

# Employee Benefits Enrollment Guide

## 2025

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This information is a simple summary of Endicott College's benefits for employees. For more detailed information, please see the Human Resources (HR) page on the Intranet, which has a Summary of Benefits, or contact HR directly. If anything in this Benefits Guide is in conflict with the Endicott College Faculty Association Agreement, the Agreement prevails. If there is a conflict between any information in this booklet and the Summary of Benefits, the latter prevails.

# Endicott Benefits At-A-Glance

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## Endicott College offers a quality benefit package to support our dedicated employees.

These plans are designed to help maintain and improve your well-being, safeguard your loved ones, and provide smart ways to save for the future. We encourage you to explore this benefit enrollment guide and learn how each benefit can make an impact on your life—the more you know, the easier it is to make the best decisions. This is meant to be a summary of benefits offered at Endicott; please see the Human Resources Intranet page on [MyEndicott](#) for full plan and policy details.

## Get to Know Your Benefits

### Who is eligible for benefits?

The benefits outlined in this brochure are for employees who work an average of 20+ hours per week year round. If you are an Endicott benefit-eligible employee, you are eligible to enroll in the benefits described in this guide.

If you are a newly-eligible employee, your health benefits will start on the first day of the month following your hire or transfer date.

Don't forget—you must enroll in benefits within 30 days of your hire/transfer to benefit-eligible position date, or you'll have to wait until the next open enrollment period (unless you have a qualifying event).



## Who are my eligible dependents?

In general, eligible dependents are your:

- Spouse, if legally married.
- Child(ren) up to age 26.
- Disabled child(ren) over age 26.

## Can I change my benefits when there are changes in my life?

When life changes, make sure you adjust your benefits. You can change your benefits coverage during the plan year if you have a qualifying event. Eligible qualifying events are:

- Your employment status changes, including moving into or out of a role with 20+ hours per week
- Your spouse or eligible dependent loses or gains coverage
- Your legal marital status changes, including marriage, death of spouse, divorce, or legal separation
- Your number of dependents changes, due to the birth of a child, adoption, or death of a dependent
- Your dependent reaches age 26 and is no longer eligible for your plan
- You and/or your dependents move to a new residence outside of the plan's coverage area

### **You must make your changes in Workday within 30 days of the qualifying event.**

Without a qualifying event, benefit selections may only be changed during open enrollment.

## Making changes in Workday after a qualifying event

Immediately following a qualifying event, submit a change of benefit request in Workday, attaching documentation (e.g., marriage certificate, statement of birth, divorce decree, or loss or gain of coverage letter) that confirms your qualifying event and upload it to Workday. You must do this within 30 days of the event.

## What happens to my benefits if I go on leave?

If you are being paid by Endicott (through PFML, Sick, or vacation) for any part of your leave, your share of your benefits cost will be deducted from that pay. If you are on unpaid leave, you will be able to continue your health benefits through the Consolidated Omnibus Budget Reconciliation Act or COBRA.



# 2025 Observances, Holidays, & Closures

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<b>Reason</b>	<b>Date</b>	<b>Type</b>
New Year's Day	January 1	Holiday
Martin Luther King, Jr. Day	January 20	Holiday
Presidents' Day	February 17	Holiday
Patriots' Day	April 21	Holiday
Memorial Day	May 26	Holiday
Juneteenth	June 19	Holiday
Independence Day	July 4	Holiday
Labor Day	September 1	Holiday
Columbus Day	October 13	Holiday
Day before Thanksgiving	November 26	College Closed
Thanksgiving Day	November 27	Holiday
Day after Thanksgiving	November 28	College Closed
Winter Break	December 24–January 1	College Closed
Christmas Day	December 25	Holiday

Employees have also been granted three (3) Personal Days to be used throughout the year for personal needs and for the observance of days of personal significance that are not reflected in the calendar.

Any hourly employee who works on a holiday will be paid for the holiday and will also be paid for working on the holiday.

Regular, 12 month part-time employees will be paid for a holiday if they are regularly scheduled to work on that day.

# Employee Benefits

## Retirement Plan

We value the hard work and commitment you show towards the Endicott College community, and want to help ensure financial security after your employment here is over.

The Endicott Employee Retirement Plan is governed by section 403(b) of the Internal Revenue Code and is administered by TIAA. The Plan lets you save your own money for your retirement in a tax-advantaged way. Upon your one-year anniversary or immediately with prior service from another higher education Institution, if you are in a benefits-eligible faculty or staff role, the college will contribute up to 8% of your pay to your retirement account.

- You may begin contributing your own money, via payroll deduction, upon your date of hire.
- You may contribute any percentage per pay period, but there is an annual limit per IRS guidelines; \$23,500 per year if you are under age 50 and \$31,000 if you are age 50 and older.
- Percentage contributions depend on your participation choice:
  - If you make a 2% contribution, the College will make an 8% contribution on your behalf.
  - If you do not make a 2% contribution, the College will contribute 6% of your pay to the retirement plan on your behalf.
- You may change or stop your contribution at any time during the year.
- You have two options for saving in a tax-advantaged way; you may wish to speak with a tax advisor or a TIAA representative to decide which option is best for you:
  - You may save before payroll taxes are calculated (pre-tax), which reduces your tax liability for the current year. You will pay taxes on your savings plus earnings later, when you withdraw from your account.
  - After federal and state taxes are calculated, you may save to a Roth 403(b) account. That means you will pay taxes now but your savings plus earnings are tax-free when withdrawn.
- You must create an account with TIAA in order to direct your contributions and to name your beneficiaries. If you do not create an account, your contributions and the College's contributions will be automatically directed to a Lifecycle fund with TIAA.

All contributions are elected through Workday retirement.

