



2024

BENEFITS GUIDE for Residents and Fellows

THE WRIGHT
CENTER
— for —
COMMUNITY
HEALTH

THE WRIGHT
CENTER
— for —
GRADUATE MEDICAL
EDUCATION

BENEFITS ENROLLMENT!

The Wright Center appreciates your commitment to our success. We're equally committed to providing you with competitive, affordable health and wellness benefits to help you take care of yourself and your family.

Please read this guide carefully. It has a summary of your plan options and helpful tips for getting the most value from your benefit plans. We understand that you may have questions about annual enrollment, and we'll do our best to help you understand your options and guide you through the process.

This guide is not your only resource, of course. Anytime you have questions about benefits or the enrollment process, you can contact your human resources representative. Although this guide contains an overview of benefits, for complete information about the plans available to you, please see the summary plan description (SPD).

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IMPORTANT: You will still have coverage and will be mapped to your new plan based on your Visa status.

A few notes about enrolling in benefits

Here are some examples of qualifying life events:

- Birth, legal adoption or placement for adoption.
- Marriage, divorce or legal separation.
- Dependent child reaches age 26.
- Spouse or dependent loses or gains coverage elsewhere.
- Death of your spouse or dependent child.
- Spouse or dependent becomes eligible or ineligible for Medicare/Medicaid or the state children's health insurance program.
- Change in residence that changes coverage eligibility.
- Court-ordered change.

The IRS requires that you make changes to your coverage within 30 days of your qualifying life event. You'll need to provide proof of the event, such as a marriage certificate, divorce decree, birth certificate or loss-of-coverage letter.

Please remember to add your Social Security number and the Social Security numbers of your dependents during enrollment.

Qualifying life events:

It is your responsibility to notify human resources within 30 days of the qualifying life event. Failure to do so may result in an inability to change your benefit election(s).



Eligibility

Eligible employees

If you're enrolling as a new employee, you are eligible for medical, dental and vision benefits on your date of hire.

Dependent eligibility

As you become eligible for benefits, so do your eligible dependents. In general, eligible dependents include:

- Your spouse, who is not eligible for coverage under their employer's health plan. This includes your legal spouse or domestic partner.
- Your children up to the age of 26. This includes your natural children and those of your spouse, adopted children, stepchildren, foster children, or children obtained through court-appointed legal guardianship. If your child is mentally or physically disabled, coverage may continue beyond age 26 once proof of the ongoing disability is provided to and approved by HR. Additionally, children who have been named in a QMSCO are covered by our plan.

How to Enroll

1. Access the BSwift Module.
2. Select **Start Your Enrollment**.
3. Review **Employee Demographic Information**:
 - Make any necessary updates in the **Self-Service Portal**. Those updates will reflect in Benefits Enterprise within 24 hours.
 - Select **I agree** at the bottom of the page.
 - Select **Continue** in the right sidebar menu.
4. Review **Family Information**:
 - Select **Edit** to change an existing dependent's demographic information.
 - Select **Add Dependents** to enter a new dependent.
 - Select **I agree** at the bottom of the page.
 - Select **Continue** in the right sidebar menu.
5. Enter Benefit Elections:
 - Complete the following steps for Medical, Dental, and Vision Plans:
 1. Select **View Plan Options**.
 2. Select which **Dependents** to cover.
 3. Select **Continue**.
 4. Select **View plan details** to review any applicable plan information.
 5. Select the appropriate **Plan** or **Waive** option.
6. Select **Continue** in the right sidebar menu after making all selections.
7. Enter any necessary **Beneficiary** Information.
8. Select **Continue**.
9. Review all selections.
10. Select **Edit Selection** to make changes to any elections.
11. Select **I agree, and I'm finished with my enrollment** and Complete Enrollment to submit the enrollment.
12. Select **View** to view a Confirmation Statement outlining the benefits elected.
13. Select **Email** to receive an email containing a Confirmation Statement outlining the benefits elected.
14. Select **Print** to print out a Confirmation Statement outlining the benefits elected.

QUESTIONS ABOUT ENROLLING?

Please contact the HR department at email: HR@thewrightcenter.org

Basic insurance terms

COINSURANCE: Coinsurance is your share of the costs of a covered healthcare service, calculated as a percent (for example, 20%) of the allowed amount for the service. Your coinsurance will begin after you have met your deductible. For example, if the health plan's allowed amount for an office visit is \$100 and you've met your deductible, your coinsurance payment of 20% would be \$20. The health plan pays the rest of the allowed amount.

