

**ROCHESTER INSTITUTE OF TECHNOLOGY**  
**Retirement Information Beginning January 1, 2019**

**Eligibility for Retirement<sup>(1)</sup>**

Age, years of service, and date of hire (or adjusted date of hire, if applicable) determines an employee's eligibility for retirement from RIT. The eligibility rules have changed over time and are as follows:

**Employees Hired Before January 1, 2019, who**

- **Were age 45 or older on January 1, 2019 OR**
- **Under age 45 with 10 years of regular full-time service or 15 years of qualifying regular part-time service on January 1, 2019**

*If adjusted date of hire is prior to July 1, 1990:*

- ◆ **Age:** At least 50
- ◆ **Service:** At least 5 years of regular full-time or 10 years of qualifying regular part-time service
- ◆ **Age plus Service:** At least 70 points

*If adjusted date of hire is on or after July 1, 1990 but before January 1, 1995:*

- ◆ **Age:** At least 50
- ◆ **Service:** At least 10 years of regular full-time or 15 years of qualifying regular part-time service
- ◆ **Age plus Service:** At least 70 points

*If adjusted date of hire is on or after January 1, 1995:*

- ◆ **Age:** At least 55
- ◆ **Service:** At least 10 years of regular full-time or 15 years of qualifying regular part-time service
- ◆ **Age plus Service:** At least 70 points

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*A year of qualifying regular part-time service is a year in which the employee is scheduled to work at least 750 hours. All years of extended part-time service (an employee work classification that existed prior to July 1, 2017) counts as an eligible year of service.*

*For those who have both regular full-time and qualifying regular part-time service, the following rules apply for counting the Service component:*

- ◆ *If the employee meets the Age and Age+Service components and if the employee has at least 5 years of regular full-time service and the regular full-time years of service plus one-half of qualifying regular part-time years of service is at least 10 years, the employee would be eligible to retire with full-time cost sharing.*
- ◆ *If the employee meets the Age and Age+Service components and if the employee has less than 5 years of regular full-time service and the regular full-time years of service plus the qualifying regular part-time years of service is at least 15 years, the employee would be eligible to retire with part-time cost sharing.*

*Service must be regular full-time and/or qualifying regular part-time service.*

### Employees Hired Before January 1, 2019, who

- Were under age 45 on January 1, 2019 **AND**
- Had less than 10 years of regular full-time service or less than 15 years of qualifying regular part-time service on January 1, 2019

### Employees Hired On and After January 1, 2019

- ◆ **Age:** At least 62
- ◆ **Service:** At least 15 years of regular full-time or 20 years of qualifying regular part-time service
- ◆ **Age plus Service:** Not applicable

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*A year of qualifying regular part-time service is a year in which the employee is scheduled to work at least 750 hours. All years of extended part-time service (an employee work classification that existed prior to July 1, 2017) counts as an eligible year of service.*

*For those who have both regular full-time and qualifying regular part-time service, the following rules apply for counting the Service component:*

- ◆ *If the employee meets the eligibility age and if the employee has at least 10 years of regular full-time service and the regular full-time years of service plus one-half of qualifying regular part-time years of service is at least 15 years, the employee would be eligible to retire with full-time cost sharing.*
- ◆ *If the employee meets the eligibility age and if the employee has less than 10 years of regular full-time service and the regular full-time years of service plus the qualifying regular part-time years of service is at least 20 years, the employee would be eligible to retire with part-time cost sharing.*

## Retirement Plan

Retirement payments are made by TIAA and/or Fidelity. Employees should contact TIAA and/or Fidelity two to three months prior to retirement to request information and forms. TIAA's number is (800) 842-2776/V and (800) 842-2755/TTY; Fidelity's number is (800) 343-0860/V and (888) 259-9743/TTY. You can also check TIAA and/or Fidelity web sites as follows: <http://www.TIAA.org> and <http://www.fidelity.com>.

## Social Security

Your retirement age for Social Security depends on your year of birth as outlined in the following chart. Generally, the earliest age at which individuals can retire and collect reduced benefits is age 62. There are special provisions for a person who is eligible for Social Security disability.

