



2021 Benefits Guide



Benefit Administrators: Contact Information

Plan	Provider	Contact information
Medical Benefit	Excellus BlueCross BlueShield (BCBS)	800.493.0318 (TTY: 800.662.1220) ExcellusBCBS.com/syredu
Prescription Drug Benefit	OptumRx	866.854.2945 (TTY: 711) optumrx.com
Flexible Spending Accounts	HealthEquity/WageWorks	877.924.3967 (TTY: 866.353.8058 / International TTY: 602.267.3826) wageworks.com
Dental Benefit	Delta Dental	800.932.0783 (TTY: 711) deltadentalins.com
Vision Benefit	VSP Vision	800.877.7195 (TTY: 800.428.4833) vsp.com
Dental/Vision and Disability Plan for SEIU Members	SEBF	855.835.9720 sebf.org
Life Insurance	MetLife (HR Shared Services is record keeper)	315.443.4042 or hrservice@syr.edu HR Shared Services
Auto and Home Insurance	MetLife	Local Representative: Tom Swanson 315.656.2982 or toll-free 800.438.6388
Long Term Disability Insurance	The Standard	800.426.4332 standard-ny.com/mybenefits/syracuse
Retirement Benefit Plan	TIAA	855.842.2873 (TTY: 800.842.2755) tiaa.org/syr Online access code to change elections: Noncontributory Retirement Plan: SURETP Voluntary Retirement Plan: SUTDAP
Dependent and Remitted Tuition	Syracuse University	315.443.4042 or hrservice@syr.edu HR Shared Services
Faculty and Staff Assistance Program (FSAP)	Carebridge	800.437.0911 (TTY: 711)
Care@Work	Care.com	855.781.1303 or Care.com

Helpful University Contact Information

Syracuse University Office of Human Resources - hr.syr.edu	
HR Shared Services	315.443.4042 or hrservice@syr.edu
Equal Opportunity, Inclusion and Resolution Services	315.443.4018
Other Syracuse University Departments	
Barnes Center at The Arch Recreation	315.443.4386
Hazard Communication Training	315.443.4132
I.D. Card Services	315.443.2721
Information Technology Services	315.443.2677
The LGBT Resource Center	315.443.3983
Parking and Transit Services	315.443.4652
Payroll	315.443.4042
Public Safety (Communications Center)	315.443.2224
University College	315.443.9378



Welcome to Syracuse University

We are pleased to have you join our team of talented faculty and staff who work to deliver the best experience possible for our students—on campus, across the country and around the world.

This booklet provides an overview of the comprehensive and diverse employee benefits and services that you will enjoy as a member of the Syracuse University (“University”) community. Beyond the basics found in this packet, you’ll want to review the details found on the Human Resources website, **hr.syr.edu**, which is continually updated with the most current benefit information.

Our HR Shared Services team is here to help with any questions you may have about your employment. We can be contacted by phone at **315.443.4042** or via email at **hrrservice@syr.edu**.

We hope you find this information to be a valuable resource as you begin your University career, and we wish you much success in your new role.

Sincerely,

Office of Human Resources

Table of Contents

New Employee Checklist.....	3
Benefits Quick Guide.....	5
Retirement Planning	6
Health Benefits (Medical and Prescription Drug)	8
Dental and Vision Benefits	13
Flexible Spending Accounts (FSAs)	16
Wellness and WorkLife Resources	16
Life Insurance	17
Disability Benefits.....	18
Workers' Compensation	18
Voluntary Long Term Disability Insurance	18
Remitted Tuition Benefits	19
Dependent Tuition Benefits	20
Paid Time Off for Staff	21
Leave of Absence.....	21
Auto and Home Insurance	21
Worldwide Travel Protection	21
Guaranteed Mortgage Program	21
Identification Cards.....	21
Adoption Assistance.....	21
Lesbian, Gay, Bisexual and Transgender (LGBT) Resource Center	21
Information Technology Services.....	22
Notice of Special Enrollment Rights.....	23
Continuation of Health Coverage/COBRA	24
Notice of Privacy Practices	27
Notice Regarding the Women's Health and Cancer Rights Act of 1998	30
Summary of Benefits and Coverage (SBC).....	30



New Employee Checklist

First Day:

- ☐ Complete your **Employment Eligibility Verification (I-9) form** at **Human Resources (HR)**. Bring your required documentation.
- ☐ Activate your NetID at **netid.syr.edu**, so that you have access to online resources and services such as:
 - Email
 - Electronic documents
 - MySlice, the University web portal where you access the University's benefits enrollment site and other employee services
- ☐ Obtain an **identification card from the Office of Housing, Meal Plan and I.D. Card Services**. Submit your photo by emailing **idcard@syr.edu** and follow the guidelines for photo submission by viewing **housingmealplans.syr.edu/idcards/photo-submission**. When your new card is ready, you will receive an email directing you when and where to pick up the card.
- ☐ Complete your **Pay Notice Acknowledgment in the Employee Services section of MySlice**.

First Week:

- ☐ Sign up for direct deposit of your pay and update your federal and/or state tax withholding status and allowances on MySlice at **myslice.syr.edu**.
- ☐ Complete a TIAA waiting period waiver form, if applicable.
- ☐ Review the Orange Alert information and provide your preferred contact information in MySlice.
- ☐ Schedule your Hazard Communication Training online at **ehss.syr.edu/about/training**, if applicable.
- ☐ If your duties will include accounting and payroll tasks, visit **fab.syr.edu** to register for applicable training. For additional training regarding the General Ledger Financial Reports, please contact General Accounting at **315.443.2522** or **genacctg@syr.edu**.

First Month:

- ☐ Review benefits information and enroll as soon as possible.
IMPORTANT: You must enroll within the first 31 days of employment to commence benefits as of your hire date.
- ☐ Attend New Employee Orientation, if applicable. New Employee Orientation sessions are regularly held, and you should receive an email from Human Resources with details about the next session.





Benefits Quick Guide

Eligibility

You are eligible for benefits the day you begin your benefits-eligible position. Refer to the University's benefits eligibility policy (hr.syr.edu/eligibility) to determine which dependents are eligible for coverage.

Retirement

After one year, you receive a University contribution to your retirement account equal to 10 percent of your base salary (hr.syr.edu/retirement-planning). The one-year waiting period may be waived for those joining from another accredited four-year institution. Make voluntary pre-tax and/or Roth contributions to your retirement account immediately upon hire. Prepare for a secure financial future by receiving personalized financial planning services through TIAA at no additional cost.

Health Insurance

Three comprehensive medical options are available through Excellus BCBS (hr.syr.edu/medical), with prescription drug coverage through OptumRx (hr.syr.edu/rx).

Dental and Vision

Preventive and comprehensive coverage is available through Delta Dental. You can add vision coverage to your dental coverage through VSP (hr.syr.edu/dental).

Flexible Spending Accounts

Withhold salary on a pre-tax basis for reimbursement of eligible out-of-pocket health care expenses and dependent care expenses. The maximum withholding is \$2,750 for medical expenses and \$5,000 per household for dependent care (hr.syr.edu/fsa).

Wellness

The Syracuse University Wellness Initiative provides learning opportunities, activities, programs and other resources to empower and encourage you to make decisions that lead to a balanced and healthy lifestyle. Learn about upcoming programs at wellness.syr.edu.

Faculty and Staff Assistance Program

Through our benefit partner, counselors are available for confidential consultation, assessment, referrals and counseling. Licensed, credentialed counselors are available 24 hours a day, seven days a week, 365 days a year by calling **800.437.0911 (TTY: 711)**.

Disability and Life Insurance

Income replacement benefits are available for short and long term disabilities. The University also provides basic life and accidental death & dismemberment (AD&D) protection, with the option to purchase additional coverage for you and your dependents (hr.syr.edu/life).

Tuition

Dependent tuition is available after you complete the equivalent of three full-time years of service for eligible dependents attending Syracuse University or other participating institutions. In addition, remitted tuition benefits for you and your eligible spouse/same-sex domestic partner may be used toward graduate and undergraduate coursework. Visit hr.syr.edu/tuition for more information.

Paid Time Off

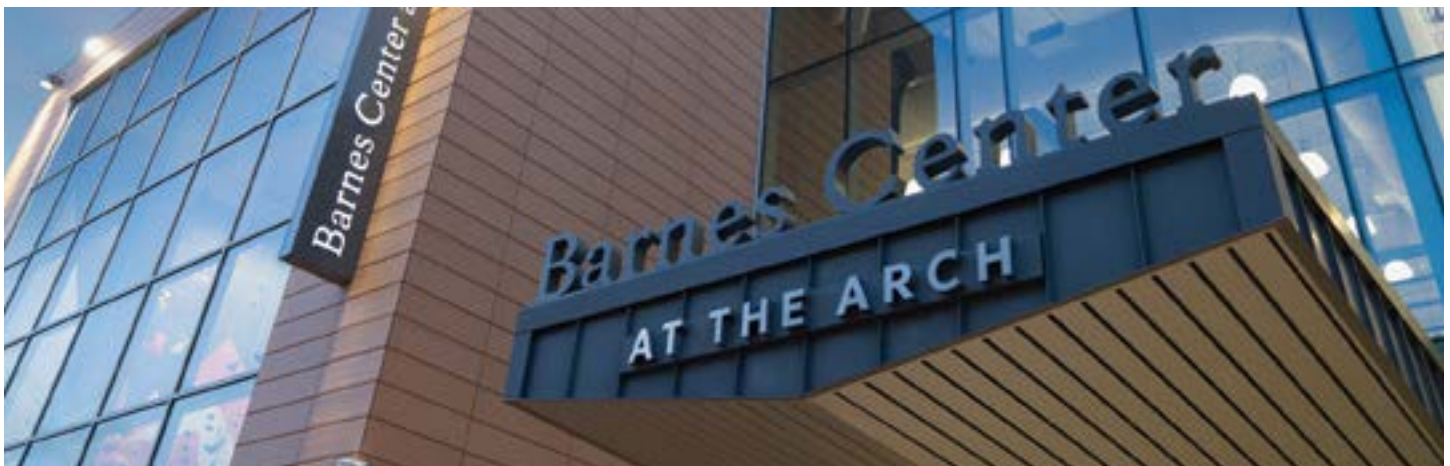
The University provides you with time to enjoy away from work, as well as to protect you and your loved ones in times of sickness. Be sure to review and understand the time off that you are eligible for through your University benefits (hr.syr.edu/timeoff).

Caregiving Resources

The University provides a variety of support to assist with child and dependent care needs, including access to a free premium membership to the caregiving website **Care.com**, a dependent care subsidy program, flexible work arrangements and more.

Additional Benefits

Auto and home insurance, recreational facilities, travel assistance, career development, will preparation services, adoption assistance and a guaranteed mortgage program are also available as part of the University's comprehensive benefits program.



Noncontributory Retirement Plan

Upon completion of your first year of employment, you'll be eligible to receive the University's contribution of 10 percent of your base salary to your retirement account, subject to the annual maximum. The University's contribution will automatically be invested in a T. Rowe Price Target Date Fund for the year closest to the year you reach age 65, however, you may redirect the contributions to other investment options within the plan at any time.

Making Changes to Your Investments

Once enrolled, you can make changes to your account by contacting TIAA by phone at **855.842.CUSE (2873)** or online at **tiaa.org/syr**.

Waiving the One-Year Waiting Period

The one-year waiting period to receive the University contribution may be waived for faculty and staff joining the University from another accredited four-year institution that confers a baccalaureate degree. In order to waive the University's one-year waiting period, you must meet the criteria provided on the waiver form. The waiver form, which must be completed by you and your previous employer, can be found at **hr.syr.edu/forms**. Once the waiver form has been completed by your previous employer, you should review it for accuracy, sign and date it, and return it to HR Shared Services either by fax (**315.443.1063**) or email (**hrservice@syr.edu**). This waiver will go into effect and the University's contributions will begin after the completed form is approved by HR Shared Services. Please keep in mind that there is no retroactive contribution of the University's

10 percent contribution, so you are encouraged to complete the waiver form as soon as possible to maximize the amount you are eligible to receive from the University.

