

A photograph of an Emory University campus during autumn. Large trees with vibrant orange and yellow leaves are in the foreground, partially obscuring a multi-story brick building with several windows. Two people are walking on a path in front of the building. The scene is bright and sunny.

EMORY
+YOU

Your Benefits

2025 Benefits Guide

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This guide is meant to provide basic benefit plan information. Every attempt has been made to ensure that the information included in this guide is accurate. For additional details and specific information, please contact the vendor or review the Summary Plan Description (SPD) for each plan. SPDs are available online at www.hr.emory.edu/benefits or by contacting the Benefits and WorkLife Department at 404-727-7613 for a printed version.

DISCLAIMER: Emory reserves the right to terminate, suspend, withdraw, amend or modify the plan in whole or in part at any time. Further, Emory reserves the right to terminate or modify coverage for any group of employees, active or retired and their dependents or a class of dependents at any time.

Benefits and WorkLife Department Office Hours:

Monday, Wednesday, Thursday, and Friday:
8:30 a.m. to 4:30 p.m.

Tuesday: 8:30 a.m. to 1:30 p.m.

Benefits and WorkLife Department
1599 Clifton Road, 1st Floor
Phone: 404-727-7613
Email: hrbenef@emory.edu



Your Benefits

As an Emory employee, you have a wide range of benefits programs available to you. Benefits give you important financial protection when you need it most. Use this Benefits Guide to review the benefits that Emory offers so that you can make the choices that are right for you and your family.

Some benefits Emory offers are employer-provided and coverage is automatic if you are eligible. Other benefits give you choices and require you to enroll.

Employer-Provided Benefits

As an eligible employee, Emory automatically provides you with several benefits. Emory pays the full cost for basic life insurance, long term disability coverage and provides a basic contribution to the 403(b) retirement plan. You are not required to make any contributions for these benefits — Emory pays the full cost.

Emory also offers a variety of other benefits not covered in this guide, including tuition reimbursement, employee discounts, the Faculty Staff Assistance Program and more. For the most current information visit the HR website at www.hr.emory.edu.

Optional Benefits

In addition to employer-provided benefits, eligible employees may enroll in optional benefits including medical, dental, vision, supplemental life insurance, accidental death and dismemberment, disability, flexible spending accounts and retirement plans. You contribute toward the cost of the optional benefits that you elect.

When Coverage Begins

For most benefits, coverage begins on an employee's date of hire.

New Hires: If you are benefits-eligible, you must enroll during your first 31 days of employment with Emory. For optional benefits other than the 403(b), if you do not enroll during your first 31 days of employment, you will not receive coverage. Your next opportunity to enroll in optional benefits will be during the benefits annual enrollment period, typically held in the fall of each year for the upcoming year (i.e. fall of 2024 for the 2025 plan year). Supplemental life insurance benefits require Evidence of Insurability (EOI) for late enrollees.

Current Employees: If you are a current benefits-eligible Emory employee, each year you have an opportunity to review your benefit elections during the benefits annual enrollment period and make changes for the upcoming plan year.

When Coverage Ends

For most benefits, coverage will end on the last day of the month in which:

- Your regular work schedule is reduced to fewer than 20 hours per week;
- Your employment with Emory ends due to resignation, termination or death; or
- You stop paying your share of the coverage.

Your dependent(s) coverage ends:

- When your coverage ends, or
- The last day of the month the dependent is no longer eligible:
 - For dependent child(ren) (up to age 26), end of the month in which they turn 26.



Eligibility

Eligibility

You are eligible for benefits if you are a regular full-time or part-time employee scheduled to work 20 hours or more per week. Full-time temporary positions on a six-month or longer assignment are eligible for medical, dental, vision and life insurance, but not disability.

If you elect coverage, your dependents are also eligible for medical, dental, vision and life insurance coverage. Eligible dependents include:

- Your legal spouse.
- Your legal child(ren): includes your natural, adopted or foster child(ren), stepchild(ren), or any child for whom you have legal custody. They are eligible:
 - Up to age 26.
 - Regardless of age, if fully disabled and unmarried, provided he/she became fully disabled either:
 - prior to age 19; or
 - between the ages of 19 and 26, if that child was covered by the plan when the disability occurred.

Dependent Verification of Eligibility

When you first enroll, or if you change coverage mid-year due to a qualified IRS family status change, you are required to provide documentation substantiating the eligibility of your dependent(s) within 31 days of the change or enrollment.

Documentation can be uploaded in Self-Service. Log on to Self-Service at <http://leo.cc.emory.edu>, click on the **Benefits tile**, then click **Document Upload**. If documentation is not received within 31 days, a letter will be mailed to you requesting the documentation within a given deadline. Refer to the chart for a list of events which require documentation.

Dependent Verification of Eligibility Documentation

EVENT	DOCUMENTATION NEEDED
Spouse with a last name different than yours	Marriage certificate OR joint tax return (current or previous year only)
Child with a last name different than yours	Birth certificate OR court document awarding custody or requiring coverage
Dependent child over age 26	Birth certificate AND a Social Security Disability Award or letter from a physician AND the parent's tax return claiming the child (current or previous year only)

You must provide the documents listed above to the Benefits and WorkLife Department within 31 days from your initial election or mid-year family status change if one of the above situations applies to you and your family. If documentation is not received in a timely manner, the election/change requested will not be processed and the affected dependents will not be covered under Emory's plans. Legible copies of required documents are acceptable.

Transfers between Entities

If you transfer employment between companies (e.g., Emory University to Emory Healthcare or vice versa), you cannot change your HSA, POS or Kaiser Permanente health plan election or any of the benefit plans in which you are currently enrolled, even if the coverage costs increase or decrease. Additionally, employees who were terminated but rehired within 30 days, transfer between entities within 30 days or return from a leave of absence and transfer to a new entity may not change their benefit plan elections. Changes will only be allowed in the following year's benefit enrollment period.



How to Enroll

Current Employees

You must enroll during the annual enrollment period: **Monday, October 28 through Monday, November 11, 2024**. Prior to enrolling, you can attend a Zoom webinar if you have questions or would like more information about Emory's medical plans and benefit programs. Webinar dates are:

- **Thursday, October 24, 2024, 1:00 pm**
- **Wednesday, October 30, 2024, 10:00 am**
- **Thursday, November 7, 2024, 2:00 pm**

Emory offers numerous tools and resources to help you make your benefit selections (see the Enrollment Checklist on page 7). Call the Benefits and WorkLife Department with any questions at 404-727-7613 or email us at hrbenef@emory.edu.

New Hires

You may enroll online during your first 31 days of employment. Note: There may be days when you can't enroll such as payroll run days. Emory offers numerous tools and resources to help you make your benefit selections. Be sure to attend Emory's New Employee Welcome Session to learn more about your benefits options and receive important information as a new hire. You can also contact the Benefits staff with your questions at 404-727-7613 or email us at hrbenef@emory.edu.

Enroll Online

You can enroll online through Self-Service (<http://leo.cc.emory.edu>) at any computer that has Internet connectivity. To access Self-Service, you will need your network ID and password. If you do not know your network ID or password, call the Office of Information Technology Help Desk at 404-727-7777 (available Monday – Friday, 7:00 am to 6:00 pm).

Steps to Enrolling Online

1. Log on to Self-Service <http://leo.cc.emory.edu>.
2. Click the *Annual Enrollment* tile.
3. On the *Welcome Instructions* page, use the left-hand guide to walk through the enrollment steps or use the *Next* button to navigate.
4. Complete the *Acknowledgment* step to proceed to your Benefits Enrollment.
5. From the Benefits Enrollment page, to view or change your elections, select the *Benefit Plan(s)* you wish to change. You may also enroll, add or drop dependents.
 - If you select *Medical*, your Tobacco Certification will display.
 - Verify or update the information and click *Agree* to record your response(s).
6. After you have reviewed your benefits, click the *Save* button in the upper right-hand corner to store your elections.
7. Once you have completed your Annual Enrollment, click the *Submit Enrollment* button in the upper right-hand corner to submit your elections to the Benefits and WorkLife Department.
8. Click *View* to review your Elections Preview Statement or *Done* to return to the Benefits Enrollment Summary. Be sure to save a copy of your Elections Preview Statement and carefully review it for accuracy. After January 1, most elections cannot be changed (except within 31 days of a family status change).
9. After annual benefits enrollment has closed, you will also receive instructions via email on how to check your 2025 benefits in PeopleSoft.



Using ALEX® for Making Benefits Decisions

Annual benefits enrollment is the one time of year when you can explore all of the different plan options that are available to you and make changes for the year ahead.

Before making your enrollment decisions, it's important to do your research so that you pick the plans that give you the coverage you need in the most cost-effective way.

That's where ALEX®, our online benefits counselor, can step in to answer your questions and help lead you to the plans that work best for you. ALEX can help you by:

1. Finding your lowest-cost medical plan options.
2. Explaining how everything works. If you have never been sure how deductibles and coinsurance work, ALEX is for you.
3. Simplifying the decision-making process by asking you about your needs and providing personalized, confidential recommendations.

ALEX Go

ALEX Go is a compact, efficient, text-based interactive experience available in both English and Spanish to help you with your benefits decisions. With ALEX Go, you can:

- Discover your best fit benefits on your own time and at your own pace.
- Find easy-to-use smart tools, educational video content, interactive calculators, and more.
- Receive enhanced medical plan recommendations and compare your medical plan options.
- Receive added educational components for various life events.



Learn more about ALEX and ALEX Go on the annual enrollment website: www.hr.emory.edu/enrollment.



Annual Enrollment Checklist

Use this checklist to ensure you've completed all of your annual enrollment tasks.

- Take some time to learn about all of the benefits options that are available to you. Read this **2025 Benefits Guide** carefully as you consider your plan choices. Emory provides a variety of tools and resources to help you make your benefits decisions; these can be found on the annual enrollment website at www.hr.emory.edu/enrollment.
- Use the interactive **ALEX Tool** which will guide you through the plan options and provide you with a personal, confidential recommendation.
- Attend a **Zoom webinar** to better understand the details of the three medical plan choices, get an overview of all the benefits programs, and have an opportunity to ask questions (see page 5 for dates and times). If you can't attend, you can also view a recording of the webinar on the annual enrollment website at www.hr.emory.edu/enrollment.
- Decide if you want to enroll in a **Flexible Spending Account** (Healthcare and/or Dependent Day Care) or a Limited Healthcare FSA (for HSA Plan participants). Remember: you must actively enroll each year.
- HSA Plan members, decide if you want to make a contribution to your **Health Savings Account**.
- Actively enroll online through Self-Service (<http://leo.cc.emory.edu>) during the enrollment period: **October 28 through November 11, 2024**. Changes are effective on January 1, 2025. If you are currently enrolled in medical benefits and don't make a new medical plan election, your current coverage will roll over.
- Complete the **tobacco use surcharge certification**, if not already done.
- Review your beneficiary(ies)**. Make any necessary updates to ensure the accuracy of your beneficiary information for life insurance and accidental death and dismemberment insurance.
- Once you have completed your enrollment online, **save or print a copy** of your confirmation statement, review it for accuracy, and retain it for your records.
- Verify your 2025 benefits elections after **Monday, November 8, 2024** by visiting Self-Service online at <http://leo.cc.emory.edu>. You will receive an email reminder at that time. If you notice any errors, notify the Benefits and WorkLife Department immediately at 404-727-7613 or email hrbenef@emory.edu. After January 1, 2025, most elections cannot be changed except within 31 days of a family status change.



Making Changes

The IRS provides strict regulations about changes to pre-tax elections during the plan year. If you experience a qualified IRS family status change mid-year, you are permitted to make a change **within 31 days** of the event.

If the change request is not completed within 31 days of the event, you will not be able to change your elections until the following year's benefits annual enrollment period. Below is a list of some of the more commonly known qualified family status changes:

- Marriage, divorce or annulment
- Birth of a child
- Placement of a foster child or child for adoption with you, or assumption of legal guardianship of a child
- Change in your spouse's or dependent's employment status that affects benefits eligibility, including termination or commencement of employment, or change in worksite
- You or your spouse returns from unpaid leave of absence
- You or your dependent becomes eligible or loses eligibility for Medicare or Medicaid
- The death of your spouse or dependent
- Court ordered coverage of your child by you or your spouse, allowing you to add or drop the child's coverage
- Change in your employment that affects benefits eligibility (working at least 20 hours per week)
- Loss of eligibility for a dependent
- Change in dependent care provider or cost for Dependent Care Flexible Spending Account

The change you request must be consistent with the qualifying event. Some mid-year changes require documentation which must also be provided within 31 days of the event.

