

# BENEFITS GUIDE

2026

# YOUR ELON BENEFITS

We understand the important role that benefits play in our lives and in our overall health. That's why we provide a benefits package that lets you elect the right coverage for you and your family, as a new hire and each year during Annual Enrollment.

This benefits guide can help familiarize you with your options in Elon's benefits program. It also provides useful tips, tools and resources to help you think through your options and make wise decisions.

# Getting ready to enroll:

- Consider your coverage needs for the upcoming year.
   For example, do you want to be financially protected if you can't work due to an accident or illness?
- Consider other available coverage.
- Gather information you'll need. If you're covering dependents, you'll need their dates of birth and Social Security numbers.
   You may also need documents to verify dependents' eligibility such as a marriage license or birth certificate.

Getting the most value from your benefits depends on how well you understand your plans and how you choose to use them. Be sure to read this entire guide for important information about your benefit options.

### THE ELON UNIVERSITY MOBILE WALLET CARD

If you visit this link <u>www.mymobilewalletcard.com/elon/</u> you will be directed to a mobile wallet card that lists all of Elon's benefit carriers for your convenience.

Simply bookmark this site and you will have quick access to carrier phone numbers, websites, etc. 24/7. Or, you can use the QR Code pictured at the right to access our mobile wallet card.



# TABLE OF CONTENTS

- 03 Benefit Basics
- 04 Eligibility
- 05 Medical and Pharmacy Plan
  Overview
- O6 Medical and Pharmacy Coverage
- 07 Medical Plan Resources
- 08 Dental Plan
- 09 Vision Plan
- 10 Benefit Costs
- 11 Flexible Spending Accounts (FSAs)
- 12 Health Savings Account (HSA)
- 14 Life Insurance and Disability
- 15 Voluntary Plans
- 17 403(b) Retirement Savings Plan
- 18 Employee Assistance Program
- 19 Contact Information

# **ENROLLING IN YOUR BENEFITS**



Log into the Elon Benefits Hub www.elon.edu/benefitshub/.



Begin the benefits enrollment process.



Elect the benefits you want.



Save or submit your elections.



Print a copy of your elections for your records.

# **ELON BENEFITS CALL CENTER**

Have questions on the Elon University benefit offerings? Need help enrolling? Looking for guidance on the difference between the medical plan options? The Elon Benefits Call Center is there to help answer those questions and many more!

Benefit Counselors are available Monday - Friday | 9am - 6pm EST. Just call 1-877-382-9808.

# **BENEFIT BASICS**



Your benefits are a partnership between you and Elon. The table below outlines how you and the university share costs for benefits. The tax treatment shows whether your contribution is taken from your paycheck before or after taxes.

| BENEFIT  | TAX TREATMENT | WHO PAYS                    |
|--|---------------|-----------------------------|
| Medical and Pharmacy   | Pretax        | Elon & Employee             |
| Dental   | Pretax        | Employee                    |
| Vision (Basic)   | N/A           | Elon                        |
| Vision (Buy-Up)  | Pretax        | Elon & Employee             |
| Basic Life and Accidental Death & Dismemberment (AD&D) Insurance | N/A           | Elon                        |
| Voluntary Life Insurance   | Post-tax      | Employee                    |
| Short-Term Disability  | Post-tax      | Employee                    |
| Long-Term Disability   | Post-tax      | Employee or Elon & Employee |
| Accident Insurance   | Post-tax      | Employee                    |
| Critical Illness Insurance                                       | Post-tax      | Employee                    |
| Critical Illness-Cancer Insurance                                | Post-tax      | Employee                    |
| Hospital Indemnity Insurance                                     | Post-tax      | Employee                    |
| Identity Theft Protection  | Post-tax      | Employee                    |
| Legal Insurance  | Post-tax      | Employee                    |

# **ELIGIBILITY**



### WHO'S ELIGIBLE?

# **Employees**

Employees who work at least 30 hours per week are eligible for the benefits described in this guide. Most benefits are effective on the first day of the month following your date of hire.

# **Dependents**

- Your legal spouse
- Your domestic partner
- Your children up to age 26

# **CHANGING YOUR BENEFITS**

Generally, you may only make or change your benefit elections as a new hire or during the Annual Enrollment period. However, you may change your benefit elections during the year if you experience a qualifying event such as:

- Marriage, divorce or legal separation
- Birth or adoption of a child
- Loss or gain of other coverage by you or your dependent
- Eligibility for Medicare or Medicaid

# You have 30 days from the qualified life event to make changes to your coverage.

- You will need to provide proof of the event, such as a marriage license.
- If you do not make the changes within 30 days of the qualified event, you will have to wait until the next Annual Enrollment period to make changes (unless you experience another qualified life event).

# ENROLLING DEPENDENTS? ITEMS TO HAVE READY

When you add dependents to your coverage, you must provide their:

- Legal name
- Date of birth
- Social Security number
- Supporting documentation, such as marriage certificate, birth certificate, adoption papers, and tax documents.

If you do not provide the required information, your dependents may be dropped from coverage.

# MEDICAL AND PHARMACY PLAN OVERVIEW

We offer the choice of three medical plans through Blue Cross Blue Shield of North Carolina (BCBSNC). All of the medical options include coverage for prescription drugs through OptumRx. To select the plan that best suits your family, you should consider the key differences between the plans, the cost of coverage (including payroll deductions) and how the plan covers services throughout the year.