Employees who will be retiring on or after age 62 who plan to collect Social Security income should contact Social Security two to three months prior to the retirement date to request information and any necessary forms. You can contact the Social Security Administration at (800) 772-1213/V and (800) 325-0778/TTY. Regardless of your age and your retirement date, it is always a good idea to get a *Personal Earnings & Benefit Statement* from Social Security to verify the information they have in their records for you. You can call the phone number above or check their web page at <http://www.ssa.gov>.

Those who work past their Full Retirement Age (FRA) can work **and** collect Social Security benefits without a reduction in the benefit amount. Please note that according to the Social Security Administration, deferring when you start collecting Social Security benefits beyond your FRA will increase the amount by 8% per year, up to age 70. Contact the Social Security Administration for more information.

Year of Birth	Full Retirement Age	Reduced Benefit at Age 62
1937 and earlier	65	80.0%
1938	65 and 2 months	79.2%
1939	65 and 4 months	78.3%
1940	65 and 6 months	77.5%
1941	65 and 8 months	76.7%
1942	65 and 10 months	75.8%
1943-54	66	75.0%
1955	66 and 2 months	74.2%
1956	66 and 4 months	73.3%
1957	66 and 6 months	72.5%
1958	66 and 8 months	71.7%
1959	66 and 10 months	70.8%
1960 and later	67	70.0%

### Medical Coverage and Cost Sharing Groups

Medical Coverage - We have split the medical coverage information in this document in two sections:

1. **Pre-Medicare:** this section applies if you and/or your spouse/partner and/or eligible children are not eligible for Medicare. Usually a person becomes Medicare-eligible at age 65, unless they are disabled before age 65.
2. **Medicare:** this section applies when you and/or your spouse/partner are eligible for Medicare. A person is eligible for Medicare beginning at age 65, or at an earlier age, if disabled.

Cost Sharing Groups - The pre-Medicare cost sharing and Medicare HRA amounts vary based on your age and your date of hire. You are in the same group when you are pre-Medicare and Medicare-eligible. For employees who meet the eligibility requirements for retirement from RIT (see pages 1 and 2), there are two cost sharing groups (Group 1 includes those who retired from RIT many years ago):

- **Group 2** is what was formerly known as the Benchmark group. These employees were hired before January 1, 2004 and were age 35 or over on January 1, 2008.
- **Group 3** is what was formerly known as the RMA group (Retiree Medical Account). These employees were hired on or after January 1, 2004 OR hired before January 1, 2004 and under age 35 on January 1, 2008. All employees hired January 1, 2019 and later are in this group.

### Pre-Medicare Plans and Cost Sharing Information

Plans: The plans that are available to active employees are available for pre-Medicare retirees and their pre-Medicare spouses/partners and/or eligible children, under the same rules regarding geographic access.

- If your permanent address is within the 31-county service area, the POS A, POS B, POS B No Drug, and POS D plans continue to be available.
- If your permanent address is outside the POS service area, you would be eligible for the Blue PPO.

Pre-Medicare Cost Sharing: The retiree cost sharing for pre-Medicare medical coverage changes as the retiree's age changes, as follows:

Age Group	Cost Sharing
<b>Pre-Medicare: ages 50 to 54</b>	<u>Group 2 and Group 3</u> : Retiree pays 100% of the medical premium through the month in which the retiree attains age 55
<b>Pre-Medicare: ages 55 to 64</b>	<p><u>Group 2 and Group 3</u>: Retiree contributes toward the cost of the medical coverage based on the Salary Level just prior to retirement. We are phasing in higher pre-Medicare cost sharing because our data shows that this group utilizes their healthcare benefits to a greater degree than employees. In order to minimize the impact to pre-Medicare retirees, we are phasing in the increase over several years as follows.</p> <p><u>Group 2</u>:</p> <p>2019: retiree will pay the same amount an active employee            2020: retiree will pay 20% more than an active employee            2021: retiree will pay 40% more than an active employee            2022: retiree will pay 60% more than an active employee            2023: retiree will pay 80% more than an active employee            2024 and after: retiree will pay double the amount an active employee pays</p> <p><u>Group 3</u>:</p> <p>2019: retiree will pay 10% more than the Group 2 retiree            2020: retiree will pay 10% more than the Group 2 retiree            2021: retiree will pay 10% more than the Group 2 retiree            2022: retiree will pay 10% more than the Group 2 retiree            2023: retiree will pay 10% more than the Group 2 retiree            2024 and after: retiree will pay 10% more than the Group 2 retiree</p> <p>Refer to the separate cost sharing chart for the retiree contribution amounts.</p>