## Medical Insurance

All medical insurance benefits are provided through Blue Cross Blue Shield of Massachusetts. You have two options for health insurance:

**HMO Value Plus** – an HMO plan that requires you to use an in-network provider. You must choose a primary care physician (PCP) and obtain referrals for specialty care.

- No deductible or co-insurance is required.
- Most services require a copayment at time of visit.
- Annual routine exams are paid at no cost to you.

**PPO Saver 3000** – a PPO plan that offers in and out-of-network coverage. You must also pay a deductible before the plan pays for most services. If you choose to go out-of-network, you pay additional out of pocket costs.

- An annual deductible of \$3,000 for an individual or \$6,000 for a family applies. Endicott will cover half of your out of pocket deductible in the form of a Health Savings Account.
- Most services are subject to deductible.
- Annual routine exams are paid at no cost to you.
- Out-of-network coverage has co-insurance.

## Health Savings Account (HSA)

Employees and dependents enrolled in the PPO Saver 3000 plan qualify for the HSA.

You are eligible to contribute to an HSA unless you are over age 65 and enrolled in Medicare.

The HSA is administered through HealthEquity.

- Endicott will contribute \$1,500 per Employee or \$3,000 per Employee + 1 or Family annually. The employer contribution will be funded on the election date, prorated on the start date.
- Use your HSA to pay for eligible expenses with tax-free dollars or choose to pay out of pocket and let your HSA balance grow over time.

### **The IRS Federal limits for HSA contribution in 2025 is:**

- \$4300 per individual plan
- \$8550 plus one or more
- Catch up contribution \$1000 catch up for 55+

### **Pharmacy Benefit Services** (For both HMO Value Plus & PPO Saver 3000)

- Tiered copayments for prescription drugs. Deductible also applies for the PPO plan.
- Coverage is available for a wide variety of medications, with many low-cost generics.
- Access to thousands of retail pharmacies.
- You may receive a three-month supply of maintenance prescriptions for just one copay.

# Medical

2025 Medical Rates		
Employee Biweekly Contribution		
	Blue NE VP	PPO Saver 3000
EE	\$103.24	\$83.39
EE+1	\$261.84	\$211.49
Family	\$284.96	\$230.17

## MEDICAL PLANS COMPARISON

### Network Comparison

HMO	PPO
Regional HMO Blue NE network in MA, ME, NH, VT, CT and RI	National PPO network Blue Cross Blue Shield PPO providers
Choose Primary Care Physician (PCP) (change anytime!)	In-network PPO Providers: richer benefits
Referrals to most HMO Blue NE network specialists	Out-of-network Providers: reduced benefits
NO referrals to HMO Blue NE network: <ul style="list-style-type: none"> <li>Ob/gyn care &amp; Behavioral Health &amp; Routine Vision</li> <li>Chiropractors &amp; Acupuncturists</li> <li>Emergencies &amp; Out-of-Area Urgent Care</li> </ul>	NO referrals required Go to any licensed provider nationwide
Freedom of choice Use in-network or out-of-network providers	
Find a doctor: <ul style="list-style-type: none"> <li>ONLINE <a href="http://www.bluecrossma.org">www.bluecrossma.org</a></li> <li>Call Physician Selection Service: 1-800-821-1388</li> </ul>	Find a doctor: <ul style="list-style-type: none"> <li>ONLINE <a href="http://www.bluecrossma.org">www.bluecrossma.org</a></li> <li>Call Physician Selection Service: 1-800-821-1388</li> </ul>

## In-Network Medical Services

		HMO			PPO SAVER		
		Deductible on per-member basis			Entire family deductible must be met before benefits are provided for any family member		
MEDICAL SERVICES		MEMBER COST SHARING					
Deductible		\$0 individual \$0 family			\$3,000 individual contract \$6,000 family contract		
DOCTOR OFFICE VISITS	Routine health checkups & related tests	\$0			\$0		
	PCP, OB/GYN, Behavioral Health visits	\$20			\$0 after deductible		
	Specialist office visits	\$35			\$0 after deductible		
	Physical, Speech Therapy, Cardiac Rehab	\$35			\$0 after deductible		
EMERGENCY AND URGENT CARE	Emergency Room visits	\$250			\$150 after deductible		
	Urgent Care facilities	\$35			\$0 after deductible		
EQUIPMENT	Prosthetics, Durable Medical Equipment	20%			20% after deductible		
DIAGNOSTIC TESTING	Labs & X-Rays	\$0			\$0 after deductible		
	MRI's, PET & CT Scans	\$75			\$0 after deductible		
HOSPITAL	Hospital Day Surgery	\$500			\$0 after deductible		
	Inpatient Admissions	\$1,000			\$0 after deductible		
PRESCRIPTION DRUGS		TIER 1	TIER 2	TIER 3	TIER 1	TIER 2	TIER 3
PRESCRIPTION DRUGS	Retail pharmacy (30-day supply)	\$15	\$30	\$50	\$10 after deductible	\$25 after deductible	\$45 after deductible
	Mail Order pharmacy (90-day supply)	\$15	\$30	\$50	\$20 after deductible	\$50 after deductible	\$135 after deductible