COPAY: A copay is a fixed dollar amount you pay for a healthcare service. The amount can vary by the type of service. Your copays will not count toward your deductible but will count toward your out-of-pocket maximum.

DEDUCTIBLE: The deductible is the amount you owe for covered healthcare services before your plan begins to pay benefits. For example, if your deductible is \$2,800, your plan won't pay anything until you've met your \$2,800 deductible for covered healthcare services subject to the deductible. Preventive care is not subject to the deductible as it is covered 100% by any medical plan option.

EMBEDDED DEDUCTIBLE: If you are on a family medical plan with an embedded deductible, your plan contains two components: an individual deductible and a family deductible. Having two components to the deductible allows each member of your family to have your insurance policy cover their medical bills prior to the entire dollar amount of the family deductible being met. The individual deductible is embedded in the family deductible.

EXPLANATION OF BENEFITS (EOB): An EOB is a statement from the insurance company showing how claims were processed. The EOB tells you what portion of the claim was paid to the healthcare provider and what portion of the payment, if any, you are responsible for.

INDIVIDUAL MANDATE: A few states mandate that their citizens must have health insurance for themselves and their dependents. The Wright Center helps you stay insured by offering affordable healthcare for all employees who work at least 30 hours each week. Coverage is effective on your date of hire and allows you to cover your spouse and children.

IN-NETWORK VS. OUT-OF-NETWORK: A network is composed of all contracted providers. Networks request providers to participate in their network, and in return, providers agree to offer discounted services to their patients. If you pick an out-of-network provider, your claims will be higher because you will not receive the discounts the in-network providers offer.

OUT-OF-POCKET MAXIMUM: The out-of-pocket maximum is designed to protect you in the event of a catastrophic illness or injury. Your out-of-pocket maximum includes your deductible, coinsurance and copays that come out of your pocket. After you have paid the specified out-of-pocket amount during a policy year, the plan pays the remaining covered services at 100%.

PREVENTIVE CARE: Routine healthcare services can minimize the risk of certain illnesses or chronic conditions. Examples of preventive care services include but are not limited to physical exams, mammograms, flu vaccines, prostate tests and smoking cessation.

REASONABLE AND CUSTOMARY: The amount of money a health plan determines is the normal or acceptable range of charges for a specific health-related service or medical procedure. If your healthcare provider submits higher charges than what the health plan considers normal or acceptable, you may have to pay the difference.

MEDICAL AND PRESCRIPTION DRUG BENEFITS

The Wright Center is committed to helping you and your dependents maintain health and wellness by providing you with access to the highest levels of care. We offer you two medical plan for 2024:

- PPO 500
- Geo Blue 500 (J-1 Visa holders only)

Medical Plan Waiver Bonus

Employees who waive medical coverage through The Wright Center may be eligible to receive a waiver bonus of up to \$1,200 per year (\$50 per paycheck for 24 payrolls). In order to receive this waiver bonus, you must actively decline a medical plan and provide proof of other coverage.

Medical and prescription drug plan summary

Highmark BCBS

Medical	PPO 500	
	In-network	Out-of-network
Deductible		
Individual	\$500	\$1,500
Family	\$1,000	\$3,000
Coinsurance (You pay after deductible)	20%	40%
Out-of-Pocket Maximum		
Individual	\$9,450	N/A
Family	\$18,900	N/A
Preventive Care	0%	40% after deductible
Primary Care Office Visit	\$30 copay	40% after deductible
Specialist Office Visit	\$50 copay	40% after deductible
Emergency Room (copay waived if admitted)	20% after deductible	
Urgent Care	\$60 copay	40% after deductible
Inpatient Care	20% after deductible	40% after deductible
Diagnostic Services (labs, radiology, imaging)	20% after deductible	40% after deductible
Outpatient Care	20% after deductible	40% after deductible

Highmark BCBS

PPO 500

Pharmacy	In-Network	Out-of-Network
Retail (31-Day Supply)		
Generic	\$20 copay	Not Covered
Preferred Brand	\$40 copay	Not Covered
Non-Preferred Brand	\$60 copay	Not Covered
Specialty*	N/A	Not Covered
Mail Order (90-day Supply)		
Generic	\$40 copay	Not Covered
Preferred Brand	\$80 copay	Not Covered
Non-Preferred Brand	\$120 copay	Not Covered
Specialty*	N/A	Not Covered

*Specialty drugs are limited to 31-day supply

Medical and prescription bimonthly employee payroll contributions (Per 24 pay deductions)

PPO 500

Employee	\$59.92
Two-Person	\$143.80
Employee+Child	\$83.88
Employee+Children	\$119.77
Family	\$175.31

Employees can elect the medical and prescription drug plan without enrolling in the dental or vision plan.