### UNDERSTANDING HOW YOUR PLAN WORKS



### 1. YOUR DEDUCTIBLE

A deductible is met when you pay the amount of money required before your insurance plan starts to cover your expenses. You pay out-of-pocket for most medical and pharmacy expenses, except those with a copay, until you reach the deductible.

If you are enrolled in Plan C, the High Deductible Health Plan (HDHP), you can pay for these expenses from your Health Savings Account (HSA).



### 2. YOUR COVERAGE

Once your deductible is met, you and the plan share the cost of covered medical and pharmacy expenses with coinsurance. The plan will pay a percentage of each eligible expense, and you will pay the rest.



### 3. YOUR OUT-OF-POCKET MAXIMUM

When you reach your out-of-pocket maximum, the plan pays 100% of covered medical and pharmacy expenses for the rest of the plan year. Your deductible and coinsurance apply toward the out-of-pocket maximum.

# MAKING THE MOST OF YOUR PLAN

Getting the most out of your plan also depends on how well you understand it. Keep these important tips in mind when you use your plan.

- In-network providers and pharmacies: You will always pay less if you see a provider within the medical and pharmacy network.
- Preventive care: In-network preventive care is covered at 100% (no cost to you). Preventive care is often received during an annual physical exam and includes immunizations, lab tests, screenings and other services intended to prevent illness or detect problems before you notice any symptoms.

# **UNDERSTANDING YOUR PHARMACY COVERAGE**

- Mail order pharmacy: If you take a maintenance medication on an ongoing basis for a condition like high cholesterol or high blood pressure, you can use the Mail Order Pharmacy to save on a 90-day supply.
- Pharmacy categories: Medications are placed in categories based on drug cost, safety and effectiveness. These tiers also affect your coverage.
  - Generic A drug that offers equivalent uses, doses, strength, quality and performance as a brand-name drug, but is not trademarked.
  - Brand preferred A drug with a patent and trademark name that is considered "preferred" because it is appropriate to use for medical purposes and is usually less expensive than other brand-name options.
  - **Brand non-preferred** A drug with a patent and trademark name. This type of drug is "not preferred" and is usually more expensive than alternative generic and brand preferred drugs.
  - **Specialty** A drug that requires special handling, administration or monitoring. Most can only be filled by a specialty pharmacy and have additional required approvals.

New for 2026, through OptumRx you have access to Virta's Sustainable Weight Loss program. Please be on the lookout for more information regarding this new benefit.

# MEDICAL AND PHARMACY COVERAGE

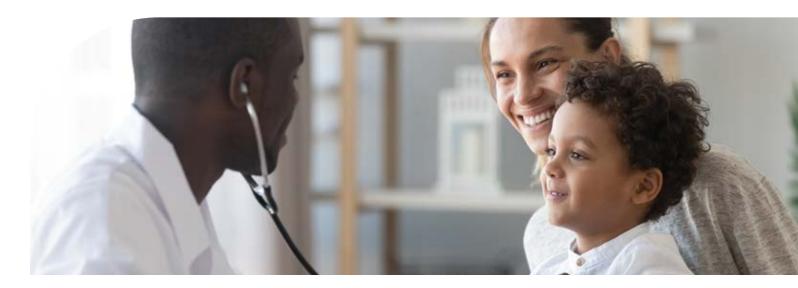
| MEDICAL PLAN                                    | PLAN A          |                                 | PL <i>A</i>                   | AN B                            | PLAN C WITH HSA  |                  |  |
|---|-----------------|---------------------------------|-------------------------------|---------------------------------|------------------|------------------|--|
| PROVISIONS                                      | IN-NETWORK      | OUT-OF-NETWORK                  | IN-NETWORK                    | OUT-OF-NETWORK                  | IN-NETWORK       | OUT-OF-NETWORK   |  |
| Elon Contribution to HSA<br>(Individual/Family) | N/A             |                                 | N                             | N/A                             |                  | \$500/\$1,000    |  |
| Annual Deductible<br>(Individual/Family)        | \$700/\$2,100   | \$2,300/\$6,900                 | \$300/\$900                   | \$1,500/\$4,500                 | \$1,700/\$3,900  | \$3,900/\$11,700 |  |
| Out-of-Pocket Maximum (Includes Deductible)     | \$5,500/\$9,000 | \$10,000/\$20,000               | \$3,500/\$5,500               | \$7,500/\$15,000                | \$6,300/\$12,600 | \$7,500/\$15,000 |  |
| Preventive Care                                 | Covered at 100% | 50%*                            | Covered at 100%               | 60%*                            | Covered at 100%  | 50%*             |  |
| Primary Care Provider<br>Office Visit           | \$35 copay      | 50%*                            | \$25 copay                    | 60%*                            | 70%*             | 50%*             |  |
| Specialist Office Visit                         | \$55 copay      | 50%*                            | \$40 copay                    | 60%*                            | 70%*             | 50%*             |  |
| Telemedicine - Teladoc                          | Covered at 100% | Not covered                     | Covered at 100%               | Not covered                     | Covered at 100%  | Not covered      |  |
| X-ray and Lab                                   | Covered at 100% | 50%*                            | Covered at 100%               | 60%*                            | 70%*             | 50%*             |  |
| Inpatient Hospital Services                     | 70%*            | \$250 copay/<br>admission; 50%* | 80%*                          | \$250 copay/<br>admission; 60%* | 70%*             | 50%*             |  |
| Outpatient Hospital Services                    | 70%*            | 50%*                            | 80%*                          | 60%*                            | 70%*             | 50%*             |  |
| Urgent Care                                     | \$55 copay      | 50%*                            | \$40 copay                    | 60%*                            | 70%*             | 50%*             |  |
| Emergency Room                                  | \$150 copay; 70 | 0%* if admitted                 | \$100 copay; 80%* if admitted |                                 | 70%*             |                  |  |
| RETAIL PHARMACY (UP TO A                        | 30-DAY SUPPLY)  |                                 |                               |                                 |                  |                  |  |
| Tier 1 - Generic                                | \$12 copay      | Not covered                     | \$10 copay                    | Not covered                     | 70%*             | Not covered      |  |
| Tier 2 - Brand Preferred                        | \$45 copay      | Not covered                     | \$35 copay                    | Not covered                     | 70%*             | Not covered      |  |
| Tier 3 - Brand Non-Preferred                    | \$90 copay      | Not covered                     | \$70 copay                    | Not covered                     | 70%*             | Not covered      |  |
| MAIL ORDER PHARMACY (90                         | -DAY SUPPLY)    |                                 |                               |                                 |                  |                  |  |
| Tier 1 - Generic                                | \$24 copay      | Not covered                     | \$20 copay                    | Not covered                     | 70%*             | Not covered      |  |
| Tier 2 - Brand Preferred                        | \$90 copay      | Not covered                     | \$70 copay                    | Not covered                     | 70%*             | Not covered      |  |
| Tier 3 - Brand Non-Preferred                    | \$180 copay     | Not covered                     | \$140 copay                   | Not covered                     | 70%*             | Not covered      |  |
| Tier 4 - Specialty<br>(30-day supply)           | \$125 copay     | Not covered                     | \$100 copay                   | Not covered                     | 70%*             | Not covered      |  |