Completing a Family Status Change

Family status changes are completed online in Self-Service (<http://leo.cc.emory.edu>). Should you have questions or difficulty making your change mid-year, please contact the Benefits and WorkLife Department within 31 days of your qualifying event.

You can reach the Benefits and WorkLife Department at 404-727-7613. Office hours are shown below.

For more information about making changes to your benefits due to family status changes, visit www.hr.emory.edu/eu/benefits/changes.html.

Benefits and WorkLife Department Office Hours:

Monday, Wednesday, Thursday, and Friday:
8:30 a.m. to 4:30 p.m.

Tuesday: 8:30 a.m. to 1:00 p.m.

Benefits and WorkLife Department
1599 Clifton Road, 1st Floor
Phone: 404-727-7613
Email: hrbenef@emory.edu



Medical Coverage

Emory offers comprehensive medical coverage to help protect you and your family from catastrophic medical costs.

For 2025, you have a choice of three medical plans:

- 1 — Aetna HSA Plan
- 2 — Aetna POS Plan
- 3 — Kaiser Permanente Plan

Aetna HSA and POS Plans

The Aetna HSA and POS plans use the same provider networks; however, there are key differences in how each plan works, including deductibles, co-pays and co-insurance. Both plans have three network options:

Tier 1: Providers give you the maximum benefit available under the plans, with lower co-pays, co-insurance and deductibles (a list of Tier 1 providers is on page 42).

Tier 2: Providers and facilities are part of both medical plans through Aetna. Co-pays, co-insurance and deductibles are higher than with Tier 1.

Tier 3: Providers and facilities that are not participating with Aetna are considered Out-of-Network. Costs are the highest.

To locate a Tier 1 or Tier 2 physician or facility, go to www.aetna.com/docfind/custom/emory.

Preventive Care

Routine preventive care is covered at 100% under both Aetna medical plans (Tier 1 and Tier 2 Networks). Preventive care can help you identify potential health risks before they become real health problems. Services include annual physicals, well-child visits, immunizations, health screenings and more. A complete list can be found at www.hr.emory.edu/enrollment.

Tier Zero Prescription Drugs

Both plans offer Tier Zero for prescription drugs. With Tier Zero, prescription medications used to prevent and treat chronic health conditions such as congestive heart failure, diabetes, high blood pressure, high cholesterol, tobacco addiction and more, are covered at 100% which means you pay \$0 for these drugs. See page 44 for the current list of Tier Zero medications.

What's the Same in the HSA and POS Plans?

- Same broad network of physicians in Georgia and nationally (Tier 1 and Tier 2).
- Routine preventive care is \$0 within the Tier 1 or Tier 2 Network.
- All plans offer Tier Zero Drugs, so you pay \$0 for certain prescription drugs.
- Neither the HSA nor the POS plan requires you to select a primary care physician or get a referral to see a specialist.
- Unlimited lifetime maximum applied across both plans and networks.
- All plans offer the opportunity to earn incentives (see page 23 for more information).

Premium Assistance under Medicaid and the Children's Health Insurance Program (CHIP)

If you or your children are eligible for Medicaid or CHIP and you are eligible for health coverage from Emory, the State of Georgia may have a premium assistance program that can help pay for coverage. For more details, visit: www.hr.emory.edu/eu/_includes/documents/sections/benefits/chip-notice.pdf.



Aetna HSA Plan

Aetna HSA Plan

The HSA Plan, a consumer-driven medical plan with a Health Savings Account, puts you in charge of how your health care dollars are spent. Features of this plan include:

- The same covered services and network of providers as the POS Plan with a different way to pay for and save for health care expenses.
- A Health Savings Account (HSA) with tax advantages, funded in part by Emory. The HSA gives you the flexibility to choose how to spend your health care dollars.
- Like the POS Plan, the HSA Plan also has deductibles, co-insurance and an out-of-pocket maximum to protect you in the event you have significant medical expenses during the year.

Deductible

All eligible expenses incurred by you or your covered dependents throughout the plan year apply towards meeting the annual deductible. The Tier 1 deductible is \$1,650 (Employee Only) or \$3,300 (Employee + Spouse, Employee + Children, or Family). The Tier 2 deductible is \$1,900 (Employee Only) or \$3,750 (Employee + Spouse, Employee + Children, or Family). As expenses are incurred, including ER visits and prescription drugs, you can use funds that have accumulated in your HSA to cover these costs. Once your HSA balance is exhausted, any remaining portion of your deductible that needs to be met for the year will be an out-of-pocket expense and your financial responsibility. The annual deductible must be satisfied before any plan expenses are paid by co-insurance, with the exception of preventive care and Tier Zero prescriptions which are covered at 100%. If you enroll and elect employee and dependent coverage, any covered expenses incurred will apply

towards meeting the family deductible of \$3,300 (Tier 1) or \$3,750 (Tier 2) before any expenses are covered under co-insurance.

Co-Insurance

Once the annual deductible is satisfied, the HSA Plan works like a traditional plan by paying the majority of expenses through co-insurance. Tier 1 care is covered at 85% (you pay 15%); Tier 2 care is covered at 75% (you pay 25%) and Tier 3 care is covered at 50% (you pay 50%).

Out-of-Pocket Maximum

Like a traditional plan, there is a maximum amount that you are financially responsible for under the plan each year. The individual out-of-pocket maximum of \$3,750 within the Tier 1 Network and \$5,500 (Tier 2) will be applied to a covered family member who incurs medical expenses after the family deductible has been met (\$3,300 within Tier 1 or \$3,750 Tier 2). This eliminates the need for the full family out-of-pocket maximum to be satisfied if only one family member needs medical care. However, the combined medical charges incurred by additional family members will satisfy the full family out-of-pocket maximum. When the family out-of-pocket maximum is satisfied, eligible expenses for all family members will be covered at 100% for the remainder of the plan year.

It is important to note that other than preventive care, you have to pay 100% of your eligible medical expenses, including prescription drugs, until your annual deductible is met. Once met, the plan provides coverage through co-insurance. You need to carefully consider the balance in your HSA and your ability to meet these financial obligations in the event of an illness, injury or accident.



Aetna HSA Plan

HSA Plan Prescription Drugs

If you are enrolled in the HSA Plan, you must pay all out-of-pocket costs for prescription drugs until you meet your annual deductible (with the exception of Tier Zero drugs; Emory pays 100% and plan participants will pay \$0 for drugs that are listed as Tier Zero; see page 44 for a current list). For non-Tier Zero drugs, you can use your HSA to pay for your prescription drug costs. After you meet the deductible, you will pay the applicable co-insurance amount under the HSA Plan, up to the "30-day Retail Maximum." The following table shows what your responsibility is once your deductible is satisfied. For example, if the table shows co-insurance is 20%, the plan will pay 80% of the cost of the prescription drug and you are responsible for the other 20%. However, there is financial protection built into the prescription drug benefit in that you will never pay more than the "30-day Retail Maximum," outlined in the table below:

TIER	CO-INSURANCE	30-DAY RETAIL MAXIMUM
Zero	0%	\$0
1	10%	\$25
2	20%	\$75
3	30%	\$120
4	40%	\$150

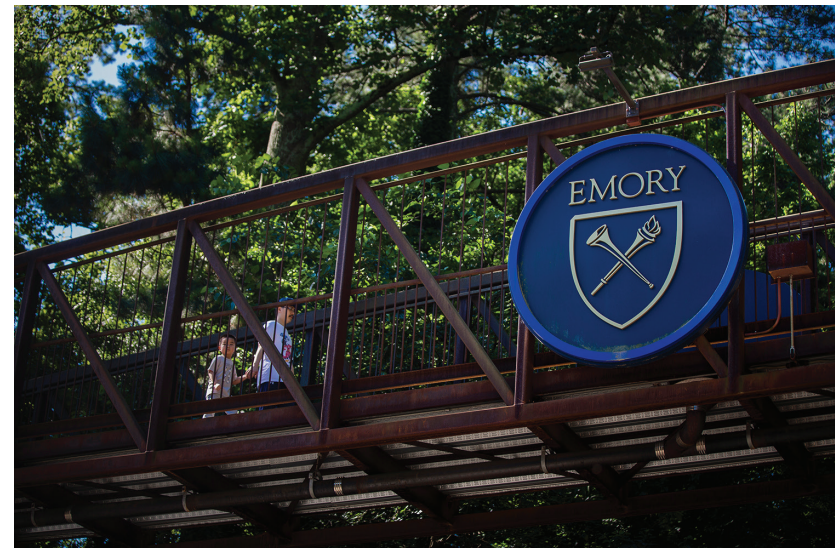
90-day supply is 2½ x the retail amount

Maintenance Drugs

If you take any maintenance prescription medications to treat certain ongoing medical conditions, you will need to fill your 90-day prescriptions in one of five ways:

- Through CVS/caremark's mail-order service;
- At a CVS retail pharmacy location (at the mail-service cost);
- At an Emory pharmacy (at the mail-service cost);
- At a Target retail pharmacy location (at the mail-service cost); or
- At a Costco, Kroger, and several independent pharmacies.

Note: If you attempt to fill a maintenance drug at a pharmacy other than the above methods, you will be charged the full retail cost. Examples include drugs used to treat high blood pressure, heart disease, asthma and diabetes, and birth control.





Aetna HSA Plan

Health Savings Account (HSA)

The HSA is funded in three ways — by Emory’s annual contribution, through your participation in various healthy activities (to earn incentives), and through optional pre-tax contributions you make to the HSA.

1 — Emory’s Annual Contribution: If you enroll in:

- Employee-Only coverage — Emory contributes **\$300** to your HSA.
- Employee + Spouse, Employee + Child(ren) or Family level coverage — Emory contributes **\$600** to your HSA.

Note: Emory’s contribution is prorated based on your enrollment date if after January 1.

2 — Incentives: In addition to Emory’s annual contribution to your HSA, you can earn **up to \$425** in incentives (additional contributions you earn by completing various healthy activities). Your spouse is also eligible for up to **\$425** in incentives for a total of **\$850**. See page 23 for details.

3 — Your Contributions: If you want a way to save tax-free for current or future eligible medical expenses, you can also contribute to your HSA. Contributions to your HSA have no expiration date; they remain in the account until you decide to access them or reimburse yourself for an eligible expense you already paid out-of-pocket. You decide when and how to pay.

To Qualify for a Health Savings Account

- You must be enrolled in the HSA Plan
- You cannot be claimed as a dependent on someone else’s tax return
- You cannot be covered by a spouse’s Flexible Spending Account (FSA)
- You cannot be covered by any other medical plan, including Medicare A and/or B

What’s Different About a Health Savings Account?

The Health Savings Account (HSA) is only available if you participate in the HSA Plan. The money is yours, account balances over \$1,000 can be invested; and it is portable -- it goes with you to be used for qualified medical expenses if you leave Emory or when you retire.

If you are enrolled in the HSA Plan, you may not participate in a general Healthcare Flexible Spending Account (FSA). However, you can participate in the limited Healthcare FSA for dental and vision, as well as medical expenses once you have met your deductible. If you are enrolled in the HSA Plan, you may still participate in the Dependent Day Care Flexible Spending Account.





Aetna HSA Plan

How the HSA Plan Works

1

Get Free Preventive Care

Tier 1 and Tier 2 Network preventive care is covered at 100% with no deductible. You pay \$0 out-of-pocket for your annual physical, well woman visit, mammogram, colonoscopy, routine immunizations, and other eligible services.

2

Pay for Your Other Medical Expenses

You pay for additional medical and prescription drug expenses as you incur them until your annual deductible is met. Your deductible amount depends on your coverage level.

3

Use your HSA

Your HSA helps you cover your deductible and pay for other medical costs. Emory will contribute \$300 (employee only) or \$600 (dependent or family coverage) to your HSA. You can also earn additional HSA monies by earning incentives. Unused funds from your HSA roll over to the next year, and your account balance over \$1,000 earns interest (tax-free) over time.

Additional HSA features

- Withdrawals from HSAs for qualified medical expenses are tax-free. If you withdraw money for any reason other than qualified medical expenses, you must pay income tax and a 20% IRS tax penalty.
- You must have a balance in your account to make a withdrawal.
- The maximum you can contribute to an HSA in one year is set by the IRS (in 2025, it is \$4,300 for single coverage and \$8,550 for family coverage). If you are age 55 or older, you can contribute an additional catch-up contribution of \$1,000. It is your responsibility to make sure your HSA contributions, including any employer or incentive contributions, do not go over the IRS maximum.