## Out of Network Medical Services

MEDICAL SERVICES		HMO			PPO SAVER		
		Deductible on per-member basis			Entire family deductible must be met before benefits are provided for any family member		
		MEMBER COST SHARING					
Deductible		\$0 individual \$0 family			\$3,000 individual contract \$6,000 family contract		
DOCTOR OFFICE VISITS	Routine health checkups & related tests	N/A			20%		
	PCP, OB/GYN, Behavioral Health visits	N/A			20% after deductible		
	Specialist office visits	N/A			20% after deductible		
	Physical, Speech Therapy, Cardiac Rehab	N/A			20% after deductible		
EMERGENCY AND URGENT CARE	Emergency Room visits	\$250			\$150 after deductible		
	Urgent Care facilities	N/A			20% after deductible		
EQUIPMENT	Prosthetics, Durable Medical Equipment	N/A			40% after deductible		
DIAGNOSTIC TESTING	Diagnostic Testing (Labs, X-Rays, MRI's, PET & CT Scans)	N/A			20% after deductible		
HOSPITAL	Hospital Day Surgery	N/A			20% after deductible		
	Inpatient Admissions	N/A			20% after deductible		
PRESCRIPTION DRUGS	PRESCRIPTION DRUGS						
	Retail pharmacy (30-day supply)	TIER 1	TIER 2	TIER 3	TIER 1	TIER 2	TIER 3
		N/A	N/A	N/A	\$20 after deductible	\$50 after deductible	\$90 after deductible

The amount the plan pays for covered services is based on the BCBSMA-allowed amount. If an out-of-network provider charges more than the BCBSMA-allowed amount, you may have to pay the difference.

## Out-of-Pocket Maximum

		OUT-OF-POCKET MAXIMUM	
		The most a member will pay per year for covered health expenses before the plan pays 100 percent of covered health expenses for the rest of that plan year	
		HMO	PPO
MEDICAL SERVICES deductible coinsurance copayments		\$2,000 Individual	\$6,450 Individual
		\$4,000 Family	\$12,900 Family

## RX COST-SHARE ASSISTANCE

What is Cost-Share Assistance?	How does Cost-Share Assistance work?
<ul style="list-style-type: none"> <li>The <b>Cost-Share Assistance</b> program is administered by our partner, <b>PILLARRx Consulting</b>.</li> </ul>	<ul style="list-style-type: none"> <li>If you or a dependent is taking an eligible medication, <b>PillarRx will call you</b> to help you enroll! Or you can call the PillarRx Care Team at 1-636-614-3128.</li> </ul>
<ul style="list-style-type: none"> <li><b>Manufacturer coupons</b> for certain eligible medications will cover most or all of your out-of-pocket costs.</li> </ul>	<ul style="list-style-type: none"> <li>Coupons are <b>automatically applied</b> when you fill your prescription, reducing your out-of-pocket cost to anywhere between \$0 and \$35, depending on the medication.</li> </ul>
<ul style="list-style-type: none"> <li><b>Must Enroll To Save.</b> Enrollment is optional, however... If you don't enroll, you'll be responsible for paying 30% of the cost of your eligible medication. Therefore, out-of-pocket costs for the medication will be higher than if you participated in the program.</li> </ul>	<ul style="list-style-type: none"> <li><b>What If I'm Already Using a Manufacturer's Coupon?</b> You still need to enroll yourself or your dependent in the program.</li> </ul>
Personalized Support From The PillarRx Care Team	
PillarRX Care Team will... <ul style="list-style-type: none"> <li><b>Help you enroll</b> in the Cost-Share Assistance Program.</li> <li><b>Monitor your claims</b> every month to ensure that you're receiving the correct coupon and provide support if needed.</li> </ul>	
You May Call the PillarRx Care Team at 1-636-614-3128	

# Dental

## Dental Plan

Dental insurance benefits are provided through Blue Cross Blue Shield of Massachusetts. It is a preferred provider organization (PPO) dental plan with access to an extensive regional network with thousands of participating dentists.

- No deductible for preventative/diagnostic care which includes cleanings, sealants, space maintainers, and x-rays.

Calendar year maximum benefit is \$1,750 per member.

2025 Dental Rates	
Employee Biweekly Contribution	
Dental Blue	
Employee	\$4.18
Family	\$12.15

## DENTAL BLUE

Network



ACCESS TO MORE THAN 90 PERCENT OF DENTISTS IN MASSACHUSETTS

350,000 PARTICIPATING LOCATIONS NATIONWIDE

### FIND A DENTIST:

- ONLINE [WWW.BLUECROSSMA.ORG](http://WWW.BLUECROSSMA.ORG)

### GO TO ANY DENTIST

#### PARTICIPATING DENTISTS IN THE NATIONAL DENTAL BLUE NETWORK

- NO CLAIMS FORMS
- DISCOUNTS & NO BALANCE BILLING

#### NON-PARTICIPATING DENTISTS (NOT-CONTRACTED WITH NATIONAL DENTAL BLUE NETWORK)

- CLAIMS FORMS
- BALANCE BILLING

For members under age 13, benefits are covered in full up to the calendar-year benefit maximum and are not subject to the deductible.

PREVENTIVE BENEFIT GROUP	BASIC BENEFIT GROUP	MAJOR BENEFIT GROUP
100%	80%	50%
NO DEDUCTIBLE	\$25 DEDUCTIBLE (up to \$75 per family)	
\$1,750 CALENDAR YEAR MAXIMUM*		
Oral Exams Cleanings X-Rays Sealants (↓Age 14) Space Maintainers (↓Age 19) Fluoride Treatments (↓Age 19)	Fillings Extractions Endodontics Periodontics	Bridges Crowns Dentures Implants

## Enhanced Dental Benefits

### Additional Support for members with Qualifying Conditions

The connection is clear: good oral health leads to better overall health.

