 16 through the last business day in July of each year, the following reduced work-week schedules will be in place for all College campus locations.

- Monday Thursday: 8 a.m. to 4:30 p.m. (30-minute lunch break)
- Friday: 8 a.m. to 12 p.m. (no lunch break)

SICK DAYS

Team members begin earning sick days upon employment. A new team member employed prior to the fifteenth of the month will accumulate one (1) day of sick leave for that month and each month of during the first calendar year employed by the College up to a maximum of twelve (12) sick days. A new team member employed on or after the fifteenth of the month will accumulate one (1) day of sick leave for the following month and each month of service during the first calendar year employed by the College. Each calendar year thereafter, a team member will be credited with twelve (12) additional sick days effective January 1st of that year.

SICK LEAVE ASSISTANCE BANK (SLAB)

The purpose of the SLAB is to provide additional sick leave days to team members to alleviate the hardship caused if a catastrophic illness or injury forces the team member to exhaust all accrued sick leave. The SLAB is not intended for single day sick leave circumstances. Participation is voluntary. To participate in the SLAB, a staff team member must (a) be employed on a full-time basis; (b) have contributed two (2) sick days as a first-year premium and (1) day thereafter annually; and have at least 75 hours of sick time available at time of enrolling. See full policy for additional details and requirements.

BEREAVEMENT LEAVE

Team members shall be entitled to maximum leave of absence of three (3) days paid bereavement leave in the event of the death of an immediate family member. ("Immediate family members" are defined in Policy No. 107 of the FT Staff Team Member Personal Policies and Procedures Handbook).





BENEFIT CONTACTS



BENEFIT	PROVIDER	PHONE	WEBSITE / EMAIL
Medical & Pharmacy	Cigna	800-997-1654	MyCigna.com
Virtual Visits	MDLIVE for Cigna	888-726-3171	MDliveForCigna.com
Dental	Cigna	800-997-1654	MyCigna.com
Vision	VSP	800-877-7195	VSP.com
Health Savings Account	HSA Bank	800-357-6246	HSAbank.com
Life and AD&D Insurance	Reliance Standard	800-351-7500	RelianceStandard.com
Disability Insurance	Sun Life	800-786-5433	SunLife.com
	State Universities Retirement System (SURS)	800-275-7877	SURS.org
Retirement Savings Plan	State Universities Retirement System (SURS)	800-275-7877	SURS.org
Employee Assistance Program	Mercy Behavioral Health	800-413-8008	MBH-EAP.com/members
Eldercare Guidance Heather Spindler	St. Andrew's Senior Solutions	314-802-5106 888-388-1930	hspindler@standrews1.com StAndrewsSeniorSolutions.com
Pet Insurance	Figo	888-246-6918	FigoPetInsurance.com
Benefit Questions	The MJ Companies	N/A	ClientAdvocate@themjcos.com
Human Resources		N/A	humanresources@lc.edu
HR Benefits Specialist Kimberly Claussen	Lewis & Clark Community College	618-468-3720	KClausse@lc.edu



SEARCH FOR AN IN-NETWORK PROVIDER ONLINE



MEDICAL

CIGNA

Cigna.com

- 1. Select Find a Doctor
- 2. Select Employer or School
- 3. Enter your Address, City or Zip
- 4. Select Doctor by Type
- 5. Log in, register or continue as a guest
- 6. If you continue as a guest, confirm your location
- 7. Select **Open Access Plus, OA plus, Choice Fund OA Plus** as your plan if you enroll in any of the Cigna medical plans
- 8. View your results

DENTAL

CIGNA

Cigna.com

- 1. Select Find a Doctor
- 2. Select Employer or School
- 3. Enter your Address, City or Zip
- 4. Select Doctor by Type
- 5. Log in, register or continue as a guest
- 6. If you continue as a guest, confirm your location
- 7. Select **Total Cigna DPPO** as your plan

8. View your results

VISION VSP VSP.com

- 1. Select Find a Doctor
- 2. Enter your Zip or Street Address, City and State
- 3. Under Advanced Search+ select **Choice** for your doctor network
- 4. Select Apply Filters
- 5. Select Search



BENEFIT GLOSSARY



BALANCE BILLING

When you are billed for the difference between the provider's actual charge and the amount reimbursed under the medical, dental or vision plan. This occurs when you go outside of the preferred provider network. Balance billing charges will not apply toward your out-of-pocket maximum.

COINSURANCE

The percentage of the cost you pay for covered services after you meet your deductible.

COPAYMENTS (ALSO CALLED COPAYS)

A flat fee you pay for a covered healthcare service. You will typically pay your copay at the time of service, and then the plan will pay any remaining amount.

DEDUCTIBLE

The amount you are required to pay each year before certain benefits are paid for by the plan. Once you meet the deductible amount, expenses are covered by the plan based on the coinsurance percentage. The deductible resets on January 1 each year.

EXPLANATION OF BENEFITS (EOB)

A statement, usually mailed to you, that explains how your claim was processed by the insurance company. The EOB details what portion of the claim was paid by the insurance company and what portion is your responsibility.

NETWORK

The doctors, hospitals, and other healthcare providers your insurance company has contracted with to provide services at discounted rates. You will pay less when you use in-network providers. Some plans will not cover the care you get outside of the network.

OUT-OF-POCKET MAXIMUM (OOPM)

The most you pay in a calendar year for covered services. If you reach the OOPM, the plan pays 100% of covered expenses for the rest of the plan year.

PLAN YEAR

The plan year refers to July 1 through June 30.

USUAL, CUSTOMARY, AND REASONABLE (UCR) CHARGES

Healthcare charges determined by your health insurance provider that are based on the range of fees charged by doctors with comparable training and experience for the same or similar service in your area. When you receive care in-network, UCR charges do not apply. For out-of-network care, you are responsible for any extra charge over the UCR fee.

The information in this enrollment guide is based on information provided by the employer and various benefit documents. While every effort was taken to accurately report your benefits, discrepancies or errors are always possible. In case of discrepancy between this guide and the actual plan documents, the plan documents will prevail. All information is confidential pursuant to the Health Insurance Portability and Accountability Act of 1996.

Guide prepared by The MJ Companies.



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