



## Benefits Overview for Facilities Management

### Blue Cross Blue Shield of RI-HealthMate Coast to Coast

#### **PLAN A:**

Individual Bi-weekly Cost \$22.00  
Family Bi-weekly Cost \$58.53  
\$25 Office Visit including Specialists  
\$100 ER Co-pay  
\$25 Walk-in Co-pay  
\$15 Generic/\$25 Preferred Brand Name/\$40 Non Preferred Brand Name  
In-Network Deductible: <sup>[1]</sup>  
\$2,000 Individual—Employee pays first \$250 per calendar year; University pays remainder  
\$4,000 Family - Employee pays first \$500 per calendar year; University pays remainder  
Out of Network Deductible and Coverage: See Summary of Benefits in B/C Package

#### **PLAN B:**

Individual Bi-weekly Cost \$21.74  
Family Bi-weekly Cost \$57.57  
\$20 Office Visit Co-pay, \$30 Office Visit Co-pay for Specialist  
\$150 ER Co-pay  
\$30 Walk-in Co-pay  
\$7 Generic/\$30 Preferred Brand Name/\$50 Non Preferred Brand Name  
In-Network Deductible: <sup>[2]</sup>  
\$2,000 Individual—Employee pays first \$250 per calendar year; University pays remainder<sup>[3]</sup>  
\$4,000 Family - Employee pays first \$500 per calendar year; University pays remainder<sup>[4]</sup>  
Out of Network Deductible and Coverage: See Summary of Benefits in B/C Package

### **Delta Dental of RI**

Individual Bi-weekly Cost \$1.25  
Family Bi-weekly Cost \$4.04  
\$1,200 per person annual maximum  
100% Preventative and minor restorative services  
50% Periodontal and major restorative services  
50% Orthodontics for dependent children up to \$1,100 lifetime maximum  
50% Single Tooth Implants and Tissue Regeneration  
No deductible

### **Buyback:**

Lesser of annual individual cost or \$3,000 for waiver of individual or family medical and dental

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[1] Review HRA plan for further information

[2] Review HRA plan for further information.

[3] Employee payment for deductible valid until 6/30/2012

[4] Employee payment for deductible valid until 6/30/2012

See Collective Bargaining Agreement and specific policies for full information regarding coverage, restrictions and other requirements.

## Benefits Overview for Facilities Management

100% Employer paid Term Life Insurance (\$50,000 death benefit)

100% Employer paid Short and Long Term Disability Insurance

Short Term Disability will supplement Rhode Island Temporary Disability Insurance for 24 weeks

Long Term Disability will pay up to 60% of your base pay if disabled for more than 26 weeks

403(b) with TIAA-CREF or VALIC

Contribute 5% of salary and RWU will contribute 8% of salary.

2 year waiting period to begin contributions and receive match

Immediate vesting

Accrue up to 8 paid vacations days in 1<sup>st</sup> year

Accrue up to 15 paid sick days per year

1 extra day of vacation added per year depending on sick usage

15 paid holidays per year

3 or 5 paid bereavement days depending on relationship of deceased

Tuition Remission for employee, spouse, or dependent child for RWU undergraduate programs<sup>[5]</sup>

Tuition Exchange and Council for Independent Colleges participation for spouse and dependent child(ren)<sup>[6]</sup>

Flexible Spending Plan for Unreimbursed Healthcare, Day Care and Transportation Expenses

Worker's Compensation

Direct Deposit

Free Parking

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*[5] Eligible after 6 months of continuous employment*

*[6] Eligible after 6 months of continuous employment*

*See Collective Bargaining Agreement and specific policies for full information regarding coverage, restrictions and other requirements.*