HIGHMARK BLUE CROSS BLUE SHIELD

ADDITIONAL TOOLS

TELEMEDICINE

Face-to-Face with a doctor, 24/7.

Need to see a doctor but can't get to their office? Get a diagnosis, treatment plan, or prescription any time, right from your phone or computer. You can register at amwell.com.

THE HIGHMARK APP

A pocketful of health.

See recent claims activity, access your virtual member ID, find in-network care nearby, and set up fingerprint or facial scan for quick, secure sign-in.

BLUES ON CALLSM

Answers from a health pro, 24/7.

Medical concerns during off hours? Just call the phone number on the back of your ID card or from the Highmark app to get support from a registered nurse or a health coach any time and put your worries to bed. Call: 1-888-BLUE-428 (1-888-258-3428)

ONLINE TOOLS & MEMBER WEBSITE

Your entire plan at your fingertips.

No more searching for old files or waiting on snail mail. Your digital ID card, Find a Doctor tool, deductible progress, and claims status are all available online at highmarkbcbs.com.

CARE COST ESTIMATOR

Know what you'll owe for care.

Before making an appointment for a test, scan, or procedure, use the Care Cost Estimator to help estimate your bill in advance. Available at highmarkbcbs.com.

WELLNESS

Personalized support for health goals.

Looking to lose weight? Quit smoking? Be more active? Get guidance based on your lifestyle, trackers to measure your progress, and resources like Sharecare® to make healthy choices and keep you motivated. Once you're enrolled, visit mycare.sharecare.com.

BLUE365

Discounts to help you stay healthy and active.

From workout gear to gym memberships to healthy meal services, we'll take a little off the top while you're taking a little off your middle. Member-only deals are at blue365deals.com.

Medical and prescription drug plan summary

BCBS Global

Geo Blue 500 (J-1 Visa holders only)

Medical	In-network	Out-of-network
Deductible		
Individual	\$500	\$1,500
Family	\$1,000	\$3,000
Coinsurance (You pay after deductible)	20%	40%
Out-of-Pocket Maximum		
Individual	\$1,000	\$3,000
Family	\$2,000	\$6,000
Preventive Care	0%	40% after deductible
Primary Care Office Visit	\$30 copay	40% after deductible
Specialist Office Visit	\$50 copay	40% after deductible
Emergency Room (copay waived if admitted)	20% after deductible	
Urgent Care	\$50 copay; 100% after deductible	40% after deductible
Inpatient Care	20% after deductible	40% after deductible
Diagnostic Services (labs, radiology, imaging)	20% after deductible	40% after deductible
Outpatient Care	20% after deductible	40% after deductible

BCBS Global

Geo Blue 500 (J-1 Visa holders only)

Pharmacy	In-Network	Out-of-Network
Retail (31-Day Supply)		
Generic	\$20 copay	40% after deductible
Preferred Brand	\$40 copay	40% after deductible
Non-Preferred Brand	\$60 copay	40% after deductible
Specialty*	N/A	N/A
Mail Order (90-day Supply)		
Generic	\$60 copay	Not Covered
Preferred Brand	\$120 copay	Not Covered
Non-Preferred Brand	\$180 copay	Not Covered
Specialty*	N/A	N/A

*Specialty drugs are limited to 31-day supply

Medical and prescription bimonthly employee payroll contributions

(Per 24 pay deductions)

Geo Blue 500 (J-1 Visa holders only)

Employee	\$53.13
Two-Person	\$127.25
Employee+Child	N/A
Employee+Children	\$104.50
Family	\$156.50

Employees can elect the medical and prescription drug plan without enrolling in the dental or vision plan.



BLUECROSS BLUESHIELD GLOBAL

ADDITIONAL TOOLS (J-1 VISA ONLY)

TELEMEDICINE

In addition to a global network of doctors and facilities available through your health plan, we've teamed up with Teladoc Health to bring you Global TeleMD. At no extra cost, this app provides 24/7 access to international doctors by telephone or secure video call. Download the Global TeleMD app and create a profile to get started!