In accordance with IRS regulations, if you are a new enrollee in the HSA Plan for 2025 (i.e. switching from the POS Plan) and you have a balance in a 2024 Healthcare Flexible Spending Account (as of December 31, 2024), you are not eligible to contribute funds to an HSA or receive any funds in your HSA until April 1, 2025. Make sure your FSA balance is \$0 by December 31, 2024 to avoid any issues.

Medicare and Social Security: If you are age 65 or older and begin receiving Social Security benefits, you will be automatically enrolled in Medicare Part A and this will limit the amount you can contribute to your HSA account. In the year that you initially become eligible for Medicare, HSA contributions are only permitted for the portion of the year you are not enrolled in Medicare. You cannot front load your HSA for the entire year. For more information, refer to Publication 969 at www.irs.gov.

You have investment options if your HSA balance is typically at least \$1,000. Contact Inspira Financial at 1-888-678-8242 for more information.



Aetna POS Plan

The POS Plan works more like a conventional medical plan where members pay co-pays for some services (co-pays are fixed fee amounts that you pay at the time you receive services). The POS Plan also uses co-insurance for some services (co-insurance is the portion of expense you must pay for care, in most cases, after meeting your deductible). The deductible is a set amount that typically you must pay before co-insurance starts. See page 22 for deductible amounts.

The POS Plan allows members to receive services from a national network of providers and facilities. It is an open access plan that:

- Provides the flexibility to choose any provider
- Does not require that a Primary Care Physician (PCP) be identified or selected
- Does not require a PCP referral to see a specialist

With the POS Plan, your monthly/bi-weekly contribution is higher than with the HSA Plan, but your annual deductible is lower. You cannot open a Health Savings Account (HSA) or receive HSA contributions from Emory. You do have the option of enrolling in a Healthcare Flexible Spending Account (FSA) which allows you to set aside up to \$3,200 pre-tax dollars to help pay for medical expenses (see page 25 for more information).

Tier 1 and Tier 2 preventive care is covered at 100% and is not subject to the deductible. For certain other medical services, such as diagnostic labs, hospitalization or radiology, the plan pays a portion of your covered expenses: 85% (Tier 1), 75% (Tier 2) and 50% (Tier 3) after you pay the annual deductible. Office visits are covered with a co-payment. Prescription drugs are covered through co-insurance.

The POS Plan also has an out-of-pocket maximum to protect you in the event you have significant medical expenses during the year. The out-of-pocket maximum includes all co-pays, as well as deductible and co-insurance, such as prescription drug costs. It also includes office visit co-pays.

POS Plan Prescription Drugs

Prescription drug coverage is part of your medical plan and you pay a percentage of the cost through co-insurance. There is also a retail minimum and a retail maximum within a five-tier structure (see chart below). You will pay the co-insurance amount subject to the retail minimum and maximum cost. You do not have to meet your deductible first. Prescription drug coverage is administered through CVS/caremark. To determine your coverage tier or cost, call 866-601-6935.

Maintenance Drugs: If you take any maintenance prescription medications to treat certain ongoing medical conditions, you will need to fill your 90-day prescriptions in one of five ways: (1) Through CVS/caremark’s mail-order service; (2) at a CVS retail pharmacy location (at the mail-service cost); (3) at an Emory pharmacy (at the mail-service cost); (4) at a Target retail pharmacy location (at the mail-service cost); or (5) at a Costco, Kroger, and several independent pharmacies. Note: If you attempt to fill a maintenance drug at a pharmacy other than the above methods, you will be charged the full retail cost. To save money, ask your doctor/pharmacist if a generic version is available.

Tier Zero: Emory pays 100% and plan participants will pay \$0 for drugs listed as Tier Zero. See page 44 for the current list of Tier Zero medications.

PRESCRIPTION DRUG TIER	CO-INSURANCE	30-DAY RETAIL MINIMUM	30-DAY RETAIL MAXIMUM
Zero	0%	\$0	\$0
1	10%	\$10	\$25
2	20%	\$20	\$75
3	30%	\$60	\$120
4	40%	\$90	\$150

90-day supply is 2½ x the retail amount



Kaiser Permanente Plan

Kaiser Permanente Plan

The Kaiser Permanente Plan is a third option to consider when selecting the medical coverage that's right for you and your family. This plan works differently than the Aetna HSA and POS plans. If you are currently seeing Emory Clinic providers (or any other providers), you will need to switch to Kaiser Permanente providers. In certain circumstances, your Kaiser Permanente provider may refer you to be seen by a non-Kaiser Permanente provider, which may include an Emory provider. **You may only elect Kaiser Permanente if you live within the states of Georgia or California. If you live elsewhere, the Aetna HSA or POS plan are your allowable medical options.**

Get to Know Kaiser Permanente

Kaiser Permanente was founded over 70 years ago with a mission to provide high-quality, affordable health care services and to improve the health of the communities they serve. Kaiser Permanente providers work together within the Kaiser Permanente health plan, making it easy for you to get quality, coordinated care.

- The Kaiser Permanente plan is an inclusive network that makes health care simple with everything you need, including primary care providers, specialty care providers, and lab and pharmacy, all conveniently located at Kaiser Permanente's 26 state-of-the-art medical facilities in the Atlanta metro area.
- **With Kaiser, you have to use Kaiser Permanente providers – there are no out-of-network benefits and you cannot use Emory providers.** But, they make it easy for you! All 600+ providers are connected through instant access to your electronic health record so you can get safe, personalized care. You won't have to coordinate with providers, specialists, pharmacies, hospitals, or other caregivers because it's all connected. You can see most specialists without a referral, and you won't have to file a claim for any Kaiser Permanente provider. To find a doctor visit kp.org/doctorsandlocations.

- Instead of meeting a deductible or paying co-insurance when you visit your provider in person, on the Kaiser Permanente plan you're only responsible for a co-pay.
- With same-day phone or video appointments, you can get care without making a trip to the doctor's office. Kaiser Permanente's telehealth options, including video visits and phone, email or online consultations, are available to you with no co-pay required.

Care Options	
In person co-pays apply	Visit your doctor for routine care, preventive services, care when you're not feeling well, and more. You may also be able to schedule same-day appointments. You can see Kaiser Permanente experts in more than 40 specialties — most without a referral.
Video no co-pay	Many Kaiser Permanente providers are available to meet face-to-face online for a convenient, secure way to get care wherever you are. Ask your provider if video visits are available to you.
Phone no co-pay	Save yourself a trip to the office by scheduling a call with a Kaiser Permanente clinician for conditions that don't require an in-person exam.
E-visit no co-pay	Fill out a short questionnaire about your symptoms online and get personalized self-care advice from a Kaiser Permanente provider.
Online no co-pay	Chat live online with a Kaiser Permanente doctor to get advice, referrals, prescriptions and more.
24/7 care and advice by phone no co-pay	Call Kaiser Permanente for advice when you need it most and for help finding out what care is right for you. You can also schedule appointments and more.
Email no co-pay	Message your provider's office anytime with non-urgent health questions. You'll get a response usually within two business days, if not sooner.



Kaiser Permanente Plan

Express, Urgent, Emergency, and Inpatient Hospital Care

Same-day Express Care

At select offices, you can quickly be seen by a certified nurse practitioner for issues like pains and sprains, coughs, colds and allergies, headaches, fever, and more. Walk in or make an appointment online or by phone.

24/7 Urgent Care*

At the three Kaiser Permanente Advanced Care Centers, you can get urgent care 24 hours a day, even for more serious (but not life-threatening) issues like deeper cuts, broken bones, stomach pain, or dehydration.

Walk-in Urgent Care*

In addition to 24/7 urgent care at Kaiser Permanente's three Advanced Care Centers, you have access to over 60 affiliated urgent care locations. At these locations, you can walk in to get care for minor issues like fever, severe sore throat, sprains, cuts, and earaches. For locations, visit kp.org/facilities and search keyword "urgent care."

Emergency Care*

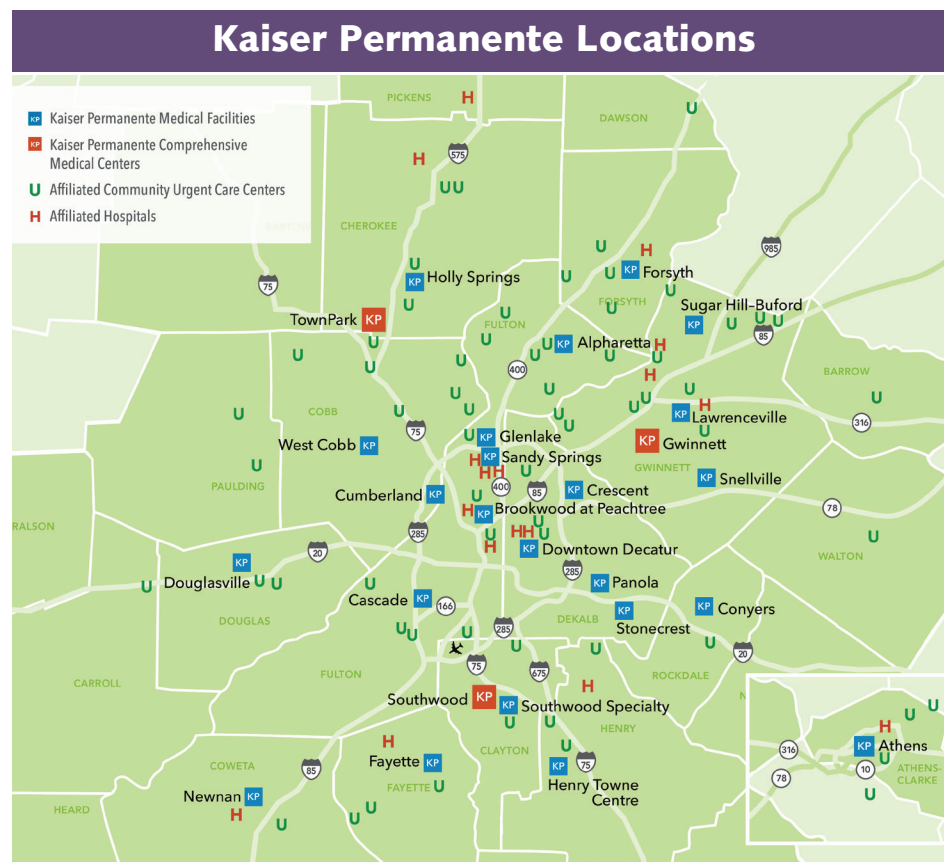
For medical emergencies, you have access to any hospital emergency room, including Emory Healthcare hospitals, even if the facility is not affiliated with Kaiser Permanente.

Inpatient Hospitals

For scheduled hospital stays, you'll likely get your care at Emory University

Hospital Midtown or Emory Saint Joseph's Hospital. There, Kaiser Permanente providers with access to your electronic medical record will be on site to provide coordinated care.

*** Call 911 or go to the nearest hospital emergency room for life-threatening emergency conditions that require immediate medical attention to prevent serious jeopardy to your health.**





Kaiser Permanente Plan

Kaiser Permanente Plan Prescription Drugs

Kaiser Permanente’s pharmacy system is the very heart of its “under one roof” care experience. In most of the 26 medical offices, you can conveniently pick up your prescription or consult a Kaiser Permanente pharmacist on your way out the door. No more traffic. No more stops.

Transitioning your prescriptions

Kaiser Permanente will help you transition your prescriptions from your current provider to a Kaiser Permanente provider. Call 404-365-0966 or 1-800-611-1811 (TTY 711) or visit my.kp.org/emoryuniversity for help to:

- Schedule a pharmacy telephone consult to review your medications. To help with the transition, you can usually get a temporary supply, if needed.
- Schedule your first office visit to get your prescription written by your new provider. Just call Kaiser Permanente or to view their formulary, visit my.kp.org/emoryuniversity/pharmacy and choose “2025 Five Tier plan formulary.”

Picking up your medication

Once you’ve transitioned your prescriptions:

- Get them filled at any one of the pharmacies at a Kaiser Permanente medical facility. When you get your prescription during your doctor visit, you can usually just pick up your medication on the way out the door!
- Visit kp.org/pharmacy or use the Kaiser Permanente app to get most new or refill prescriptions* mailed to you.

There’s no charge for shipping and you can save money by ordering a 90-day supply. Just make sure you’ve registered on kp.org first.