Condition	One cleaning or periodontal maintenance, 4 per calendar year <sup>1</sup>	Periodontal scaling, once per quadrant every 24 months <sup>1</sup>	Oral cancer screening, twice per calendar year	Fluoride treatment, 4 per calendar year
DIABETES	✓	✓		
CORONARY ARTERY DISEASE	✓	✓		
STROKE	✓	✓		
PREGNANCY	✓	✓		
ORAL CANCER	✓		✓	✓
SJÖGREN'S SYNDROME	✓		✓	✓
INTELLECTUAL AND/OR DEVELOPMENTAL DISABILITIES	✓ <small>NEW! On plan renewal date</small>		✓	✓
MENTAL HEALTH CONDITIONS	✓ <small>NEW! On plan renewal date</small>		✓	✓

### NO ADDITIONAL COST TO RECEIVE THESE EXTRA SERVICES

Enhanced Dental Benefits are included with your dental coverage, at no additional cost. These services aren't subject to a deductible, co-insurance, or annual maximum when provided by a dentist in our network. If you have a PPO plan and choose to receive services from a dentist not in our network, you may be subject to co-insurance.

## Vision

### Vision Plan

Vision Insurance is provided by Blue2020, giving you access to EyeMed's Insight Network for a greater variety of choices and flexibility.

- Coverage for exams, prescription glasses, and contact lenses is available each year.
- Choose independent, national retail, and regional retail providers (LensCrafters, Pearle Vision, Target Optical).

[blue2020ma.com](http://blue2020ma.com)

Blue 20/20 is administered by EyeMed Vision Care®, an independent company



**FAVORITE NATIONAL RETAILERS**

**LENSCRAFTERS™**

**PEARLEVISION™**

**OPTICAL™**  
and many regional retailers.

**ON-LINE SHOPPING OPTIONS**

- Glasses.com
- Contactsdirect.com
- Ray-Ban.com
- Targetoptical.com
- Lenscrafters.com

THOUSANDS OF INDEPENDENT PROVIDERS

1-855-875-6948

2025 Vision Rates	
Employee Biweekly Contribution	
Blue 20/20	
Employee	\$3.41
Family	\$8.95

#### MASSACHUSETTS

#### BLUE 20/20 EXAM-PLUS VISION PLAN: INSIGHT NETWORK \$150 - 12/12/24 Frequency

Vision care service	In-network member cost	Out-of-network reimbursement <sup>1</sup>
<b>Comprehensive eye exam</b>	\$10 copay	up to \$50
<b>Contact lens fit and follow-up<sup>2</sup></b>		
• Standard	up to \$40	n/a
• Premium	10% off retail price	n/a
<b>Retinal imaging</b>	up to \$39	n/a
<b>Enhanced Diabetes Eye Care Benefit<sup>3</sup></b> For members diagnosed with type 1 or type 2 diabetes	Paid in full, up to two diabetic eye exams and diagnostic testing every 12 months	n/a
<b>Frames</b>	\$150 allowance, then additional 20% off balance	up to \$90
<b>Standard plastic lenses</b>		
• Single vision	\$25 copay	up to \$42
• Bifocal	\$25 copay	up to \$78
• Trifocal	\$25 copay	up to \$130
• Lenticular	\$25 copay	up to \$130
• Standard progressive lens	\$90 copay	up to \$140
• Premium progressive lens tier 1-tier 3	\$110 - \$135 copay	up to \$196
• tier 4	\$90 copay, then 80% of charge less \$120 allowance	up to \$196
<b>Lens options<sup>2</sup></b>		
• UV treatment	\$15	n/a
• Tint (solid and gradient)	\$15	n/a
• Standard plastic scratch coating	\$15	n/a
• Standard polycarbonate	\$40	n/a
• Standard polycarbonate for covered dependents under age 19	Paid in full	up to \$26
• Standard anti-reflective coating	\$45	n/a
• Premium anti-reflective coating tier 1-tier 2	\$57 - \$68	n/a
• Photochromic/Transitions™ plastic	\$75	n/a
• Polarized	20% off retail price	n/a
• Other add-ons	20% off retail price	n/a
<b>Contact lenses<sup>4</sup></b>		
• Conventional	\$150 allowance, then additional 15% off balance	up to \$120
• Disposable	\$150 allowance	up to \$120
• Medically necessary	Paid in full	up to \$210
<b>Frequency</b>		
• Exam	once every 12 months	
• Lenses for frames or one order of contact lenses	once every 12 months	
• Frames	once every 24 months	

**ADDITIONAL IN-NETWORK SAVINGS AND DISCOUNTS**

**40%**

OFF A COMPLETE SECOND PAIR OF GLASSES

**20%**

OFF NON-PRESCRIPTION SUNGLASSES

**15%**

OFF RETAIL PRICE OR 5% OFF PROMOTIONAL PRICE FOR LASER VISION CORRECTION THROUGH U.S. LASER NETWORK

Blue 20/20 is administered by EyeMed Vision Care®, an independent company.



For costs and further details of the coverage, including exclusions, please refer to your member booklet.  
1. Your actual expenses for covered services may exceed the stated out-of-network amount.  
2. Indicates a service that is a discounted arrangement as part of your vision plan.  
3. Consult with your eye care provider.  
4. Discount applies to materials only and not fittings for contact lenses.

Blue Cross Blue Shield of Massachusetts is an independent licensee of the Blue Cross and Blue Shield Association.



## Flexible Spending Accounts (FSA)

### Healthcare FSA

Use pre-tax savings to pay for or reimburse you for qualified out-of-pocket expenses for yourself and your dependents.

- Receive reimbursements for medical care (such as copayments, deductibles, glasses, and laser vision correction), dental expenses (such as orthodontics and expenses over plan allowances), and even over-the-counter products that are health-related (aspirin, sunscreen, lip balm, first aid products, etc.).
- Annual minimum contribution is \$200, and annual IRS maximum is \$3,300.
- The plan Year is January 1, 2025 to December 31, 2025. You must incur all claims by March 15, 2026, and submit claims for the 2025 plan year no later than March 31, 2026.
- Any balance remaining in your Healthcare FSA at the end of any Plan Year, up to a maximum \$660, will be carried forward and used to fund such benefits in any subsequent Plan Year. This carryover amount will not affect your ability to contribute the maximum amount in the subsequent Plan Year.
- Any remaining balance over \$660 will be forfeited.

