This is a summary of your benefits. Please refer to your benefit booklets and SPDs for detailed information. Lincoln University reserves the right to modify and/or terminate benefits at any time. Contact the Human Resources Benefits Team for specific details and eligibility requirements.



GENERAL OVERVIEW

Lincoln University understands the importance of benefits to you and your family and the value that comes from having a highquality benefits plan. The University Benefits Plan is competitive and comprehensive, offering you a full array of benefits that allow you to choose coverage that best meets the needs of you and your family.

All full time employees working 30 hours or more per week are eligible for benefits. Your spouse and eligible dependent children (to age 26) may be eligible to enroll in benefits.

This Benefits Brochure is a summary of the benefits provided by the University and does not provide all details regarding the benefits plans. For additional information, please refer to the Summary Plan Descriptions (SPDs) that can be accessed on the University website.

CONTENTS

Overview	2
Paycor	
Medical Insurance	4
Pharmacy Benefit	5
Preventive Care	6
Dental Insurance	7
Voluntary Vision Benefit	
Flexible Spending Account	9
Employee Contributions	10
University Paid Benefits, Voluntary Life, AD&D	11
Auto/Home, Voluntary Accident Insurance	
Voluntary Group Critical Illness	
Health Screening Benefit, Whole Life Insurance	14
Employee Assistance Program	15
Online Education & Information	16
Money Back Reimbursements	17

PAYCOR

PAYCOR is part of a secure web hosted system that you will access via your internet browser. Within the Employee Self Service system, employees are able to access their time cards, request leave, review benefits and see their payroll information.

HOW TO ACCESS HTTPS://SECURE.PAYCOR.COM

To view your benefits, follow these steps.

Step 1: Log in to using your User Name and Personal Identification Number (PIN).

Step 2: Select the Benefits tab. A tab displays for each type of benefit your company offers and shows benefits for the current year. Click each tab to view the different types of benefits and make your enrollment changes.

PAYCOR ENROLLMENT - LOGIN TO PAYCOR AND NAVIGATE TO BENEFITS ENROLLMENT

The Paycor benefits website is your online resource to confirm your benefit coverage, review benefit plan details and obtain benefits claims forms. This functional online tool puts your benefits at your fingertips.

With just a few clicks you can:

- Review benefits plan documents and resources.
- Enroll in your benefits during the designated enrollment period.
- Review current benefits elections for your entire family.
- Update your life insurance beneficiaries

UNUM VOLUNTARY BENEFITS

Now is your chance to sign up for voluntary life, accident and critical illness offered through UNUM.

HOW DO I ENROLL?

Enroll online: 4/9 - 5/11

https://www.plane.biz/Logons/LincolnUniversityoftheCommonwealth-2018Re-enrollmentEvent/default.htm

Your login information is the last 4 digits of your Social Security Number, Your Last Name, and Your Date of Birth.

Enroll by Phone: 4/9 - 5/11

Call Unum at (800) 350-5370

Benefit Counselors are available Monday through Friday from 8AM to 8PM ET.

MEDICAL INSURANCE - INDEPENDENCE BLUE CROSS

Independence Blue Cross is the medical vendor. You may go to any doctor within the Personal Choice or National BlueCard Network. No referrals are required.

Members may wish to utilize the member website at www.ibxpress.com for important member information including explanation of benefits (EOBs), claims and other member activity is also consolidated in the Member Health Statement, a single, user-friendly statement that members can find on the portal.