COSTS FOR PRESCRIPTIONS FILLED AT A KAISER PERMANENTE PHARMACY (LOCATED AT KAISER PERMANENTE MEDICAL FACILITIES)				
TIER	30-DAY SUPPLY	31-60 DAY SUPPLY	61-90 DAY SUPPLY	COMMUNITY PHARMACY* (FIRST FILL ONLY)
1 - Preventative Generic	\$0	\$0	\$0	\$0
2 - Preferred Generic	\$10	\$20	\$30	\$10
3 - Preferred Brand	\$30	\$60	\$90	\$30
4 - Non-Preferred	\$60	\$120	\$180	\$60
5 - Specialty	\$90	\$180	\$270	N/A

* Community pharmacy partners are Walgreens and RiteAid.

MAIL ORDER PRESCRIPTIONS		
TIER	30-DAY SUPPLY	31-90 DAY SUPPLY
1 - Preventative Generic	\$0	\$0
2 - Preferred Generic	\$10	\$25
3 - Preferred Brand	\$30	\$75
4 - Non-Preferred	\$60	\$150



Kaiser Permanente Plan

kp.org and the KP mobile app

(A hub for health management)

Visit kp.org/signup to create your profile using your assigned medical record number and find providers and locations near you.

Kaiser Permanente's easy-to-navigate portal connects you to all of your Kaiser Permanente doctors, care providers and medical information. When you visit kp.org, you can:

- Schedule and change routine appointments
- Check most lab results
- Refill most prescriptions
- Make personal action plans for ongoing care
- Manage a family member's care
- Get timely reminders for screenings and more
- Find Kaiser Permanent providers and services located at one of Kaiser Permanente's 26 medical facilities in the Atlanta metro area.

You can also use the Kaiser Permanente mobile app to manage routine appointments, refill most prescriptions for mail-order delivery, see most test results, and more. Visit the app store on your smart phone and search for "Kaiser Permanente" to find and download the app.





Medical Plan Rates

New Structure for Medical Plan Rates

Starting in 2025, Emory is introducing a new approach for medical plan rates, where the amount you pay will be higher or lower depending on how much you are paid. The reason we are doing this is because the cost of the medical plan is more of an employee’s income if they are lower paid, and we want to ensure all our employees have access to affordable health care. In fact, Emory is making a financial investment to subsidize the additional cost of the medical premiums for lower paid employees.

We have three salary-based rate bands to determine employee contributions. The bands are shown below, and medical rates are on pages 20-21.

SALARY-BASED RATE BANDS	
SALARY-BASED RATE BAND 1	< \$28.84 hourly/\$60,000 annually*
SALARY-BASED RATE BAND 2	\$28.84 to \$48.07 hourly/ \$60,000 to \$100,000 annually*
SALARY-BASED RATE BAND 3	> \$48.07 hourly/\$100,000 annually*
* annual salary based on someone who works 40 hours per week	

The 2025 bands will be determined by your salary as of October 1, 2024 and medical rates will not change at any time in 2025 even if you exceed the pay limit for your band due to a pay increase, promotion, etc.

On average, employees in Band 1 will see a reduction in their medical rates in 2025, and employees in Band 2 will see no increase in their rates. Employees in Band 3 will see an increase in their rates which are consistent with the overall increase in Emory’s health care costs -- approximately 17% for this year, due to increases in utilization and cost.

Tobacco Use Surcharge

To support the health and well-being of our faculty and staff, Emory has implemented a **\$50 per person monthly tobacco use surcharge** on medical contributions for employees and their spouses who are covered by an Emory medical plan and use tobacco products. You must certify online in Self-Service whether or not you and your spouse have used tobacco within the last 60 days. The per person tobacco use surcharge will be waived if:

- You certify that you and/or your spouse have not used tobacco within the last 60 days; OR
- You are currently being treated by a physician for a medical condition such as nicotine addiction. In this case, you will need to complete and return a **Tobacco Free Physician Affidavit** to the Benefits and WorkLife Department. This form is available online at www.hr.emory.edu/enrollment.



Medical Plan Rates - Full-Time

Costs for each medical plan option are based on your salary and your work status — full-time (regular employees scheduled to work 30 or more hours per week) or part-time (regular employees regularly scheduled to work between 20-29.9 hours per week). Full-time employee rates for the three salary-based rate bands are listed below:

2025 Medical Plan - Full Subsidy Contributions

(for employees working at least 30 hours per week)

		Aetna HSA Plan		Aetna POS Plan		Kaiser Permanente Plan	
		MONTHLY	BIWEEKLY	MONTHLY	BIWEEKLY	MONTHLY	BIWEEKLY
SALARY-BASED RATE BAND 1 < \$28.84 hourly/\$60,000 annually*	Employee only	\$40.00	\$20.00	\$67.00	\$33.50	\$56.00	\$28.00
	Employee + child(ren)	\$137.00	\$68.50	\$220.00	\$110.00	\$186.00	\$93.00
	Employee + spouse	\$226.00	\$113.00	\$336.00	\$168.00	\$282.00	\$141.00
	Family	\$311.00	\$155.50	\$473.00	\$236.50	\$397.00	\$198.50
SALARY-BASED RATE BAND 2 \$28.84 to \$48.07 hourly/ \$60,000 to \$100,000 annually*	Employee only	\$44.00	\$22.00	\$75.00	\$37.50	\$62.00	\$31.00
	Employee + child(ren)	\$153.00	\$76.50	\$246.00	\$123.00	\$208.00	\$104.00
	Employee + spouse	\$252.00	\$126.00	\$375.00	\$187.50	\$315.00	\$157.50
	Family	\$347.00	\$173.50	\$527.00	\$263.50	\$443.00	\$221.50
SALARY-BASED RATE BAND 3 > \$48.07 hourly/\$100,000 annually*	Employee only	\$52.00	\$26.00	\$87.00	\$43.50	\$73.00	\$36.50
	Employee + child(ren)	\$179.00	\$89.50	\$288.00	\$144.00	\$243.00	\$121.50
	Employee + spouse	\$295.00	\$147.50	\$439.00	\$219.50	\$368.00	\$184.00
	Family	\$407.00	\$203.50	\$617.00	\$308.50	\$518.00	\$259.00

* annual salary based on someone who works 40 hours per week.

These medical plan rates do not reflect the monthly \$50 per person tobacco use surcharge (details on page 19).



Medical Plan Rates - Part-Time

Part-time employee rates for the three salary-based rate bands are listed below:

2025 Medical Plan - Partial Subsidy Contributions (for employees working between 20-29.9 hours per week)							
		Aetna HSA Plan		Aetna POS Plan		Kaiser Permanente Plan	
		MONTHLY	BIWEEKLY	MONTHLY	BIWEEKLY	MONTHLY	BIWEEKLY
SALARY-BASED RATE BAND 1 < \$28.84 hourly/\$60,000 annually*	Employee only	\$49.00	\$24.50	\$84.00	\$42.00	\$69.00	\$34.50
	Employee + child(ren)	\$171.00	\$85.50	\$276.00	\$138.00	\$233.00	\$116.50
	Employee + spouse	\$282.00	\$141.00	\$420.00	\$210.00	\$353.00	\$176.50
	Family	\$389.00	\$194.50	\$591.00	\$295.50	\$496.00	\$249.00
SALARY-BASED RATE BAND 2 \$28.84 to \$48.07 hourly/ \$60,000 to \$100,000 annually*	Employee only	\$55.00	\$27.50	\$93.00	\$46.50	\$77.00	\$38.50
	Employee + child(ren)	\$191.00	\$95.50	\$307.00	\$153.50	\$259.00	\$129.50
	Employee + spouse	\$315.00	\$157.50	\$468.00	\$234.00	\$393.00	\$196.50
	Family	\$434.00	\$217.00	\$659.00	\$329.50	\$553.00	\$276.50
SALARY-BASED RATE BAND 3 > \$48.07 hourly/\$100,000 annually*	Employee only	\$65.00	\$32.50	\$109.00	\$54.50	\$91.00	\$45.50
	Employee + child(ren)	\$223.00	\$111.50	\$360.00	\$180.00	\$304.00	\$152.00
	Employee + spouse	\$368.00	\$184.50	\$548.00	\$274.50	\$460.00	\$230.00
	Family	\$508.00	\$254.00	\$771.00	\$385.50	\$647.00	\$323.50

* annual salary based on someone who works 40 hours per week.

These medical plan rates do not reflect the monthly \$50 per person tobacco use surcharge (details on page 19).



Medical Plan Comparison

	AETNA HSA PLAN			AETNA POS PLAN			KAISER PERMANENTE PLAN
Emory Contribution	\$300/\$600 ¹			None			None
Earned Incentives	\$425/\$850 ²			\$425/\$850 ²			\$425/\$850 ²
Health Savings Account (HSA)	Yes			No			No
	TIER 1	TIER 2	TIER 3 ³	TIER 1	TIER 2	TIER 3 ³	
Annual Deductible - Single	\$1,650	\$1,900	\$2,850	\$850	\$1,000	\$2,000	\$0
Annual Deductible - Family	\$3,300 ⁴	\$3,750 ⁴	\$5,700 ⁴	\$2,550	\$3,000	\$6,000	\$0
Out-of-Pocket Maximum ⁵ - Single	\$3,750	\$5,500	\$11,500	\$3,000	\$4,500	\$11,250	\$3,000
Out-of-Pocket Maximum ⁵ - Family	\$7,500	\$11,000	\$23,000	\$6,000	\$9,000	\$22,500	\$6,000
Out-of-Pocket Maximum ⁵ Aggregate	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Primary Care Office Visits ⁶	15% after deductible	25% after deductible	50% after deductible	\$25 co-pay	\$35 co-pay	50% after deductible	\$25 co-pay
Pediatrician/Mental Health Physician Visit	15% after deductible	25% after deductible	50% after deductible	\$25 co-pay	\$25 co-pay	50% after deductible	\$25 co-pay
Specialist Office Visits ⁷	15% after deductible	25% after deductible	50% after deductible	\$35 co-pay ⁷	\$50 co-pay	50% after deductible	\$35 co-pay
Diagnostic Labs	15% after deductible	25% after deductible	50% after deductible	15% co-insurance	25% co-insurance	50% co-insurance	\$0
X-Ray	15% after deductible	25% after deductible	50% after deductible	15% after deductible	25% after deductible	50% after deductible	\$0
Durable Medical Equipment	15% after deductible	25% after deductible	50% after deductible	15% co-insurance	25% co-insurance	50% after deductible	\$0
Routine Preventive Care ⁸	Plan pays 100%	Plan pays 100%	50% after deductible	\$0 co-pay	\$0 co-pay	50% after deductible	\$0
Emergency Room Visits ⁹	15% after deductible	25% after deductible	25% after deductible	\$250 co-pay	\$250 co-pay	\$250 co-pay	\$250 co-pay
Hospitalizations: Inpatient/Outpatient Coverage	15% after deductible	25% after deductible	50% after deductible	15% after deductible	25% after deductible	50% after deductible	\$250 / \$150 co-pay
Behavioral Health: Inpatient	15% after deductible	25% after deductible	50% after deductible	15% after deductible	25% after deductible	50% after deductible	\$250
Behavioral Health: Outpatient	15% after deductible	25% after deductible	25% after deductible	\$25 co-pay	\$25 co-pay	\$25 co-pay	\$25 co-pay

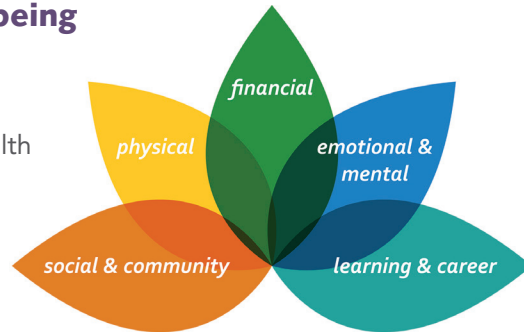
¹ \$600 is contributed annually to the HSA by Emory when Employee+Spouse, Employee+Children or Family level coverage is elected. ² Both employees and spouses can earn up to \$425 in incentives (a maximum total of \$425 for single and \$850 for employee + spouse). ³ Amounts applied to deductible and out-of-pocket maximums are limited to the Reasonable and Customary charges. ⁴ Family deductible applies in the HSA plan when Employee+Spouse, Employee+Children or Family level coverage is elected. ⁵ Out-of-Pocket maximum includes co-pays. ⁶ Includes services of an internist, general physician, family practitioner, dermatologist and/or allergist. ⁷ An additional facility fee may be charged for your specialist visit which may apply to your deductible or co-insurance. ⁸ Routine Preventive Care services ONLY are covered at 100% under the plan at the Tier 1 and Tier 2 Network levels. Diagnostic services are subject to the deductible and co-insurance. ⁹ Co-pay waived if admitted. **DISCLAIMER:** Every attempt has been made to ensure the chart and information above accurately reflects the details of the plan. Should there be any errors, the terms and conditions of the Summary Plan Description (SPD) prevail.