Financial Counseling at No Additional Cost

TIAA offers personalized financial planning services to help you reach your retirement goals. To schedule a meeting with one of the University's dedicated TIAA financial consultants, or for assistance with your account, contact TIAA at **855.842.CUSE (2873)/TTY: 800.842.2755**, or sign up online at **tiaa.org/syr**. In addition, the University provides a variety of resources to help you plan for a successful retirement. Be sure to check out **hr.syr.edu/financial-wellness** to see the many tools available to support your personal financial goals.

Designate a Beneficiary

A beneficiary is the person or organization who will receive the money in your accounts if you pass away. You can name *primary beneficiaries*, who receive the money if they are alive when you pass away, and *contingent beneficiaries*, who receive the money if your primary beneficiaries pass away before you. You can update your beneficiary designations at any time.

In general, if you're married, your spouse must consent in writing if you choose to name someone else as your primary beneficiary. If you don't name a beneficiary, the plan rules will determine who receives your account. Naming a beneficiary ensures that your wishes are followed.



Health Benefits

Syracuse University is committed to providing comprehensive health plan options for our faculty and staff. Three health insurance options are available: SUBBlue, SUOrange and SUPro. All three options include medical coverage administered by Excellus BCBS and prescription drug coverage administered by OptumRx. In general, the same services are covered under all three plans, but with a different deductible and copay/coinsurance structure.

Benefits Eligibility

You are eligible to enroll as of your date of hire. Generally, you may cover your legal spouse or eligible domestic partner, and your children up to age 26 under your health coverage. Please refer to the University's Benefits Eligibility Policy online at hr.syr.edu/eligibility to determine if your dependents are eligible for coverage. You must show documentation of your dependent's relationship to you before your dependent will be approved for coverage.

Medical Benefits

SUBBlue and SUPro allow members to receive services from any provider, subject to certain plan restrictions. When you receive health care, your coverage will be determined by whether the provider participates in the network, as described below.

- **In-Network:** Services must be performed by a provider that participates with the local Excellus BCBS network or the national BlueCard network, regardless of their location. Coordination with your Primary Care Physician (PCP) is not required.
- **Out-of-Network:** Services are performed by a provider that does not participate in the Excellus BCBS network.

SUOrange restricts coverage to only those providers that participate with Excellus BCBS or the national BlueCard network.

Coverage for International Travel: When traveling outside the United States, you have access to in-network providers in over 200 countries worldwide. If you receive health care services from a participating BCBS Global Core provider, generally you can present your ID card and pay the applicable deductible and copay/coinsurance under SUBBlue, SUOrange or SUPro.

If you see an international provider who doesn't participate in the BCBS Global Core network, you will need to pay for those services at the time they are rendered. If you're enrolled in SUBBlue or SUPro, you can submit those claims to Excellus BCBS for reimbursement as though the providers were participating; however, there is no coverage for non-participating providers in the SUOrange plan.

Online Tools and Resources for Medical Benefits: Set-up an account through the excellusBCBS.com/syredu secure member website for a full suite of online tools. You can view your benefits, eligibility and claims and search for participating providers and facilities. You can also download the **Excellus BCBS mobile app** for instant access to your member ID card and claims information. Excellus BCBS also offers member assistance through their dedicated customer service unit at **800.493.0318 (TTY: 800.662.1220)**.

Prescription Drug Benefits

OptumRx is the pharmacy benefit manager for Syracuse University. The benefit provides many convenient ways to obtain your prescriptions. Visit hr.syr.edu/rx for coverage details.

Generic Drugs

To encourage the appropriate use of generic medications, if a generic equivalent is available and you choose to have the brand name drug, or your doctor writes "Dispense As Written" (DAW) on your prescription to ensure that you get the brand name drug, you will be required to pay the generic, tier one copay plus the difference in cost between the brand name drug and the generic drug.

Biotech/Specialty Drugs

Prescription drugs in the biotech/specialty class are required to be filled through mail order by Optum Specialty Pharmacy and may be limited to a 30-day supply per refill. Your cost will follow the mail order schedule for your medical plan option, but for a 30-day supply. Contact Optum Specialty Pharmacy at **844.265.1761 (TTY: 711)** to learn more about specialty medications.

Home Delivery

If you take certain prescription medications on an ongoing basis, you can fill your prescriptions using home delivery, which offers convenient mail order service with free standard shipping. Enroll in home delivery online at optumrx.com.

Have your doctor write your prescription for up to a 90-day supply with three refills. Your doctor can call, fax or electronically prescribe your medication for home delivery. Some medications, including pre-packaged medications and controlled substances, may not be available in a supply greater than 30 days per order. Home delivery orders are generally received within 14 days, but you will be notified if there will be a delay with your shipment. Call OptumRx at **866.854.2945 (TTY: 711)** for assistance with home delivery.

When you use mail order, the plan's mail order cost sharing applies, which is different than the cost sharing at a retail pharmacy. This may result in significant savings in your out-of-pocket costs, but savings vary for each medication and savings are not guaranteed.

Retail 90-Day Network

You may fill a 90-day supply at a local participating pharmacy, instead of using the mail order option, and pay the retail cost share for your plan option.

Online Tools and Resources for Prescription Drug Benefits

Set up your account at optumrx.com, the secure member website for prescription drug benefits. Then you can view your claim history, view/print your member ID card, find participating pharmacies, estimate the cost of prescriptions and much more. The **OptumRx mobile app** gives you access from anywhere.



2021 Health Plan: Monthly Employee Contributions

	SUBBlue		SUOrange		SUPro	
	Schedule A	Schedule B	Schedule A	Schedule B	Schedule A	Schedule B
Employee	\$147.88	\$129.54	\$143.58	\$125.77	\$134.87	\$118.14
Employee + Spouse/Domestic Partner	\$325.33	\$284.99	\$315.87	\$276.70	\$296.70	\$259.91
Employee + Child(ren)	\$285.41	\$250.02	\$277.10	\$242.74	\$260.29	\$228.01
Employee + Spouse/Domestic Partner + Child(ren)	\$462.86	\$405.47	\$449.39	\$393.67	\$422.13	\$369.78

Contributions listed here are based on the 12-month calendar year. The actual deduction from your paycheck depends on your deduction cycle.

Reduced Medical Contributions: Schedule B

Employees will pay the Schedule A contribution rates for health plan coverage unless they qualify, apply and are approved for reduced Schedule B contributions. Applications must be received within 31 days of your date of hire and resubmitted each year during Open Enrollment. Eligibility for Schedule B contributions is based on household income and household size according to the chart below (subject to change each year). For 2021, the eligibility guidelines are:

Household Size	Household Income
1	Less than \$38,000
2	Less than \$52,000
3	Less than \$65,000
4 and up	Less than \$79,000

Household size is the number of individuals declared on your most recent federal income tax return and the return for your spouse or domestic partner, if filed separately. Included in household size are your children who are not declared on your tax return, but are either under age 19 and living with you, or age 19 or older and enrolled on your medical plan. Household income is the combined adjusted gross income reported on your (combined) federal income tax returns.

Additional information about Schedule B contributions, including the application form, is available online at hr.syr.edu/scheduleb.

2021 Health Plan: Schedule of Benefits

The following chart shows your cost sharing for some commonly used health care services. The complete benefit summary and coverage features of each plan option can be found in the Medical Booklet, posted online in MySlice.

	SUBlue		SUPro	
	SUOrange	Out-of-Network	In-Network	Out-of-Network
	In-Network			
Annual Deductible¹	\$150 per individual with a maximum of \$300 per family	\$300 per individual with a maximum of \$1,000 per family	\$200 per individual with a maximum of \$400 per family	\$300 per individual with a maximum of \$1,000 per family
Coinsurance	Generally, no coinsurance. Certain exceptions apply. See the Medical Booklet for information.	30% allowable amount plus the difference between provider's charge and the allowable amount. Certain exceptions apply. See the Medical Booklet for information.	5% of allowable amount for inpatient hospitalization - or - 20% of allowable amount for other services, except as otherwise noted in the Medical Booklet	5% of allowable amount for inpatient hospitalization - or - 30% of allowable amount for other services, except as otherwise noted in the Medical Booklet - plus - Difference between provider's charge and the allowable amount
Annual Out-of-Pocket Maximum²	\$2,000 per individual with a maximum of \$4,000 for a family	\$6,000 per individual with a maximum of \$12,000 for a family	\$1,500 per individual with a maximum of \$3,000 for a family	\$6,000 per individual with a maximum of \$12,000 for a family
Routine Preventive Screenings	No deductible or copay; paid in full	Deductible plus coinsurance	No deductible or coinsurance; paid in full	Deductible plus coinsurance
Routine Preventive Screenings include, but are not limited to, the following (certain restrictions apply, contact Excellus BCBS with any questions): <ul style="list-style-type: none"> Breast Cancer Screenings (one per calendar year for ages 35 and older, with exceptions if high risk; both preventive and diagnostic screenings are covered in full through an in-network provider) Prostate Cancer (one per calendar year for ages 50 and older, with exceptions if high risk) Cervical Cancer (one per calendar year for ages 18 and older) Colonoscopy <p>This list is subject to change based on guidelines issued by the United States Preventive Services Task Force and the Advisory Committee on Immunization Practices.</p>				
Well Child Visits Birth to 2nd birthday: 11 visits 2nd birthday to 3rd birthday: 2 visits 3rd birthday to 19th birthday: 1 visit per calendar year	No deductible or copay; paid in full	Deductible plus the difference between provider's charge and allowable amount	No deductible or coinsurance; paid in full	Deductible plus coinsurance
Routine Adult Physical (one per calendar year)	No deductible or copay; paid in full	Deductible plus the difference between provider's charge and allowable amount	No deductible or coinsurance; paid in full	Deductible plus coinsurance

	SUBBlue		SUPro	
	SUOrange			
	In-Network		In-Network	Out-of-Network
Physician Office Visits	Deductible plus \$35 copay (PCP) ³ or deductible plus \$50 copay (Specialist)	Deductible plus \$35 copay and coinsurance (PCP) or deductible plus \$50 copay and coinsurance (Specialist)	Deductible plus coinsurance	Deductible plus coinsurance
Urgent Care Facility Visit	Deductible plus \$50 copay	Deductible, \$50 copay and coinsurance	Deductible plus coinsurance	Deductible plus coinsurance
Hospital Emergency Room	Deductible plus \$150 copay	In-network deductible plus \$150 copay	Deductible plus coinsurance	In-network deductible plus in-network coinsurance
Inpatient Hospital	Deductible plus \$350 copay per admission	Deductible, \$350 copay per admission and coinsurance	Deductible plus coinsurance	Deductible plus coinsurance
Outpatient Surgery (performed at a hospital)	Deductible plus \$200 copay	Deductible, \$200 copay and coinsurance	Deductible plus coinsurance	Deductible plus coinsurance
Diagnostic Machine Tests, X-Rays and Radiology Services	Deductible plus \$50 copay	Deductible, \$50 copay and coinsurance	Deductible plus coinsurance	Deductible plus coinsurance
Diagnostic Laboratory Tests	No deductible or copay; paid in full	Deductible and coinsurance	Deductible plus coinsurance	Deductible plus coinsurance
Physical Therapy	Deductible plus \$35 copay	Deductible, \$35 copay and coinsurance	Deductible plus coinsurance	Deductible plus coinsurance
Maternity	No deductible or copay; paid in full	Deductible and coinsurance	No deductible or coinsurance; paid in full	Deductible plus coinsurance
Telehealth (including MDLIVE services and provider-facilitated visits)	Deductible plus copay associated with in-person visit	Deductible plus copay associated with in-person visit plus coinsurance	Deductible plus coinsurance	Deductible plus coinsurance
Chiropractic Services	Deductible plus \$50 copay	Deductible, \$50 copay and coinsurance	Deductible plus coinsurance	Deductible plus coinsurance

¹Unless otherwise noted, all plan options require the employee to pay an annual deductible before any other cost sharing is determined. After the annual deductible is satisfied, the employee must pay the copay or coinsurance, if applicable. For out-of-network services, the coinsurance and/or copay is then applied to the balance of the allowable amount. The employee is also responsible for the difference between the provider's charge and the allowable amount as defined by Excellus BCBS. Review examples of how the deductible, copays and coinsurance apply at hr.syr.edu/medical.