	EPO Base Plan You Pay	EPO Buy-Up Plan You Pay
Referrals Required	No	No
Preventive Care*	\$0	\$0
Deductible	\$0	\$0
PCP / Specialist	\$20 copay / \$40 copay	\$15 copay / \$30 copay
Rehabilitation Services	\$20 copay	\$30 copay
Labs / Radiology / Scans	\$0 / \$40 / \$40	\$0 / \$30 / \$30
Inpatient Hospital	\$250 per admission	\$200 per admission
Outpatient Surgery	\$125 copay	\$100 copay
Emergency Room	\$100 (waived if admitted)	\$100 (waived if admitted)
Urgent Care	\$50 copay	\$50 copay
Prescriptions (Retail)	\$10 / \$40 / \$60	\$10 / \$40 / \$60
Prescriptions (Mail)	\$20 / \$80 / \$120	\$20 / \$80 / \$120

*Age and/or frequency limits apply.

PHARMACY BENEFIT - INDEPENDENCE BLUE CROSS

	EPO Base Plan You Pay	EPO Buy-Up Plan You Pay
Prescriptions (Retail)	\$10 / \$40 / \$60	\$10 / \$40 / \$60
Prescriptions (Mail)	\$20 / \$80 / \$120	\$20 / \$80 / \$120

PRESCRIPTION DRUG MAIL ORDER – IBC HOME DELIVERY

The mail order program benefits individuals who are on long-term medication therapies, for those who have chronic conditions such as diabetes, asthma or high blood pressure. By ordering prescriptions by mail, you will receive a three month supply for only two times the retail cost.

If you wish to take advantage of this benefit, it is recommended that you have your physician write out two prescriptions: one for a 30 day supply to be filled first at the pharmacy, and a second for a 90 day supply (or up to one year) to be used for mail order. Be sure to fill the 30 day supply before mailing the 90 day supply request to avoid fulfilment issues. This will ensure that you will not be without your prescription before you receive your order in the mail.

Complete the Mail Order Form with your first order only. Send the completed Mail Order Form plus the original prescription and the appropriate payment to Futurescripts, using the pre-addressed mail order envelope. Your order will be processed and mailed to you within 10-14 days from the day you mailed your order, along with re-order instructions for future refills.

To obtain a mail order form log on to: www.ibxpress.com

PRESCRIPTION DRUG Specialty Drugs – BriovaRx™ Pharmacy

Specialty pharmacy drugs are typically drugs that are administered by the patient. These may include, but are not limited to, drugs that are taken orally, by injection, or infusion. Specialty drugs meet certain criteria including, but not limited to:

- Drugs used to treat rare, complex, or chronic diseases
- Drugs that have complex storage and/or shipping requirements
- Drugs that require comprehensive patient monitoring and education

Members will be allowed to obtain the first fill at a retail pharmacy; however, subsequent fills will need to be obtained at a BriovaRx pharmacy. For additional information about the Independence Mandatory Specialty Pharmacy benefit program, members should call the number on their ID card.

PREVENTIVE CARE

Taking care of ourselves is extremely important!

WHAT ARE PREVENTIVE SERVICES?

Preventive services typically include yearly check-ups, screenings, and immunizations that can help you and your family members stay healthy and avoid or delay health problems.

WHAT IS COVERED 100% AS PREVENTIVE CARE UNDER IBC?*

- Preventive Exams
- Mammograms
- Depression Screenings
- Cholesterol Testing
- Immunizations

*Age and frequencies schedules apply to all preventive care.

For more information, please visit https://www.ibx.com/individuals/member_resources/preventive_care/index.html

WELLNESS WORKS

Lincoln University Wellness Works program includes easy, fun activities you can participate in on a regular basis with your coworkers, family members and friends while taking care of your health!

Throughout the year the University will communicate upcoming activities, challenges or onsite seminars for you to participate.

Some examples of activities include:

- Weight Loss Challenge
- Walking/Steps Challenge
- Stress Management Programs
- Cooking Demonstrations
- Financial Wellness Programs
- Nutrition Counseling

These events are successful because you take time out of your day to do something for your health!

Keep an eye out for more exciting Wellness events as the Lincoln University HR Team promotes our mission to "Live Well and Be Well".



PREVENTIVE CARE



HOW TO ACCESS?

Access Member Portal at www.ibxpress.com for more information.

