

# PACIFIC UNION COLLEGE SALARIED EMPLOYEE BENEFITS 2010 – 2011

Benefits are based upon a budgeted position time. Overtime is excluded in the benefits calculation.

|   | <u>&lt; than 20 hrs</u>           | <u>20-37.5 hrs</u> | <u>&gt; than 37.5 hrs</u> |
|---|-----------------------------------|--------------------|---------------------------|
| <b>TAXES AND RETIREMENT</b>   |                                   |                    |                           |
| <b>Retirement Pension Funding (employer)</b><br><i>Defined Contribution Plan.<br/>Employer Match 2.10%<br/>when employee contributes 3.0%. Maximum employee contribution is 25%.</i>  | <b>Self Contribution<br/>Only</b> | <b>Pro rata*</b>   | <b>100%</b>               |
| Representative: Chris Knef <a href="mailto:chris_knef@aigvalic.com">chris_knef@aigvalic.com</a> (707) 483-1325 or Client Care Center (800)-448-2542<br>North American Division (NAD) Plan. <a href="http://www.agrsretirenet.com">www.agrsretirenet.com</a> (Social Security Number, plus PIN required) Select "About My Account" |                                   |                    |                           |
| <b>Social Security (FICA)</b><br><i>7.65% of gross wages (employer's portion).</i>  | <b>Yes</b>                        | <b>Yes</b>         | <b>Yes</b>                |
| <b>Unemployment, State Disability, and State Family Leave Program.</b><br><i>Self-Insured program, not an insurance plan.<br/>SDI/PFLP - employee funded.</i>   | <b>Pro rata</b>                   | <b>Pro rata</b>    | <b>Pro rata</b>           |
| <b>Tax Deferred Account (TDA)</b><br><i>Up to 25% of gross earnings.</i>  | <b>Yes</b>                        | <b>Yes</b>         | <b>Yes</b>                |

## HEALTH CARE

**Health Care Assistance Plan**, *Self-Insured Program, not an insurance plan*

\*St Helena Hospital EPO/ PPO,

**EXCLUSIVE ST HELENA HOSPITAL OR ST HELENA CLEARLAKE HOSPITAL SERVICES**

**\*Accessing the Blue Cross Prudent Buyer Plan**

**Medical** – Deductible: \$700 family, \$350 individual

**No\***

**No\***

**Yes**

**60-day waiting period**

A monthly health care cost contribution will be payroll deducted for employee (\$50), employee/spouse (\$80),

or employee/family (\$110), from all Delta Health Systems plan participants.

Out-of-pocket maximum: \$3,000 individual / \$6,000 family.

Office visits: \$25 copay for a general physician and \$40 copay for a Specialist, then plan pays 100%.

Outpatient and inpatient paid at 80% within Blue Cross Network; out of network paid at 50%.

**Rx – HealthTrans** - \$10 generic, \$30 brand, \$45 non-formulary, \$75 special meds

HealthTrans - prescription drugs by mail - \$15 generic, \$40 brand, \$50 non-formulary, \$50 special meds for a 90-day supply,

**Mental Health** Program

**Vision** - \$560 max payable paid at 80% of billed rate or the contract rate if the provider is a Blue Cross participant.

**Dental** - prophylaxis cleaning two times a year at 100%.

Deductible: \$150 family, \$75 individual.

80% most services (\$2,500 single, \$5,520 max family payable annual, which includes the cost of prophylaxis cleaning), 50% orthodontia (\$2,300 max lifetime payable benefit) to age 24 only.

60-day waiting period (hourly only).

Total lifetime assistance per person - \$5,000,000.

Dependents covered if employee's spouse earns less than **No\***

**No\***

**Buy-in**

spousal earnings limit; otherwise buy-in is available based on spouse earnings (2010-2011 limit - \$50,000); buy-in rates per unit (spouse or dependent) per month of \$300

(maximum 3 buy-in units per covered employee family).

Medical Catastrophic Coverage is available.