²Out-of-pocket maximum refers to the maximum amount of out-of-pocket expenses an employee would pay in a calendar year. The out-of-pocket expenses are defined as the deductibles, coinsurance and copayment amounts. Any member payment for the difference between provider charges and the allowable amounts for out-of-network services does not count toward the out-of-pocket maximum.

³Copays for outpatient treatment related to mental health and substance use in SUBBlue and SUOrange are consistent with that of a PCP office visit.



Prescription Drug Coverage

	SUBlue and SUOrange	SUPro
Annual Deductible	No deductible	
Out-of-Pocket Maximum (separate from the medical out-of-pocket maximum)	\$2,000 per individual with a maximum of \$4,000 for a family	
Retail: Tier 1	20% coinsurance*	15% coinsurance*
Retail: Tier 2	25% coinsurance	25% coinsurance
Retail: Tier 3	45% coinsurance	40% coinsurance
Receive up to a 30-day supply or up to a 90-day supply of maintenance medications at a retail pharmacy.		
Mail Order: Tier 1	\$20*	Lesser of \$15 or 15% coinsurance*
Mail Order: Tier 2	\$50	Lesser of \$45 or 25% coinsurance
Mail Order: Tier 3	\$90	Lesser of \$90 or 40% coinsurance
Receive up to a 90-day supply of maintenance medication through home delivery.		
Specialty Mail Order	Same as mail order except 30-day supply for most medications	
Infertility Medications	Follows above schedule for retail, mail order and specialty with a \$20,000 lifetime maximum	

***Certain prescription drugs are available at \$0 copay (age, gender and other restrictions may apply; contact OptumRx for more details at 866.854.2945, TTY: 711), including:**

Aspirin
 Breast Cancer Prevention Drugs
 Cholesterol Medications
 FDA-Approved Tobacco Cessation Drugs and OTC Products
 Fluoride
 Folic Acid

Iron Supplements
 Pre-exposure Prophylaxis (PrEP) Therapies
 Preparatory Prescriptions for Colonoscopies
 Vitamin D Supplements
 Women's Contraceptives

Dental and Vision Benefits

There are two dental plan options offered by Delta Dental: Preventive and Comprehensive. **Enrollment in a Delta Dental option is a two-year commitment. A new two-year commitment cycle for the University's dental and vision plans started Jan. 1, 2021. Elections made during calendar year 2021 will be in effect through Dec. 31, 2022.** In order to enroll in vision benefits with Vision Service Plan (VSP), you must first enroll in a dental plan. Vision coverage is not available as a separate option.

2021 Dental With or Without Vision Plan: Monthly Employee Contributions

	Preventive	Preventive Plus Vision	Comprehensive	Comprehensive Plus Vision
Employee	\$8.32	\$13.33	\$30.08	\$35.09
Employee + Spouse/ Domestic Partner	\$21.38	\$31.40	\$70.51	\$80.53
Employee + Child(ren)	\$24.25	\$35.13	\$69.64	\$80.52
Employee + Spouse/ Domestic Partner + Child(ren)	\$40.50	\$57.88	\$109.04	\$126.42

Contributions listed here are based on the 12-month calendar year. The actual deduction from your paycheck depends on your deduction cycle.

Summary of University Dental Benefits

Regardless of which dental plan you choose, you can visit any licensed dentist, but you'll maximize plan value by using a dentist who participates in a Delta Dental network.

	Delta Dental PPO Dentist	Delta Dental Premier Dentist	Non-Participating Dentist
Plan Allowance	Dentists are paid PPO contracted fees. Your costs are usually lowest.	Dentists are paid Premier contracted fees. Your costs are usually moderate.	Claims for services provided by non-participating dentists will be processed using a maximum fee level that may be higher than Delta Dental's maximum plan allowance. Your costs are usually highest.
Payment Responsibilities	By agreement, participating dentists must accept contracted fees as payment in full for covered services and cannot balance bill you. Delta Dental's benefit is a percentage of the maximum plan allowance, which may require a coinsurance amount. Deductibles may also apply. You are also responsible for costs related to services that are not covered.		The benefit payment is sent directly to you. You are responsible for any applicable coinsurance and/or deductibles, plus any difference between Delta Dental's payment (the maximum plan allowance) and the amount billed that exceeds this allowance. You are also responsible for costs related to services that are not covered.

Online Tools and Resources for Dental Benefits

Visit Delta Dental's website at deltadentalins.com to:

- Locate participating dentists by location, specialty and network type;
- Obtain eligibility and benefit information; or
- Check the status of a claim.

From a mobile phone, the website is streamlined so you can access your ID card, benefit and claim information with just a few clicks. Call Delta Dental at **800.932.0783 (TTY: 711)** with any questions.

Summary of Delta Dental Benefits

The Preventive plan covers two annual exams and cleanings per calendar year. Coverage for basic and major dental care, including fillings, scaling, extractions and root canals, is available if you select the Comprehensive plan.

Plan	Annual Deductible Per Person	Family Deductible	Deductible for Diagnostic and Preventive Services	Annual Maximum Per Person
Preventive	\$0	\$0	Waived	\$500
Comprehensive	\$50 (does not apply to preventive services)	\$150 (does not apply to preventive services)	Waived	\$2,000

		Delta Dental PPO Dentist		Delta Dental Premier Dentist		Non-Participating Dentist	
Service	Examples of Covered Services	Paid by Delta Dental	Paid by Patient	Paid by Delta Dental	Paid by Patient	Paid by Delta Dental	Paid by Patient
Preventive Plan Coverage							
Diagnostic	Exam and X-rays (two per calendar year)	100%	0%	100%	0%	100%	0%
Preventive	Fluoride treatments (to age 19), teeth cleaning, sealants (to age 14)	100%	0%	100%	0%	100%	0%
TMJ	Temporomandibular joint dysfunction treatment	50%	50%	50%	50%	50%	50%
Additional Coverage for Comprehensive Plan Only							
Basic Restorative	Fillings	80%	20%	60%	40%	60%	40%
Oral Surgery	Extractions	80%	20%	60%	40%	60%	40%
Endodontics	Root canal therapy	80%	20%	60%	40%	60%	40%
Periodontics	Treatment of gum disorders	80%	20%	60%	40%	60%	40%
Prosthodontics	Dentures, bridgework	50%	50%	50%	50%	50%	50%
Major Restorative	Crowns	50%	50%	50%	50%	50%	50%
Stainless Steel Crowns	On temporary teeth (only for children)	80%	20%	60%	40%	60%	40%

Summary of University Vision Benefits

The following is a summary of vision services and benefits provided through VSP:

Coverage	Frequency	Copay	Plan Information
Exam	Every calendar year	\$15	Routine exam only
Prescription Glasses (lenses)	Every calendar year	\$25*	Single vision, lined bifocal and lined trifocal lenses Polycarbonate lenses for dependent children
Prescription Glasses (frames)	Every other calendar year		\$150 allowance for a wide selection of frames \$170 allowance for featured frame brands 20% savings on the amount over your allowance
Lens Options	Every calendar year	\$0 \$95-\$105 \$150-\$175	Standard progressive lenses Premium progressive lenses Custom progressive lenses
Contact Lens Care	Every calendar year	up to \$60	\$150 allowance for contacts. Copay applies to contact lens exam (fitting and evaluation). Either frames or contact lenses are covered in a calendar year. If you choose contact lenses, you will be eligible for a frame one calendar year from the date the contact lenses were obtained. Current soft contact lens wearers may qualify for a special program that includes a contact lens exam and initial supply of replacement lenses.
Additional Coverage	Diabetic Eyecare Plus Program		

*A \$25 copay applies for prescription glasses; if frames or lenses are purchased separately, a \$25 copay applies. If frames and lenses are purchased at the same time, only one copay of \$25 is charged.

Service Employees Benefit Fund (SEBF) Dental and Vision Plans

Employees represented by the SEIU bargaining unit have the choice of participating in either the University's dental and vision plans as outlined above, or the SEBF dental plan, with or without vision. The SEBF plan is administered by the union and coverage is provided through SEBF Dental and Davis Vision, respectively. **Enrollment in**

the SEBF plan is a one-year commitment. In order to enroll in vision benefits, you must first enroll in a dental plan. Vision coverage is not available as a separate option. For information about the SEBF plan benefits, visit hr.syr.edu/sebf.

SEBF With or Without Vision Plan: Monthly Employee Contributions

	Basic	Basic Plus Vision	Comprehensive	Comprehensive Plus Vision
Employee	\$19.96	\$25.18	\$26.79	\$32.01
Employee + 1	\$40.18	\$51.91	\$45.68	\$57.41
Family	\$57.95	\$69.68	\$66.86	\$78.59

Contributions listed here are based on the 12-month calendar year. The actual deduction from your paycheck depends on your deduction cycle.

Flexible Spending Accounts (FSAs)

If you expect to have health care or dependent care expenses next year, setting aside money in an FSA is a great way to save on taxes—whether you enroll in the University’s health plans or have other coverage.

Which type of FSA do you need?

	Health Care FSA	Dependent Care FSA
What can you use it for?	<ul style="list-style-type: none"> • Copays, coinsurance and deductibles from your health plans • Dental and vision expenses • Prescriptions and eligible health care products 	Day care expenses for a child under age 13, or an adult dependent, so you (and your spouse/partner) can work
How much can you contribute?	\$2,750 per employee	\$5,000 per household
What if you don’t claim the full amount?	Roll over up to \$550 to the next year (lose any amount over \$550 not claimed by April 30 of the following year)	Lose any amount not claimed by April 30 of the following year

Health Care and Dependent Care FSAs have different rules. Be sure you read and understand which expenses are eligible, when you can access the funds and how to file claims by the annual deadline. Details, online calculators and tips can be found on the HealthEquity/WageWorks website (wageworks.com) or at hr.syr.edu/fsa.

Syracuse University Wellness and WorkLife Resources

Syracuse University cares about the health and wellness of our entire campus community. There are several University departments and programs that provide you with a variety of wellness and worklife related programs, tools and resources. Please visit hr.syr.edu/worklife for more information on worklife opportunities at the University.

- The **Syracuse University Wellness Initiative** provides learning opportunities, activities, programs and other resources needed to empower and encourage you to make decisions that lead to a balanced and healthy lifestyle. Learn more and subscribe to the email list at wellness.syr.edu.
- **Financial Wellness**—Whether you’re just beginning your career or planning for retirement, the University provides assistance with meeting the financial demands of many of life’s most significant events. You can find resources to help plan for a financially secure future on the Financial Wellness website (hr.syr.edu/financial-wellness). Be on the lookout for upcoming opportunities to increase your financial know-how and understand the steps toward retirement readiness.
- **Carebridge, our Faculty and Staff Assistance Program**, provides comprehensive counseling, worklife services and resources to you and your dependents. This partnership enables the University to offer independent, confidential counseling (both in person and telephonic) and other resources to help people manage challenges at work and in their personal lives. Licensed, credentialed counselors are available 24 hours a day, seven days a week, 365 days a year by calling Carebridge at **800.437.0911 (TTY: 711)**.
- **Healthy Monday Syracuse** is part of a national initiative to help end chronic preventable diseases by offering weekly programs to support people in starting and sustaining healthy behaviors. Many people view Monday as a “fresh start.” Plus, those who begin the week with a healthy habit are more likely to keep it up all week long, which creates long lasting, healthy change. Sign up for our Healthy Monday Syracuse weekly email newsletter for tips on improving wellbeing. Check out Central New York Monday Mile walking routes and Meatless Monday dining options. Visit lernercenter.syr.edu/healthy-monday for more information.