EMPLOYEE WELLNESS RESOURCES

Before any work/life issue becomes a larger problem, we offer a variety of emotional, practical, physical, and clinical support services for you and your dependents, helping make transitions more comfortable and assignments more successful.

WELLNESS COACHING

A wellness coach can help assess current levels of health and wellness, and will work with you to improve it. Trained by the Mayo Clinic, wellness coaches motivate and teach members the information they need to know to reach their wellness goals.

HOW TO FIND A DOCTOR OR HOSPITAL

To find a doctor or facility and compare the cost of specific medical treatments, visit the **Find Doctors and Hospitals Inside the U.S.** section of the **Member Hub** on **geo-blue.com** or in the **GeoBlue app**.

GEOBLUE MOBILE APP

Download the free app and login using your username and password from www.geo-blue.com or register as a new user through the app using information from your ID card.

GLOBAL HEALTH ASSESSMENT

Complete the global health assessment to gain insight on your current health and wellness. Then work to increase your wellness by using one of the online programs focused on fitness, weight, smoking and stress. Visit the Wellness section on www.geo-blue.com.

MATERNITY MANAGEMENT IN THE U.S.

The Baby Beginnings program is a maternity management program specifically designed to help expectant mothers successfully manage their health before, during and after their baby is born.

SUPPLEMENTAL HEALTH

Supplemental health benefits insurance can help protect you from significant or unexpected out-of-pocket expenses. Consider your anticipated medical needs along with the cost of the insurance plans available to you to decide if these benefits may be right for you.

Critical Illness

The Wright Center provides you the option to purchase critical illness insurance through Sun Life. If you develop a critical illness, you want to be able to focus on your health—not your finances. Critical illness insurance pays a lump-sum cash benefit that can help handle expenses if you or a covered family member is diagnosed with a covered condition.

Benefit Amounts

- Employee: \$10,000, \$20,000, \$30,000, \$40,000. Guarantee issue: Up to \$40,000.
- Spouse: \$10,000, \$20,000, \$30,000, \$40,000. Guarantee issue: Up to \$40,000. Cannot exceed 100% of employee amount.
- Dependent children: \$5,000, \$10,000, \$15,000, \$20,000. Guarantee issue: Up to \$20,000. Cannot exceed 50% of employee amount.

Hospital Indemnity

Hospital Indemnity insurance pays a daily benefit if you have a covered stay in a hospital, critical care unit, or rehabilitation facility on or after your coverage effective date. You can use this money for any purpose you like; for example, to help pay for expenses not covered by your medical plan, lost wages, child care, travel, home healthcare costs, or any of your regular household expenses. Hospital Indemnity insurance is a limited benefit policy. This is not health insurance and does not satisfy the requirement of minimum essential coverage under the Affordable Care Act.

Accidental Injury

The Wright Center provides you the option to purchase accidental injury insurance through Sun Life. Accidental injury insurance pays benefits directly to you in the event of a covered accident. How you use the money is up to you. It can help pay out-of-pocket medical cost (coinsurance/deductibles) or expenses that may not be covered by medical insurance, like rehabilitation, transportation, and child care. The plan pays a lump-sum benefit depending on the covered injury/treatment.

The plan provides an annual \$50 wellness benefit. This is beyond what is covered under the medical benefit for preventive care.



SUN LIFE DENTAL PLAN

Sun Life Dental

View covered services, claim status or your account balance; find a dentist; update your information; and much more at sunlife.com/account.

The Wright Center is pleased to continue offering dental coverage at no cost to you with the Basic plan. Should you need additional coverage, you can choose to enroll in the Enhanced plan at an additional cost to you. Although you can choose any dental provider, when you use an in-network dentist, you will generally pay less for treatments because your share of the cost will be based on negotiated discount fees. With out-of-network dentists, the plan will pay the same percentage but the reimbursement will be based on out-of-network rates. You may be billed for the difference.

Dental exams can tell your doctor a lot about your overall health. It's important to schedule regular exams to help detect significant medical conditions before they become serious.

To see a current provider directory, please visit sunlife.com/findadentist.

