

BENEFITS GUIDE 2025

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.

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ENROLLING IN YOUR BENEFITS



Sign into your existing OnTrack account.



Begin the benefits enrollment process.



Elect the benefits you want.



Save or submit your elections.



Print a copy of your elections for your records.

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	After-tax	Employee
Short-Term Disability	After-tax	Employee
Long-Term Disability	After-tax	Employee or Elon & Employee
Accident Insurance	After-tax	Employee
Critical Illness Insurance	After-tax	Employee
Critical Illness-Cancer Insurance	After-tax	Employee
Hospital Indemnity Insurance	After-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.

- Depending on the type of event, you may 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.

MEDICAL AND PHARMACY COVERAGE

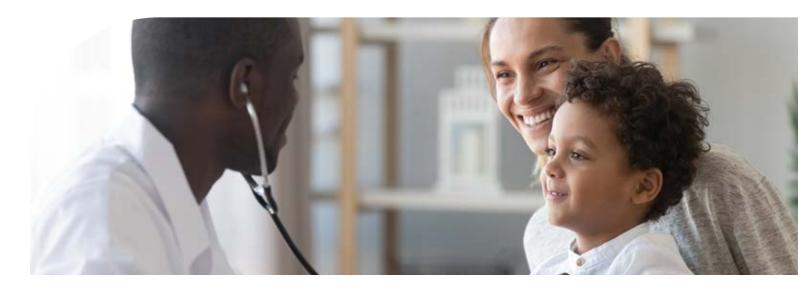
MEDICAL PLAN	PLA	N A	PL <i>I</i>	\N B	PLAN C V	VITH HSA	
MEDICAL PLAN PROVISIONS	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	
Elon Contribution to HSA (Individual/Family)	N/A		N	N/A		\$500/\$1,000	
Annual Deductible (Individual/Family)	\$700/\$2,100	\$2,300/\$6,900	\$300/\$900	\$1,500/\$4,500	\$1,650/\$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 Office Visit	\$35 copay	50%*	\$25 copay	60%*	70%*	50%*	
Specialist Office Visit	\$55 copay	50%*	\$40 copay	60%*	70%*	50%*	
Telemedicine	\$15 copay	Not covered	\$10 copay	Not covered	70%*	Not covered	
X-Ray and Lab	Covered at 100%	50%*	Covered at 100%	60%*	70%*	50%*	
Inpatient Hospital Services	70%*	\$250 copay/ admission; 50%*	80%*	\$250 copay/ 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	D A 30-DAY SUPF	PLY)					
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	

^{*}After deductible

	PLA	N A	PL#	N B	PLAN C V	VITH HSA
MEDICAL AND PHARMACY	BIWEEKLY	MONTHLY	BIWEEKLY	MONTHLY	BIWEEKLY	MONTHLY
Employee Only	\$80.94	\$175.36	\$140.30	\$303.98	\$48.98	\$106.12
Employee + Spouse/ Domestic Partner*	\$222.82	\$482.78	\$399.84	\$866.32	\$153.49	\$332.56
Employee + Child(ren)	\$195.82	\$424.28	\$292.52	\$633.79	\$134.89	\$292.27
Family	\$265.26	\$574.72	\$490.99	\$1,063.82	\$182.73	\$395.91

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

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 Pre-Diabetes, 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 BlueConnectNC.com 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 BlueConnectNC.com 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 https://www.blue365deals.com/how-it-works 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 \$1,000 per individual

^{*6} 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	\$21.16	\$45.84
Employee + Spouse/Domestic Partner*	\$38.46	\$83.32
Employee + Child(ren)	\$52.46	\$113.67
Family	\$73.64	\$159.55

 $[\]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 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 pair of glasses	N/A N/A N/A	\$10 copay \$10 copay \$10 copay	Up to \$50 reimbursement Up to \$75 reimbursement Up to \$100 reimbursement	
Contact Lenses • Elective (in lieu of glasses) • Medically necessary	15% discount on a contact lens exam (fitting & evaluation)	N/A N/A	\$200 allowance Covered in full	Up to \$105 reimbursement Up to \$210 reimbursement	
Frequency • Exam • Lenses • Frames	Once every 12 months N/A N/A		Once ever	y 12 months y 12 months 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/ 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.

^{*}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	\$80.94	\$175.36	\$140.30	\$303.98	\$48.98	\$106.12
Employee + Spouse/Domestic Partner*	\$222.82	\$482.78	\$399.84	\$866.32	\$153.49	\$332.56
Employee + Child(ren)	\$195.82	\$424.28	\$292.52	\$633.79	\$134.89	\$292.27
Family	\$265.26	\$574.72	\$490.99	\$1,063.82	\$182.73	\$395.91

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Employee Only	\$21.16	\$45.84
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	BUY-UP PLAN			
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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.