- **Barnes Center at The Arch** offers free access to fitness floors in an accessible and centralized space on campus with your Syracuse University I.D. Additional opportunities such as drop-in fitness classes, personal training and memberships for dependents, spouses and partners are competitively priced and available for purchase. Learn more at ese.syr.edu/bewell/billing-and-fees.
- **Barnes Center at The Arch Pharmacy** is a full-service pharmacy on campus that is available to you. The pharmacy provides a wide selection of prescription and over-the-counter medications, vitamins and dietary supplements in addition to pharmaceutical education and counseling. Learn more at ese.syr.edu/bewell/pharmacy.
- **Sanvello** is a mindfulness app. Through free premium access, you may explore stress, anxiety and depression management resources. Based on cognitive behavioral therapy and mindfulness meditation, Sanvello provides daily tools to help manage mental health. Learn more at ese.syr.edu/bewell/sanvello.
- **Help a Student** with the assistance of the Barnes Center at The Arch health and wellness team. Faculty and staff members may be the first to recognize that a student is in distress or be the first to introduce a student to the many available health and wellness campus resources. Available resources include workshops, programs, wellness supplies and referral consultation services. Learn more at ese.syr.edu/bewell/campus-community.
- **Hendricks Chapel** leads in service to our common good as a student-centered global home for religious, spiritual, moral and ethical life. It offers spiritual and grief counseling, meditation and wellness programming. Learn more about Hendricks Chapel and view the meditation schedule at hendricks.syr.edu.

Life Insurance

Upon employment, Syracuse University provides \$50,000 basic group life insurance at no cost for faculty members and \$10,000 basic group life insurance at no cost for staff. At age 65, coverage reduces to \$32,500 for faculty and \$6,500 for staff. All life and AD&D insurance is administered through MetLife. Your personalized rate will be exhibited in MySlice during your enrollment.

Supplemental Life Insurance

You can purchase additional life insurance in increments of one to 10 times your annual salary, not to exceed \$2,000,000. A Statement of Health is required if you elect supplemental life coverage above \$250,000 upon hire, or if you decide in the future to increase your supplemental life insurance coverage. The Statement of Health form can be found at hr.syr.edu/lifesoh.

Will Preparation Service

If you choose to enroll in supplemental life insurance, you have access to another service—free will preparation. Like life insurance, a carefully prepared will is important. With a will, you can define your most important decisions, such as who will care for your children or inherit your property. The will preparation service also includes the preparation of living wills and power of attorney. By enrolling for supplemental life coverage, you'll have access to MetLife Legal Plans, a network of more than 14,000 participating attorneys for preparing or updating these documents at no additional cost to you if you use a MetLife Legal Plans participating attorney.

Using the Will Preparation Service is easy.

Step 1: Call MetLife Legal Plans at **800.821.6400** and a client service representative will assist you in locating a participating plan attorney in your area and provide you with a case number.

Step 2: Call and make an appointment with a participating attorney—many plan attorneys have evening and weekend appointments for your convenience.

Step 3: That's it. When you use a plan attorney, you don't need to submit any claim forms. You also have the flexibility of using a non-network attorney and being reimbursed for covered services according to a set fee schedule.

Basic and Supplemental AD&D Insurance

Upon employment, Syracuse University provides you with \$3,000 of basic AD&D coverage at no cost to you. You have the opportunity to purchase additional AD&D coverage in increments of one to 10 times your annual salary. Total coverage must not exceed the amount of supplemental life insurance. With the purchase of supplemental AD&D coverage, you will also enjoy the benefits of MetLife's travel assistance program, which provides a range of travel concierge services to you and your dependents. For more information, visit hr.syr.edu/travel.

Dependent Life Insurance: Spouse/Same-Sex Domestic Partner

You may purchase life insurance for your spouse/same-sex domestic partner in an amount not to exceed your own coverage (basic and supplemental life combined). You can choose coverage for your spouse/same-sex domestic partner in the amounts of \$10,000 or \$20,000 without providing a Statement of Health. Coverage levels of \$40,000, \$60,000, \$80,000 and \$100,000 may also be elected; however, your spouse/same-sex domestic partner must complete and submit a Statement of Health form which can be found at hr.syr.edu/lifesoh and have it approved by MetLife. Coverage will not go into effect until MetLife notifies HR Shared Services of its approval.

Dependent Life Insurance: Child(ren)

You may purchase life insurance for your unmarried child(ren) under age 26 who are dependent upon you for more than half of their support in the amount of \$10,000 as long as this coverage does not exceed your own amount. A Statement of Health is not required. If both parents are University employees, each can elect child life insurance. The monthly premium is \$0.63, based on a 12-month calendar year and remains the same regardless of the number of children covered. The actual deduction from your paycheck depends on your deduction cycle.



Disability Benefits

Salary Continuation Disability Benefits for Exempt Employees

Upon employment, the Syracuse University Salary Continuation Plan for faculty and exempt staff provides benefits for qualifying short term disabilities, maternity leaves and long term disabilities. There is no employee contribution required.

Period of Disability	Benefits Paid by Syracuse University (taxable)
Weeks 0-16	100% of current salary
Weeks 17-26	60% of current salary
Weeks 27-52	50% of current salary
Weeks 53+	50% of current salary if Social Security disability award has been granted before week 53 and if the eligible employee has completed at least 12 months of active employment

Questions about the Salary Continuation Plan should be directed to HR Shared Services at **315.443.4042** or hrrservice@syr.edu.

Disability Benefits Plan for Non-Exempt Employees

Syracuse University provides income replacement in excess of Statutory New York State Disability Benefits and Workers' Compensation for a non-exempt employee absent from work due to occupational or non-occupational injury or illness, as indicated in the table below. There is no employee contribution required.

Period of Disability	Benefits Paid by Syracuse University (taxable)
Weeks 0-1	First week waiting period (five consecutive days), sick pay benefits payable if eligible.
Weeks 2-26	New York State Statutory benefits up to a maximum of \$170 per week, if eligible. Supplemental Benefit up to a maximum of \$170 per week, if eligible.

Workers' Compensation

Syracuse University provides coverage (Statutory Benefits) for all employees, on a non-contributory basis, that provides protection for occupational illness or injury. Questions about non-exempt disability benefits and Workers' Compensation should be directed to the Office of Risk Management and Regulatory Compliance Services at **315.443.5106**.

Voluntary Long Term Disability (LTD) Insurance

The LTD plan complements Syracuse University's Salary Continuation Plan and the Disability Benefits Plan, both of which cover the first six months of disability before the LTD plan begins payments. Learn more about coverage and rates for voluntary LTD coverage at hr.syr.edu/ltd.

It is important to consider the advantages of seeking coverage beyond the University's plans alone. Voluntary LTD insurance helps protect you and your lifestyle and further helps you to meet your financial commitments in a time of need. You may purchase additional coverage for long term disabilities at group rates through the Voluntary LTD Plan, insured by The Standard. This program is designed to provide you with a benefit of 60 percent of your pre-disability earnings, payable monthly, if you have an illness or injury that prevents you from working for more than six months. Voluntary LTD benefit payments are not taxable because you pay the full premium cost on an after-tax basis.

The benefit amount you receive may be reduced by other income such as Social Security Disability benefits. If you are covered under both the Voluntary LTD insurance and the University's Salary Continuation Plan, disability benefits shall first be provided under the Voluntary LTD insurance, and benefits under the Salary Continuation plan would be reduced by the amount you receive under the Voluntary LTD plan.

You are guaranteed acceptance if you apply for Voluntary LTD insurance during your first 45 days of benefit eligibility. However, if you don't enroll when you are first eligible and later decide to elect the benefit, you must wait for the annual Open Enrollment period to elect coverage. You will need to submit a Medical History Statement to The Standard and may be asked to supply additional medical information and/or have a physical exam.

The Voluntary LTD program offers you the advantages of:

- **Convenience.** With premiums deducted directly from your paycheck after-tax, you don't have to worry about mailing monthly payments.
- **Savings.** Typically, group insurance rates are lower than the rates for individual insurance plans.
- **Peace of Mind.** You can take comfort in knowing that you have help meeting your financial obligations if you become disabled and are unable to work for an extended period of time.

Remitted Tuition Benefits

Syracuse University offers Remitted Tuition Benefits (RTB), which may be applied to tuition charges for undergraduate and graduate courses at Syracuse University, including University College (UC), with certain restrictions. You may use RTB credits for yourself, or you may transfer them to your eligible spouse or same-sex domestic partner. When you use RTB, you receive a full tuition waiver. RTB credits transferred to a spouse or same-sex domestic partner are valued at 85 percent. Credit hours are awarded in mid-July each year and are available for use during the academic year immediately following. Please visit the Syracuse University Remitted Tuition Policy online at hr.syr.edu/rtpolicy for more information.

Getting Started

The number of credit hours available depends upon your employment status:

- Full-time employees receive 12 credit hours annually.
- Part-time employees receive nine credit hours annually.

Your RTB will be prorated during your first year of employment, according to the following schedule:

Credits Hours Available Upon Hire

Employment Date	Full-Time	Part-Time
July 1-Sept. 30	12	9
Oct. 1-Dec. 31	8	6
Jan. 1-March 31	4	3
April 1-June 30	0	0

There are no forms or applications to complete to use RTB, unless you are transferring credits to an eligible spouse/same-sex domestic partner. To transfer credits to an eligible spouse or same-sex domestic partner, complete a Remitted Tuition Transfer Authorization Form (available at hr.syr.edu/forms) and return it to HR Shared Services prior to the start of the semester in which the benefits are to be used. A new form will only need to be completed if you wish to make a change in the number of credits assigned, or to change the recipient, including transferring credits back to yourself.

RTB credits may be used for courses offered through Syracuse University, including UC, according to the following guidelines:

- Credit hours do not carry over from year to year; credits not used are forfeited.
- Credit hours may not be borrowed from a future year to be used in a current year.
- Up to six credit hours may be taken per semester or summer session. You may exceed six credit hours in a single semester only with the permission of your supervisor. You may take classes during regular work hours only with the permission of your supervisor.
- Remitted tuition applies to tuition charges only.
- UC registrants must pay a processing fee that is not covered by RTB.
- Syracuse University reserves the right to restrict the use of RTB for certain workshops, non-credit courses and special programs.

- Spouses/same-sex domestic partners receiving RTB must have a United States-issued Social Security number or an individual tax identification number.

Benefits Eligibility Status Change

RTB will be adjusted based upon any changes in your eligibility status (e.g., moving from full- to part-time employment). If you separate from the University, the total year benefit will be prorated based upon your termination date according to the chart below and no benefits for future semesters, including Maymester or Summer Sessions, will be authorized. If you terminate during a semester when RTB were used by you or your spouse/same-sex domestic partner, you will be billed for any remaining balance after the prorated remitted tuition credits have been applied.