### Limited Purpose Healthcare FSA

- This plan is available for those enrolled in the PPO Saver 3000 only.
- The plan works just like the Healthcare FSA, however, can only be used for Dental and Vision Expenses.
- If you choose to enroll in the PPO Saver 3000 and contribute to a Health Savings Account (HSA), you must spend down any remaining funds in a Healthcare FSA for Plan Year 2024 prior to January 1, 2025.

### Dependent Care FSA

Use pre-tax savings for reimbursement of qualified dependent daycare expenses for children up to age 13 incurred while you are working at Endicott.

- The annual minimum contribution is \$200, and annual IRS maximum is \$5,000.
- Plan Year is January 1, 2025–December 31, 2025. You must incur all claims by December 31, and submit claims for the 2025 plan year no later than March 31, 2026.

## Protection for the unexpected, that's the benefit of the Aflac Group Accident Plan.

After an accident, you may have expenses you've never thought about. Can your finances handle them? It's reassuring to know that an accident insurance plan can be there for you in your time of need to help cover expenses such as:

- Ambulance rides
- Emergency room visits
- Surgery and anesthesia
- Prescriptions
- Major Diagnostic Testing
- Burns

### Plan features

- Benefits are paid directly to you, unless otherwise assigned.
- Coverage is guaranteed-issue (which means you may qualify for coverage without having to answer health questions).
- Benefits are paid regardless of any other medical insurance.

### Accident (biweekly rates)

Individual	\$6.55
Employee & Spouse	\$10.71
Employee & Child	\$12.62
Family	\$12.62

## The Aflac Group Critical Illness plan benefits include:

### Critical Illness Benefit payable for:

- Cancer
- Heart Attack (Myocardial Infarction)
- Stroke
- Kidney Failure (End-Stage Renal Failure)
- Major Organ Transplant
- Bone Marrow Transplant (Stem Cell Transplant)
- Sudden Cardiac Arrest
- Coronary Artery Bypass Surgery
- Non-Invasive Cancer

### Features:

- Benefits are paid directly to you, unless otherwise assigned.
- Coverage is available for you, your spouse, and dependent children.
- Coverage may be continued (with certain stipulations).
- That means you can take it with you if you change jobs or retire.

### Critical Illness (biweekly rates)

#### Employee

	\$10,000	\$20,000
18-25	\$1.42	\$2.84
26-30	\$2.06	\$4.12
31-35	\$2.79	\$5.57
36-40	\$3.77	\$7.53
41-45	\$5.05	\$10.11
46-50	\$6.80	\$13.59
51-55	\$10.76	\$21.52
56-60	\$13.10	\$26.21
61-65	\$21.48	\$42.96
66+	\$34.49	\$68.98

#### Spouse

	\$10,000	\$20,000
18-25	\$1.42	\$2.84
26-30	\$2.06	\$4.12
31-35	\$2.79	\$5.57
36-40	\$3.77	\$7.53
41-45	\$5.05	\$10.11
46-50	\$6.80	\$13.59
51-55	\$10.76	\$21.52
56-60	\$13.10	\$26.21
61-65	\$21.48	\$42.96
66+	\$34.49	\$68.98

## Tuition Remission

Endicott College offers tuition benefits to its full-time employees and their immediate family members. Graduate programs, on-line courses and programs, institutes and certificate programs are included in tuition remission. Independent studies may be approved for tuition remission at the discretion of the Provost. The benefit covers 100% of the cost of tuition. You are responsible for any fees, including application fees, registration fees, books, materials, and any other course expenses. Please visit [MyEndicott](#) for further details.

## Tuition Exchange

After one year of employment, tuition exchange scholarship allows your dependent child to attend an undergraduate program at a participating college or university at a discounted tuition rate. Please visit [MyEndicott](#) for further details.

## Vacation Time:

Upon hire, all regular benefit eligible positions will begin accruing 3 weeks' vacation per year. After 3 years, the accrual increases to 4 weeks.

Carry-over limits are equivalent to one time the annual accrual, based on the FTE multiplier.

## How vacation and sick hours are calculated:

All positions are based on a full-time equivalency (FTE) multiplier.

Full-time regular positions work 35 standard hours per week.

Police, Public Safety, and Facilities Management work 40 standard hours per week.

3 weeks' vacation \* 35 standard hours per week = 105 hours

3 weeks' vacation \* 40 standard hours per week = 120 hours

Part-time, 20 hour per week exempt worker's entitlement is calculated as:

3 weeks \* 35 hours/week standard \* 0.57 FTE = 60 hours

A 10 month academic year worker's entitlement is calculated as weeks

\* 35 hours/week standard \* 0.83 FTE (10/12 months) = 87.15 hours

All accruals are calculated and accrued each pay period.

Part-time, non-exempt employees working less than 20 hours are not eligible for vacation accrual.



### **The following period activity pay positions do not earn vacation time:**

Adjunct	Hospitality Agent/Servers
Adjunct — Music/Band	Hospitality Bartender
Academic Assistant	Housekeeper
Academic Coach	Private Instructor - Visual & Performing Arts
Administrative Assistant	Shuttle Driver
Athletic Trainer	Student — Graduate Assistant
Athletic Assistant Coaches (seasonal)	Student — Non-Workstudy
Coordinator	Student — Workstudy
Custodian	Tutor
Dispatcher	

## **Sick**

Endicott provides you with sick time. The intent of offering this time is to help employees and their families maintain wellness, not just to take time when sick.