<sup>\*</sup>After deductible

|   | PLAN A   |          | PLAN B   |            | PLAN C WITH HSA |          |
|---|----------|----------|----------|------------|-----------------|----------|
| MEDICAL AND PHARMACY                    | BIWEEKLY | MONTHLY  | BIWEEKLY | MONTHLY    | BIWEEKLY        | MONTHLY  |
| Employee Only                           | \$84.58  | \$183.25 | \$146.61 | \$317.66   | \$51.18         | \$110.90 |
| Employee + Spouse/<br>Domestic Partner* | \$232.85 | \$504.51 | \$417.83 | \$905.30   | \$160.40        | \$347.53 |
| Employee + Child(ren)                   | \$204.63 | \$443.37 | \$305.68 | \$662.31   | \$140.96        | \$305.42 |
| Family                                  | \$277.19 | \$600.58 | \$513.09 | \$1,111.69 | \$190.95        | \$413.73 |

 $<sup>^*</sup>$ Single rate for domestic partner is post-tax, remainder of employee/family premium is pre-tax.

# MEDICAL PLAN RESOURCES



# **TELEMEDICINE**

- Teladoc is a 24/7 service that provides access to board-certified doctors by mobile app, online video or phone.
- Whether you're at home, at work, traveling or you simply want a more convenient way to see a doctor, telemedicine is easy to use and available anytime, anywhere.
- Get care for allergies, asthma, colds, flu, ear aches, pinkeye, rashes and more. You can even get a prescription, if needed.
- Teladoc has a full mental health network to support emotional, behavioral and social needs. You and your covered dependents can visit with a licensed counselor, therapist or psychologist from the comfort of your home through phone calls or video chats.
- Sign up at <u>www.teladoc.com</u> or download the Teladoc app.

### **LIVONGO**

BCBSNC partners with Livongo to offer a more effective way to manage Diabetes and Cardiovascular issues.

The Livongo program offers personalized, actionable and timely support including:

- Lifestyle behavior change tools
- Expert health coaching
- Provider coordination
- Cellular-connected devices
- Personalized plans for reaching health goals

If you are interested in participating in this program, please contact BCBSNC.

## NURSE SUPPORT CONDITION CARE

When you're managing a chronic condition, things can get complicated and overwhelming. BCBSNC can help you manage your condition. As you work with your primary care provider, the Nurse Support Program Condition Care also connects you to more tools, resources and care. And this program is available to you as a benefit of your health plan at no additional cost. To learn more, visit the Wellbeing section on <a href="BlueConnectNC.com">BlueConnectNC.com</a> and click on Nurse Support Program.

# **MEMBER SERVICES WEBSITE**

The BCBSNC Member Services website is a way to manage medical benefits in an organized and efficient way. It is intended to help empower, educate and excite members to take charge of their health and use all the BCBS tools to achieve their goals. Visit bcbsnc.com to register.

# **BLUE DISTINCTION CENTERS (BDCS)**

The Blue Distinction program helps you find hospitals that deliver superior specialty care. Hospitals earn the distinction by meeting objective quality standards for patient safety and outcomes. To find a BDC near you, call the customer service number on the back of your member ID card. Or visit the Find a Doctor tool on <a href="BlueConnectNC.com">BlueConnectNC.com</a> and use the "All Blue Distinction Programs" filter.

# **BLUE365 DISCOUNTS**

Blue365 offers exclusive health and wellness deals, keeping you healthy and happy, every day of the year.

Visit <a href="https://www.blue365deals.com/how-it-works">https://www.blue365deals.com/how-it-works</a> for information on how to register for Blue365.

