

**LONG-TERM CARE INSURANCE**

(www.nyperl.net/1-866-474-5824)

Provides coverage for care in a nursing home, assisted living facility, or at home.

**Eligibility for Long-Term Care Coverage**

-Must be eligible to receive health insurance.

-Also available to spouse/domestic partner, parents, parents-in-laws and dependent children ages 18-24.

**Effective Date for Long-Term Care Coverage**

-If employee enrolls within 60 days of eligible appointment, guaranteed issue. All others are subject to medical underwriting.

**Cost for Long-Term Care Coverage**

-Premiums determined by amount of coverage, plan purchased, and age of enrollee.

**EMPLOYEE ASSISTANCE PROGRAM**

(11 LoGrasso Hall/716-673-3586)

EAP office on-site offers confidential assistance with personal problems or concerns of employees.

**WORK-LIFE SERVICES**

(www.worklife.state.ny.us)

An interactive web site New York State employees can access, offering resources to balance work and life.

The SUNY Fredonia Federal Credit Union, located at 716 Maytum Hall, offers many great services to employees.

\*Parents in need of quality childcare may wish to contact the Campus & Community Children’s Center (CCCC) at 673-4662 to obtain information regarding available Early Childhood and School Age Programs (www.childcareccc.com)

**GSEU benefits on-line at:**

www.gseu.org

**To view Civil Service employee benefits on-line, go to:**

www.cs.state.ny.us  
(Executive Branch)

\*NOTE: To ensure timely coverage of all benefits please contact our BENEFITS OFFICE at 508 Maytum Hall (716-673-3434) for information, applications, and documentation requirements.



**BENEFITS SUMMARY**

Graduate Assistants  
represented by

**SUNY - GSEU**



*Where  
Success  
is a  
Tradition*

**Human Resources Office**

280 Central Avenue  
Maytum Hall, 5th Floor  
Tel 716-673-3434  
Fax 716-673-3210

## HEALTH INSURANCE

(1-877-769-7447)

Graduate Assistant employees may elect to participate in the **SUNY Student Employee Health Plan (SEHP)**.

### **Eligibility for Health Insurance Coverage**

-Working at least 1/2 an assistantship **AND** employed at an annualized salary *minimum* of \$4,122 for the contract year July - June.

\*A Graduate Assistant hired for 1/2 year is also eligible if working 1/2 an assistantship **AND** employed at a salary that would yield at least \$4,122 *when annualized*.

-SUNY J1 Visa holders are **NOT** eligible to enroll. They must enroll in the State University of New York Medical Insurance Program for International Students and Scholars.  
-Dependent coverage is available for spouse, domestic partner, and dependent children *under age 19*.

### **Effective Date for Health Insurance Coverage**

-If applying within 45 days of eligibility, effective date is the **LATER** of: date PS-404G enrollment form is received in Human Resources **OR** the date of appointment.

-If applying during annual open enrollment period, coverage is effective the date PS-404G enrollment form is received in Human Resources.

-If applying upon involuntary loss of other coverage, effective date is the day PS-404G enrollment form is received in Human Resources **IF done within 30 days of coverage loss**.

-Effective date for enrollment under other circumstances requires a 30 day waiting period **AFTER** PS-404G enrollment form is received in Human Resources.

### **Cost for Health Insurance Coverage**

-New York State pays the majority of the health insurance premium, regardless of whether employee selects individual or family coverage. The 2008 *employee cost* is as follows:

- **Individual Coverage** \$5.44 biweekly

- **Family Coverage** \$46.25 biweekly

-Premiums may be taken **pre-tax**/payroll deduction.

-\$10 co-pay required per office visit.

## PRESCRIPTION DRUGS

Coverage included with health insurance plan.

### **-Co-payment for a 90-day supply:**

-\$5 for generic, \$20 for preferred brand name, \$55 for non-preferred brand name, when using *mail service pharmacy*.

### **Eligibility for Prescription Drug Coverage**

-Must be eligible to receive health insurance.

### **Effective Date for Prescription Drug Coverage**

-Same as health insurance effective date.

### **Cost for Prescription Drug Coverage**

-Included in health insurance premium.

\*One identification card is used for medical, surgical, and prescription benefits.