Credit Hours Available Upon Termination

Termination Date	Full-Time	Part-Time
July 1-Sept. 30	0	0
Oct. 1-Dec. 31	4	3
Jan. 1-March 31	8	6
April 1-June 30	12	9

Tax Implications

For information on remitted tuition taxability rules, please refer to the Comptroller's Office website at bfas.syr.edu/comptroller/resources/tax-compliance/tax-procedures/#remitted. You are encouraged to determine whether you're eligible to claim the federal Lifetime Learning Tax Credit to help offset your share of tuition costs paid for a participating spouse or same-sex domestic partner (if claimed as a dependent on your tax return).



Dependent Tuition Benefits

After the equivalent of three years of full-time employment as determined by the Office of Human Resources, the University provides educational benefits to your qualified dependents to assist them in pursuing their first baccalaureate degree. Benefits are available for dependents attending Syracuse University through the Tuition Waiver Program and for dependents attending other educational institutions through the Tuition Exchange Program and the Cash Grant Program.

Benefits are limited to tuition expenses and are applicable to undergraduate coursework only. Students are eligible for only one program at a time, must meet academic and admission requirements and be matriculated in a program of study leading to the first bachelor's degree. The following is a brief description of each Dependent Tuition Benefit Program available. Please visit the Syracuse University Dependent Tuition Policy online at hr.syr.edu/dependenttuitionpolicy for complete details.

Tuition Waiver Program

An eligible dependent who is matriculated and enrolled as a full-time undergraduate student at Syracuse University may apply to receive a tuition waiver. The waiver can be applied only to the minimum number of credit hours required for completion of the first baccalaureate degree and includes Summer Session courses. The value of the tuition waiver for the current academic year is posted online at hr.syr.edu/dependent-tuition.

Tuition Exchange Program

An eligible dependent who is matriculated as a full-time undergraduate student pursuing their first baccalaureate degree at an institution that participates with Tuition Exchange, Inc. may apply to receive a Tuition Exchange Scholarship. The program is limited to a maximum of eight semesters and excludes Summer Session courses. Scholarships are not guaranteed as they are awarded by the participating member institutions according to their own criteria. Students denied a Tuition Exchange scholarship may apply to participate in the Cash Grant Program. Please visit hr.syr.edu/dependent-tuition for more information.

Cash Grant Program

Eligible Dependents who are full-time undergraduate students and are matriculated into an Eligible Accredited Post-Secondary Institution of Learning may apply to have up to \$1,250 per semester applied toward tuition charges (Summer Session courses are excluded) for a maximum of eight semesters. An Eligible Accredited Post-Secondary Institution of Learning is an institution that offers courses of study leading to an associate's or baccalaureate degree and is accredited in the United States by an agency recognized by the University. Awards are made payable directly to the institution.

How to Apply

All applicants must complete and submit the Dependent Tuition Application form, available at hr.syr.edu/forms.

In addition to the Dependent Tuition Application, all Syracuse University Tuition Waiver Program applicants are required to file an application for the New York State Tuition Assistance Program (TAP) within state deadlines. An exemption from this requirement is available if certain criteria are met. Consult the Dependent Tuition Policy for complete details.

Applicants for the Tuition Exchange Program must also complete the Tuition Exchange Request form, available at hr.syr.edu/forms.

New applicant applications are due no later than:	
Tuition Waiver	Early Decision Freshman Nov. 15 Regular Decision Freshman Feb. 1
Tuition Exchange	Nov. 15
Cash Grant	May 1

Renewal applications are due no later than:	
Tuition Waiver	March 1
Tuition Exchange	Feb. 1
Cash Grant	May 1



Paid Time Off for Staff

Syracuse University generally provides paid time off in the form of floating holidays, personal days, sick time and vacation time which may differ for exempt and non-exempt employees. Consult the specific time off policies for further information by visiting hr.syr.edu/timeoff. Bargaining unit staff employees should consult their collective bargaining unit agreement for additional details about their paid time off.

Holidays: The University provides the following seven paid holidays each calendar year: New Year's Day, Martin Luther King Jr. Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day and Christmas Day. In addition, at certain times of year, paid bonus days are assigned to certain holidays that will result in long weekends. These assigned days may vary from year to year depending upon how these holidays fall on the calendar. You are eligible for these holidays immediately upon employment. The University also provides Orange Appreciation days.

Leaves of Absence

You may request short term leaves of absence, with pay, for court and jury duty, military training, volunteer fire fighting, the funeral of an immediate relative (as defined in the University's Funeral/Bereavement Leave Policy), special public service assignments or unusual personal business that cannot be accomplished outside of working hours. The University recognizes the New York Paid Family Leave benefit that provides support when employees need time away from work for certain family matters. In addition, employees who have completed one year of continuous service are eligible to request a leave of absence, without pay, for family, health and other personal reasons for a period of up to one year. Bargaining unit staff employees should consult the collective bargaining agreement for additional details about their leaves.

Other Benefits

Auto and Home Insurance

You are eligible upon employment to participate in the University's Group Auto and Home insurance program through MetLife. You can apply to purchase insurance coverage for your home, automobile and other personal property at special group rates. You can receive an additional discount if you pay your premium through payroll deduction. Syracuse University's dedicated MetLife representative, Tom Swanson, may be contacted at **315.656.2982**. More information can be found at hr.syr.edu/home-and-auto-insurance.

Worldwide Travel Protection

International SOS (ISOS) provides worldwide travel, medical and security assistance for faculty, staff and students traveling outside the United States on University business, sanctioned academic work or research. ISOS serves to better enhance safety and to help facilitate communication in the event of emergency situations. Visit riskmanagement.syr.edu or contact the Office of Risk Management and Regulatory Compliance Services for more information.

Guaranteed Mortgage Program

The University's Guaranteed Mortgage Program offers an alternative financing method for employees purchasing a home in the University area. For more information on this program, contact the University's Real Estate Office at **315.443.2104**.

Identification Cards

You will be issued a Syracuse University identification card upon employment. The I.D. card enables you to obtain a discount on certain purchases at the Syracuse University Bookstore and on tickets for certain athletic and cultural events. It also facilitates borrowing privileges at the University Libraries and access to campus recreational facilities. Your spouse/domestic partner and dependents may also apply for I.D. cards through the Office of Housing, Meal Plan and I.D. Card Services (**315.443.2721**), for which they will be charged a processing fee. I.D. cards enable family members to use University facilities such as the library, campus bus service and fitness centers.

Adoption Assistance

Syracuse University offers adoption assistance reimbursement grants to cover eligible expenses up to \$5,000 for the adoption of one child or \$8,000 for simultaneous adoption of more than one child. To qualify, the child being adopted must be under 18 years of age and not biologically related to either parent. More information can be found at hr.syr.edu/adoption.

Lesbian, Gay, Bisexual and Transgender (LGBT) Resource Center (RC)

Syracuse University values diversity in all its forms and welcomes faculty and staff members to our community who identify as lesbian, gay, bisexual, transgender, queer, questioning, intersex and asexual. The LGBT RC's mission is to provide community building, outreach and visibility, and intellectual and leadership development that centers the experience of people with marginalized sexualities and genders. On and off-campus community members are invited to join the LGBT RC as they seek to understand the ways that privilege and oppression manifest in our society, commit to ending oppression in our communities and actively engage in struggles to achieve liberation.

The LGBT RC provides services, resources and programs that benefit staff and faculty through individual consultations with faculty and staff about content and research on LGBTQ topics, LGBTQ-inclusion workshops and reference materials and advocacy through campus-wide committees to support diversity and inclusion. To stay informed and provide input, join the Syracuse University Faculty and Staff Listserv and the LGBT Community Listserv by emailing lgbt@syr.edu.

Information Technology Services (ITS)

ITS provides a wide range of services for faculty and staff, including high-speed internet, email, file storage on the University network, web conferencing solutions, online academic and personal information resources through MySlice and computer labs equipped with specialized academic software. Visit answers.syr.edu and search "ITS Faculty and Staff Services" for a full list of available resources. Some highlights include:

AirOrangeX, Syracuse University's Wireless Network

To connect your smartphone or tablet, visit answers.syr.edu/aox and follow the instructions for your device. To connect your computer to AirOrangeX, follow these simple steps:

1. Open the window on your computer that displays wireless networks.
2. Choose AirOrangeHelp from the list of available wireless networks.
3. Open your web browser, navigate to airorangehelp.syr.edu and follow the instructions.
4. If your computer is not automatically connected to AirOrangeX, choose the AirOrangeX wireless network from the list of available wireless networks on your computer.

Need Help?

You can find contact information for your department support staff at its.syr.edu/contact_its. You also can contact the ITS Service Center by calling **315.443.2677** or emailing help@syr.edu. The Service Center is located in room 1-227 in the Center for Science and Technology (check its.syr.edu/its_service_center for hours of operation).

For a more DIY approach, visit answers.syr.edu, the University's knowledge base of technical how-to information.

Connect With ITS

 @SU_ITS

 ITS at Syracuse University

 su_its

You also can download the **Syracuse University mobile app** in the Apple App store or Google Play store.

Technology Guide

The Technology Guide is your go-to source for a wide array of technology services and resources. You can find the Technology Guide at its.syr.edu/techguide.

Information Security

Whether working on campus, at home, across the country or around the globe, it is critical that you understand how to protect University information. You can find detailed information at its.syr.edu/infosec.

Six Keys to Information Security:

1. DON'T share your NetID password with anyone and DON'T use it as a password for systems outside of the University.
2. DON'T click on hyperlinks in email unless you are sure the link is valid.
3. DON'T provide information of any kind to anyone—University employee or third-party—who does not require it to perform their Syracuse University role.
4. DON'T access data from off campus unless using an approved remote access method.
5. DON'T take information home on portable media such as thumb drives, flash drives or other portable media.
6. REPORT any suspected information security incident to your local IT staff or the ITS Service Center immediately.

Accessibility

All University technology should be usable by the greatest number of people possible, including those with disabilities. ITS offers a variety of resources to ensure accessibility at its.syr.edu/accessibility.

Professional Development

Develop new skills with unlimited access to the LinkedIn Learning video library of engaging, top-quality courses. To get started, visit linkedinlearning.syr.edu. You also can install the latest Office 365 software on up to five devices. To get started, visit portal.office.com and sign in using your @syr.edu email address and NetID password.

IT Policies

Please review Syracuse University's information technology policies at policies.syr.edu. Also, search for "Copyright or Copywrong" on answers.syr.edu to find out how Syracuse University addresses issues of electronic copyright infringement and to learn about preventive measures and policies to ensure compliance with federal laws.

Notice of Special Enrollment Rights

Enrollment of Eligible Employees, Spouses, Domestic Partners and Dependents:

Enrollment in benefits must take place within 31* days of an Eligible Employee first becoming eligible for benefits, during an annual open enrollment period or within 31* days of an appropriate qualifying life event. All necessary forms and required documentation must be submitted to the Office of Human Resources within this time period. Qualifying life events for enrolling Eligible Employees, Spouses, Domestic Partners and Dependents include the following:

1. Marriage, civil union or registered domestic partnership; or for Eligible Domestic Partners, the earliest date on which the residency and financial interdependence criteria are satisfied as defined by the Syracuse University Office of Human Resources.
2. Birth, adoption or legal guardianship of a child.
3. Loss of benefit coverage for an Eligible Employee, Spouse, Domestic Partner or Dependent previously covered by a non-Syracuse University employer or other non-Syracuse University source.
4. Eligibility for or loss of Medicaid or CHIP coverage.*

Coverage for an Eligible Employee, Spouse, Domestic Partner or Dependent will be terminated upon the date he or she no longer meets the eligibility criteria for benefits (e.g., date of divorce, dissolution of marriage, civil union or registered domestic partnership, or the earliest date the Domestic Partner or Dependent criteria are no longer met, as applicable). Eligible Employees must notify HR Shared Services and submit all necessary forms and required documentation within 31* days of the date their covered Spouse, Domestic Partner or Dependent no longer meets the eligibility criteria.