DENTAL INSURANCE - DELTA DENTAL

Delta Dental is the dental vendor. You may go to any dentist you choose. Your choice will impact your out of pocket cost for services:

- PPO Network Providers: Employee will have LESS out of pocket cost and no balance billing
- Premier Network Providers: Employee will have MORE out of pocket cost than PPO network providers and No balance billing
- Out of Network Providers: Non-Delta Dental dentists may balance bill for amounts above the usual, customary and reasonable payment from Delta Dental.

Benefit Provision	Base Plan		Buy-	Up Plan
Plan Type	PPO Plu	s Premier	PPO Plus Premier	
Annual Deductible (waived for Preventive Services)	\$50,	/ \$200	\$50 / \$200	
Annual Maximum (per person)	\$1,	,000	\$2	2,500
Orthodontia Lifetime Maximum (covers dependent children to age 19)	\$1,500		\$1,500	
Out of Network Reimbursement	MAC		MAC	
	In Network	Out of Network	In Network	Out of Network
Preventive Services	100%	100%	100%	100%
Basic Services	80%	80%	80%	80%
Major Services	50%	50%	60%	60%
Orthodontia	50%	50%	50%	50%

VALUE ADDED BENEFITS

- Delta Dental on the go: deltadentalins.com
- SmileWay Wellness Program
- Grin Newsletter
- Enhanced dental benefits for pregnant women



HOW TO ACCESS?

Access Member Portal at www.deltadentalins.com for more information.

VOLUNTARY VISION BENEFIT - VSP

Comprehensive vision coverage for yourself and your dependents. Visit vsp.com for details, if you plan to see a provider other than a VSP doctor.

Base Plan	Buy-up Plan
\$10 copay (every 12 months)	\$10 copay (every 12 months)
\$25 copay (every 12 months)	\$25 copay (every 12 months)
Single vision, lined bifocal, lined trifocal, polycarbonate for children	Single vision, lined bifocal, lined trifocal, polycarbonate for children; Scratch Resistant Coating Anti-Reflective Allowance
\$130 allowance; 20% off the amount over your allowance (every 24 months)	\$150 allowance; 20% off the amount over your allowance (every 24 months)
Up to \$130 copay for your contact lens exam (fitting and evaluation) \$60 allowance for contacts (every 12 months)	Up to \$150 copay for your contact lens exam (fitting and evaluation) \$60 allowance for contacts (every 12 months)
	\$10 copay (every 12 months) \$25 copay (every 12 months) Single vision, lined bifocal, lined trifocal, polycarbonate for children \$130 allowance; 20% off the amount over your allowance (every 24 months) Up to \$130 copay for your contact lens exam (fitting and evaluation) \$60 allowance for contacts

Your Coverage with Other Providers				
Exam	Up to \$45			
Single Vision Lenses	Up to \$30			
Lined Bifocal Lenses	Up to \$50			
Lined Trifocal Lenses	Up to \$65			
Frame	Up to \$70			
Contacts	Up to \$105			

- Average 20-25% savings on all non-covered lens options.
- 20% off additional glasses and sunglasses, including lens options, from any VSP doctor within 12 months of your last WellVision Exam.
- Average 15% off the regular price, or 5% off the promotional price of laser vision correction services.
- Discounts only available from contracted facilities.

HOW TO ACCESS?

Access Member Portal at https://www.vsp.com/signon.html for more information.



FLEXIBLE SPENDING ACCOUNT – DISCOVERY BENEFITS

HEALTHCARE FSA

- \$2,600 Annual Maximum
- Full election amount available at the beginning of the plan year
- Can be used for Medical, Prescription, Dental and Vision expenses.

DEPENDENT CARE FSA

- \$5,000 Annual Maximum
- Can you only use the money as it is funded into your account
- Can be used for children under age 13, when both parents work, for day care, summer day camp, nursery school and in home child care providers.