# **DENTAL PLAN**



It's important to have regular dental exams and cleanings so problems are detected before they become painful – and expensive. Keeping your teeth and gums clean and healthy will help prevent most tooth decay and is an important part of maintaining your overall health. We offer a dental plan through Delta Dental of NC.

| PLAN PROVISIONS   | PPO IN-NETWORK  | PREMIER IN-NETWORK                                      | OUT-OF-NETWORK   |
|---|---|---|--|
| Annual Deductible (Individual/Family)                               | \$0   | \$50/\$150  | \$50/\$150   |
| Annual Maximum (per Individual)                                     | \$1,650   | \$1,650   | \$1,650  |
| Diagnostic and Preventive Services (e.g., X-rays, cleanings, exams) | Covered at 100%   | Covered at 100%   | Covered at 100%  |
| Basic and Restorative Services (e.g., fillings)                     | 80%   | 80%   | 80%  |
| Major Services* (e.g., dentures, crowns, bridges)                   | 50%   | 50%   | 50%  |
| Orthodontia (children up to age 19)                                 | 50%, up to a lifetime maximum of \$1,000 per individual | 50%, up to a lifetime maximum of \$1,000 per individual | 50%, up to a lifetime maximum of<br>\$1,000 per individual |

<sup>\*6</sup> month waiting period m1ay apply if no previous coverage

# **GET THE MOST FROM YOUR DENTAL PLANS**

- Stay in-network While you have the option of choosing any provider, you save money when you use in-network dentists. When using an out-of-network dental provider, you pay more because the provider has not agreed to charge you a negotiated rate.
- Free annual check-up Use free preventive care to keep your mouth and gums healthy all year long.
- Use your FSA or HSA funds Help pay for eligible out-of-pocket dental expenses.

| DENTAL                              | BIWEEKLY | MONTHLY  |
|-------------------------------------|----------|----------|
| Employee Only                       | \$22.24  | \$48.19  |
| Employee + Spouse/Domestic Partner* | \$40.42  | \$87.58  |
| Employee + Child(ren)               | \$55.14  | \$119.48 |
| Family                              | \$77.41  | \$167.72 |

 $<sup>\</sup>hbox{*Single rate for domestic partner is post-tax, remainder of employee/family premium is pre-tax.}\\$ 

# **VISION PLAN**



The vision plan provides coverage for routine eye exams and pays for all or a portion of the cost of glasses or contact lenses. You can choose any provider; however, you always save money if you see in-network providers. We offer two vision plans through VSP. Elon covers the full cost of the basic plan.

|  | BASIC PLAN   |                          | BUY-UP PLAN   |   |
|--|--|--------------------------|---|---|
| PLAN PROVISIONS  | IN-NETWORK   | OUT-OF-NETWORK           | IN-NETWORK  | OUT-OF-NETWORK  |
| Exam   | \$5 copay  | Up to \$50 reimbursement | \$5 copay   | Up to \$50 reimbursement  |
| Frames   | 20% off a complete<br>pair of glasses                            | N/A                      | \$200 allowance plus 20% off the amount over your allowance | Up to \$70 reimbursement  |
| Lenses  Single vision Bifocal Trifocal                                 | 20% off a complete<br>pair of glasses                            | N/A<br>N/A<br>N/A        | \$10 copay<br>\$10 copay<br>\$10 copay                      | Up to \$50 reimbursement<br>Up to \$75 reimbursement<br>Up to \$100 reimbursement |
| Contact Lenses  • Elective (in lieu of glasses)  • Medically necessary | 15% discount on a<br>contact lens exam<br>(fitting & evaluation) | N/A<br>N/A               | \$200 allowance<br>Covered in full                          | Up to \$105 reimbursement<br>Up to \$210 reimbursement                            |
| Frequency • Exam • Lenses • Frames                                     | Once every 12 months<br>N/A<br>N/A                               |                          | Once ever   | y 12 months<br>y 12 months<br>y 24 months   |

# PAY FOR VISION EXPENSES TAX-FREE

Use your  $\mbox{HCFSA}$  or  $\mbox{HSA}$  funds to pay for your exam copay and eyeglasses or contacts.

|   | BUY-UP PLAN |         |  |
|---|-------------|---------|--|
| VISION                                  | BIWEEKLY    | MONTHLY |  |
| Employee Only                           | \$6.43      | \$13.93 |  |
| Employee + Spouse/<br>Domestic Partner* | \$8.49      | \$18.39 |  |
| Employee + Child(ren)                   | \$9.08      | \$19.67 |  |
| Family                                  | \$14.52     | \$31.45 |  |

Elon covers the full cost of the basic vision plan.

<sup>\*</sup>Single rate for domestic partner is post-tax, remainder of employee/family premium is pre-tax.