^{*}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 Flexible Spending 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 \$3,300* 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 Flexible Spending 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 \$5,000* per year (\$2,500 if married and filing separate tax returns). Funds are available as they are deducted throughout the year.

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 2025, the total of your contributions and the company's can be up to \$4,300 for individual coverage and \$8,550 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 www.irs.gov.



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? Amount for full-year 2025	Employee: \$500 Employee + 1 or Family: \$1,000	×
Can I contribute my own savings?	✓	✓
Is there an IRS maximum annual contribution?*	Employee: \$4,300 Family: \$8,550 Those 55 and older can contribute an additional \$1,000 annually.	✓ Health Care FSA: \$3,300 Dependent Care FSA: \$5,000
Will my savings roll over each year?	√ Unlimited	Elon has a grace period, not a rollover.
Will I earn interest on my savings?	✓	×
Are the savings tax-free? In most states	✓	✓
Do I keep the money if I leave the company?	✓	×
Can I also have a Flexible Spending Account (FSA)?	! 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 Lincoln Financial Group.

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 Lincoln Financial Group 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 \$1,000,000.
- Coverage is automatic; you do not need to enroll.
- Dependent life insurance is also available in the amounts of \$15,000 or \$7,500.

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 your base annual salary
- Up to a \$200,000 maximum
- Guaranteed issue amount of \$20,000

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 the insurance Carrier.

VOLUNTARY LIFE INSURANCE FOR YOUR DEPENDENTS

Spouse/Domestic Partner

- Increments of \$5,000 (not to exceed 50% of employee voluntary life coverage)
- Up to a \$50,000 maximum

Child(ren)

- 14 days 6 months: \$250
- 6 months 26 years: \$10,000

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 Lincoln Financial Group 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 • 70% of your base salary, to a maximum of \$8,000 per month if you are disabled and are unable to work for more than 180 days. • Benefits are offset with other sources of income, such as Social Security and Workers' Compensation.

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 2025.

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.

Examples of Covered Injuries:

- Broken bones
- · Eye injuries

Burns

- Ruptured discs
- Concussions
- Torn ligaments
- Cuts repaired by stitches

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/ DOMESTIC PARTNER	CHILD(REN)
\$10,000, \$20,000 or \$30,000	100% of employee coverage amount	50% of employee coverage amount

Examples of Covered Illnesses:

Cancer

Heart attack

Stroke

- Coronary artery bypass surgery
- Major organ failure
- End-stage renal (kidney) failure

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	

Additional Benefits For:

Radiation

- Hospitalization
- Immunotherapy
- Stem Cell Treatments

Examples of Covered Illnesses:

Cancer

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

VOLUNTARY PLANS (CONTINUED)

IMPORTANT: This is a fixed indemnity policy, NOT health insurance

This fixed indemnity policy may pay you a limited dollar amount if you're sick or hospitalized. You're still responsible for paying the cost of your care.

- The payment you get isn't based on the size of your medical bill.
- There might be a limit on how much this policy will pay each year.
- This policy isn't a substitute for comprehensive health insurance.
- Since this policy isn't health insurance, it doesn't have to include most Federal
 consumer protections that apply to health insurance.

Looking for comprehensive health insurance?

 Visit HealthCare.gov or call 1-800-318-2596 (TTY: 1-855-889-4325) to find health coverage options. To find out if you can get health insurance through your job, or a family member's job, contact the employer.

Questions about this policy?

For questions or complaints about this policy, contact your State Department
of Insurance. Find their number on the National Association of Insurance
Commissioners' website (naic.org) under "Insurance Departments." If you
have this policy through your job, or a family member's job, contact the
employer.

VOLUNTARY PLANS (CONTINUED)



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

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 www.myautohome.farmers.com.

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 in 2025 (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.
- 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 www.tiaa-cref.org/elon.

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 http://www.mymobilewalletcard.com/elon/ 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 of North Carolina	877-275-9787	www.bcbsnc.com
Pharmacy	OptumRx	Customer Service: 855-218-8489 Pharmacy Help Desk: 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	Lincoln Financial	800-423-2765	www.lfg.com
Short-Term Disability	Aflac	Brandon Harvey 336-991-4590	www.aflacenrollment.com/ ElonUniversity/Q59764123885
Long-Term Disability	Lincoln Financial	800-487-1485	www.lfg.com
Accident Insurance	Wellfleet	855-664-5838	www.wellfleetworkplace.com/ register
Critical Illness Insurance	Wellfleet	855-664-5838	www.wellfleetworkplace.com/ register
Critical Illness-Cancer Insurance	Wellfleet	855-664-5838	www.wellfleetworkplace.com/ register
Hospital Indemnity Insurance	Wellfleet	855-664-5838	www.wellfleetworkplace.com/ register
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? 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 - 9pm EST. Just call 1-877-382-9808.

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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.