Allows you to set aside money pre-tax for eligible expenses. For a complete list visit www.discoverybenefits.com. You must keep all receipts on file in case of an audit. You will be asked to substantiate your expenses.

Savings Example: An FSA participant with \$1,000 of out-of-pocket expenses					
Without FSA With FSA					
Gross pay	\$25,000	\$25,000			
FSA Contribution	\$0	-\$1,000			
Taxable Income	\$25,000	\$24,000			
Taxes	-\$9,413	-\$9,036			
Take Home Pay after Taxes	\$15,587	\$14,964			
Healthcare Expenses	\$1,000	\$1,000			
Available Income	\$14,587	\$13,964			
Tax-free Reimbursement from FSA	\$0	\$1,000			
Net Income	\$14,587	\$14,964			

That's a savings of \$377 for the year!

For illustrative purposes only. Actual dollar amounts and savings may vary.

EMPLOYEE CONTRIBUTIONS

Employee Contributions – Medical (IBX)*						
	Monthly	LU Pays	Monthly	Bi-Weekly	9-Month	
Single BASE	\$845.62	\$761.06	\$84.56	\$42.28	\$112.75	
Employee/Children BASE	\$1,507.75	\$980.04	\$527.71	\$263.86	\$703.62	
Employee/Spouse BASE	\$1,945.77	\$1,264.75	\$681.02	\$340.51	\$908.02	
Employee/Family BASE	\$2,481.05	\$1,612.68	\$868.37	\$434.18	\$1,157.82	
Single BUY-UP	\$861.44	\$775.30	\$86.14	\$43.07	\$114.85	
Employee/Children BASE	\$1,535.96	\$998.37	\$537.59	\$268.79	\$716.79	
Employee/Spouse BASE	\$1,982.18	\$1,288.42	\$693.76	\$346.88	\$925.01	
Employee/Family BUY-UP	\$2,527.46	\$1,642.84	\$884.62	\$442.31	\$1,179.49	

Employee Contributions – Dental (Delta Dental)					
	Monthly	LU Pays	Monthly	Bi-Weekly	9-Month
Single BASE	\$28.66	\$24.36	\$4.30	\$2.15	\$5.73
Employee/Family BASE	\$71.46	\$24.36	\$47.10	\$23.55	\$62.80
Single BUY-UP	\$33.40	\$24.36	\$9.04	\$4.52	\$12.05
Employee/Family BUY-UP	\$83.29	\$24.36	\$58.93	\$29.47	\$78.57

Employee Contributions – Vision (VSP)					
	Monthly	LU Pays	Monthly	Bi-Weekly	9-Month
Single BASE	\$5.42	\$0.00	\$5.42	\$2.71	\$7.23
Employee/Family BASE	\$11.66	\$0.00	\$11.66	\$5.83	\$15.55
Single BUY-UP	\$7.53	\$0.00	\$7.53	\$3.77	\$10.04
Employee/Family BUY-UP	\$16.20	\$0.00	\$16.20	\$8.10	\$21.60

*Contributions are withheld on a Bi-Monthly basis.

UNIVERSITY PAID BENEFITS

Lincoln University provides, at no cost to you, a Life and Accidental Death benefit as well as short term and long term disability coverage.

BASIC LIFE INSURANCE AND AD&D

1 times your annual earnings, rounded to the next higher \$1,000, to a maximum of \$200,000*. You name a primary and secondary beneficiary and may change that designation at any time. You should review your beneficiary each year.

*Reduction at Age 70	*Reduction at Age 75
65% of the amount of life insurance you had prior to age 70.	50% of the amount of life insurance you had prior to your first reduction.
65% of the amount of life insurance shown above if you become insured on or after age 70 but before age 75.	50% of the amount of life insurance shown above if you become insured on or after age 75.