# **BENEFIT COSTS**



Your biweekly and monthly payroll contributions for medical, dental and vision benefits are shown here.

|                                     | PLAN A   |          | PLAN B   |            | PLAN C WITH HSA |          |
|-------------------------------------|----------|----------|----------|------------|-----------------|----------|
| MEDICAL AND PHARMACY                | BIWEEKLY | MONTHLY  | BIWEEKLY | MONTHLY    | BIWEEKLY        | MONTHLY  |
| Employee Only                       | \$84.58  | \$183.25 | \$146.61 | \$317.66   | \$51.18         | \$110.90 |
| Employee + Spouse/Domestic Partner* | \$232.85 | \$504.51 | \$417.83 | \$905.30   | \$160.40        | \$347.53 |
| Employee + Child(ren)               | \$204.63 | \$443.37 | \$305.68 | \$662.31   | \$140.96        | \$305.42 |
| Family                              | \$277.19 | \$600.58 | \$513.09 | \$1,111.69 | \$190.95        | \$413.73 |

| DENTAL                              | BIWEEKLY | MONTHLY  |
|-------------------------------------|----------|----------|
| Employee Only                       | \$22.24  | \$48.19  |
| Employee + Spouse/Domestic Partner* | \$40.42  | \$87.58  |
| Employee + Child(ren)               | \$55.14  | \$119.48 |
| Family                              | \$77.41  | \$167.72 |

|                                     | BUY-UP PLAN |         |  |
|-------------------------------------|-------------|---------|--|
| VISION                              | BIWEEKLY    | MONTHLY |  |
| Employee Only                       | \$6.43      | \$13.93 |  |
| Employee + Spouse/Domestic Partner* | \$8.49      | \$18.39 |  |
| Employee + Child(ren)               | \$9.08      | \$19.67 |  |
| Family                              | \$14.52     | \$31.45 |  |

Elon covers the full cost of the basic vision plan.

Please note: Your payroll contributions for the additional plans and more information can be found on the Human Resources website.

<sup>\*</sup>Single rate for domestic partner is post-tax, remainder of employee/family premium is pre-tax.

# FLEXIBLE SPENDING ACCOUNTS (FSAs)

A Flexible Spending Account (FSA) helps you pay for health care or dependent care costs using tax-free dollars. Your contribution is deducted from your paycheck on a pretax basis and is put into the FSA. When you incur expenses, you can access the funds in your account to pay for *eligible* expenses. The accounts are administered by Flores and Associates.

This chart shows the eligible expenses for each FSA and how much you can contribute each year. Each of these options reduces your taxable income.

| ACCOUNT TYPE   | ELIGIBLE EXPENSES  | ANNUAL CONTRIBUTION LIMITS  |
|--|--|---|
| Health Care<br>Flexible Spending<br>Account (HCFSA)    | Most medical, dental and vision care expenses that are not covered by your health plan, such as copays, coinsurance, deductibles, eyeglasses, orthodontia and prescriptions. | Maximum contribution is \$3,400* per year.  You cannot enroll if you are enrolled in Plan C, the medical plan with an HSA.  Funds are deducted throughout the year, but all funds are available on January 1. |
| Dependent Care<br>Flexible Spending<br>Account (DCFSA) | Dependent care expenses including day care, after school programs for children under age 13 or elder care programs so you can work or attend school full-time.               | Maximum contribution is \$7,500* per year (\$3,750 if married and filing separate tax returns). Funds are available as they are deducted throughout the year.   |

<sup>\*</sup>For the most recent IRS limits, please visit  $\underline{www.irs.gov}.$ 

# **HEALTH SAVINGS ACCOUNT (HSA)**



A Health Savings Account (HSA) is a savings account that belongs to you that is paired with Plan C. It allows you to make tax-free contributions that you can use to pay for current and future medical expenses for you and your dependents. The HSA is administered by Health Equity through BCBSNC.



### START IT

- Contributions to an HSA are tax-free for you whether they come from you or the university. Elon contributes \$500
  for individual coverage and \$1,000 for family coverage (contributions are prorated for new hires throughout the year).
- The HDHP costs less than other plans so the money you save on premiums can be put into your HSA. This helps you save money on taxes and gives you more flexibility and control over your health care dollars.



### **BUILD IT**

- All of the money in your HSA is yours (including any contributions deposited by the university) even if you leave your job, change plans or retire.
- In 2026, the total of your contributions and the company's can be up to \$4,400 for individual coverage and \$8,750 for family coverage. If you are age 55 or older, you can contribute an additional \$1,000 per year.



# **USE IT**

- You can withdraw your money tax-free at any time, as long as you use it for qualified expenses (a list can be found on www.irs.gov).
- You can also save this money and hold onto it for future eligible health care expenses.



# **GROW IT**

- Unused money in your HSA will roll over, earn interest and grow tax-free over time.
- You decide how to use the HSA money, including whether to save it or spend it for eligible expenses. When your balance is large enough, you can invest it tax-free.

# **ELIGIBILITY DETAILS**

- You cannot have an HSA if you are enrolled in any other health coverage or Medicare, or claimed a dependent on someone else's tax return.
- You cannot participate in the Health Care Flexible Spending Account (FSA) if you have an HSA. Your spouse/domestic partner also cannot have a Health Care FSA.

Due to IRS requirements, if you elect to participate in Plan C with the HSA, the services you can receive at Elon's Faculty/Staff Health and Wellness Clinic may be limited and a \$40 copay may be charged. Please contact their office at 336-278-5569 if you have any questions about your eligibility status.

# FSA AND HSA: ALL YOU NEED TO KNOW

Elon offers several accounts that enable you to pay for eligible expenses tax-free. The IRS provides a list of eligible expenses for each type of account at <a href="https://www.irs.gov">www.irs.gov</a>.



### **HEALTH SAVINGS ACCOUNT (HSA)**

Available to those enrolled in Plan C as long as you are not enrolled in any other health coverage or Medicare or claimed as a dependent on someone else's tax return.



# HEALTH CARE FLEXIBLE SPENDING ACCOUNTS (FSA)

Use this account for medical, pharmacy, dental and vision expenses. Not available to those enrolled in Plan C.