	Basic Plan		Enhanced Plan	
	In-network	Out-of-network	In-network	Out-of-network
Deductible				
Individual	\$50		\$50	
Family	\$150		\$150	
Annual Maximum	\$1,500		\$2,000	
Preventive Services	100%; deductible waived		100%; deductible waived	
Basic Services	80%		100%	
Major Services	50%		50%	
Orthodontia (dependents to age 26)	50%		50%	
Orthodontia Lifetime Maximum	\$1,000		\$1,000	
Rollover Amount*	N/A		\$600	
Total Rollover Limit*	N/A		\$1,500	

*When you have paid claims less than \$800 on dental services in a year, you can rollover \$600 for the next year. A covered individual can rollover up to \$1,500 total over multiple years. This allows you to increase your annual maximum dollars for future treatments.

Dental bimonthly employee payroll contributions

	Basic Plan	Enhanced Plan
Employee	N/A	\$2.71
Two-Person	N/A	\$5.60

- You can elect the Sun Life dental plan regardless of whether you are enrolled in the medical or vision plan.
- To view your dental ID card, you will need your Social Security number or member ID, and date of birth. Register at sunlife.com/account.

SUN LIFE VISION PLAN

The Wright Center is pleased to offer you the following vision coverage at no cost to you! Sun Life’s vision care benefits access the broad VSP network and include coverage for eye exams, standard lenses, frames, contact lenses and discount for laser surgery. The vision plan is built around a network of eye care providers, with better benefits at a lower cost to you when you use providers who belong to the VSP network. When you use an out-of-network provider, you will have to pay more for vision services.

Eye exams can tell your doctor a lot about your overall health. It’s important to schedule regular exams to help detect significant medical conditions before they become serious.

	In-network	Out-of-network
Frequency	12/12/12/12 months	
Eye Exam (Once every 12 months)	No Charge	\$60 allowance
Lenses (Once every 12 months)		
Single	No Charge	\$30 allowance
Bifocal	No Charge	\$50 allowance
Trifocal	No Charge	\$65 allowance
Frames* (Once every 12 months)	\$130 allowance	\$70 allowance
Contact Lenses (Once every 12 months)		
Medically Necessary	No Charge	\$210 allowance
Elective	\$130 allowance	\$105 allowance

To locate an in-network vision provider, visit vsp.com or call 1-800-877-7195.



- You can elect the Sun Life vision plan regardless of whether you are enrolled in the medical or dental plan.
- To view or print your vision ID card, visit vsp.com and create an account



FLEXIBLE SPENDING ACCOUNT (FSA)

A great way to plan ahead and save money over the course of a year is to participate in an FSA. An FSA lets you redirect a portion of your salary on a pretax basis into a reimbursement account, saving you money on taxes. Each year that you would like to participate in the FSAs, you must elect the amount you want to contribute.

The Wright Center offers two types of FSAs that can help you save on a pretax basis for out-of-pocket expenses.

Flexible Spending Account (FSA)



The healthcare FSA can be used to pay for eligible out-of-pocket medical, dental, vision and prescription drug expenses.

Paylocity's feature allows you to skip the pen and paper. Paylocity automatically passes medical, pharmacy, dental and vision claims to your FSA, thereby eliminating the need for you to submit a manual claim form. You pay your copay or out-of-pocket expense directly to your healthcare provider, who in turn will initiate the claim. Paylocity initiates a direct deposit or sends you a check from your FSA to reimburse you for your eligible out-of-pocket expense. You do not have to complete any paperwork. You will be asked if you want to enroll in the Paylocity feature when enrolling in the healthcare FSA program.

Funds in the healthcare FSA are available at the beginning of the plan year and can be used for your expenses and those of your spouse and dependents, even if you and your family aren't covered by our plan.

If you contribute at least \$100 in your Healthcare FSA, The Wright Center will match your contribution dollar-for-dollar up to \$500 into your account.

Grace period benefit

The maximum contribution in 2024 for the healthcare flexible spending account is \$3,200 per household. This is a use-it-or-lose-it account, meaning any funds remaining in the account following the close of the plan year will be forfeited. Our plan has a 2 1/2 month grace period to allow you additional time to incur claims and use your FSA funds to pay for these expenses. If you wait until the end of the grace period to submit a claim from the prior year, you may find that the claim is not eligible for payment using this year's funds. All services must be incurred from January 1, 2024 through March 15, 2025. Claims must be submitted by March 31, 2025.