Well-being & Medical Plan Incentives

Five Dimensions of Well-being

This fall, Emory is launching a new vision and focus that takes a more holistic approach to employee health and well-being, concentrating on the following five dimensions:



1. **Financial:** supporting your financial well-being and empowering you to achieve your long-term financial goals.
2. **Emotional & Mental:** helping you manage stress, build resilience, and prioritize your mental health.
3. **Physical:** promoting a healthy lifestyle and preventing illness.
4. **Social & Community:** providing opportunities for social interaction and community involvement and creating an inclusive and welcoming environment for all.
5. **Learning & Career:** fostering continuous learning and professional growth.

The 2025 well-being and medical plan incentives are directly tied to the new well-being dimensions.

Incentives

To encourage you to take an active role in your health and well-being, Emory provides well-being and medical plan incentives for your participation in healthy activities.

Incentives are applied to your medical plan:

- If you have the Aetna HSA Plan, you will get a deposit into your health savings account.

- If you have the Aetna POS Plan, you will get a credit toward your deductible or co-insurance. Incentives cannot be used for co-pays.
- If you have the Kaiser Plan, your incentives will be added to your Kaiser Permanente Health Reimbursement Arrangement (KP HRA) and can be used towards your medical and pharmacy co-pays.

2025 Incentives are listed in the chart on the following page.

Incentive activities must be completed between January 1, 2025 and November 15, 2025 in order to receive the 2025 incentives.

Healthy Emory Connect

It's much easier to develop healthy habits when you're keeping track of them. Healthy Emory Connect (Sharecare) can help you do that!

Healthy Emory Connect (Sharecare) is Emory's well-being platform, open to benefits-eligible employees, spouses, and pre-65 retirees with Emory medical plan coverage. By joining, you can participate in challenges and other programs to earn your incentives.



Other Healthy Emory Programs

In addition to the incentives and the Healthy Emory Connect platform, Healthy Emory offers many other well-being activities throughout the year. To learn more, visit the website at www.healthy.emory.edu, watch for announcements in Emory newsletters, or view Healthy Emory's events calendar: <https://www.trumba.com/calendars/hr-events-healthy-emory>.



Well-being & Medical Plan Incentives

You and your spouse can choose from a menu of different incentive opportunities (see below). Both employees and spouses can earn **up to \$425** in incentives (a maximum total of **\$425 for single** and **\$850 for employee + spouse**).

2025 Incentives		Eligible	Earn
Annual Preventive Exam (Well Adult/Well Woman)	Complete your annual preventive wellness exam (well adult or well woman) with your provider.	employee and spouse	\$50
RealAge (Health Risk Assessment) Completion*	Answer questions on the Healthy Emory Connect (Sharecare) platform/mobile app to gauge how fast you're aging based on your lifestyle, medical history, and other risk factors. Then, connect to resources to help improve your health and lower your "RealAge."	employee and spouse	\$25
Healthy Emory Connect Activities*	Complete challenges and other activities offered through the Healthy Emory Connect (Sharecare) platform/mobile app (Nutrition, Physical Activity, Sleep & Recovery, and Social & Community).	employee and spouse	Up to \$400
Diabetes Prevention Program (DPP)*	Complete the Diabetes Prevention Program (DPP). This is a one-year program for individuals at high risk of developing diabetes. To participate, you must meet certain eligibility criteria. This small group program teaches you how to eat healthy, increase physical activity, and manage stress to prevent type 2 diabetes. It has two phases: the core phase and the post-core phase.	employee and spouse (must meet the DPP criteria)	Up to \$200
Unwinding Mini-Course*	Enhance your well-being with the "Unwinding" app, a unique tool offered by Sharecare. Complete a relaxing mini-course each quarter to help reduce stress and boost mindfulness—an easy way to prioritize your mental well-being throughout the year.	employee and spouse	\$25/quarter Annual max: \$100
Winship 5k	Participate in the Winship 5k race to help Emory raise money for cancer research. Don't want to race? No problem! You can also participate as a volunteer on race day to earn this incentive.	employee and spouse	\$25
Fidelity Financial Wellness Check-Up	Take the Fidelity Financial Wellness Check-Up to find out what you're doing well and what steps you may need to take to improve your financial well-being.	employee only	\$25

* You must join Healthy Emory Connect in order to receive these incentives.



Flexible Spending Accounts

Out-of-pocket expenses for medical care and dependent day care can be difficult to manage.

Emory offers two types of Flexible Spending Accounts to help you set aside pre-tax funds to pay for these expenses.

A Flexible Spending Account (FSA) is funded with money you contribute on a pre-tax basis. You can use FSA funds to pay for qualified out-of-pocket health care costs for you and eligible dependents or dependent day care charges.

According to IRS regulations, each year you must enroll during your benefits annual enrollment period if you want to participate in either a Healthcare FSA or a Dependent Day Care FSA.

Healthcare FSA for POS or Kaiser Permanente plans

You can contribute between \$200 and \$3,200 pre-tax annually into the Healthcare FSA. All money you elect to contribute is accessible immediately and can be used to cover out-of-pocket costs such as:

- Medical expenses: co-pays, deductibles, co-insurance
- Dental expenses: deductibles and co-insurance
- Vision expenses: prescription glasses, contact lenses, co-pays
- Prescription drug costs
- Over-the-counter drugs

Limited Purpose Healthcare FSA for HSA Plan

HSA Plan members are not eligible for the Healthcare FSA but do have access to a limited Healthcare FSA administered through Aetna PayFlex. You may use the limited FSA to reimburse yourself for dental and vision expenses and for medical expenses once your deductible has been met. **Members who elect a Limited Purpose FSA will be able to use the Inspira Financial debit card for dental and vision expenses.**

TIP: You may want to think twice about enrolling in a Limited Healthcare FSA. If you are making contributions to your HSA, those funds can be used for any IRS eligible medical, dental, and vision expense whereas the Limited Healthcare FSA funds can only be used for dental and vision if you have not satisfied your HSA medical plan deductible.

Grace Period for Healthcare FSA

The risk of forfeiting money from your Healthcare FSA has been reduced by a grace period (extra time in the following year to use your FSA money). For those with a current 2024 FSA, you will be able to use any remaining balance in your Healthcare FSA at the end of 2024 to pay for expenses incurred through March 15, 2025. Any 2024 Healthcare FSA funds not used by March 15, 2025 will be forfeited. To avoid forfeiture, purchase items such as eyeglasses, contact lenses and other approved Healthcare FSA expenditures. Reimbursement requests using your previous year's remaining Healthcare FSA balance must be filed by **May 15, 2025**. Please remember to keep all of your receipts and Explanation of Benefits from insurance companies as they are required for verification of expenses.



Flexible Spending Accounts

Dependent Day Care FSA

Money you contribute into a Dependent Day Care FSA can be used toward care for a child under age 13, a physically or mentally disabled parent or child, or elder care for tax-qualified dependents. If you're single or married and filing a joint tax return, you can contribute up to \$5,000 into this FSA. If you're married and file separately, you can contribute up to \$2,500. If you are a highly compensated employee under the IRS definition (i.e. you had Emory earnings of more than \$155,000 for 2024), you are restricted to an annual contribution of no more than \$1,800. Unlike the Healthcare FSA, you can only access the money that is currently in your account. To qualify for reimbursement, these expenses must be incurred so that you and/or your spouse can work or go to school. HSA Plan members can also participate in the Dependent Day Care FSA.

No Grace Period for the Dependent Day Care FSA

If you have a Dependent Day Care FSA, you do NOT have a grace period in which to use remaining previous year balances. All expenses must occur no later than December 31, 2024 and claims for 2024 Dependent Day Care FSA must be filed no later than **May 15, 2025**, to receive reimbursement. File by the May 15th deadline to avoid forfeiture of your 2024 FSA funds.

**DON'T MISS THE MAY 15, 2025
REIMBURSEMENT DEADLINE!**

Inspira Financial Debit Card

All new FSA participants will automatically receive a new debit card in the mail for 2025. Please activate the card when you receive it. Current FSA participants who elect FSAs for 2025 will have their new balances loaded onto their existing card. The use of the card is for convenience only. IRS guidelines still require you to retain receipts for any eligible expense for which you receive reimbursement. On occasion, there may be a request for verification of expenses and you will need to submit appropriate documentation for the expense. If not received, the card will be deactivated until the expense can be substantiated as eligible under IRS definitions. Check with Inspira Financial, the FSA Administrator, to determine what supporting documentation is required. You can manage your account online at <https://inspirafinancial.com>.

GET REIMBURSED

Getting reimbursed from your FSA is easy. Just follow these steps:

1. Register on Aetna's website at www.aetna.com to download your medical or dental Explanation of Benefits (EOB).
2. Register on the Inspira Financial website at <https://inspirafinancial.com>.
3. Enroll in direct deposit.
4. Follow the steps to upload documents.
5. Receive reimbursement in a few days.



Dental Coverage

Emory offers two different dental plan options: the Aetna Traditional Dental (PPO) or the Aetna Dental Maintenance Organization (DMO).

Aetna Traditional Dental (PPO) Plan

The Aetna Traditional Dental (PPO) Plan is a traditional dental plan that allows you to see any dental provider. Some services require you to pay the deductible and applicable co-insurance. The deductible is a set amount that typically you pay before co-insurance starts. Co-insurance is the portion you must pay for services, in most cases, after meeting your deductible.

Features of this plan include:

- Flexibility to choose any provider. This plan has a large number of In-Network providers.
- Reimbursements for most Out-of-Network claims, subject to reasonable and customary levels.
- Preventive services received by either In-Network or Out-of-Network providers are covered at 100% up to reasonable and customary levels.

Some examples of routine preventive services include:

- Oral examinations
- Routine, deep cleanings and polishing (deep cleanings, or full mouth debridement, CPT 4355, are covered under preventive services as a replacement for one of your routine cleanings once in a 24 month period of time)
- Fluoride
- Sealants (permanent molars only)
- Bitewing X-rays
- Full Mouth Series X-Rays
- Space Maintainers

Aetna Dental Maintenance Organization (DMO) Plan

The Aetna Dental Maintenance Organization (DMO) Plan is a managed care plan that contracts with a list of providers at a set fee schedule. Participants pay co-pays and do not have to pay co-insurance. This plan offers a limited network of dentists with low member contributions, no deductible and low out-of-pocket co-pays. **Out-of-Network coverage is not available.** A Primary Care Dentist (PCD) must be selected and a referral is required for specialist care.

For a list of scheduled services and to see what the Aetna DMO plan pays, go to www.aetna.com/docfind/custom/emory. Be sure to check with your dentist of choice before enrolling to ensure he/she is participating in the plan and is accepting new patients.