Eligible Employees may voluntarily terminate coverage for themselves or their Eligible Spouses, Domestic Partners and Dependents during an annual Open Enrollment period or within 31* days of an appropriate qualifying life event. For qualifying life events, benefits will be terminated as of the date of the event, provided all necessary forms and required documentation are submitted to the Office of Human Resources within the 31*-day time period.

An Eligible Spouse's or Domestic Partner's Open Enrollment that includes new coverage options not previously available is considered a qualifying life event for voluntarily terminating coverage. For further information on eligibility, please refer to the Benefits Eligibility Policy at hr.syr.edu/eligibility.

*You may make changes to your benefits coverage within 60 days if the event is due to eligibility for or loss of Medicaid or CHIP coverage (healthcare.gov/medicaid-chip/childrens-health-insurance-program).





Continuation of Health Coverage/COBRA

This notice summarizes important information about your rights and obligations with regard to continuation coverage under the Consolidated Omnibus Budget Reconciliation Act of 1985, as amended (commonly known as "COBRA"). By law, COBRA continuation coverage is a temporary extension of coverage under a Group Health Plan. **This notice explains COBRA continuation coverage, when it may become available to you and your family, and what you need to do to protect your right to get it.** When you become eligible for COBRA, you may also become eligible for other coverage options that may cost less than COBRA continuation coverage.

In the event that you are no longer covered under a group health plan component of the Syracuse University Medical Benefits Plan, the Syracuse University Retiree Medical Benefits Plan, the Syracuse University Retiree Prescription Drug Plan, the Syracuse University Dental and Vision Benefits Plan, or the Syracuse University Cafeteria Plan and Summary Plan Description (each containing a "Group Health Plan" which as used herein refers to the individual active or retiree medical, dental/vision, and/or health care flexible spending account benefit to which you are enrolled, with eligibility determined by each individual plan document), you will have the

opportunity for a temporary extension of Group Health Plan coverage (called "Continuation Coverage") if your coverage terminates for one of the reasons specified below (commonly known as a "Qualifying Event"). Syracuse University, or its designee, will notify you of your right to continue your coverage, once notice has been received that a Qualifying Event triggering that right has occurred. **For important information regarding notification procedures, please read Section V.**

I. Eligibility for Continuation Coverage

A "Qualified Beneficiary" is a person who has a right to enroll in Continuation Coverage following a Qualifying Event. Qualified Beneficiary may refer to the covered employee, covered former employee, or retiree, or that individual's covered spouse, domestic partner, or dependent child (collectively "Family Members") who has continuation rights with respect to a Qualifying Event. In general, all individuals must have health coverage on the day before a Qualifying Event in order to be a Qualified Beneficiary. As an exception, an eligible dependent child who is born or placed for adoption with a covered employee/former employee/retiree during a period of Continuation Coverage immediately

becomes a Qualified Beneficiary. The COBRA period for such a child is measured from the same date as for other Family Members arising from the Qualifying Event, not from the date the child became enrolled in Continuation Coverage. The term "placed for adoption" includes an adoption without a preceding placement.

II. Qualifying Events

Qualifying Event means an event that gives rise to Continuation Coverage, depending upon whether the Qualified Beneficiary is the covered employee/former employee/retiree, or a Family Member.

A. If you are an employee covered by a Group Health Plan, you have the right to elect Continuation Coverage if your Group Health Plan coverage terminates due to one of the following Qualifying Events:

1. a reduction in your hours of employment; or
2. your employment has terminated (for reasons other than gross misconduct on your part). Termination of employment or reduction of hours is not a qualifying event with respect to coverage under

the Syracuse University Retiree Medical Benefits Plan or the Syracuse University Retiree Prescription Drug Plan.

B. If you are the Family Member of a covered employee/former employee/retiree and are covered by a Group Health Plan, you have the right to elect Continuation Coverage if your Group Health Plan coverage terminates due to one of the following Qualifying Events:

1. death of the covered employee/former employee/retiree;
2. termination (for reasons other than gross misconduct), or reduction of hours of the covered employee's employment. Termination of employment or reduction of hours is not a qualifying event with respect to coverage under the Syracuse University Retiree Medical Benefits Plan or the Syracuse University Retiree Prescription Drug Plan;
3. divorce or legal separation of a covered employee/former employee/retiree from that individual's covered spouse;
4. the employee's/former employee's/retiree's action to file a termination of domestic partnership with the Office of Human Resources; or
5. a dependent child's ceasing to satisfy the requirements for a dependent child under a Group Health Plan.

C. In addition, sometimes filing a bankruptcy proceeding under Title 11 of the United States Code can be a Qualifying Event. If a bankruptcy proceeding is filed with respect to Syracuse University, and that bankruptcy results in the loss of coverage of any retired employee covered under a Group Health Plan, the retired employee will become a Qualified Beneficiary. The retired employee's covered Family Member will also become a Qualified Beneficiary if bankruptcy results in the loss of their coverage under a Group Health Plan.

III. Continuation Coverage Term Limits

In general, Continuation Coverage is available for up to 18 months due to employment termination or reduction of hours of work. However, certain Qualifying Events, or a second Qualifying Event during the initial period of coverage, may permit a Qualified Beneficiary to receive a maximum of 36 months of coverage as identified in A., B., and C. as follows:

- A. Your benefit coverage may be continued for up to 36 months in the event of death, divorce or legal separation, dissolution of domestic partnership, or loss of dependent eligibility.
- B. The 18-month coverage period may be extended to 29 months for Qualifying Beneficiaries, if:

1. any Qualifying Beneficiary is determined under Title II or Title XVI of the Social Security Act to have been disabled on or within 60 days of the date of termination or reduction in hours of the covered employee's employment; and
2. you or another Qualified Beneficiary notifies the University within 60 days after the determination and before the end of the 18-month coverage period.

Any coverage extended after the initial 18 months because of a disability determination may be charged to you at 150 percent of the applicable premium (even if your coverage is ultimately continued for a total of 36 months, pursuant to the paragraph below), so long as the disabled person is covered during the extension. If it is later determined that the Qualifying Beneficiary whose disability resulted in the extended coverage is no longer totally disabled, you or another Qualified Beneficiary must notify the University within 30 days of the determination.

C. If you are a covered Family Member and you continue your coverage upon an employee or former employee's termination or reduction in hours of employment, your Continuation Coverage may be extended to 36 months if another qualifying event (such as death of the covered employee/former employee, divorce or legal separation, a covered employee/former employee becoming entitled to Medicare benefits (under Part A, Part B, or both), dissolution of domestic partnership, or ineligibility for dependent coverage) occurs during the initial 18-month period and you properly notify the University or its designee. **If one of these events occurs, you or someone on your behalf must notify the University or its designee within 60 days.** Continuation Coverage will not last beyond 36 months from the date of the first event that made you eligible to continue your coverage.

IV. Premium Payments

If you elect to continue your coverage, you will be required to pay the applicable premium for your benefits. Except with respect to Continuation Coverage extended for up to 29 months for a disabled person and any other covered Family Members whose coverage is extended with the disabled person's coverage (or up to 36 months in the event that a second Qualifying Event occurs with respect to a Qualified Beneficiary whose coverage is extended due to disability), your premium payment will not exceed 102 percent of the full cost of the coverage to the Group Health Plan, which includes an administration fee.

Premiums must be paid on a monthly basis. You will be required to pay the first premium payment, along with any retroactive premium

payments owed from the date of termination of your coverage, within 45 days after you submit your written election form. Payment is considered made on the date it is postmarked to the applicable Group Health Plan.

V. Notification Procedures

The University will notify the designated COBRA Administrator of the Qualifying Event within 30 days following the date coverage ends when the Qualifying Event is:

1. the end of employment or reduction of hours employment;
2. death of the employee/retiree; or
3. commencement of a proceeding in bankruptcy with respect to the University.

For other Qualifying Events (such as death, divorce, legal separation, dissolution of domestic partnership, a dependent child's losing eligibility for coverage as a dependent child, or becoming disabled while covered under COBRA continuation coverage), you or someone on your behalf must notify the University or its designee in writing within 60 days after the Qualifying Event occurs, using the procedures specified below. If these procedures are not followed or if the notice is not provided in writing to the University or its designee during the 60 day notice period, any spouse/domestic partner or dependent child who loses coverage will not be offered the option to elect Continuation Coverage.

NOTICE PROCEDURES: Any notice that you provide must be in writing. Oral notice, including notice by telephone, is not acceptable. You must mail, email, fax or hand-deliver your notice to the department listed below, at the following address:

Syracuse University
Office of Human Resources, Suite 101
640 Skytop Road
Syracuse, New York 13244
Fax: **315.443.1063**
Email: **hrservice@syr.edu**

If mailed, your notice must be postmarked no later than the last day of the required notice period. Any notice you provide must state:

- the **name of the plan or plans** under which you lost or are losing coverage;
- the **name and address of the covered employee/former employee/retiree** under the plan;
- the **name(s) and address(es) of the Qualified Beneficiary(ies)**; and
- the **Qualifying Event** and the **date** it happened.

If the Qualifying Event is a divorce or legal separation, your notice must include a copy of the divorce decree or the court-approved legal separation agreement.

In order to protect your family's rights, you should keep the University informed of any changes in your address and the addresses of Family Members. You should also keep a copy, for your records, of any notices you send to the University.

VI. Termination of Continuation Coverage

Continuation Coverage may be terminated for the following reasons:

1. you reach the applicable maximum coverage period;
2. the University no longer provides Group Health Plan coverage to any of its employees/retirees;
3. you fail to make timely payment of any premium due;
4. your Continuation Coverage has been extended for up to 29 months due to a Qualifying Beneficiary's disability, and there has been a final determination that the Qualifying Beneficiary is no longer totally disabled;
5. after you enroll in Continuation Coverage, you become entitled to Medicare; or
6. after you elect Continuation Coverage, you become covered under another group health benefits plan that either: (i) does not contain any exclusion or limitation; or (ii) contains an exclusion or limitation that does not apply to you or has been satisfied in accordance with federal law.

The University reserves the right to terminate for cause the coverage of a Qualified Beneficiary on the same basis that the Group Health Plan terminates for cause the coverage of similarly situated non-continuation beneficiaries (for example, for the submission of a fraudulent claim).

In the case of an individual who is not a Qualified Beneficiary and who is receiving coverage under the Group Health Plan solely because of the individual's relationship to a Qualified Beneficiary, if the Group Health Plan's obligation to make Continuation Coverage available to the Qualified Beneficiary ceases, the Group Health Plan is not obligated to make coverage available to the individual who is not a Qualified Beneficiary.

VII. Other Coverage Options

Instead of enrolling in Continuation Coverage, there may be other coverage options available when you lose group health plan coverage through the Health Insurance Marketplace, Medicare (discussed further below), Medicaid, the Children's Health Insurance Program (**healthcare.gov/medicaid-chip/childrens-health-insurance-program**) or other group health plan coverage options (such as coverage under a spouse's plan) through what is called a "special enrollment period." Some of these options may cost less than Continuation Coverage. You can learn more about many of these options at **healthcare.gov**.

Additional information about enrolling in Medicare instead of Continuation Coverage:

In general, if you don't enroll in Medicare Part A or B when you are first eligible because you are still employed, after the Medicare initial enrollment period, you have an eight-month special enrollment period (visit: **medicare.gov/sign-up-change-plans/how-do-i-get-parts-a-b/part-a-part-b-sign-up-periods**) to sign up for Medicare Part A or B, beginning on the earlier of:

1. the month after your employment ends; or
2. the month after group health plan coverage based on current employment ends.