SHORT TERM DISABILITY

If you are disabled due to an illness or accident that occurred off the job, you may receive benefits through the Short Term Disability plan. Benefits begin on the 31st day of a disability due to an illness or accident. The maximum benefit duration is 9 weeks. The plan provides 60% of your pre-disability earnings to a \$1,000 weekly maximum.

LONG TERM DISABILITY

If you are disabled for longer than 90 days, you may receive benefits through the Long Term Disability Plan which provides a monthly benefit of 60% of pre-disability earnings, to a maximum of \$5,000 per month.

*Same Age Reduction schedule used for the Basic Life applies to the Voluntary Life coverage.

VOLUNTARY LIFE INSURANCE AND AD&D

Lincoln University offers Voluntary Life/AD&D insurance benefit which provides you with the opportunity to purchase additional life insurance for yourself, your spouse, and your dependent children at group rates via payroll deduction (with post-tax dollars).

	Benefits Purchased in Increments	Maximum Benefit*	Guarantee Issue (No Medical Question)**
Employee	\$10,000 Increments	Not to exceed 5x salary or \$500,000	\$100,000
Spouse	\$5,000 Increments	Not to exceed 50% of EE election and approved to \$250,000	\$30,000
Children	\$2,000 Increments	\$10,000	\$10,000

*Same Age Reduction schedule used for the Basic Life applies to the Voluntary Life coverage

**Each Open Enrollment employees already enrolled in the voluntary coverage may elect up to the guarantee issue without medical questions

AUTO / HOME INSURANCE - LIBERTY MUTUAL

HERE'S HOW

- Get exclusive group savings.
- Extra savings on your home insurance when you insure both your car and home.
- Obtain additional discounts based on your driving experience, car, home safety features and more.

SERVICE AND SUPPORT

- Service convenient for you by phone, at a local sales office, online or with one of our on-site representatives.
- Your choice of payment options including, direct billing, electronic withdrawal or online payment.

VOLUNTARY ACCIDENT INSURANCE - UNUM

Accident Insurance provides a lump sum benefit based on the type of injury (or covered incident) you sustain or the type of treatment you need.

COVERAGE AVAILABLE FOR

- Employee
- Spouse: Ages 17 to 64
- Children: Dependent children newborn until their
 26th birthday, regardless of marital or student status.

You can enroll online at the following address between 4/9 and 5/11:

https://www.plane.biz/Logons/LincolnU niversityoftheCommonwealth-2018ReenrollmentEvent/default.htm

Your login information is the last 4 digits of your Social Security Number, Your Last Name, and Your Date of Birth.

Enroll by Phone: Call Unum at (800) 350-5370 Benefit Counselors

· Broken bones· Emergency room visit· Torn ligaments· Outpatient surgery facility· Cuts repaired by stitches· Doctor office visit· Coma due to a covered injury· Chiropractic visit· Eye injuries· Occupational therapy· Ruptured discs· Speech therapy	Some Covered Injuries Include:	Some Covered Expenses Include:
· Cuts repaired by stitches· Doctor office visit· Coma due to a covered injury· Chiropractic visit· Eye injuries· Occupational therapy· Ruptured discs· Speech therapy	· Broken bones	· Emergency room visit
· Coma due to a covered injury· Chiropractic visit· Eye injuries· Occupational therapy· Ruptured discs· Speech therapy	· Torn ligaments	 Outpatient surgery facility
· Eye injuries· Occupational therapy· Ruptured discs· Speech therapy	· Cuts repaired by stitches	· Doctor office visit
Ruptured discs Speech therapy	\cdot Coma due to a covered injury	· Chiropractic visit
	· Eye injuries	· Occupational therapy
	· Ruptured discs	· Speech therapy
Concussion Physical therapy	· Concussion	· Physical therapy
· Burns · Hospitalization	• Burns	· Hospitalization

VOLUNTARY GROUP CRITICAL ILLNESS - UNUM

Critical Illness provides enrollees a lump sum benefit at the time of the diagnosis of a covered illness*. You choose the lump sum benefit from \$5,000 to \$50,000 and you are able to use the benefit received in any way you see fit.