Sick time is available for you to use for occasional personal illness not covered by Paid Medical Leave or Short-Term Disability, or to attend routine medical or dental appointments. You may use up to 40 hours per year of Sick time to care for a family member or to accompany a family member to routine medical or dental appointments.

12 month positions accrue 12 days per year; maximum up to 120 days.

Part-time workers with 20 or more hours scheduled per week will accrue sick time based on the FTE multiplier.

Part-time, non-exempt employees with less than 20 hours scheduled per week will be eligible to accrue Massachusetts Sick Time at a rate of 1 hour for every 30 hours worked.

## **Personal Time**

Personal time is issued on July 1st of each year.

12-month, full-time employees receive three personal days; pro-rated based on start date.  
Full-time Public Safety employees receive five personal days; pro-rated based on start date.

Personal days not used within the fiscal year in which they are given are forfeited.

## **Flexible Time**

The ECFA Agreement states that certain, non-12 month union jobs require a flexible schedule throughout the year. Due to the flexibility needed, an allotment of 33 days of time will be added under Personal Time in Workday, to be used when taking flex time off.



# Insurance Coverage

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## Basic Life Insurance

Basic life insurance provides a cash benefit to your beneficiary/beneficiaries in the event of your death while employed by Endicott College.

- Endicott provides this benefit at no cost to you.
- Basic life insurance is equal to your annual salary, up to a maximum of \$200,000.
- Benefits are reduced starting at age 65, and by age 70 your basic life insurance is equal to 50% of your salary up to a maximum of \$100,000.
- Premiums the College pays on coverage over \$50,000 of insurance is taxable income and appears on your pay slip as Group Term Life.
- Benefits are tax-free to the beneficiary.
- Upon termination of employment, you may continue this policy at your own expense.
- **Be sure to update your beneficiary/beneficiaries in Workday.**

## Accidental Death & Dismemberment Insurance

Accidental Death & Dismemberment (AD&D) insurance provides an additional cash benefit to your beneficiary/beneficiaries in the event of your accidental death and to you if you lose a limb or part of a limb, if either occurs while employed by Endicott College.

- Endicott provides this benefit at no cost to you.
- AD&D insurance is equal to your annual salary up to a maximum of \$200,000.
- Benefits are reduced starting at age 65, and by age 70 your basic life insurance is equal to 50% of your salary up to a maximum of \$100,000.



## Supplemental Life & AD&D Insurance

Upon hire, you may **purchase** additional life insurance and AD&D insurance at preferred rates through the convenience of payroll deductions.

- You may elect coverage between one and five times your annual salary, up to \$200,000.
- You are eligible for the guaranteed issue amount up to \$180,000 if enrolled within 30 days of hire. Evidence of Insurability (EOI) is required over \$180,000. During this enrollment period, employees are able to enroll or increase their Supplemental Life insurance coverage up to the \$180,000 guarantee issue amount without medical underwriting (EOI) required, for a January 1, 2025 effective date. Outside of this enrollment period, EOI is required for any new or increased coverage that is elected.
- You need to provide EOI if you wish to increase coverage by more than 1x your salary.
- You may elect coverage for your spouse up to \$50,000.
- Your spouse is eligible for the guaranteed issue amount up to \$30,000 if enrolled within 30 days of hire. Evidence of Insurability (EOI) required over \$30,000. During this enrollment period, employees are able to enroll or increase their spouse's amount of Supplemental Life insurance coverage up to the \$30,000 guarantee issue amount with medical underwriting (EOI) required, for a January 1, 2025 effective date. Outside of this enrollment period, EOI is required for any new or increased coverage that is elected.
- Spouses are eligible for up to 100% of the employee's Supplemental Life amount (subject to the \$50k maximum).
- You may continue this policy at your own expense upon termination of employment.
- **Be sure to update your beneficiary/beneficiaries in Workday.**

## Long-Term Disability Insurance (LTD)

Endicott's integrated disability program provides you with income in the event you become disabled and are unable to work. You are eligible for LTD after a 180-day elimination period. For the first 180 days of your disability, you will receive compensation from a combination of workers' compensation (if applicable), Massachusetts Paid Family & Medical Leave, Short-Term Disability, and PTO. **Benefit maximum increased in 2025 from \$4,000 to \$10,000 per month.**



# Leaves & Absence

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## Protecting Your Income During Parental & Medical Leaves

If you have a serious medical condition, have a baby, or welcome a foster or adopted child into your family, Endicott has programs to protect your income while on leave. Some of these are familiar to you, such as Sick and Short-Term Disability. The College is pleased to also offer Paid Medical Leave (PML) for those who are eligible. This benefit is only available to employees who work in Massachusetts.

**Paid Medical Leave (PML)** is an insurance Endicott has purchased to ensure compliance with the Massachusetts Paid Family & Medical Leave law.

- Endicott now provides you with Paid Medical Leave. You will receive a percentage of your pay, based on a calculation using your actual pay over the last four quarters and the average weekly pay across the Commonwealth of Massachusetts. Endicott continues to provide you with **Short-Term Disability (STD)**. If PML does not provide you with 60% of your base salary, STD will supplement PML to a maximum of \$3500\* per week. **\*Benefit maximum increased from \$2,500 to \$3,500 per week in 2025.**
- You may use PTO to continue pay during the waiting period.
- Both PML and STD are available after a seven (7) day waiting period.

Endicott continues to provide federal Family & Medical Leave Act (FMLA) coverage. FMLA protects your job for up to 12 weeks for your or a family member's serious medical condition. It does not provide any type of salary continuance. In almost all circumstances, the policies described above provide the same or more job protection and also provide some level of income.