If you don't enroll in Medicare and elect Continuation Coverage instead, you may have to pay a Medicare Part B late enrollment penalty and you may have a gap in coverage if you decide you want Medicare Part B later. If you elect Continuation Coverage and later enroll in Medicare Part A or B before the Continuation Coverage ends, the Plan will terminate your Continuation Coverage. However, if Medicare Part A or B is effective on or before the date of the COBRA election, Continuation Coverage may not be discontinued on account of Medicare entitlement, even if you enroll in the other part of Medicare after the date of the election of COBRA coverage.

If you are enrolled in both Continuation Coverage and Medicare, Medicare will generally pay first (primary payer) and Continuation Coverage will pay second. Certain plans may pay as if secondary to Medicare, even if you are not enrolled in Medicare. Visit **medicare.gov/medicare-and-you** for more information.

VIII. Note to Employees Losing Medical Plan Coverage by Reason of Retirement

Upon retirement from employment with the University, you and your Qualifying Dependents will be provided with the option to elect Continuation Coverage. You may also be eligible to enroll in the Syracuse University Retiree Medical Plan. If you elect Continuation Coverage of your active medical benefits upon retirement, you lose your eligibility to enroll in the Retiree Medical Plan. If you enroll in the Retiree Medical Plan, you will not be provided with an opportunity to enroll in Continuation Coverage when your retiree medical benefits terminate, except as identified in Section II, C. Your Qualified Beneficiaries may have a limited right, at their own expense, to elect Continuation Coverage if the requirements in Section II, B (3), (4) or (5), or C are satisfied. If you have any questions regarding your coverage options at retirement, please contact the Office of Human Resources.

IX. Questions

The information above summarizes your rights and obligations under the continuation coverage provisions of COBRA, as amended and reflected in the final and proposed regulations published by the U.S. Department of the Treasury. This information is intended to reflect the law and does not grant or take away any rights under the law. Complete information about COBRA and the applicable Group Health Plan, including but not limited to, the applicable premium payments and summary plan descriptions, may be obtained by contacting the Syracuse University Office of Human Resources by phone: **315.443.4042**, or email: **hrservice@sy.edu**, or the University's designated COBRA Administrator.

For further information regarding your rights under COBRA, you may also contact the nearest Regional or District Office of the U.S. Department of Labor's Employee Benefits Security Administrations ("EBSA"). Visit the U.S. Department of Labor's EBSA website (**dol.gov/agencies/ebsa**) or call their toll-free number at **1.866.444.3272**. For more information about health insurance options available through a Health Insurance Marketplace, visit **healthcare.gov**.

X. Right to Amend or Terminate

As is the case with all of Syracuse University's benefit plans, the University reserves the right to amend or terminate these benefits at any time and from time to time, and retains the discretion to construe any ambiguity or uncertainty that might arise with respect to this notice.

Notice of Privacy Practices

This notice describes how medical information about you may be used and disclosed and how you can get access to the information. Please review it carefully.

This Notice of Privacy Practices (“NPP”) is made in compliance with the Standards for Privacy of Individually Identifiable Health Information (the “Privacy Standards”) established by the United States Department of Health and Human Services (“DHHS”) pursuant to the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”). This NPP summarizes the privacy practices of Syracuse University’s Group Health Plans. The Privacy Standards shall control in the event of a discrepancy between this NPP and the Privacy Standards. Syracuse University’s Group Health Plans, which include the Syracuse University Medical Benefits Plan; the Syracuse University Retiree Medical Benefits Plan; the Syracuse University Retiree Prescription Drug Plan; the Syracuse University Dental and Vision Benefits Plan; and the Syracuse University Health Care Flexible Spending Account (included within the Syracuse University Cafeteria Plan and Summary Plan Description; (collectively, the “Health Plans”)), are required by law to maintain the privacy of your Protected Health Information (“PHI”) as defined below, and to inform you, through this NPP, about:

1. the Health Plans’ duties with respect to your PHI;
2. how the Health Plans may use and disclose your PHI;
3. your privacy rights with respect to your PHI;
4. your right to file a complaint with the Health Plans and with the Secretary of DHHS; and
5. who to contact for further information about the Health Plans’ privacy practices.

PHI, as defined by HIPAA, includes all individually identifiable information about you that is transmitted or maintained by the Health Plans, including demographic information, and includes information that is created or received by the Health Plans that relates to:

- your past, present or future physical or mental health or condition;
- the provision of health care services to you; or
- the past, present or future payment for the provision of health care to you.

The Health Plans are required to abide by the terms of the NPP that is currently in effect for the Health Plans. The Health Plans reserve the right to revise or amend the terms of this NPP. Any revision or amendment will be effective for all records that the Health Plans have created or maintained in the past and for any of your records that we may create or maintain in the future. You

will be informed of any material changes made to this NPP. In addition, the Health Plans will post, at all times, a copy of its most current NPP online at policies.syr.edu/legal-notices/hipaa-notice-of-privacy-practices. You may also obtain a copy of the most current NPP at any time by calling the Syracuse University Office of Human Resources at **315.443.4042**.

If you have any questions about this NPP or would like further information about HIPAA, please contact Human Resources at **315.443.4042**.

HOW THE HEALTH PLANS MAY USE AND DISCLOSE YOUR PHI

HIPAA permits the Health Plans, its Business Associates and their agents/subcontractors, if any, to use and/or disclose your PHI, without prior authorization, for the purposes of treatment, payment and other health care operations of the Health Plans, which are described below. Consistent with the Genetic Information Nondiscrimination Act (GINA), the Health Plans are prohibited from using or disclosing genetic information for underwriting purposes. The Health Plans will disclose your PHI to its Business Associates only if it has received satisfactory assurances that the Business Associates will appropriately safeguard your PHI. HIPAA also permits the Health Plans to use and disclose of your PHI, without prior authorization, for other specific purposes that are also described below. For each category, a description and some examples of the permitted uses and/or disclosures have been provided. The following examples are illustrative and are not meant to be a complete description of the permitted uses and disclosures of the Health Plans.

- A. Treatment.** The Health Plans may use and/or disclose your PHI to health care providers who are involved in your care and treatment. The Health Plans may use or disclose PHI about you to physicians, nurses, paraprofessionals, technicians or other health care providers who are involved in your care and treatment. For example, we may disclose your PHI to a physician or a pharmacy to assist in the management of your health care.
- B. Payment.** The Health Plans may use and/or disclose your PHI to fulfill its obligation for coverage and the provision of health benefits under the Health Plans. For example, the Health Plans may use or disclose PHI to obtain or provide reimbursement for the provision of health care. Payment includes, but is not limited to, actions relating to eligibility or coverage determinations, billing, claims management, collection activities, reviews for medical necessity determinations and appropriateness of care, utilization review and pre-authorizations.

C. Health Care Operations. The Health Plans may use and/or disclose PHI in order to conduct its normal business operations. For example, the Health Plans may use your PHI to conduct quality assessment and improvement activities, population-based activities relating to improving or reducing health care costs, contacting health care providers and patients with information regarding treatment alternatives, reviewing the competence or qualifications of health care professionals, evaluating health plan performance and other insurance-related activities.

D. Follow-up Telephone Calls/Emails. The Health Plans may call you to follow up on care or treatment you received by a health care provider or to ask questions relating to treatment, payment or other health care operations of the Health Plans.

E. Treatment Alternatives or Other Health-Related Benefits and Services. The Health Plans may use and/or disclose PHI to tell your health care providers about or recommend possible treatment alternatives or health-related benefits or services that may be of interest to you or your health care provider.

F. Individuals Involved in Your Care or Payment for Your Care. HIPAA permits the Health Plans to disclose PHI to a family member, other relative, a close personal friend or any other person identified by you if:

1. you are present for or otherwise available prior to the disclosure and we have either obtained your agreement to the disclosure, provided you the opportunity to object to the disclosure or the Health Plans have reasonably inferred from the circumstances that you do not object to the disclosure;
2. due to your incapacity or an emergency circumstance, the Health Plans have determined that a disclosure is in your best interest—in such circumstances, the Health Plans will only disclose PHI that is directly relevant to the person’s involvement with your health care.

G. As Required By Law. The Health Plans may use and/or disclose your PHI if we are required to do so under any federal, state or local law.

H. Public Health Risks. The Health Plans may use and/or disclose your PHI to authorized public health officials (or a foreign government agency collaborating with such officials) so such officials may carry out public health activities. For example, the Health Plans may disclose your PHI to public health officials for the following reasons:

1. to prevent or control disease, injury or disability;
2. to report vital events such as births and deaths;
3. to report child abuse or neglect;
4. to report quality, safety or effectiveness of FDA-regulated products or activities;
5. to notify people of product recalls they may be using;
6. to notify a person who may have been exposed to a communicable disease or may be at risk for contracting or spreading a disease or condition; or
7. to your employer, in order to comply with employment laws.

I. Victims of Abuse, Neglect, or Domestic Violence. The Health Plans may disclose your PHI to government authorities, including a social service or protective services agency, authorized by law to receive reports of abuse, neglect or domestic violence. For example, the Health Plans may report your PHI to government officials if it reasonably believes that you have been a victim of abuse, neglect or domestic violence. The Health Plans will make every effort to obtain your permission before releasing this information; however, in some cases the Health Plans may be required or authorized to act without your permission.

J. Health Oversight Activities. The Health Plans may disclose your PHI to a health oversight agency for activities authorized by law. These agencies typically monitor the operation of the health care system, government benefits programs and compliance with government regulatory programs. The oversight activities may include audits; civil, criminal or administrative investigations or actions; inspections; and/or licensure or disciplinary actions.

K. Lawsuits and Similar Proceedings. The Health Plans may use or disclose your PHI in response to a court or administrative order, if you are involved in a lawsuit or similar proceeding. The Health Plans may also disclose your PHI in response to a discovery request, subpoena or other lawful process that is not accompanied by an order of a court or administrative tribunal, but only if we have first received satisfactory assurances from the party requesting the information that reasonable efforts have been made to inform you of the request or if the Health Plans have received satisfactory assurances that efforts have been made by the party seeking the information to obtain a qualified protective order. A qualified protective order is an order of a court or an administrative tribunal or a stipulation by parties to the litigation that prohibits the parties from using or disclosing PHI for any purpose other than the litigation or proceeding. A qualified

protective order will require the return of PHI to the Health Plans at the end of the litigation or proceeding.

L. Law Enforcement Purposes.

The Health Plans may disclose your PHI to law enforcement officials for the following reasons:

1. in response to court orders, warrants, subpoenas or summons or similar legal process;
2. to assist law enforcement officials with identifying or locating a suspect, fugitive, material witness or missing person;
3. if you have been or are suspected of being a victim of a crime and you agree to the disclosure, or if we are unable to obtain your agreement because of incapacity or other emergency;
4. if we suspect that a death resulted from criminal conduct;
5. to report evidence of criminal conduct that occurred on our premises;
6. in response to a medical emergency, to report a crime (including the location or victims of the crime; or the identity, description or location of the person who committed the crime).

M. Coroners, Medical Examiners and Funeral Directors.

The Health Plans may disclose your PHI to a coroner or medical examiner for the purpose of identifying a deceased person, determining cause of death or other duties as authorized by law. The Health Plans may also release PHI to funeral directors as necessary to carry out their duties.

N. Organ, Eye or Tissue Donation Purposes.

The Health Plans may use or disclose your PHI to organ procurement organizations or other entities engaged in the procurement, banking or transplantation of organs, eyes or tissue for the purpose of facilitating donation and transplantation.

O. Research. In most cases, the Health Plans will ask for your written authorization before using and/or disclosing your PHI to conduct research. However, in limited circumstances we may use and/or disclose PHI without authorization if: (i) the use or disclosure was approved by an Institutional Review Board or a Privacy Board; and (ii) we obtain representations from the researcher that the information is necessary for the research protocol, PHI will not be removed from our location and the information will be used solely for research purposes; or (iii) the PHI sought by the researcher relates only to decedents and the researcher agrees that the use or disclosure is necessary for the research.