## PUC Salaried Employee Benefits 2010-2011

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Third Party Administrator - Delta Health Systems

[www.deltahealthsystems.com](http://www.deltahealthsystems.com)

Customer Service 800-556-5918

*HealthTrans* Customer Service 1-877-289-0616

*Thru 06/30/2011*

# PUC Salaried Employee Benefits 2010-2011

|  | <u>&lt; than 20 hrs</u>      | <u>20-37.5 hrs</u>            | <u>&gt; than 37.5 hrs</u>                               |               |                |        |       |        |                |        |       |        |                   |        |       |        |           |                 |            |
|--|------------------------------|-------------------------------|---|---------------|----------------|--------|-------|--------|----------------|--------|-------|--------|-------------------|--------|-------|--------|-----------|-----------------|------------|
| <p><b>Wellness Program</b><br/> <i>Yearly health screen testing. Employees who participate in the College's Health and Wellness Program, or a wellness program approved by human resources, will be rebated an amount equivalent to 50% of the contribution. The rebate will be made once every six months.</i><br/> <a href="http://www.puc.edu/Departments/Human_Resources/wellness.shtml">http://www.puc.edu/Departments/Human_Resources/wellness.shtml</a></p>   | <b>Yes</b>                   | <b>Yes</b>                    | <b>Yes</b>  |               |                |        |       |        |                |        |       |        |                   |        |       |        |           |                 |            |
| <p><b>Health Services</b><br/> <i>Utilize this department service for small medical needs.<br/>                     (Health Services asks that if you need medical care after hours, call Dr. Wheeler's exchange at (707) 963-3658.<br/>                     You will be asked about your symptoms, and then be connected directly.<br/>                     Dr. Wheeler will want to speak with the person needing care.)</i></p>   | <b>Yes</b>                   | <b>Yes</b>                    | <b>Yes</b>  |               |                |        |       |        |                |        |       |        |                   |        |       |        |           |                 |            |
| <p><b>Flexible Spending Account</b><br/> <i>Tax-free contribution up to \$6,000 for unreimbursed medical and \$5,000 for child care expenses.</i><br/> <b>aflac.com</b> (forms) Representative:<br/>                     Tim Ranuio <a href="mailto:timothy_ranuio@us.aflac.com">timothy_ranuio@us.aflac.com</a> 707-258-2602 or cell 650-291-1813<br/>                     Fax claims toll free 1-877-353-9256</p>  |                              |                               |   |               |                |        |       |        |                |        |       |        |                   |        |       |        |           |                 |            |
| <p><b>Employer Basic Survivor Benefit Plan</b><br/> <i>Term life insurance benefit for employee, spouse, and dependents. Payout of \$100,000 for employee, \$50,000 for spouse, \$10,000 for dependent child, \$750 for stillborn child. Optional buy-in plan for additional coverage available (UNUM). Based on IRS rules, the first \$50,000 of an employer provided life Insurance benefit is non-taxable. Any amount over \$50,000 for an employee, over \$2,000 for a spouse, or over \$2,000 for a child is considered taxable income, also called "imputed income." If coverage exceeds \$2,000 for a spouse or child, then the entire amount, either \$50,000 or \$10,000, is considered imputed income. Imputed income, premium rate, does not increase your take-home pay, but is added to your total income to be taxed. Additional information and waiver forms are available in HR.</i></p> | <b>No*</b>                   | <b>No*</b><br><br>Beneficiary | <b>Yes</b><br><br>(Enrollment for Designation required) |               |                |        |       |        |                |        |       |        |                   |        |       |        |           |                 |            |
| <p><b>Workers' Compensation</b><br/> <i>Self-Insured program, not an insurance plan.</i></p>   | <b>Yes</b>                   | <b>Yes</b>                    | <b>Yes</b>  |               |                |        |       |        |                |        |       |        |                   |        |       |        |           |                 |            |
| <b>VACATION AND SICK LEAVE</b> <i>Leave without pay must be approved by Human Resources.</i>   |                              |                               |   |               |                |        |       |        |                |        |       |        |                   |        |       |        |           |                 |            |
| <p><b>Holidays</b><br/> <i>Nine days per year - New Year's, Martin Luther King, President's, Memorial, Independence, Labor, Thanksgiving, Christmas, personal (birthday, etc.).</i></p>  | <b>No</b>                    | <b>Pro rata</b>               | <b>Yes</b>  |               |                |        |       |        |                |        |       |        |                   |        |       |        |           |                 |            |
| <p><b>Paid Leave</b>     <i>Leave without pay must be approved by Human Resources.</i></p> <table border="0" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Service Years</th> <th style="width: 25%;">Accrual Amount<br/>(biweekly)</th> <th style="width: 25%;">Per Year Accrual</th> <th style="width: 25%;">Accrual Limit</th> </tr> </thead> <tbody> <tr> <td>1 to 4.9 years</td> <td>3.0800</td> <td>40.00</td> <td>120.00</td> </tr> <tr> <td>5 to 9.9 years</td> <td>4.6200</td> <td>60.00</td> <td>180.00</td> </tr> <tr> <td>10 years and over</td> <td>6.1500</td> <td>80.00</td> <td>240.00</td> </tr> </tbody> </table>  | Service Years                | Accrual Amount<br>(biweekly)  | Per Year Accrual  | Accrual Limit | 1 to 4.9 years | 3.0800 | 40.00 | 120.00 | 5 to 9.9 years | 4.6200 | 60.00 | 180.00 | 10 years and over | 6.1500 | 80.00 | 240.00 | <b>No</b> | <b>Pro rata</b> | <b>Yes</b> |
| Service Years  | Accrual Amount<br>(biweekly) | Per Year Accrual              | Accrual Limit   |               |                |        |       |        |                |        |       |        |                   |        |       |        |           |                 |            |
| 1 to 4.9 years   | 3.0800                       | 40.00                         | 120.00  |               |                |        |       |        |                |        |       |        |                   |        |       |        |           |                 |            |
| 5 to 9.9 years   | 4.6200                       | 60.00                         | 180.00  |               |                |        |       |        |                |        |       |        |                   |        |       |        |           |                 |            |
| 10 years and over  | 6.1500                       | 80.00                         | 240.00  |               |                |        |       |        |                |        |       |        |                   |        |       |        |           |                 |            |
| <p><b>Regular Sick Leave</b><br/> <i>Accumulates at .0386 per hour worked. Maximum accrual 80 hrs.<br/>                     Accumulated Leave cannot be cashed out.</i></p>  | <b>No</b>                    | <b>Pro rata</b>               | <b>Yes</b>  |               |                |        |       |        |                |        |       |        |                   |        |       |        |           |                 |            |
| <p><b>Extended Sick Leave (must be approved and entered by HR)</b><br/> <i>Available after 3 days of illness under doctor's care or for family member illness.</i></p>   | <b>No</b>                    | <b>Pro rata</b>               | <b>Yes</b>  |               |                |        |       |        |                |        |       |        |                   |        |       |        |           |                 |            |