### **DEPENDENT CARE FSA**

Use for eligible childcare expenses for dependents under age 13 or elder care.

# **COMPARISON OF ACCOUNTS**

|   | HSA   | FSA   |
|---|---|---|
| Does the company contribute?<br>Amount for full-year 2026 | Employee: \$500<br>Employee + 1 or Family: \$1,000  | ×   |
| Can I contribute my own savings?                          | ✓   | ✓   |
| Is there an IRS maximum annual contribution?*             | Employee: \$4,400 Family: \$8,750 Those 55 and older can contribute an additional \$1,000 annually. | Health Care FSA: \$3,400<br>Dependent Care FSA: \$7,500 |
| Will my savings roll over each year?                      | <b>√</b><br>Unlimited   | Elon has a grace period, not a rollover.                |
| Will I earn interest on my savings?                       | ✓   | ×   |
| Are the savings tax-free?<br>In most states               | ✓   | ✓   |
| Do I keep the money if I leave the company?               | ✓   | ×   |
| Can I also have a Flexible Spending<br>Account (FSA)?     | !<br>Dependent Care FSAs only   | N/A   |

### IMPORTANT INFORMATION ABOUT HCFSA AND DCFSA

- Your FSA elections are effective from January 1 through December 31.
- Claims for reimbursement must be submitted by March 31 of the following year.
- You are provided a 2 1/2 month grace period during which any unused funds from the prior year may be used for claims incurred up until March 15 of the following year.
- Please plan your contributions carefully. Any unused money remaining in your account(s) will be forfeited. This is known as the "use it or lose it" rule and it is governed by Internal Revenue Service regulations.
- FSA elections do not automatically continue from year to year; you must actively enroll each year.
- You can only change your FSA contribution amount if you experience a qualified status change.
- The FSA plans are not interchangeable. You must enroll in each separately and funds are non-transferable.

# LIFE INSURANCE AND DISABILITY

# LIFE AND AD&D INSURANCE

Elon provides basic life and AD&D insurance for employees and offers voluntary insurance options for employees and their dependents through Reliance Matrix.

# **BASIC LIFE AND AD&D INSURANCE**

- Life insurance is an important part of your financial wellbeing, especially if others depend on you for support.
- The university provides basic life and accidental death and dismemberment insurance through Reliance Matrix to all eligible employees at no cost equal to three times your base annual earnings, rounded to the next higher \$1,000 to a maximum of \$1,500,000. Guaranteed issue amount of \$1,000,000.
- Coverage is automatic; you do not need to enroll.

# **VOLUNTARY LIFE INSURANCE**

- You may choose to purchase additional life coverage for yourself and your dependents at affordable group rates.
- Rates are based on age and the coverage level chosen.

### **VOLUNTARY LIFE INSURANCE FOR YOU**

### **Employee**

- Increments of \$10,000 up to five times your base annual salary.
- Up to a \$1,000,000 maximum.
- Guaranteed issue amount of \$250,000.

During your initial eligibility period, you can receive coverage up to the guaranteed issue amounts without providing Evidence of Insurability (EOI, or information about your health). Coverage amounts that require EOI will not be effective unless approved by Reliance Matrix.

# **VOLUNTARY LIFE INSURANCE FOR YOUR DEPENDENTS**

### Spouse/Domestic Partner

- Increments of \$5,000 (not to exceed 100% of employee basic/voluntary life coverage)
- Up to a \$250,000 maximum
- Guaranteed issue amount of \$50,000

### Child(ren)

- Birth 6 months: \$250
- 6 months 26 years: \$30,000

### SHORT-TERM DISABILITY INSURANCE

You have the opportunity to enroll in an individual Short Term Disability policy through Aflac. The Aflac representative for Elon University is Brandon Harvey. His phone number is 336-991-4590. Please reach out to him if you are interested.

# LONG-TERM DISABILITY INSURANCE

Disability insurance through Reliance Matrix provides income replacement should you become disabled and unable to work due to a non-work-related illness or injury. Eligible employees can choose to either share in the cost of coverage with Elon or pay 100% of the premium themselves. Any portion of the premium that is paid by Elon will result in a taxable benefit.

| COVERAGE                | BENEFIT  |
|-------------------------|--|
| Long-Term<br>Disability | <ul> <li>70% of your base salary, to a maximum of \$10,000 per month if you are disabled and are unable to work for more than 180 days.</li> <li>Benefits are offset with other sources of income, such as Social Security and Workers' Compensation.</li> </ul> |

# PROTECT YOUR LOVED ONES

- Affordable supplemental coverage Take advantage of the group rates offered to get the best deal on your coverage. Investing in insurance give you peace of mind and the financial protection for yourself and your loved ones.
- Be sure to designate your beneficiary You must choose a beneficiary for life and AD&D insurance. Keep your beneficiaries up-to-date in 2026.

# **VOLUNTARY PLANS**



Round out your coverage with benefits through Wellfleet that offer financial protection and assistance with all areas of your life. These coverages provide cash benefits to help you pay for both medical expenses not covered by your medical plan as well as day-to-day expenses that may start to add up – like rent, mortgage, car payments, etc. – while you are ill.

### **ACCIDENT INSURANCE**

If you purchase coverage and are hurt in a covered accident, you will receive a cash benefit for covered injuries that you may spend as you like.