Please see the chart on the next page to see how these benefits fit together.

### Weeks of Leave – Birth or Placement of Foster or Adopted Child

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18												
<b>SICK</b>	Paid Medical Leave (birth mother) 5 Weeks																												
	Short-Term Disability 5 Weeks																												
							Paid Bonding Leave (for mother) 12 Weeks																						
	Paid Bonding Leave (non-birth parent) 12 Weeks																												
	FMLA (unpaid job protection) 12 Weeks																												

### Weeks of Leave – Your Own Serious Medical Condition or Family Member

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25											
<b>SICK</b>												Paid Medical Leave up to 20 weeks for self Up to 12 weeks for family member																								
	Employer's Short-Term Disability (for employee) 25 Weeks																																			
	FMLA (unpaid job protection) 12 Weeks																																			

# MetLife Legal Services

## Some features of our service:

- Members can use the online site to get the legal help they want, or get assistance from our Client Service Center.
- Proven process to help employees find a network attorney for covered legal services.
- Award-winning Client Service Center regularly recognized for providing high-quality customer service.
- Our digital capabilities that make it easy for anyone to create wills, living wills, powers of attorney and home probate avoidance documents (transfer on death deed or revocable living trust) online in as little as 15 minutes without having to leave their home.

## Plan Features and Rates

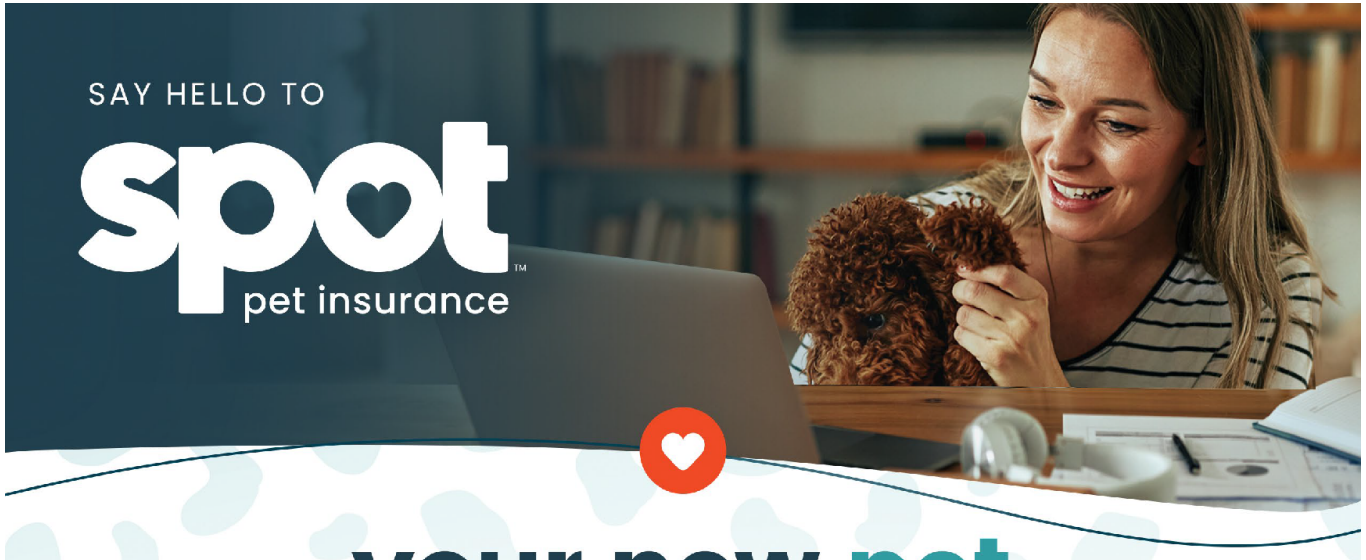
The legal plan provides full coverage of attorney fees for the most common personal legal matters with no additional out-of-pocket cost to employees.<sup>1</sup>