## PUC Salaried Employee Benefits 2010-2011

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*Separate accumulation rates from Paid Leave.  
.019231/hour worked; 40 hrs max annually.  
The accumulated leave cannot be cashed out.*

## PUC Salaried Employee Benefits 2010-2011

|  | <u>&lt; than 20 hrs</u> | <u>20-37.5 hrs</u>             | <u>&gt; than 37.5 hrs</u>      |
|--|-------------------------|--------------------------------|--------------------------------|
| <b>Disability (Non-work related)</b><br><i>Coordinated with State Disability Insurance (SDI) and Paid Family Leave (6 weeks in 12-month period) at 55% of lost wages. SDI provides 50% of monthly earnings during first 180 days. Long-Term Disability pays 66% after first 180 days. Benefits up to age 65. Taxable benefit. (UNUM Insurance)</i>   | <b>No</b>               | <b>Yes</b>                     | <b>Yes</b>                     |
| <b>Family Medical Leave Act and CA Paid Family Leave</b><br><i>Up to 12 weeks of unpaid leave for personal or family medical need.</i>   | <b>Yes</b>              | <b>Yes</b>                     | <b>Yes</b>                     |
| <b>Funeral Time Allowance</b><br><i>Up to 24 work hours (3 days) for immediate family.</i>   | <b>Pro rata</b>         | <b>Pro rata</b>                | <b>Yes</b>                     |
| <b>Jury Duty Service</b><br><i>Up to 2 weeks (76 hrs) allowed per fiscal year.</i>   | <b>Pro rata</b>         | <b>Pro rata</b>                | <b>Yes</b>                     |
| <b><u>EDUCATION ASSISTANCE</u></b>   |                         |                                |                                |
| <b>Tuition Assistance for Dependent Children</b><br><i>10% of tuition for preschools<br/>                     35% of tuition for day schools<br/>                     70% of tuition for boarding schools &amp; PUC dorm or village student ~<br/>                     60% of tuition for denominational college if course of study is offered at PUC ~</i>  | <b>No*</b>              | <b>No*</b>                     | <b>Yes</b>                     |
| <b>Free Tuition Hours</b><br><i>Spouse may take the remaining hours, not to exceed 6 hours per quarter for employee and spouse. Non-cumulative benefit.</i>  | <b>No</b>               | <b>one class up to 4 hours</b> | <b>one class up to 4 hours</b> |
| <b><u>HOUSING AND MOVING</u></b>   |                         |                                |                                |
| <b>Housing Assistance</b><br><i>Subsidy paid per month. Amount determined annually. 2010-2011 assistance (effective July 1.2010) above \$1,020 to maximum benefit of \$280 per month.</i>  | <b>No</b>               | <b>No</b>                      | <b>Yes</b>                     |
| <b>Moving Assistance</b><br><i>Freight, travel, allowance, duplicate housing expense. Amortized over a 4-year period.</i>  | <b>No</b>               | <b>No</b>                      | <b>Yes</b>                     |
| <b><u>MISCELLANEOUS</u></b>  |                         |                                |                                |
| <b>Auto and Home Insurance</b><br><i>Liberty Mutual offers a unique program to purchase high-quality auto, home and renters insurance at low group rates through the convenience of payroll deductions with no down payment. <a href="mailto:richard.goertzen@libertymutual.com">Quotes - richard.goertzen@libertymutual.com</a><br/> <b>Information</b> - <a href="http://www.libertymutual.com/personal/libertyrep/ca/santarosa.html">http://www.libertymutual.com/personal/libertyrep/ca/santarosa.html</a></i> | <b>Yes</b>              | <b>Yes</b>                     | <b>Yes</b>                     |
| <b>Automobile Insurance Deductible Reimbursement</b><br><i>Up to \$150 for first accident, \$125 for second accident during each fiscal year.</i>  | <b>No</b>               | <b>No</b>                      | <b>Yes</b>                     |
| <b>Christmas Bonus</b>   | <b>Pro rata</b>         | <b>Pro rata</b>                | <b>Yes</b>                     |
| <b>Direct Deposit</b>  | <b>Yes</b>              | <b>Yes</b>                     | <b>Yes</b>                     |