Eye injuries

Ruptured discs

Torn ligaments

# **Examples of Covered Injuries:**

- Broken bones
- Broken bones
- .

Burns

- Concussions
- Cuts repaired by stitches

# CRITICAL ILLNESS-CANCER INSURANCE

Pays a lump-sum benefit following the diagnosis of cancer.

| COVERAGE LEVEL          | COVERAGE AMOUNTS |  |
|-------------------------|------------------|--|
| Employee                | \$15,000         |  |
| Spouse/Domestic Partner | \$15,000         |  |
| Child(ren)              | \$7,500          |  |

# **CRITICAL ILLNESS INSURANCE**

If you are diagnosed with a covered illness, you get a lump-sum cash benefit, even if you receive other insurance benefits.

# **Coverage Amounts**

| EMPLOYEE                          | SPOUSE/<br>DOMESTIC PARTNER      | CHILD(REN)                      |
|-----------------------------------|----------------------------------|---------------------------------|
| \$10,000, \$20,000<br>or \$30,000 | 100% of employee coverage amount | 50% of employee coverage amount |

# **Examples of Covered Illnesses:**

- Cancer
- Coronary artery bypass surgery
- End-stage renal (kidney) failure
- Heart attack
- Major organ failure
- Stroke

# Additional Benefits For:

Radiation

- Hospitalization
- Immunotherapy
- Stem Cell Treatments

# **Examples of Covered Illnesses:**

Cancer

- Heart attack
- Coronary artery bypass surgery
- Major organ failure
- Stroke

# HOSPITAL INDEMNITY INSURANCE

Hospital indemnity insurance provides a fixed lump-sum payment that can help cover hospital expenses not covered by insurance, or to pay for expenses while you, your spouse/domestic partner, and/or dependents are in the hospital.

 The plan pays \$1,000 (limit of 13 times per plan year) for the initial hospital admission, as well as \$200 per day, for up to 31 days, that an individual is hospitalized.

# The plan also includes coverage for stays in:

- Intensive care unit
- Inpatient rehab facility
- Inpatient mental & nervous disorder facility
- Inpatient substance abuse facility

# VOLUNTARY PLANS (CONTINUED)

# **IDENTITY THEFT PROTECTION**

Protecting your personal information has become a major concern. Identity theft coverage through Norton LifeLock is designed to protect your identity and assets through identity, credit and social media monitoring. The plan includes:

- · Device security with secure VPN
- Cyber-crime insurance
- Scam detection
- Identity restoration support
- · Financial and credit insights

This plan is available at a low monthly group rate, which you can pay through automatic payroll deductions.

### **LEGAL PLAN**

The legal plan through MetLife provides legal representation for you and your dependents at a price that won't break your budget. You can receive legal advice and fully covered legal services for a wide range of personal legal matters from a network-participating plan attorney. Services provided through the plan include:

- Court appearances
- Document review and preparation
- Family law
- Real estate matters
- Will preparation

Consult directly with a network attorney and representative from the MetLife Legal Services team for specific plan details. The plan is available at a low monthly group rate, which you can pay through automatic payroll deductions.

# **PET INSURANCE**

You can purchase health insurance, administered by MetLife, for your dog, cat, bird or other animals. Like a regular health insurance plan, a pet insurance policy can help you plan for your pet's health care — and offset costs for routine care and unexpected illness or injury. Your premium is based on your pet's species, age, the benefits coverage you select and where you live. For more information, to get a quote or enroll, visit www.metlife.com/getpetquote.

# **AUTO AND HOME INSURANCE**

Farmers GroupSelect auto and home insurance is designed to help you protect your home and automobile for affordable group rates.

- Auto: In addition to basic liability protection, you can get 24/7 claim service, rental car damage coverage, towing/roadside assistance, windshield repair without a deductible and more.
- Home: Coverage is designed to fully replace your home in the event of a loss and to prevent you from incurring extra costs.

For more information, to get a quote or enroll, visit <u>www.</u> <u>myautohome.farmers.com</u>.

# 403(b) RETIREMENT SAVINGS PLAN



Whether retirement is way down the road or just around the corner, it's important to have savings goals and specific investment objectives. To help you meet your goals and objectives, we offer a 403(b) Retirement Savings Plan, administered by Teacher's Insurance Annuity Association (TIAA), with multiple investment options and a university match.

# CONTRIBUTIONS

- You can contribute up to \$23,500 (subject to change by the IRS), and if you are age 50 or older, you may contribute up to an additional \$7,500 as a "catch-up" contribution. Individuals ages 60-63 can contribute an additional "catch-up" contribution of \$3,750.
- Starting January 1, 2026, if you earned more than \$145,000 in the prior calendar year, age-based catch-up contributions must be made as designated Roth contributions.
- Eligible participants can contribute a percentage (4%) of their annual base salary (pre-tax) with the university contributing a portion (8%) of the employee's annual base salary.

# **ELIGIBILITY**

- Participation is mandatory for all active, full-time faculty/staff who have satisfied a one-year waiting period.
- The university's plan allows for the waiver of the one-year waiting period if an employee is coming from an "eligible employer" and has participated in their retirement plan for at least one year.
- An eligible employer is defined as any educational organization, teaching institution or an institution of higher education.
- Please note that a Statement of Previous Participation must be completed in order to waive the waiting period.

# MORE INFORMATION

 TIAA has many different investment options for you to choose from, along with tools and resources you can use to determine which options best meet your investment objectives.