Pre-Medicare Medical Contribution Payments: RIT has retained the services of Lifetime Benefit Solutions (LBS) to administer billing for retirees and surviving spouses. LBS sends an invoice to pre-Medicare retirees with medical coverage on or about the 15<sup>th</sup> of each month for the next month's coverage and the payment is due by the 1<sup>st</sup> of the month. LBS offers several payment options: payment by check, money order, electronic funds transfer (EFT - automatic withdrawal from your bank account), and by credit card with a fee. If payments are not made in a timely basis, coverage will be cancelled. LBS will send details about the payment options and deadlines with the first bill.

**When You Can Make Medical Plan Changes**

Retirees can make changes each fall during the annual Open Enrollment period. Changes include a change in the medical plan in which you participate (e.g., POS B to POS D) and a change in the level of coverage (e.g., change from individual coverage to two person coverage). You may also cancel coverage or enroll in coverage at that time (if you did not elect coverage at retirement or canceled coverage after retirement).

Generally, the Open Enrollment period is the only time when you can make a change unless you have a qualified family or employment status change during the year. A family or employment status change includes marriage, divorce, birth or adoption of a child, death of a spouse or dependent, or a change in employment (e.g., spouse gaining or losing employment). If you have one of these events and you want to elect, cancel or change the level of coverage, you must notify RIT Human Resources, **within 31 days of the event**. Otherwise, you must wait until the next Open Enrollment for a January 1 effective date. Please remember that the event must be consistent with the change you want to make (e.g., changing from individual coverage to two person coverage is not consistent

with a spouse gaining employment). Also remember -- you generally cannot change medical plans during the year (e.g., POS D to POS A) even if you have a change in family or employment status.

There are two exceptions to the qualified family or employment status change rules described above. If you move out of the POS plan service area permanently, you will need to change plans. Please notify RIT's Human Resources Department prior to your move so you can complete the necessary paperwork. In addition, if you (and/or your spouse/partner) are not eligible for Medicare at retirement, you will need to change plans when you become eligible for Medicare. The Medicare information is described in the next section.

### **Medical Coverage When Medicare-Eligible**

When you are retired and you (and/or your spouse/partner) are eligible for Medicare (generally the first of the month in which you attain age 65) and enroll in Medicare Part A and Part B, RIT provides you with access to supplementary Medicare coverage through a private Medicare Exchange called Via Benefits. In addition, RIT provides you with financial support to help you pay for your coverage and other eligible healthcare expenses.

### **Becoming Familiar with Medicare and Supplemental Plans Available Through Via Benefits**

Medicare benefits are broken into several component parts. To decide how to best meet your medical needs and budget, it helps to understand how these parts work together. The following outline will help familiarize you with the parts of Medicare and the decisions you must make.

<b>What You Get From Medicare</b>	
<b>Part A and Part B</b> Original Medicare consists of Part A and Part B.	
<b>Part A:</b> Part A provides you with inpatient care, and covers inpatient hospital stays, home healthcare, stays in skilled nursing facilities, and hospice care.	<b>Part B:</b> Part B provides you with outpatient care, and covers physician fees and other medical services not requiring hospitalization. <b>You must enroll in Part B and pay the Part B premium.</b> The amount of the premium is based on the retiree's modified adjusted gross income. The standard premium for those who enroll in Medicare Part B in 2018 is about \$134 per month; this amount could be higher based on your income.

<b>What You Choose From Via Benefits (Supplemental Plans)</b>	
<b>You choose from three different types of supplemental plans that add coverage where original Medicare may have less than you require. These plan types will be explained in materials from Via Benefits.</b>	
<b>Medicare Advantage</b>	<ul style="list-style-type: none"> <li>• Medicare Advantage is a plan offered by a private insurance company to provide you with your Medicare Part A and Part B (you must be enrolled in Part A and Part B) benefits plus additional benefits.</li> <li>• There are two types of Medicare Advantage plans: Medicare Advantage Prescription Drug (MAPD), which includes prescription drug coverage; and Medicare Advantage (MA), which does not.</li> <li>• Within these two Medicare Advantage plan types there are three doctor networks types: Health Maintenance Organization (HMO), Preferred Provider Organization (PPO) and Private Fee-For-Service Plans (PFFS).</li> </ul>
<b>Medigap</b>	<ul style="list-style-type: none"> <li>• Medigap is a supplemental insurance sold by private insurance companies to fill "gaps" in Original Medicare Plan coverage.</li> </ul>
<b>Part D</b>	<ul style="list-style-type: none"> <li>• Part D refers to prescription drug coverage, which is available to all people who are eligible for Medicare.</li> <li>• Plans are offered through private insurance companies.</li> </ul>