You can use the coverage more than once. If you receive the full benefit for a covered illness, your coverage can be continued for remaining conditions. The diagnosis of new conditions must occur at least 90 days after the most recent diagnosis. Each condition is payable once per lifetime.

You can enroll online at the following address between 4/9 and 5/11:

https://www.plane.biz/Logons/LincolnUniversity oftheCommonwealth-2018Re-enrollmentEvent/ default.htm

Your login information is the last 4 digits of your Social Security Number, Your Last Name, and Your Date of Birth.

Enroll by Phone: Call Unum at (800) 350-5370 Benefit Counselors

	What Type of	of Coverage is Available?	
Employee		\$5,000 to \$50,000 in \$1,0	000 increments
Dependent Children (newborn until 26th bir of marital status or stud		Automatically covered employee amount (no a	
Spouse (ages 17-64 with purch coverage)	ase of employee	\$5,000 to \$30,000 in \$1,0	000 increments
Covere	ed Conditions	Optional Cancer Coverage	Specific Childhood Conditions
 Blindness Stroke Coma Heart attack Occupational HIV 	 Major organ failure End-stage renal (kidney) failure Coronary artery bypass surgery (25%) 	• Cancer • Carcinoma in situ (25%)	 Cerebral Palsy Cleft Lip or Palate Cystic Fibrosis Down Syndrome Spina Bifida

· Benign brain tumor

*Pre-existing Condition Limitation: This means a sickness or physical condition that existed within 3 months before the coverage effective date. The Condition would be pre-existing if (1) Symptoms existed that would cause a person to seek advice or treatment from a doctor; or (2)You were treated, received advice from a doctor or took prescribed medicine. This limitation means that the critical illness benefit will not be paid during the first 12 months the policy is in force for a pre-existing condition.

HEALTH SCREENING BENEFIT RIDER - UNUM

Available to all members covered under the Accident and/or Critical Illness Insurance.

Each covered insured individual will automatically receive The Health Screening Benefit Rider*, which can pay \$50 per calendar year per insured individual if a covered health screening test¹ is performed. Screening tests include, but are not limited to:

- Colonoscopy
- Mammography
- Pap smear
- Skin cancer biopsy
- PSA (blood test for prostate cancer)
- Serum cholesterol test to determine LDL and HDL levels
- Stress test on a bicycle or treadmill

*The Health screening benefit rider is not available in NH.

¹ Insured individuals are eligible for benefits 30 days after the effective date of coverage.

WHOLE LIFE INSURANCE - UNUM

VALUABLE FEATURES

- Policy builds cash value
- Accidental Death Benefit Rider (optional)
- Long Term Care (LTC) Rider*

(14 days until their 25th birthday).

- Living Benefit Option automatically included
- Portable you own the policy

You can enroll online at the following address:

https://www.plane.biz/Logons/LincolnUniversity oftheCommonwealth-2018Re-enrollmentEvent/ default.htm

Your login information is the last 4 digits of your Social Security Number, Your Last Name, and Your Date of Birth.

Enroll by Phone: Call Unum at (800) 350-5370 Benefit Counselors

Avaliable Family Coverage		
Individual Employee Covera (ages 15-80)	age	You can purchase coverage for as low as \$3 a week.
Individual Spouse Coverage (ages 15-80)	ē	Coverage is available for as low as \$3 a week. Spouse coverage amount can not exceed the employee base coverage amount.
Individual Child Coverage No employee or spouse purchas Available to eligible children, ste children and grandchildren (14 d	epchildren, legally adopted	You can purchase coverage for as low as \$1 a week.
Child Term Life Benefit With purchase of employee or sp eligible children, legally adopted		\$1,000 to \$10,000 – one rider covers all children

*Long Term Care (LTC) Rider allows access to death benefit after receiving long term care for 90 days. Pays a monthly benefit for a period of long term care. Beneift amount and duration based on the type of care you receive.