For additional details about the 403(b) Retirement Savings Plan or to enroll or change your contribution rates or investment elections, visit <a href="https://www.tiaa-cref.org/elon">www.tiaa-cref.org/elon</a>.

# EMPLOYEE ASSISTANCE PROGRAM



# **EMPLOYEE ASSISTANCE PROGRAM**

Life is filled with change and uncertainty. The responsibilities and demands on our time can be overwhelming. Our Employee Assistance Program (EAP) is here to help you and your family members with life's challenges.

The EAP, administered by MYgroup® McLaughlin Young, provides 24/7 confidential support, resources and information for you and your dependents. You and your family have access to three free consultations with a licensed clinician per incident, per individual, per calendar year. Services include:

- Childcare and eldercare assistance: Needs assessment along with referrals to childcare and eldercare providers.
- · Daily living services: Referrals to help with event planning, transportation services, pet services, and more.
- Financial services: Budgeting, credit and financial guidance, retirement planning, and assistance with tax issues.
- Legal services: Consultations for issues relating to civil, consumer, personal and family law, financial matters, business law, real estate, estate planning, and more.

Confidential assistance is available any time. Call 800-633-3353 or visit <u>mygroup.com</u> (Username: elonuniversity and Password: guest).

# CONTACT INFORMATION

# THE ELON UNIVERSITY MOBILE WALLET CARD

If you visit this link <a href="www.mymobilewalletcard.com/elon/">www.mymobilewalletcard.com/elon/</a> you will be directed to a mobile wallet card that lists all of Elon's benefit carriers for your convenience. Simply bookmark this site and you will have quick access to carrier phone numbers, websites, etc. 24/7. Or, you can use the QR Code pictured at the right to access our mobile wallet card.



| COVERAGE                          | CARRIER                                     | PHONE  | WEBSITE  |
|-----------------------------------|---|--|--|
| Medical                           | Blue Cross Blue Shield<br>of North Carolina | 877-275-9787   | www.bcbsnc.com   |
| Pharmacy                          | OptumRx                                     | Customer Service:<br>855-218-8489<br>Pharmacy Help Desk:<br>844-368-8731 | www.optumrx.com  |
| Telemedicine                      | Teladoc                                     | 800-835-2362   | www.teladoc.com  |
| Dental                            | Delta Dental of NC                          | 800-662-8856   | www.deltadentalnc.com                                    |
| Vision                            | Vision Service Plan (VSP)                   | 800-877-7195   | www.vsp.com  |
| Health Savings Account            | Health Equity                               | 877-713-7682   | www.myhealthequity.com                                   |
| Flexible Spending Accounts        | Flores and Associates                       | 800-532-3327   | www.flores247.com  |
| Life and AD&D Insurance           | Reliance Matrix                             | 800-351-7500   | www.reliancematrix.com                                   |
| Short-Term Disability             | Aflac                                       | Brandon Harvey 336-991-4590  | www.aflacenrollment.com/<br>ElonUniversity/Q59764123885  |
| Long-Term Disability              | Reliance Matrix                             | 800-351-7500   | www.reliancematrix.com                                   |
| Accident Insurance                | Wellfleet                                   | 855-664-5838   | www.wellfleetworkplace.com/<br>register                  |
| Critical Illness Insurance        | Wellfleet                                   | 855-664-5838   | www.wellfleetworkplace.com/<br>register                  |
| Critical Illness-Cancer Insurance | Wellfleet                                   | 855-664-5838   | www.wellfleetworkplace.com/<br>register                  |
| Hospital Indemnity Insurance      | Wellfleet                                   | 855-664-5838   | www.wellfleetworkplace.com/<br>register                  |
| Identity Theft Protection         | Norton LifeLock                             | 800-607-9174   | www.Norton.com/<br>employeebenefits                      |
| Legal Insurance                   | MetLife                                     | 800-821-6400   | www.metlife.com  |
| Pet Insurance                     | MetLife                                     | 800-438-6388   | www.metlife.com/getpetquote                              |
| Auto and Home Insurance           | Farmers GroupSelect                         | 800-438-6381   | www.myautohome.farmers.com/                              |
| Employee Assistance Program (EAP) | MYgroup                                     | 800-633-3353   | www.mygroup.com Username: elonuniversity Password: guest |
| 403(b) Retirement Savings Plan    | TIAA  | 800-842-2733   | www.tiaa.org/public/index.html                           |
| Office of Human Resources         |   | 336-278-5560   | www.elon.edu/u/fa/hr/benefits/                           |
| Elon Benefits Call Center         |   | 877-382-9808   |  |

# **ELON BENEFITS CALL CENTER**

Have questions on the Elon University benefit offerings? Need help enrolling? Looking for guidance on the difference between the medical plan options? The Elon Benefits Call Center is there to help answer those questions and many more!

Benefit Counselors are available Monday - Friday | 9am - 6pm EST. Just call 1-877-382-9808.

# **NOTES**

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### **ABOUT THIS GUIDE**

This benefit summary provides selected highlights of the Elon University benefits program. It is not a legal document and shall not be construed as a guarantee of benefits nor of continued employment at the company. All benefit plans are governed by master policies, contracts and plan documents. Any discrepancies between any information provided through this summary and the actual terms of such policies, contracts and plan documents shall be governed by the terms of such policies, contracts and plan documents. Elon University reserves the right to amend, suspend or terminate any benefit plan, in whole or in part, at any time. The authority to make such changes rests with the Plan Administrator.