P. Uses that Require Your Written Authorization.

1. Any use or disclosure of any PHI for marketing purposes and disclosures that constitute the sale of PHI require your written authorization;
2. Psychotherapy notes will only be used and disclosed with your written authorization;
3. Any other uses and disclosures not specified in this Notice require your written authorization.

Q. To Avert Serious Threat to Health or Safety.

The Health Plans may use or disclose your PHI when necessary to prevent or lessen a serious and imminent threat to your health or safety, or the health or safety of another person or the public. In such cases, the Health Plans will only share your PHI with a person or persons reasonably able to prevent or lessen the threat, including the target of the threat, or if it is necessary for law enforcement authorities to identify or apprehend an individual.

R. Specialized Government Functions. The Health Plans may use and disclose PHI regarding:

1. Military and veteran activities;
2. Intelligence, counterintelligence and other national security activities authorized by law;
3. Protective services for the president, to foreign heads of state or to other persons authorized by law;
4. Inmates to a correctional institution or a law enforcement official having lawful custody of an inmate or other individual.

S. Workers' Compensation. The Health Plans may disclose your PHI for workers' compensation or other similar programs that provide benefits for work-related injuries or illnesses.

Except as otherwise indicated in this NPP, uses and disclosures for all other purposes will be made only with your written authorization. You may revoke an authorization at any time, provided that your revocation is done in writing, and except to the extent that the Health Plans have already relied upon your authorization.

YOUR RIGHTS REGARDING YOUR PHI
HIPAA provides you with the following rights regarding the PHI we maintain about you:

A. Right to Inspect and Copy. You have the right to inspect and receive a copy of your PHI contained in a "designated record set" for as long as the Health Plan maintains the PHI in the designated record set, except for psychotherapy notes; information compiled in reasonable anticipation of, or for use in, a civil, criminal or administrative action

or proceeding; and PHI maintained by the Health Plans that is subject to the Clinical Laboratory Improvements Amendments of 1988. If your PHI is in an electronic file, you may request an electronic copy of the record.

A “designated record set” is a group of records maintained by or for a health plan that is the enrollment, payment, claims adjudication and case or medical management record systems maintained by or for a health plan; or use in whole or in part, by or for the health plan to make decisions about individuals.

To inspect or obtain a copy of your PHI contained in a designated record set, please submit a request in writing to the Office of Human Resources at Syracuse University, Skytop Office Building, Suite 101, 640 Skytop Road, Syracuse, New York 13244-5300. If you request a copy of your record set, we may charge a fee for the costs of copying, mailing or other supplies we use to fulfill your request. The standard fee is \$0.75 per page and must generally be paid before or at the time we provide you with copies of your PHI. The Health Plans will respond to your request for inspection of records within 10 days and will respond to requests for copies within 30 days if the information is located within our facility and within 60 days if the information is located off-site at another facility. If the Health Plans need additional time to respond to your request for copies, we will notify you in writing within the time frame above to explain the reason(s) for such delay and when you can expect to have a final answer to your request.

Under certain circumstances, the Health Plans may deny your request to inspect or obtain a copy of your PHI. If your request for inspection is denied, we will provide you with a written notice explaining our reasons for such denial and will include a complete description of your rights to have the decision reviewed and how you can exercise those rights.

B. Right to Amend. You have the right to request that the Health Plans amend your PHI or a record about you in a designated record set for as long as the information is kept by the Health Plans, if you feel that the PHI the Health Plans have about you is incorrect or incomplete. The Health Plans may deny your request for amendment if it determines that the PHI or record that is the subject of the request:

1. was not created by the Health Plans, unless you provide a reasonable basis to believe that the originator of the PHI is no longer available to act on the requested amendment;

2. is not part of the designated record set;
3. would not be available for your inspection under the Privacy Standards (as described in Right to Inspect and Copy Section, above); or
4. is accurate and complete.

To request an amendment, your request must be made in writing and submitted to the Office of Human Resources at Syracuse University, Skytop Office Building, Suite 101, 640 Skytop Road, Syracuse, New York 13244-5300. In addition, your request should include the reasons(s) why you believe the Health Plans should amend your PHI. The Health Plans will respond to your request for amendment no later than 60 days after the receipt of your request. If the Health Plan need additional time to respond to your request, we will notify you in writing within 60 days to explain the reason(s) for the delay and the date by which we will complete your request. If the Health Plans deny your request for an amendment, we will provide you with a written notice of the denial that explains the reasons for doing so. You will have the right to submit a written statement disagreeing with the denial. You will also be informed of how to file a complaint with the Health Plans or with the Secretary of the DHHS. These procedures will be explained in greater detail in any written denial notice.

C. Right to an Accounting of Disclosures. You have the right to request an “accounting of disclosures.” An “accounting of disclosures” is a list of disclosures the Health Plans have made regarding your PHI. An accounting of disclosures will include all disclosures except the following:

1. Disclosures to carry out treatment, payment and health care operations;
2. Disclosures made to you;
3. Disclosures made pursuant to your authorization;
4. Disclosures made in a facility directory or to persons involved in your care;
5. Disclosures for national security or intelligence purposes;
6. Disclosures to correctional institutions or law enforcement officials; or
7. Disclosures made before April 14, 2003.

The accounting of disclosures will be in a format that is consistent with the requirements of the Privacy Standards. To request an accounting of disclosures, you must submit your request in writing to the Office of Human Resources at Syracuse University, Skytop Office Building, Suite 101, 640 Skytop Road, Syracuse, New York 13244-5300. Your request must include a time period of requested disclosures, which

may not be longer than six years and may not include dates before April 14, 2003. The first list you request within a 12-month period will be free. Additional lists within the same 12-month period will be assessed a charge for the costs of providing the list.

The Health Plans will notify you of the cost involved, at which time you may choose to withdraw or modify your request before any costs are incurred. The Health Plans will respond to your request for an accounting of disclosures within 60 days from the receipt of such request. If the Health Plans need additional time to prepare the accounting, they will notify you in writing within 60 days about the reason for the delay and provide you with the date when you can expect to receive the accounting.

D. Right to Receive Notifications of Breaches.

You have the right to receive notifications of breaches of your unsecured PHI. You need not specifically request such notification; it will be provided to the extent required by the privacy rules.

E. Right to Request Restrictions. You have the right to request a restriction or limitation on the PHI the Health Plans use or disclose about you for treatment, payment or health care operations. You also have the right to request a limit on the medical information that the Health Plans disclose about you to someone who is involved in your care, like a family member, relative, friend or other person(s) identified by you.

The Health Plans are not required to agree to your request for restriction. If the Health Plans do agree to a requested restriction, the Health Plans may not use or disclose PHI in violation of such restriction, unless the information is needed to provide you with emergency care or treatment, or as otherwise required by law. Under certain circumstances, the Health Plans may terminate its agreement to a restriction.

To request restrictions, you must make your request in writing to the Office of Human Resources at Syracuse University, Skytop Office Building, Suite 101, 640 Skytop Road, Syracuse, New York 13244-5300. In your request, you must tell us (1) what information you want to limit; (2) whether you want to limit our use, disclosure or both; and (3) to whom you want the limits to apply, for example, disclosures to your spouse.

F. Right to Request Confidential

Communications. You have the right to request that the Health Plans communicate with you about you and your PHI in a certain way or at a certain location. For example, you can ask that the Health Plans contact you only at work or by mail.

The Health Plans will not ask you the reason for your request and will accommodate all reasonable requests. Your request must specify how or where you wish to be contacted and how payment for your health care will be handled if we communicate with you through this alternative method or location. To request confidential communications, you must make your request in writing to the Office of Human Resources at Syracuse University, Skytop Office Building, Suite 101, 640 Skytop Road, Syracuse, New York 13244-5300.

G. Right to Receive a Paper Copy of This NPP.

You have the right to receive a paper copy of this NPP at any time. Even if you have agreed to receive this NPP electronically, you are still entitled to a paper copy of this NPP. To obtain a paper copy of this NPP please contact the Office of Human Resources at Syracuse University at **315.443.4042**.

COMPLAINTS

If you believe your privacy rights have been violated, you may file a complaint with the Privacy Official at the Office of Human Resources at Syracuse University, with Syracuse University's Privacy Officer and/or with the Secretary of the DHHS. To file a complaint with the Privacy Official at the Office of Human Resources at Syracuse University, please submit a written complaint to Privacy Official, Office of Human Resources at Syracuse University, Skytop Office Building, Suite 101, 640 Skytop Road, Syracuse, New York 13244-5300. To file a complaint with Syracuse University's Privacy Officer, please submit a written complaint to Privacy Officer, Office of Risk Management and Regulatory Compliance Services, 119 Euclid Avenue, Syracuse, New York 13244. The Health Plans will not retaliate against you for filing a complaint with a Privacy Official of Syracuse University or with the Secretary of the DHHS.

CONTACT PERSON

If you have any questions about this Notice of Privacy Practices or subjects addressed in it, please contact Privacy Official, Office of Human Resources at Syracuse University Skytop Office Building, Suite 101, 640 Skytop Road, Syracuse, New York 13244-5300, **315.443.5462**.

Notice Regarding the Women's Health and Cancer Rights Act of 1998

Federal law requires group health plans that provide medical and surgical benefits for mastectomies to provide coverage in connection with the mastectomy (in the manner determined by the attending physician and the patient) for:

- reconstruction of the breast on which the mastectomy was performed,
- surgery and reconstruction of the other breast to produce a symmetrical appearance, prostheses, and
- treatment of physical complications at all stages of mastectomy, including lymphedema.

Group health plans and health insurers may not deny eligibility to enroll, renew or continue group health plan coverage to avoid providing coverage for breast reconstruction or mastectomy complications. In addition, the law prohibits penalizing or otherwise reducing or limiting the reimbursement of an attending provider for the required care, or providing any incentive (monetary or otherwise) to induce the attending provider to provide care that would be inconsistent with the law.

The above-described coverage required by applicable law may only be subject to the annual deductibles, copayments and coinsurance provisions that apply to similar benefits.

Please refer to the benefit information that has been provided to you in the Syracuse University Medical Benefits Booklet for the coverage that you have selected, for the amount of any deductible or coinsurance limitation that may apply.

If you have any questions about this coverage, please contact your Plan Administrator (Syracuse University Human Resources at **315.443.4042**) or the health plan administrator (Excellus BCBS at **800.493.0318/ TTY: 800.662.1220**).

Summary of Benefits and Coverage (SBC)

Choosing health coverage is an important decision. To help you make an informed choice, a Summary of Benefits and Coverage (SBC) is available to you. An SBC summarizes important information about health coverage in a standard format to help you compare features across coverage options available to you. The SBCs for the SUBBlue, SUOrange and SUPro coverage options are posted on this website: **hr.syr.edu/sbc**. Paper copies of the SBCs also are available, and may be requested at any time free of charge by contacting HR Shared Services at **315.443.4042** or **hrservice@syr.edu**.



KEEP OUR
SPEECH
PEACEABLY TO ASSEMBLE
PRESS

TO PETITION THE GOVERNMENT

*Eligible employees electing to participate in the University's benefit plans, programs, or policies are bound by the terms of the governing plan, program, and policy documents. If you have any questions regarding the plans, programs or policies, you may request a copy of the governing document by contacting HR Shared Services at **315.443.4042** or hrrservice@syr.edu.*

Every effort has been made to ensure that the information contained within this document is accurate. However, benefits are governed by legal documents (which, in certain circumstances, may include insurance contracts). If there is any difference between the information in this document and the official documents, the official documents will control. As is the case with all of Syracuse University's benefit plans, the University reserves the right to modify or terminate these benefits at any time.