Dental Plan Comparison

2025 Dental Plan Comparison			
	Aetna PPO Plan		Aetna DMO Plan
	IN-NETWORK	OUT OF NETWORK ¹	IN-NETWORK ONLY*
Preventive Services (routine & deep cleanings, X-rays, etc.)	\$0	\$0	\$0
Basic Services (filling, root canal, etc.)	10% ²	20% ²	Scheduled
Major Restorative (crown, bridge, etc.)	50% ²	50% ²	Scheduled
Calendar Year Deductible³	\$50/person \$150/family	\$50/person \$150/family	None
Annual Plan Payment Maximums	\$1,500/person	\$1,500/person	None
Orthodontia:			
- Deductible	None	None	\$2,000 co-pay, limited to one treatment per lifetime
- Co-insurance	50%	50%	
- Lifetime Maximum	\$1,500	\$1,500	
<p>* There is no Out of Network coverage in the Aetna DMO plan.</p> <p>¹ Amounts applied to deductible are limited to the Reasonable and Customary charges</p> <p>² After deductible</p> <p>³ Waived for preventive services</p> <p>DISCLAIMER: Every attempt has been made to ensure the chart and information above accurately reflect the details of the plan. Should there be any errors, the terms and conditions of the Summary Plan Description (SPD) prevail.</p>			



Dental Plan Rates

2025 Dental Plan - Full Subsidy Contributions (for employees working at least 30 hours per week)				
	Aetna PPO Plan		Aetna DMO Plan	
	MONTHLY	BIWEEKLY	MONTHLY	BIWEEKLY
Employee only	\$31.00	\$15.50	\$20.00	\$10.00
2-Person	\$69.00	\$34.50	\$40.00	\$20.00
Family	\$113.00	\$56.50	\$66.00	\$33.00

2025 Dental Plan - Partial Subsidy Contributions (for employees working between 20-29.9 hours per week)				
	Aetna PPO Plan		Aetna DMO Plan	
	MONTHLY	BIWEEKLY	MONTHLY	BIWEEKLY
Employee only	\$38.75	\$19.38	\$22.22	\$11.11
2-Person	\$83.00	\$41.50	\$45.96	\$22.98
Family	\$139.00	\$69.50	\$72.58	\$36.29



Vision Coverage

Vision Coverage

Emory offers an optional vision plan through EyeMed Vision Care. Some features of this plan include:

- Routine annual eye exam: \$0 co-pay.
- Retinal imaging: \$0 co-pay.
- Single, bifocal, trifocal, lenticular lenses: \$0 co-pay.
- Tint: \$0 co-pay.
- UV: \$0 co-pay.
- Progressive lenses: \$65 co-pay.
- Frames: Up to \$150 allowance, 20% off balance over \$150.
- Contact lenses (conventional and disposable): \$0 co-pay up to \$200 allowance. 15% off balance over \$200 on conventional lenses.
- Benefits provided once every 12 months for lenses or contact lenses.
- Contact lens and frame allowance are a one-time use benefit. Members are encouraged to use their full allowance at the time of initial service. Unused balances are not available for future visits during the same plan year in which the initial service was utilized.
- 40% off unlimited additional prescription eyewear purchases.
- 20% off nonprescription sunglasses.

For a complete list of the plan details, visit EyeMed Vision Care at: www.eyemedvisioncare.com.

EyeMed Providers

EyeMed Vision Care offers a large network of providers including the Emory Eye Center, LensCrafters, Pearle Vision and many more. For a complete list of providers, call 855-270-2343 or go to www.eyemedvisioncare.com: Select *Find a Provider* (top menu), enter your zip code, click on *Choose Network* and click *Select*, then click on *Get Results*.

2025 Vision Plan - Full & Partial Subsidy Contributions (rates apply to both full and part-time employees)		
	EyeMed Vision Care	
	MONTHLY	BIWEEKLY
Employee only	\$12.28	\$6.14
Employee + child(ren)	\$24.50	\$12.25
Employee + spouse	\$23.28	\$11.64
Family	\$36.08	\$18.04

Vision Coverage through your Medical Plan

Employees enrolled in one of Emory’s medical plans receive one routine vision exam per calendar year at an optometrist or ophthalmologist. Because an annual vision exam is considered preventive care, it is covered at 100%. Locate a participating vision provider at www.aetna.com/docfind/custom/emory.

Discount to the Emory Eye Center

All Emory faculty and staff and their immediate family members are eligible to receive services and discounts at the Emory Eye Center. For a complete list of discounts, visit the benefits website. To schedule an appointment, call 404-778-2020.

Important Note: Plan participants cannot use EyeMed Vision Care and discounts from the Emory Eye Center at the same time.



Life Insurance

Emory provides basic life insurance at no cost to you. The value of the basic life insurance benefit is 1x base annual salary, with a minimum of \$10,000 and a maximum of \$50,000 (for active employees). Enrollment is automatic, but you must select beneficiaries. Life insurance benefits are administered by The Standard Insurance Company.

Supplemental Life Insurance

You can elect supplemental life insurance coverage in increments of \$10,000, up to a maximum of \$750,000. Coverage elected up to \$500,000 at the time of your initial eligibility does not require Evidence of Insurability (EOI). During each benefits annual enrollment period, you can elect to increase* your existing coverage up to \$20,000 without satisfying EOI. If you are increasing your existing coverage by more than \$20,000, EOI is required. If you initially waived coverage, EOI is required for any amount you elect.

Coverage for Your Spouse

You can elect supplemental life insurance coverage for your spouse in increments of \$10,000, up to a maximum of \$500,000. Coverage elected up to \$100,000 at the time of your initial eligibility does not require EOI. During each benefits annual enrollment period, you can elect to increase* existing spouse coverage up to \$10,000 without satisfying EOI. If you are increasing your existing coverage by more than \$10,000, EOI is required. If you initially waived coverage, EOI is required.

* For employees who are currently on leave of absence, any increases to employee/spouse life insurance cannot be made until the annual enrollment immediately following the employee's return to work.

Coverage for Your Child(ren)

You can elect life insurance for your eligible child(ren) in increments of \$2,000, up to a maximum of \$10,000. Even if you initially waived coverage, no EOI form is required.

Note: You can purchase supplemental life insurance for a spouse or child(ren) without purchasing employee coverage.

Designate a Beneficiary

Since Emory provides you with life insurance benefits, you should designate a beneficiary, even if you do not sign up for supplemental life insurance benefits. Your beneficiary is the person(s) who will receive your life insurance benefits when you die. Your beneficiary can be a person or multiple people, charitable institutions, or your estate. Once named, your beneficiary remains on file until you make a change. If your family situation changes, you will want to review the beneficiaries on file and make updates if necessary. If you do not name a beneficiary, your life insurance benefits will be distributed in accordance with the policy. Use Self-Service to designate a beneficiary.



Life Insurance

Supplemental Life Rates	
AGE OF EMPLOYEE/SPOUSE	MONTHLY RATES PER \$10,000
Less than 25	\$.39
25-29	\$.47
30-34	\$.62
35-39	\$.70
40-44	\$.78
45-49	\$1.16
50-54	\$1.79
55-59	\$3.71
60-64	\$5.07
65-69	\$9.86
70+	\$16.00
DEPENDENT CHILD(REN)	RATE
Rate per \$2,000 coverage	\$.34

At age 70, supplemental life insurance coverage reduces to 65% of the original face amount; at age 75 it reduces to 50% of the original face amount.

Example

Here is an example of how the cost for a supplemental life insurance policy is calculated for an employee, age 42, who elects a \$100,000 supplemental life insurance policy.

$$\text{Cost} = (\$100,000/\$10,000) \times .78 = \$7.80 \text{ per month}$$





Accidental Death & Dismemberment

Accidental Death & Dismemberment

Accidental Death & Dismemberment (AD&D) insurance provides coverage for non-job related accidental dismemberment or accidental death.

You can purchase AD&D for you and your spouse in increments of \$10,000 (up to \$250,000). You can purchase coverage for dependent child(ren) at levels of \$5,000, \$10,000 or \$15,000. Evidence of Insurability (EOI) is not required to enroll in this benefit.

Designate a Beneficiary

Be sure to designate a beneficiary for your AD&D coverage. Your beneficiary can be any person(s), charitable organizations, or your estate. You should review your beneficiaries at least annually and make any necessary updates as needed. You do not need to name a beneficiary for spouse or child AD&D as you are automatically the beneficiary for dependent coverage.

Accidental Death & Dismemberment Rates

	COVERAGE	MONTHLY RATES
Employee/Spouse	\$10,000	\$.14
	\$20,000	\$.28
	\$30,000	\$.42
	\$40,000	\$.56
	\$50,000	\$.70
	\$60,000	\$.84
	\$70,000	\$.98
	\$80,000	\$1.12
	\$90,000	\$1.26
	\$100,000	\$1.40
	\$110,000+	\$1.54 - \$3.50
Child(ren)	\$5,000	\$.07
	\$10,000	\$.14
	\$15,000	\$.21

Example

Here is an example of how the cost for an AD&D insurance policy is calculated for a monthly paid employee who elects \$100,000 in coverage for the year.

$$\text{Cost} = (\$1.40 \times 12 \text{ months}) = \$16.80 \text{ per year}$$



Short Term Disability

Emory offers both a short term and a long term disability benefit through UNUM. These benefits provide an income in the event you become disabled due to an injury or illness that is not work-related.

Short Term Disability (STD)

Short term disability (STD) coverage provides a benefit equal to 70% of your base salary for a period of up to 180 days, if your claim for benefits is approved. Emory offers the option of multiple waiting periods associated with the STD program. A waiting period is the length of time between your last day actively at work and the point in which you would be eligible to begin receiving your STD benefit. Currently, Emory offers the choice of four waiting periods: 15, 21, 30 or 60 days. For STD coverage, the benefit is tax-free. You may enroll or decrease your waiting period during annual enrollment without Evidence of Insurability (EOI), however, pre-existing condition exclusions will apply.

STD benefits will begin the latter of:

- The end of your STD waiting period; OR
- The date your accrued sick leave and optional use of paid leave (vacation or floating holidays) payments end.

You have the option to decide how much accrued leave to use after satisfying the waiting period. Concurrent payment of STD benefits and accrued leave is not permitted.

Short Term Disability Rates	
WAITING PERIOD	EMPLOYEE COST PER \$100 COVERED SALARY
15 days	\$.72
21 days	\$.65
30 days	\$.36
60 days	\$.20

Example

Here is an example of how the cost for STD is calculated for an employee with a \$50,000 salary who chooses a 60-day waiting period.

$$\text{Cost} = (\$50,000 / \$100) \times \$.20 = \$100 \text{ per year}$$

NOTE: STD coverage added during annual enrollment is subject to pre-existing condition exclusions. Any condition you were diagnosed with, treated for, or taking medication for within three months of January 1, 2025 will be excluded for STD benefits for 12 months after the effective date.

This same exclusion applies when you reduce your STD waiting period.



Long Term Disability

Long Term Disability (LTD)

With long term disability (LTD) coverage provided by Emory, you can receive a benefit equal to 66.67% of your base salary in the event you are unable to work due to a non-work-related injury or illness. With LTD there is a 180-day elimination period. Emory's LTD coverage has a monthly maximum benefit of \$15,000. It is automatically provided after you have completed one year of service in a benefits-eligible status. For LTD coverage, the 81.67% salary benefit is taxable to the recipient as LTD is employer paid.

Cost of Living Adjustment (COLA) Option

A feature within the LTD program is the ability for you to elect the COLA option. COLA provides a 4% annual increase to the level of your LTD benefits when your disability under the LTD plan lasts more than a year. The COLA adjustment is to keep the level of your disability payments/income in pace with inflation. COLA premiums are deducted from your paycheck after tax. COLA benefits received while on LTD are not subject to federal or state income tax. COLA is optional and is 100% employee paid. Enroll when you are initially eligible or during annual enrollment without Evidence of Insurability.

NOTE: COLA coverage added during annual enrollment is subject to pre-existing condition exclusions. Any condition you were diagnosed with, treated for, or taking medication for, within three months of January 1, 2025 will be excluded for COLA benefits for 12 months after the effective date.

Supplemental Individual Disability Insurance (IDI)

Another feature within the LTD program is the ability for you to "buy up" and increase the level of income that is protected and paid as a benefit should a long term disability occur. Emory provides LTD coverage at 66.67% of your base salary; Individual Disability Insurance (IDI) provides the ability for you to purchase additional coverage, making the total income replacement benefit 75% while you are disabled. Since you pay the full cost to "buy up" under the IDI feature, the additional coverage or benefit payments related to IDI are tax-free. IDI protection is also portable in the event you leave Emory. You must enroll when you are initially eligible during the first benefits enrollment period after the effective date of your long term disability coverage. Enrollment is only offered one time. For more information, go to www.unum.com or call 800-421-0344.

COLA Enrollment Without Evidence of Insurability

Employees who are currently enrolled in Long Term Disability (LTD), but did not initially elect the Cost of Living Adjustment (COLA), will be able to enroll in COLA during annual enrollment without answering questions about their health. However, pre-existing condition exclusions will apply.