<b>Money Matters</b>	<ul style="list-style-type: none"> <li>• Debt Collection Defense</li> <li>• Identity Restoration<sup>2</sup></li> <li>• Identity Theft Defense</li> </ul>	<ul style="list-style-type: none"> <li>• Negotiations with Creditors</li> <li>• Personal Bankruptcy</li> <li>• Promissory Notes</li> </ul>	<ul style="list-style-type: none"> <li>• Tax Audit Representation</li> <li>• Tax Collection Defense</li> </ul>
<b>Home &amp; Real Estate</b>	<ul style="list-style-type: none"> <li>• Boundary &amp; Title Disputes</li> <li>• Deeds</li> <li>• Eviction Defense</li> <li>• Foreclosure</li> </ul>	<ul style="list-style-type: none"> <li>• Mortgages</li> <li>• Property Tax Assessments</li> <li>• Refinancing &amp; Home Equity Loan</li> <li>• Sale or Purchase of Home</li> </ul>	<ul style="list-style-type: none"> <li>• Security Deposit Assistance</li> <li>• Tenant Negotiations</li> <li>• Zoning Applications</li> </ul>
<b>Estate Planning</b>	<ul style="list-style-type: none"> <li>• Codicils</li> <li>• Complex Wills</li> <li>• Healthcare Proxies</li> <li>• Living Wills</li> </ul>	<ul style="list-style-type: none"> <li>• Powers of Attorney (Healthcare, Financial, Childcare, Immigration)</li> </ul>	<ul style="list-style-type: none"> <li>• Revocable &amp; Irrevocable Trusts</li> <li>• Simple Wills</li> </ul>
<b>Family &amp; Personal</b>	<ul style="list-style-type: none"> <li>• Adoption</li> <li>• Affidavits</li> <li>• Conservatorship</li> <li>• Demand Letters</li> <li>• Garnishment Defense</li> <li>• Guardianship</li> </ul>	<ul style="list-style-type: none"> <li>• Immigration Assistance</li> <li>• Juvenile Court Defense, Including Criminal Matters</li> <li>• Name Change</li> <li>• Parental Responsibility Matters</li> <li>• Personal Property Issues</li> </ul>	<ul style="list-style-type: none"> <li>• Prenuptial Agreement</li> <li>• Protection from Domestic Violence</li> <li>• Review of ANY Personal Legal Document</li> <li>• School Hearings</li> </ul>
<b>Civil Lawsuits</b>	<ul style="list-style-type: none"> <li>• Administrative Hearings</li> <li>• Civil Litigation Defense</li> </ul>	<ul style="list-style-type: none"> <li>• Disputes Over Consumer Goods &amp; Services</li> <li>• Incompetency Defense</li> </ul>	<ul style="list-style-type: none"> <li>• Pet Liabilities</li> <li>• Small Claims Assistance</li> </ul>
<b>Elder-care Issues</b>	Consultation & Document Review for Issues Related to Your Parents: <ul style="list-style-type: none"> <li>• Deeds</li> <li>• Leases</li> </ul>	<ul style="list-style-type: none"> <li>• Medicaid</li> <li>• Medicare</li> <li>• Notes</li> <li>• Nursing Home Agreements</li> </ul>	<ul style="list-style-type: none"> <li>• Powers of Attorney</li> <li>• Prescription Plans</li> <li>• Wills</li> </ul>
<b>Traffic &amp; Other Matters</b>	<ul style="list-style-type: none"> <li>• Defense of Traffic Tickets<sup>3</sup></li> <li>• Driving Privileges Restoration</li> </ul>	<ul style="list-style-type: none"> <li>• Habeas Corpus</li> </ul>	<ul style="list-style-type: none"> <li>• Repossession</li> </ul>
<b>Employee Paid Rate<sup>4</sup></b>	<b>\$18.00 per employee per month (Covers spouse and dependents)</b>		

<b>Additional features:</b>	<b>Telephone advice, office consultations, demand letters and document review</b> on an unlimited number of personal legal matters.
	For non-covered matters that are not otherwise excluded employees get <b>four additional hours</b> of network attorney time and services per plan year. <sup>5</sup>
	<b>Reduced fees</b> for personal injury, probate and estate administration matters, provided by network attorneys.
<b>As a part of our standard plan, we also offer:</b>	Access to a <b>digital estate planning solution</b> for wills, living wills, power of attorney and living trusts.
	<b>Reporting:</b> Usage reports, analysis and evaluation of the reports.

# Spot Pet Insurance

- Receive 20% discount off of pet insurance with Endicott College's exclusive code.






## your new pet insurance benefit

**Save on Vet Bills with America's Favorite Pet Insurance**

Cap off your benefits with pet insurance from Spot and get reimbursed on eligible vet bills for accidents, illnesses, and more.

- ✓ Up to 90% Cash Back
- ✓ Preventative Care Add-Ons
- ✓ 24/7 Pet Telehealth Line

### How Spot Pet Insurance Works

-  Visit any licensed vet or specialist.
-  Submit your claim online.
-  Get reimbursed fast & easily.

**Special Offer Just for You: Up to 20% Off**



Save With Your Discount! <https://spotpet.link/enticott>

When Calling, Use Priority Code: EB\_ENDICOTT | 800.905.1595

\*10% employee discount. 10% multi-pet discount for additional pets added. Limitations apply. For terms and conditions, visit [spotpetins.com/sample-policy](https://spotpetins.com/sample-policy). Insurance plans are underwritten by United States Fire Insurance Company, produced by Spot Insurance Services, LLC. EB.D.23

# Benefits to Enhance Quality of Life

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## A Healthy Me Rewards

- Blue Cross Blue Shield members can earn up to \$400 a year, just for making healthy choices. Visit [ahealthymerewards.com](http://ahealthymerewards.com).

## Weight Loss Reimbursement Program

- Blue Cross Blue Shield members can receive up to \$150 yearly reimbursement for hospital, non-hospital and Weight Watchers weight-loss programs.

## Fitness Reimbursement

- Blue Cross Blue Shield members can earn up to \$150 yearly reimbursement for full-service health club, studio or home fitness equipment.

For all these benefits and more, visit the Human Resources page under [MyEndicott](#).

# Provider Contact Information

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For detailed benefit information, visit the websites of our providers.

## **Blue Cross Blue Shield**

[bcbsma.com](http://bcbsma.com) | 800-262-2583

## **HealthEquity**

Health Savings Account

[bluecrossma.com/myblue](http://bluecrossma.com/myblue) or [myhealthequity.com](http://myhealthequity.com) | 866-346-5800

## **BCBS Dental**

[bcbsma.com](http://bcbsma.com) | 800-262-2583

## **WEX**

Flexible Spending Accounts & Health Reimbursement Accounts

[discoverybenefits.com](http://discoverybenefits.com) | 866-451-3399

## **Unum**

[unum.com](http://unum.com) | 866-679-3054

## **Blue 20/20 Vision**

[bluecrossma.com](http://bluecrossma.com) | 800-262-2583

## **TIAA**

Retirement Account

[tiaa.org](http://tiaa.org) | 800-842-2252

## **MetLife Legal Services**

Legal Plans | Customer Service Number | 800-821-6400

[members.legalplans.com](http://members.legalplans.com)

## **Spot Pet Insurance**

[spotpet.link/indicott](http://spotpet.link/indicott) | 800-905-1595 (priority code EB\_ENDICOTT)



**Employee Benefits  
Enrollment Guide  
2025**