Dependent Care Flexible Spending Account (DCFSA)



Dependent care FSAs allow you to set aside money pretax to pay eligible out-of-pocket day care expenses so that you or your spouse can work or attend school full-time. You must contribute money through payroll deduction to your dependent care FSA before you can spend it.

You must decide how much to set aside for this account in 2024. You may contribute up to \$5,000, or up to \$2,500 if you are married and file separate tax returns.

Eligible expenses

- Adult day care
- Child day care
- After-school care
- Babysitting (work-related, in your home or someone else's home)
- Babysitting by your relative who is not a tax dependent (work-related)
- Nanny or au pair
- Custodial elder care
- Transportation to and from eligible care (provided by your care provider)

Ineligible expenses

- Babysitting (not work-related, for other purpose)
- Babysitting by your tax dependent (work-related or for other purpose)
- Custodial elder care (not work-related, for other purpose)
- Dance lessons, piano lessons or sports lessons
- Educational, learning or study skills services for child(ren)
- Household services (housekeeper, maid, cook, etc.)

*Debit card does not apply, one must submit claims via their Paylocity Self Service Portal under Flexible Spending

VOLUNTARY LIFE AND AD&D

You have the opportunity to purchase voluntary life and AD&D insurance for yourself, your spouse and/or your dependent children. Your cost for this coverage is based on the amount you elect and your age. You must purchase voluntary life and AD&D insurance for yourself in order to purchase spouse and/or dependent child(ren) coverage. If you did not enroll in this coverage when you were first eligible, you will be subject to medical underwriting.

Here are some helpful insurance terms:

AGE REDUCTION: The group term basic life and AD&D insurance coverage are subject to a reduction in benefit amount as you age.

PORTABILITY AND CONVERSION: Portability and conversion are available if your employment with The Wright Center ends. Portability allows you to continue your term life coverage, while the conversion option allows you to convert your term life policy into an individual whole life policy.



Coverage Amounts

Voluntary Life	Employee	Spouse	Child
Benefit Amount	\$10,000 Increments	\$10,000 Increments	\$2,500 Increments
Guarantee Issue	\$100,000	\$30,000	\$10,000
Maximum Amount	Lesser of \$500,000 or 5x Base Annual Earnings	\$150,000; up to 100% of employee's coverage amount	\$10,000
Age Benefit Reduction	At age 70: 67% At age 75: 50%	N/A	N/A

Voluntary Life Rates (Monthly)

Employee
(Per \$1,000 of Coverage)Spouse
(Per \$1,000 of Coverage)

Age	Rate	Rate
Under Age 20	\$0.072	\$0.072
20-24	\$0.072	\$0.072
25-29	\$0.087	\$0.087
30-34	\$0.116	\$0.116
35-39	\$0.130	\$0.130
40-44	\$0.145	\$0.145
45-49	\$0.216	\$0.216
50-54	\$0.332	\$0.332
55-59	\$0.620	\$0.620
60-64	\$0.953	\$0.953
65-69	\$1.833	\$1.833
70-74	\$2.973	N/A
75-79	\$4.783	N/A
80-84	\$4.783	N/A
85 and Over	\$4.783	N/A

AD&D Monthly Rates per \$1,000 of Coverage

Employee Voluntary AD&D	\$0.030
Spouse Voluntary AD&D	\$0.030
Child Voluntary AD&D	\$0.030

Example: A 41 year old employee elects \$40,000 of coverage:

(\$40,000	/	\$1,000)	x	\$0.145	=	\$5.80
Elected Benefits Amount				Monthly Rate		Total

SHORT/LONG-TERM DISABILITY PLANS

The Wright Center offers two disability plans by Sun Life to provide financial assistance in case you become disabled or unable to work.

Voluntary Short-Term Disability (STD) plan

STD benefits are designed to replace a portion of your income for a non-work-related short-term injury or illness. STD benefits are paid at 60% of your eligible weekly base pay, up to \$1,000 or \$1,500 weekly depending on your class, during the first 11 weeks of injury or illness. This plan is voluntary therefore if you elect this benefit the bi-weekly cost is based on your age at point of enrollment.