Long Term Care

Long Term Care

Emory offers optional coverage for long term care through UNUM. Your coverage is portable, which means you may continue coverage when you leave Emory. Long term care is designed for people who need assistance with daily living activities due to an accident, illness, or advancing age. You may receive long term care either in your home or in a facility. Benefits are paid when a physician certifies a person can no longer perform at least two of the following:

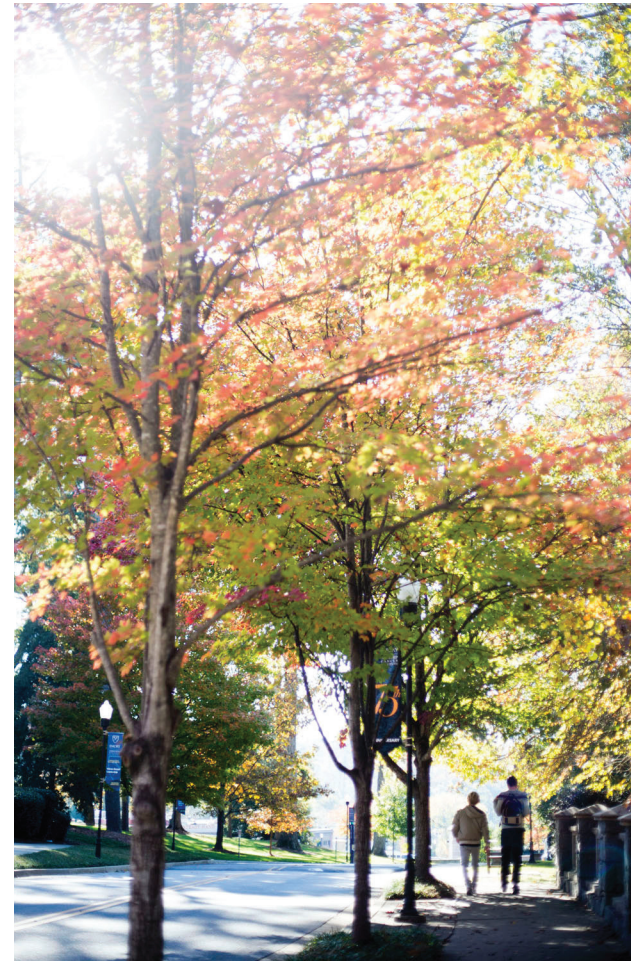
- Bathing
- Dressing
- Eating
- Toileting
- Transferring

There is a 60-day waiting period before benefits are paid. Monthly coverage can be purchased in increments of \$1,000 (from \$1,000 to \$8,000). You can elect a benefit of three years, six years, or an unlimited duration.

Other family members also may take advantage of Emory's group rates, but there is no guarantee of coverage.

If you apply when first eligible, no Evidence of Insurability is required for up to \$6,000 in monthly benefits. If you apply after 31 days you must complete a medical questionnaire and be approved by UNUM.

For additional information, contact UNUM at 800-227-4165.





Other Benefits

AFLAC

Emory provides a voluntary coverage through AFLAC for Hospital, Cancer and Accident insurance. These policies are available at group rates that are lower than those typically available to individual policy holders. You have access to a wide range of policy and rider insurance products through AFLAC. Coverage is portable in the event that you leave Emory. For more information or to schedule an appointment to receive a personal quote, call AFLAC at 877-384-3344 or visit online at www.aflac.com/emory.

Home & Auto Insurance

Emory provides access to this voluntary coverage through Farmers GroupSelect for home and auto insurance. This coverage is available at group rates that are lower than those typically available to individual policy holders. You have access to a wide range of personal property and casualty insurance products through Farmers GroupSelect. You may get coverage for your automobile, boat, motor home, or recreational vehicle. Policies for your rental property, house or condo are also available. Your coverage is portable, so in the event that you leave Emory, you may continue your coverage through Farmers GroupSelect's direct bill program.

For more information or to receive a personal quote for Home and Auto, call Farmers GroupSelect at 800-438-6381.

MetLife Legal Plans

Whether you have planned legal expenses or just want to be prepared for the unexpected, MetLife Legal Plans is available to meet your needs. Through the plan, you have access to more than 4,000 law firms and 9,000 attorneys nationwide, for both telephone and office consultations. The plan covers a variety of services from traffic or real estate matters to will and estate planning

and more. Employees enrolled in the MetLife Legal Plan will also have access to **Family First Caregiver Concierge Services** which provide dedicated, multidisciplinary care experts to solve complex caregiving challenges such as:

- elder care
- child and adolescent well-being
- cognitive issues and dementia
- aging in place
- insurance and Medicare navigation
- and much more

There are no claim forms, deductibles, hour limits, co-pays or caps for covered services. Since this is a group plan, you receive discounted rates on the cost of coverage. The plan is portable in the event that you leave Emory.

The plan is available for **\$16.74 per month** and covers you, a spouse, and legal dependent(s)/child(ren). Participants in this plan who experience a qualified IRS family status change during the year must remain enrolled in the plan for the entire year. For more information, call MetLife Legal Plans at 800-821-6400.

Adoption Reimbursement

Emory provides reimbursement for the costs of adopting a child. Eligible employees can receive reimbursement for qualified adoption expenses up to \$5,000 per finalized adoption, not to exceed a lifetime benefit of \$10,000. No action is required at annual enrollment. Applications for assistance should be submitted no later than 90 days after the official date of the adoption of a child. Information about the Adoption Reimbursement benefit is available on the Benefits website at www.hr.emory.edu/benefits.



Other Benefits

Childcare Subsidy

Emory offers a childcare subsidy for eligible employees who need financial support with tuition expenses at The Clifton School, Early Emory, or Primrose at Emory Healthcare-Northlake Campus.

The subsidy can be applied towards tuition for children aged infant through pre-kindergarten, aftercare expenses for children enrolled in the Georgia Lottery pre-kindergarten, and Summer Camp for children enrolled in early education programming the remainder of the year at The Clifton School, Early Emory, and Primrose at Emory Healthcare-Northlake Campus. For information, go online: <https://hr.emory.edu/eu/work-life/children-and-family/child-care/index.html>.

Maven

Emory has a new benefit for **Aetna Plan members** in partnership with Maven, the world's largest virtual clinic for women and families offering support for **pregnancy, postpartum, and menopause**.

With Maven, you and your partner can access unlimited 24/7 virtual appointments and messaging with over 35+ types of providers, a dedicated Care Advocate to help you find the right care, plus expert-vetted articles and provider-led classes. Get expert support, day or night, for:

- Navigating pregnancy and preparing to give birth by creating your birth plan
- Breastfeeding and bottle feeding
- Returning to work and finding the right childcare options for you
- Treating menopause symptoms
- Managing your mental health
- And more!

Maven is available to Emory University faculty and staff enrolled on the Aetna medical plan, as well as their spouses, partners, and dependents >18.

Sign up for free today at: mavenclinic.com/join/aetna-now or download the Maven Clinic app.





Retirement Savings

*Retirement may be just around the corner or may be far on the horizon — but it is never too late or too early to start saving.
Emory encourages you to take care of your future by planning well today.*

To assist employees in saving for retirement, Emory is pleased to offer a 403(b) Savings Plan, 403(b) Roth, and 457(b) Deferred Compensation Plan.

403(b) Savings Plan

A 403(b) plan is a tax-deferred retirement plan available to employees of educational institutions and certain non-profit organizations. Contributions and investment earnings grow tax-deferred until withdrawal, assumed to be retirement, at which time they are taxed as ordinary income.

Emory's 403(b) savings plan allows employees to contribute a percentage of **pre-tax** pay, and receive a basic contribution and matching contribution from Emory. Emory's 403(b) savings plan offers you "Four Ways to Invest." From the simplest of options, or mixing and matching to develop your own investment mix, you can create the retirement portfolio that is right for you. You can choose to invest with one or both of Emory's retirement plan vendors: **Fidelity Investments and/or TIAA**. For more information, visit the Benefits website at www.hr.emory.edu/benefits.

403(b) Roth

The 403(b) Roth allows individuals to save for retirement by contributing **after-tax** dollars. At the time of distribution, in retirement, the withdrawal of your contributions are tax-free; however, the earnings on any contributions are taxed unless your account has been open at least five years and you have reached age 59 1/2. Employees have the option of directing 403(b) contributions to either the 403(b) Savings Plan or the 403(b) Roth, or some combination of the two plans that does not exceed that year's contribution limits set by the IRS.

Employee Contributions

You can contribute from 1% to 91% of your regular salary in any increment, subject to IRS maximum deferral limits. The maximum deferral limit for 2024 is \$23,000 per calendar year (the limit for 2025 is not yet available). This limit is published annually by the IRS. If you are age 50 or over, you can make additional catch-up contributions (for 2024, the IRS limit is \$7,500). Contributions up to 2% will be matched by Emory.

Auto Enrollment

New employees will be automatically enrolled in the retirement plan with a contribution of 1% of their salary each pay period. Employees have the option to opt out of the election. If employees continue with the 1% contribution, the contribution will be automatically increased to 2% after one year. Employees can also opt out of the increase.

Eligibility for "Employer" Contributions

All eligible full-time and part-time employees who are at least 21 years of age, have completed one year of service and have worked at least 1,000 hours in a consecutive 12-month period are eligible to receive Emory's Basic Contribution.

Eligibility for matching contributions becomes effective on the first day of the month you meet the eligibility requirement and contribute your own 1% or 2%.

Employees may be eligible to waive the one year service requirement if they participated in their prior employer's sponsored retirement plan and received employer contributions in the plan immediately prior to joining Emory. You



Retirement Savings

must complete the **Certification of Participation** in Self-Service (click on **Benefits** tile, then **403(b) Certification**, and follow the instructions provided).

Emory's Basic Contribution

Once you are eligible, Emory provides a basic contribution of 6% of regular salary. When your eligibility requirement has been met, Emory's 6% contribution to your retirement will begin the first of the following month.

Emory's Matching Contribution

Emory will match employee contributions as follows:

- Your first 1% of regular salary contributed — Emory matches with a 1.5% contribution
- Your second 1% of regular salary contributed — Emory matches with a 1.5% contribution

For your 2% contribution, Emory matches a total of 3%.

Example

Here is an example of the total 403(b) contributions received for an employee who contributes 2%:

Employee Contribution = 2%

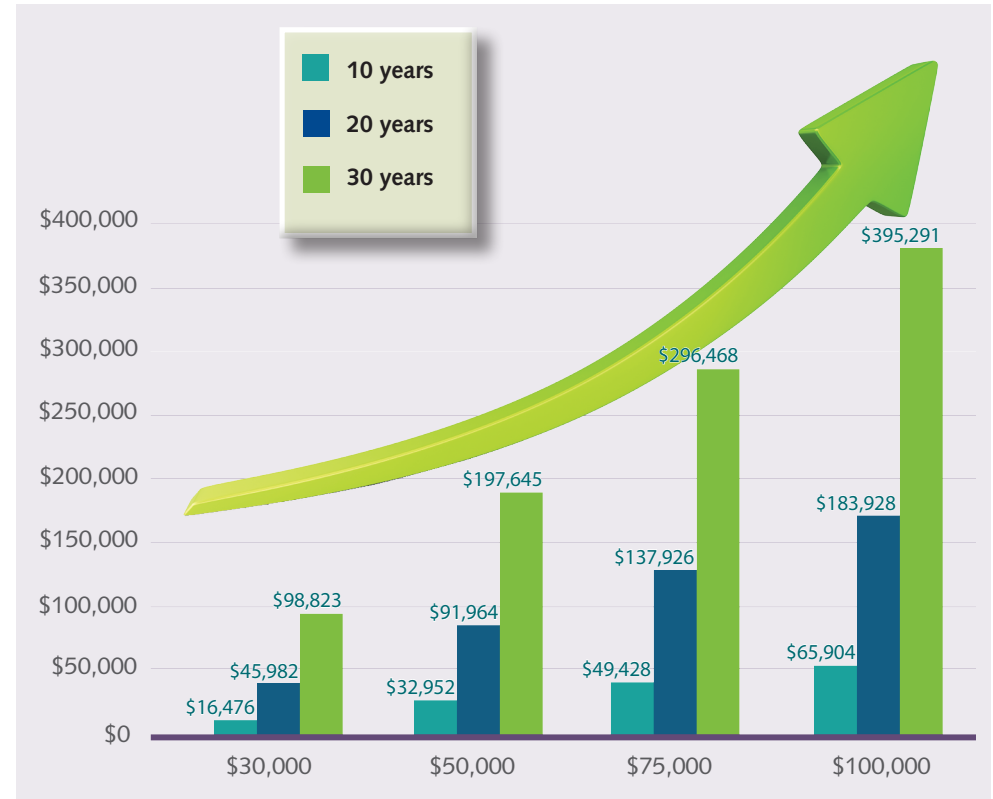
Employer Matching Contribution = 3%

Employer Basic Contribution = 6%

Total 403(b) Contribution = 11%

How your Contributions Could Grow

Taking advantage of matching contributions can make a big difference! The chart below shows examples of different salary levels contributing 2% and matched by Emory's 3%. The example does not include Emory's basic contribution of 6% which would make the totals even higher.