\***With the exception of Graduate Assistants returning to their position in the next semester, coverage ends 28 days after the last day worked, even if identification card has a different termination date.**

## VISION COVERAGE

Provided by **EyeMed** (1-877-226-1412)

-A routine eye exam is provided once in any 24 month period with a \$10 co-payment.

-Select group of eyeglasses and contact lenses are paid in full, when offered at time of eye exam.

### **Eligibility for Vision Coverage**

-Must be eligible to receive health insurance.

### **Effective Date for Vision Coverage**

-Same as health insurance effective date.

### **Cost for Vision Coverage**

-Included in health insurance premium.

\*No identification card is needed for vision benefits.

## DENTAL COVERAGE

Provided by **GHI** (1-800-947-0101).

-When using a *participating* provider of the **SEHP Dental Program**, an exam and cleaning is covered twice in a 12 month period, with a \$20 co-payment.

### **Eligibility for Dental Coverage**

-Must be eligible to receive health insurance.

### **Effective Date for Dental Coverage**

-Same as health insurance effective date.

### **Cost for Dental Coverage**

-Included in health insurance premium.

\*A separate identification card is issued for dental benefits.

**\*NETWORK providers MUST be used to receive GHI or EyeMed benefits.**

## RETIREMENT SYSTEM

(www.osc.state.ny.us/1-866-805-0990)

### **New York State Employees' Retirement System (ERS):**

-Defined benefit plan.

-Benefit based on final average salary, years of NYS service credit, and age at retirement.

-Defined by Tier (membership date).

### **Eligibility for Retirement System Participation**

-Membership for employees is *optional*, **except** when employee has current membership.

### **Effective Date for Retirement System Participation**

-Membership for temporary and part-time employees is effective upon receipt of application at ERS.

### **Cost of Retirement System Participation**

-Employee contribution is 3% of salary for those joining on or after July 27, 1976.

-No employee contribution after 10 years of service credit or membership.

**\*ERS service credit can be transferred to the New York State Teachers' Retirement System (TRS).**

## OPTIONAL RETIREMENT SAVINGS PLANS

Voluntary tax-deferred savings programs designed to provide funds in retirement.

-Employees may choose to participate in a tax-deferred annuity/403(b) through TIAA-CREF **AND/or** the NYS Deferred Compensation Plan/457(b).

### **Eligibility for Savings Plan Coverage**

-Upon employment

### **Effective Date for Savings Plan Coverage**

-Choice of employee.

### **Cost for Savings Plan Coverage**

-Employee contributions through payroll deduction subject to IRS limits - up to \$15,500 to each plan in 2008.

## NYS FLEX SPENDING ACCOUNT

(www.flexspend.state.ny.us/1-800-358-7202)

A portion of salary can be designated by employee to establish a fund to cover eligible childcare or elder care expenses with pre-tax dollars. "Use it or lose it" rule applies.

### **Eligibility for Flex Spending Coverage**

-Must be receiving regular biweekly paychecks.

-Must enroll within 60 days of hire or during annual open enrollment period.

\*Additional eligibility criteria may be required.

### **Effective Date for Flex Spending Coverage**

-Dependent Care Advantage Account (DCAA) is immediate.

-Reimbursement as funds are deposited through payroll deduction.

### **Cost for Flex Spending Coverage**

-The employee determines the amount to be contributed.

-Annual maximum \$5,000 per household.

## TUITION ASSISTANCE PROGRAMS

(Student Accounts/309 Maytum Hall/716-673-3236)

-Up to 9 credit hours of *tuition* assistance is available to qualified Graduate Assistants by completing the **Application for Waiver of Tuition for Specified Appointees**, with signed approval by the Department Chair and Dean. Applicants must apply for TAP or complete an income affidavit to be eligible for these funds.

-Submit completed applications to Student Accounts.

\***Fees** are **NOT** covered by tuition assistance programs.

## NEW YORK'S COLLEGE SAVINGS PROGRAM

(www.nysaves.org/1-877-697-2837)

Voluntary employee contributions put aside for **any ONE** designated person (per account) to use for qualified higher education expenses.

-Offers an annual NYS income tax deduction for contributions up to \$5,000 for individuals/\$10,000 for married couples filing joint.

-Federal taxes due on earnings, at beneficiary's tax rate, upon withdrawal.

-Minimum payroll deduction is \$15.00 per pay.