Short-term disability

	Class Two
Weekly Benefit Amount	60%
Weekly Benefit Maximum	\$1,000
Benefits Begin	15th Day
Benefits Duration	Up to 11 Weeks

Short-Term Disability (STD) Biweekly Rates

Age	Biweekly Rate
Under Age 25	\$0.25
25-29	\$0.19
30-34	\$0.19
35-39	\$0.18
40-44	\$0.19
45-49	\$0.25
50-54	\$0.39
55-59	\$0.41
60-64	\$0.53
65-69	\$0.71
70 and Over	\$0.44

Long-Term Disability (LTD) plan

The Wright Center's LTD plan is available to eligible full-time employees upon employment. This benefit offers financial protection to you when you need it most — if you become disabled and can no longer work. The plan will also help you return to work, if appropriate.

If you become totally disabled, you will receive 60% of your base salary, up to \$5,000 after you have satisfied the 90-day waiting period for benefits. Your benefit amount may be offset by other benefits you are receiving, such as Social Security or workers' compensation. Your monthly benefits are subject to federal income tax and may be subject to state and local taxes.

Long-term disability

Monthly Benefit Amount	60%
Monthly Benefit Maximum	\$5,000
Benefits Begin	90 Days
Benefits Duration	Normal Retirement Age



Coordination of disability benefits

Your benefit may be reduced if you receive disability benefits from retirement, Social Security, workers' compensation, state disability insurance, no-fault benefits or return-to-work earnings. Refer to your certificate of coverage for more details.



EMPLOYEE ASSISTANCE PROGRAM (EAP)

The EAP, sponsored by NexGen, provides confidential support and resources for you and your dependents at no charge. You can seek expert guidance for any kind of issue, from everyday matters to more serious problems affecting your well-being. Use **company code, 8920**, to access several benefits and resources. Here are just some of the tools this program offers:

Counseling Services

Our counselors are Mental Health Professionals who provide confidential counseling in-person or over the phone for a variety of stressful issues such as marital, family, substance abuse, depression, stress, grief, health, and more.

Child/Elder Care Resources

We can assist you with finding a pediatrician, babysitter/nanny, camps, sports lessons, music lessons, and college applications and financial aid. Eldercare resources include help with housing options, assisted living facilities, Medicare, doctors, financial planning, and transportation.

Legal and Financial Consultations

Half-hour legal consultations can be done over the phone or inperson, and can be used for issues such as divorce, custody disputes, and wills. Half-hour financial consultations are provided over the phone and can provide assistance with topics such as debt consolidation, tax questions, student loans, and investments. ID Theft resources are also available.

Health Advocacy

Our licensed Care Guides are available to provide benefit information and assistance navigating your health plan. Care Guides provide healthcare claims and appeals management, healthcare billing assistance, prescription information and costs, as well as healthcare provider research.

Exclusive Entertainment Discounts (thru Working Advantage) Company ID: 871915611

Get discounts, up to 60% off, through the Working Advantage discounts program.

Exclusive Discounts Include:

- Entertainment
- Theatre & Events
- Shopping & Gifts
- Earn Rewards

DirectAccess Anonymous Reporting

This free and confidential service allows you to report misconduct, unethical, or illegal behavior without risk or fear of being identified. Call 1-800-327-2255; Company PIN #8920.

For a complete list of all services offered through NexGen, visit www.nexgeneap.com

Company ID: 8920.

IDENTITY THEFT

Allstate Identity Protection Pro+

Allstate has been protecting what matters most. Now get comprehensive identity protection monitoring and fraud resolution, plus award-winning cyber protection designed to help you protect yourself and your family against today's digital threats.

Prepare for what's next with:

- Identity, financial account, and credit monitoring
- Cyber protection for mobile and desktop devices
- 24/7 support, plus up to \$5 million in fraud expense reimbursement

Allstate Identity Protection Pro+ Cyber

Get all the features of Pro+ with added cyber protection designed to help you defend yourself from today's risks.

Device protection tools for up to 5 devices:

- Anti-virus protection
- Missing and stolen device tools
- Safe browsing
- Phishing protection
- Anti-tracker
- Firewall
- Webcam protection
- Safe pay
- Android smart watch protection
- File shredder

It's easy to get started

- 1. Sign up**
You're protected from your effective date
- 2. Activate key features**
Explore additional features in our easy-to-use portal and apps
- 3. Live your best life online**
We've got you covered with 24/7 alerts

PET INSURANCE

We care about all of your dependents - even the four-legged ones. As part of your benefits, you can access MetLife Pet Insurance."