This hypothetical example assumes a \$30,000, \$50,000, \$75,000 and \$100,000 annual salary, respectively; a \$0 initial retirement savings plan account balance; and a 6% annual rate of return compounded biweekly. Your own account may earn more or less than this example, and income taxes will be due when you withdraw from your account. Investing in this manner does not ensure a profit or guarantee against a loss in declining markets.



Retirement Savings

Vesting

FOR NEW HIRES OR CONTRIBUTIONS AFTER JANUARY 1, 2007,
VESTING IS AS FOLLOWS:

Your Contributions	100% vested
Emory Basic Contribution and Matching Contribution	After completion of 3 years of service

How to Enroll

You can enroll in the 403(b) Savings Plan or 403(b) Roth at any time throughout the year (enrollment is not limited to the benefits annual enrollment period). Enroll using Fidelity's NetBenefits website: <http://NetBenefits.com/Emory>. Visit www.hr.emory.edu/benefits for more information and step-by-step instructions. You can also make changes to your contribution amounts at any time throughout the year using NetBenefits.

457(b) Deferred Compensation Plan

The 457(b) Deferred Compensation Plan is another way for certain employees to set aside additional contributions for retirement. Participation in this plan is limited only to those employees who earn 125% of the IRS highly compensated employee salary limit or more per year. For 2024, this amount is \$193,750 (the 2025 limit is not yet available).

- Emory does not contribute or match participant contributions to the 457(b) plan.
- Catch-up contributions to the 457(b) plan can only occur in the last three years prior to the normal retirement age of 65.
- The 457(b) plan has a different lineup of investment choices.

For more information about the 457(b) Plan, including instructions on how to enroll, visit the benefits website at www.hr.emory.edu/benefits.

Retirement Counseling Sessions

Fidelity Investments and TIAA offer individual retirement counseling sessions throughout the year on the 403(b) Savings Plan, 403(b) Roth, and the 457(b) Deferred Compensation Plans.

To make an appointment, visit the benefits website: www.hr.emory.edu/benefits. Appointments are currently being offered virtually.





Resources

Summary of Benefits and Coverage

All employers are required to provide an eight-page Summary of Benefits and Coverage (SBC) for all the health plans available to their employees. Emory's SBC is available online at: www.hr.emory.edu/benefits.

Tier 1 Network (For HSA & POS Plans)

Providers and facilities in the Tier 1 Network give you the maximum benefit available under the Aetna HSA and POS plans, with lower co-pays, co-insurance and deductibles.

Tier 1 facilities include:

- Emory University Hospital
- Emory University Hospital Midtown
- Emory Decatur Hospital
- Emory Long Term Acute Care
- Emory Hillandale Hospital
- Emory University Orthopaedics & Spine Hospital
- Emory Johns Creek Hospital
- Emory Rehabilitation Hospital, in partnership with Select Medical
- Children's Healthcare of Atlanta (including Egleston and Scottish Rite)
- Grady Memorial Hospital (including Hughes Spalding)
- Emory Saint Joseph's Hospital
- St. Francis Hospital (Columbus)
- Wesley Woods Geriatric Hospital

Tier 1 physicians include:

- Emory physicians
- DeKalb Physician Hospital Organization (DPHO)
- Community physicians

To locate a participating Tier 1 physician or facility, go to www.aetna.com/docfind/custom/emory or call Aetna at 800-847-9026.

Out-of-State Coverage (HSA & POS Plans)

If you or your covered dependents live outside of Georgia, search for providers in the Tier 2 Network at www.aetna.com/docfind/custom/emory.

International Coverage (HSA & POS Plans)

If you live or travel outside the U.S., coverage for urgent/acute care is provided at the Tier 2 Network level. Routine care will be covered at the Tier 3 level. Call Aetna at 800-847-9026 for more information.

Emergency Coverage (HSA & POS Plans)

Emergencies are always covered at the Tier 2 Network co-pay or co-insurance level. Contact Aetna within 48 hours.

Kaiser Permanente Network

You may only elect Kaiser Permanente if you live within the states of Georgia or California. If you live elsewhere, the Aetna HSA or POS plan are your allowable medical options. To search for Kaiser Permanente doctors and locations visit kp.org/doctorsandlocations.



Resources

8-EVIP (404-778-3847) Appointment Line (HSA & POS Plans)

Emory Healthcare is committed to the health care needs of Emory's employees and to meet this commitment, will facilitate and expedite employee access to Emory providers. The EVIP Appointment Line was developed for this purpose. Emory employees and family members can simply call **404-778-EVIP** for expedited access to Emory physicians.

- Representatives are available Monday through Saturday from 8:00 a.m. to 5:00 p.m. and Sunday from 10:00 a.m. to 3:00 p.m. to assist you in making appointments with Emory Clinic providers.
- We will do our best to accommodate you within a timeframe you are comfortable with. In many areas, we have reserved same day/next day appointment slots. If the access we can offer within the Physician Group Practice does not meet your needs, we will connect you with an Emory-affiliated practice.
- Urgent appointments will be clinically reviewed to secure an appointment within a medically appropriate timeframe.

Emory HealthConnection (HSA & POS Plans)

Emory HealthConnection is available to assist you in selecting the right Emory provider to meet your needs. Emory HealthConnection can be reached online at www.emoryhealthcare.org or by calling 404-778-7777.

MyChart: Emory Healthcare Patient Portal (HSA & POS Plans)

If you receive care from an Emory Healthcare physician, you are encouraged to sign up for the Emory Healthcare Patient Portal Technology – a convenient and secure health-management tool. Patient portal technology provides you with

increased access to your care team, resources and empowerment to manage your health.

If you are not currently utilizing MyChart, sign up at www.emoryhealthcare.org/patientportal, or call 404-727-8820.

Note: If you see an outpatient private practice provider, that provider may have a separate portal in place. Please contact your provider directly.

The Pharmacy at Emory (HSA & POS Plans)

The Pharmacy at Emory offers full-service pharmacies in several locations including on the Emory University Clifton campus. The hours at the Clifton campus are 9:00 a.m. to 6:00 p.m., M-F. For more information about this location or other Emory Pharmacy locations, visit www.emoryhealthcare.org/pharmacy.





Tier Zero Prescription Drug List (Aetna HSA & POS Plans)

ANTIRETROVIRAL THERAPY *

- Emtricitabine/tenofovir disoproxil fumarate 200 mg – 300 mg

BLOOD PRESSURE & HEART FAILURE

- Acebutolol HCL
- Amiodarone HCL
- Amlodipine Besylate
- Amlodipine/Olmesartan
- Amlodipine/Olmesartan/HCT
- Amlodipine/Valsartan
- Amlodipine/Telmisartan
- Atenolol
- Atenolol/Chlorthalidone
- Benazepril HCL
- Benazepril/Hydrochlorothiazide
- Betaxolol HCL
- Bisoprol/Hydrochlorothiazide
- Bisoprolol Fumarate
- Captopril
- Captopril/Hydrochlorothiazide
- Candesartan Cilexetil
- Candesartan Cilexetil/Hydrochlorothiazide
- Carvedilol
- Clonidine HCL
- Digoxin
- Diltiazem HCL
- Doxazosin Mesylate
- Enalapril Maleate
- Enalapril/Hydrochlorothiazide
- Eplerenone
- Esmolol HCL
- Felodipine
- Fosinopril Sodium

- Fosinopril/Hydrochlorothiazide
- Furosemide
- Guanabenz Acetate
- Guanfacine HCL
- Hydralazine HCL
- Hydralazine/Hydrochlorothiazid
- Hydralazine/Reserpin/Hctz
- Hydrochlorothiazide
- Irbesartan
- Irbesartan/Hydrochlorothiazide
- Isosorbide Dinitrate
- Isosorbide Mononitrate
- Isradipine
- Labetalol HCL
- Lisinopril
- Lisinopril/Hydrochlorothiazide
- Losartan Potassium
- Losartan Potassium/Hydrochlorothiazide
- Methyldopa
- Metolazone
- Metoprol/Hydrochlorothiazide
- Metoprolol Succinate
- Metoprolol Tartrate
- Minoxidil
- Moexipril HCL
- Moexipril/Hydrochlorothiazide
- Nadolol
- Nicardipine HCL
- Nifedipine
- Nimodipine
- Nisoldipine
- Nitroglycerin
- Olmesartan
- Olmesartan/Hydrochlorothiazide
- Papaverine HCLI
- Pindolol
- Prazosin HCL
- Propranolol HCL

- Propranolol/Hydrochlorothiazide
- Quinapril HCL
- Quinapril/Hydrochlorothiazide
- Ramipril
- Reserpine
- Sotalol
- Spironolact/Hydrochlorothiazide
- Telmisartan
- Telmisartan/Hydrochlorothiazide
- Terazosin HCL
- Timolol Maleate
- Torsemide
- Trandolapril
- Trandolapril/Verapamil
- Triamterene/Hydrochlorothiazide
- Valsartan
- Valsartan/Hydrochlorothiazide
- Verapamil HCL

CHOLESTEROL LOWERING

- Amlodipine Besylate/Atorvastatin Calcium
- Atorvastatin Calcium
- Cholestyramine
- Colestipol HCL
- Ezetimbe
- Fenofibrate
- Fenofibric acid
- Fluvastatin
- Gemfibrozil
- Lovastatin
- Niacin
- Omega-3 Polyunsaturated FA
- Pravastatin Sodium
- Simvastatin
- Rosuvastatin

CONTRACEPTIVES

- Oral Contraceptives: Monophasic/Biphasic/Triphasic Generic Agents
- Non-Oral Contraceptive: NuvaRing
- Non-Oral Contraceptive: Ortho Evra

DIABETES

- Acarbose
- Acetohexamide
- Alogliptin
- Alogliptin/Metformin
- Alogliptin/Pioglitazone
- Chlorpropamide
- Glimepiride
- Glipizide
- Glyburide, ext-rel
- Glyburide/Metformin HCL
- Metformin HCL
- Metformin ext-rel
- Metformin/Repaglinide
- Miglitol
- Nateglinide
- Pioglitazone
- Pioglitazone HCl/Metformin HCl
- Repaglinide
- Tolazamide
- Tolbutamide

SMOKING CESSATION

- Nicotrol NS
- Nicotrol Inhaler
- Bupropion HCl (smoking deterrent) SR 12 hr 150 mg
- Zyban
- Chantix

*Generic antiretroviral therapy for preexposure prevention of human immunodeficiency virus (HIV) infection in people who are at an increased risk. As prescription drugs come off patent protection (lose brand status), become available as generics, or over-the-counter, this list will change.

For the most up-to-date list, contact CVS Caremark at 866-601-6935; www.caremark.com.



Numbers & Websites

VENDOR/ORGANIZATION	PHONE NUMBER	WEBSITE(S)
Emory University Benefits and WorkLife Department Annual Enrollment website	404-727-7613	www.hr.emory.edu/benefits www.hr.emory.edu/enrollment
Aetna Medical (Medical — HSA and POS Plans, Behavioral Mental Health, Incentives)	800-847-9026	www.aetna.com www.aetna.com/docfind/custom/emory
Inspira Financial — Health Savings Account & Flexible Spending Account	888-678-8242	https://inspirafinancial.com
Aetna Dental (PPO & DMO)	877-238-6200	www.aetna.com/docfind/custom/emory
AFLAC	877-374-6909	www.aflac.com/emory
CVS/caremark (Pharmacy Manager — HSA & POS Plans)	866-601-6935	www.caremark.com
Emory Employees Appointment Line (EVIP)	404-778-EVIP	N/A
EyeMed Vision Care (Vision Plan)	855-270-2343	www.eyemedvisioncare.com
Fidelity Investments (Retirement Plans)	800-343-0860	www.netbenefits.com/Emory
MetLife Legal Plans	800-821-6400	www.legalplans.com
Kaiser Permanente (Medical)	800-324-9208	my.kp.org/emoryuniversity
Farmers GroupSelect Home and Auto	800-438-6381	https://hr.emory.edu/eu/benefits/faculty-staff/home-auto/index.html
The Pharmacy at Emory	404-778-2022	www.emoryhealthcare.org/pharmacy
TIAA (Retirement Plans)	800-842-2252	www.tiaa.org
The Standard (Life Insurance)	866-756-8118	www.standard.com
UNUM (Long Term Care)	800-227-4165	www.unum.com
UNUM (Short Term Disability, Long Term Disability, & Supplemental LTD)	800-421-0344 (Customer Service) 800-858-6843 (Claims)	www.unum.com



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