## PUC Salaried Employee Benefits 2010-2011

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*Automatic deposit of payroll check to ACH financial institution.*

**Financial Planning Services**

**Yes**

**Yes**

**Yes**

## PUC Salaried Employee Benefits 2010-2011

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|  |                 |                 |                 |
|--|-----------------|-----------------|-----------------|
| <b>Fine Arts &amp; Adventure Series</b><br><i>Music, Variety &amp; Film Programs.</i>  | <b>Yes</b>      | <b>Yes</b>      | <b>Yes</b>      |
| <b>Firewood (Land Management Dept.)</b><br><i>50% off cut-your-own fee. 15% off pre-cut firewood.</i>  | <b>Yes</b>      | <b>Yes</b>      | <b>Yes</b>      |
| <b>ID card/Purchase Reimbursement</b><br><i>5% discount at PUC/HME businesses.</i>   | <b>No</b>       | <b>Yes+</b>     | <b>Yes</b>      |
| <b>Optional Insurance Programs for purchase</b><br><i>AFLAC Accidental Death &amp; Dismemberment, Intensive Care, &amp; Cancer.<br/>Long-Term Disability supplement to 66%% of monthly earnings<br/>available for all employees.<br/>Also, NAD (UNUM) Long-Term Care Program, AD&amp;D &amp; Term Life Insurance.<br/>AFLAC contact: Tim Ranuio Office: (707) 258-2602; Cell: (650) 291-1813</i> | <b>No</b>       | <b>Yes</b>      | <b>Yes</b>      |
| <b>Pre-paid Legal</b><br><i>Purchase available thru payroll.<br/><b>Northern California Rep</b> – Randy Parker 800-872-6992 <a href="mailto:randyparker@prepaidlegal.com">randyparker@prepaidlegal.com</a></i>   | <b>Yes</b>      | <b>Yes</b>      | <b>Yes</b>      |
| <b>Transfer &amp; Retirement Gifts</b><br><i>Cash gift at farewell or retirement. Taxable.</i>   | <b>Pro rata</b> | <b>Pro rata</b> | <b>Pro rata</b> |
| <b>Travel Allowance for Spouse</b><br><i>Only major department heads paid at 152% of above.<br/>Travel allowed once every 5 years of service.<br/>Taxable benefit.</i>   | <b>No</b>       | <b>No</b>       | <b>Yes</b>      |

\* NAD Policy / ^ Does not count for service credit / + One overdraw and employee may lose the privilege / ~ If qualified; see Human Resources.