15

EMPLOYEE ASSISTANCE PROGRAM – HEALTH ADVOCATE

When you call HMS, you will be connected to an EAP professional who will help you with your concerns and issues such as counseling, parenting, care giving, legal and financial issues, stress, and depression.

SERVICES AVAILABLE TO YOU

- Professional evaluation for the nature and scope of employee personal problems, (1-3 sessions) and referral, if needed, to appropriate professional counseling or other necessary care. This service is available for employees referred by the Lincoln University; for employees recognizing their own problems and wanting help to solve them; and for eligible dependents of Lincoln University employees.
- Case management for in-patient and outpatient treatment
- 24 hour emergency hotline

	Work / Life Services
Child Care	 Child Care Centers Family Child Care Homes Community Resources
Elder Care	 Nursing Homes Assisted Living Facilities Independent Living Facilities Community Services & Resources
Legal	 Family Law Issues Real Estate Criminal Matters Estate Planning Motor Vehicle Elder Law
Financial	 Debt Management Budgeting College Funding Retirement Strategies Life Insurance Needs
Identity Theft Assistance	Information through online resources, and consultation with a fraud recovery specialist.
Individual Health Risk Assessment	Online information and tools for employees wanting to develop an accurate assessment of health and fitness.

ONLINE EDUCATION & INFORMATION

HOW TO ACCESS?

Access Member Portal at www.ibxpress.com for more information.

HEALTH MANAGEMENT CENTER

Centralized lifestyle resource areas that direct individuals to consolidated, consistently organized sets of applications, health content and other resources

MESSAGE BOARDS

Integrated online discussion groups that provide members with a way to get answers and support on health issues from experts and peers.

VIDEOS

Over 3,000 videos covering emerging health trends and providing a review of various disease, condition and wellness areas.

RECIPES

A collection of over 600 healthy recipes which are presented by category and which include nutritional information, required ingredients and preparation tips.

HEALTH TRACKERS

Health trackers-graphical tools that track important health measurements over time. Members can create their own trackers or use one of the available templates such as blood pressure or stress level.

BLUE365[®] offers discounts on health and wellness products and services from nationally recognized brands. Help members establish healthy behaviors through incentives and active participation. The program includes:

- Fitness center memberships
- Nutrition and weight management programs
- Laser vision correction
- Alternative medicine services
- Parent and senior care
- Hearing aids

BLUE INSIDER helps members save up to 60% on a wide range of services from national, regional, and local businesses, as well as attractions and events. Through CorCell[®], Independence offers exclusive discounts for a program that preserves umbilical cord blood.

17

MONEY BACK REIMBURSEMENTS

The Healthy Lifestyles Solutions reimbursements reward you for taking small steps that can add up to big changes in your health. We offer you up to \$150 back for completing 120 workouts at the gym, an approved weight loss program, including WeightWatchers online, and/or an approved program to help you quit tobacco. It's easy and convenient to participate – no enrollment is required. As soon as you meet eligibility requirements for a program, visit www.ibx. com/reimbursements to request reimbursement.

HOW THE PROGRAM WORKS

- Members do not need to enroll; when members meets requirements (i.e., 120 workouts in a 365-day period), they can request reimbursement.
- Members are eligible for one reimbursement per program per calendar year.
- Requirements do not need to be met during same calendar year as reimbursement.

MEMBERS WILL:



NOTES

NOTES



2018 EMPLOYEE BENEFITS GUIDE



Benefit details are provided in the official plan document for each plan, including, if applicable, plan documents and insurance contracts. This Benefits Guide does not constitute or imply a contract of employment, nor does it guarantee the continuation of the University benefit programs. The University reserves the right to amend or terminate any or all provisions of the benefits plan at any time.

This benefit summary prepared by



Arthur J. Gallagher & Co.