Key Benefits

- Flexible product offerings with straightforward pricing and options, discounts up to 30%, customizable limits, and deductible savings
- Quick 3-step enrollment and hassle-free claims experience with most claims processed within 10 days
- An experienced team of pet advocates and multi-channel support options

Get a quote or enroll today.

Visit metlife.com/getpetquote

Call 1-800-GET-MET8

403(b) RETIREMENT PLAN

The Wright Center provides eligible employees a 403b retirement plan to save for the future. Currently, the 403b retirement plan is administered by TIAA. After one year of employment, The Wright Center contributes 3% of your annual base salary to a 403b account for you regardless of your participation. The annual IRS contribution limits are followed for employees under or over the age of 50. The initial enrollment or declination period is within the first thirty days of employment for personal contributions. Once the initial enrollment period or declination period has expired, you may enroll or make changes to your 403b account on a quarterly basis. These changes occur in January, April, July and October.

Please visit the [The Wright Center Portal](#) to begin your 403(b) election.



PAID TIME OFF (PTO)

TWCGME provides residents and fellows with flexible paid time off from work that can be used for such purposes as vacation, personal or family illness, doctor appointments, school, volunteerism, and other activities of the resident or fellow's choice. Residents and fellows must be accountable and responsible for managing their own PTO hours to allow for adequate reserves should they have a need to cover vacation, illness or disability, appointments, emergencies, or other situations that require time off from work. Residents and fellows will also be accountable to ensure that their work responsibilities are covered in their absence, and they must follow established departmental sign-out procedures.

Residents and Fellows will have 160 hours of paid time off to use each academic/fiscal year, i.e. July 1 through June 30

Whenever possible, PTO must be scheduled in advance and requested through HR & Payroll System (Paylocity)

Paid Holidays:

TWCGME will grant holiday time off to eligible residents and fellows up to 88 hours per academic year. The maximum payout of a holiday is eight hours.

As an essential community provider, some of our clinics are open on holidays, therefore there are times when staff and learners will be required to have staff present to work on a holiday. If you are not scheduled on a Holiday due to clinic closure or faculty not available, you will utilize Holiday Hours.



CONTACTS

Medical and Prescription

Highmark BlueCross BlueShield

Member services: 1-888-258-3428

General website: www.highmarkbcbs.com

BlueCross BlueShield Global

Member services:

Outside the U.S.: 1-610-230-2406

Toll-free inside the U.S.: 1-888-304-8898

Website: www.geo-blue.com

Dental

Sun Life

Customer service: 800-247-6875

Website: www.sunlife.com/us

Vision

Sun Life

Customer service: 1-800-877-7195

Website: www.vsp.com

Flexible Spending Accounts (FSA)

Paylocity

Customer service: 800-631-3539

Website: www.access.paylocity.com

Email: BATinfo@paylocity.com

Life and AD&D

Sun Life

Customer service: 800-247-6875

Website: www.sunlife.com/us

Short- and Long-Term disability

Sun Life

Customer service: 800-247-6875

Website: www.sunlife.com/us

Employee Assistance Program

NexGen

For more information and resources:

services: 1-800-EAP-CALL

Company ID: 8920

Website: www.nexgeneap.com

403(b) Retirement Plan

TIAA

Participant Help Line: 1-800-842-2252

Website: www.tiaa.org

Voluntary Supplemental Health

Sun Life

Customer service: 800-247-6875

Website: www.sunlife.com/us

Identity Theft

Allstate Identity Protection

Customer Service: 1-800-789-2720

Website: myaip.com

Pet Insurance

MetLife

Customer Service: 1-800-GET-MET8

Website: www.metlife.com/getpetquote

A background image showing a group of people from the chest up, cheering with their hands raised in the air. They are outdoors under a clear blue sky. The image is slightly blurred and has a warm, sunny tone. A large, semi-transparent white rectangular box is overlaid on the image, containing the text.

Final notes

This summary of benefits is not intended to be a complete description of The Wright Center's insurance benefit plans. Please refer to the plan document(s) for a complete description. These can be found in Paylocity > BSwift Benefit > Library. Each plan is governed in all respects by the terms of its legal plan document rather than by this or any other summary of the insurance benefits provided by the plan.

In the event of any conflict between a summary of the plan and the official document, the official document will prevail. Although The Wright Center maintains its benefit plans on an ongoing basis, The Wright Center reserves the right to terminate or amend each plan in its entirety or in any part at any time.

Please contact your human resources representative with questions regarding the information provided in this overview.