<b>How to Decide</b>
You combine Parts A and B with the supplemental plans you choose from Via Benefits to get a package of plans to cover your needs. Choosing the best combination requires some education and some comparison of plan features and costs. A Benefit Advisor from Via Benefits, described on the following page, will help you with the comparison and decision process.

**How to Enroll in Medicare**

When you (and your spouse/partner) are eligible for Medicare (generally the first of the month in which you attain age 65) you will need to be enrolled in Medicare Part A and Part B; this Medicare enrollment process should begin about three months prior to retirement (or prior to turning age 65, if you retired before you were eligible for Medicare).

If you are age 65 or older when you retire, then you would have enrolled in Medicare Part A when you turned age 65. Therefore, if you are already enrolled in Part A at retirement, you would only need to enroll in Medicare Part B.

You should begin the process to apply for Medicare Part A and/or Part B about three months in advance of when you will need the coverage. If you or your spouse are Medicare-eligible at retirement and you have been enrolled in RIT employee medical coverage, please contact RIT Human Resources (contact information at end of this

document) in advance of applying for Medicare to obtain a form verifying that you have had coverage under an employer group plan; this verification is important because without it, you would likely be subject to a Part B late enrollment penalty since you are enrolling in Medicare after age 65.

You can enroll in Medicare Part A and Medicare Part B in the following ways:

- Online at [www.SocialSecurity.gov](http://www.SocialSecurity.gov).
- By calling Social Security at 1-800-772-1213/V and 1-800-325-0778/TTY, Monday through Friday, from 7 a.m. – 7 p.m.
- In-person at your local Social Security office, with an appointment. Go to <https://www.ssa.gov/locator/> to find the office nearest you.

### **Via Benefits**

RIT's relationship with Via Benefits allows you to purchase an individual supplemental Medicare plan. Via Benefits is dedicated to making the transition to your new coverage as easy and straightforward as possible. With Via Benefit's assistance, retirees gain access to a number of different Medicare plans available in your geographic area, including those offered by the leading national and regional insurance companies, and including Excellus and MVP Health Care if you live in the Rochester area.

We understand that you will need to make important choices about your healthcare coverage and a Benefit Advisor from Via Benefits will provide you with assistance. The Benefit Advisors are objective, knowledgeable, non-commissioned and U.S.-based. The Benefit Advisor will give you and your eligible spouse/partner personalized support and assistance to help you find and enroll in a plan that fits your expected needs and your budget. The Benefit Advisor will provide:

- Individualized telephone support to help you make an informed and confident enrollment decision.
- Assistance in understanding the differences among various plans and the costs of each of those plans.
- Advice and decision-making support, based on your current coverage and expected future needs.
- Assistance with enrolling in medical and prescription drug plans, as well as a dental plan, if you wish.

To speak to a Benefit Advisor from Via Benefits, call the RIT dedicated toll-free number: (888) 586-0693/V. In addition, Via Benefits offers a personalized website where you can find resources to help you understand and compare plan options, as well as enrollment information. Plan details and premiums are publicized annually around October 1 for the upcoming year. For example, plan and premium information for 2020 will not be available until after October 1, 2019. The web address for RIT retirees is <https://my.viabenefits.com/RIT> and you can access the site at your convenience 24 hours a day, 7 days a week.

Please note that the enrollment call is recorded and tends to be a lengthy and detailed process, as prescribed by Medicare requirements. The Via Benefits representative is required to read detailed legal information about the plan and your enrollment. You should plan on at least two hours per person.

### **RIT Financial Support**

If you enroll in medical coverage through Via Benefits, RIT will provide

- **HRA benefits.** RIT will place your benefit dollars in an account called a **Health Reimbursement Arrangement (HRA)**. You and/or your eligible spouse/partner can be reimbursed from this account for healthcare premiums and eligible out-of-pocket healthcare expenses. See below for details.
- **Catastrophic prescription drug coverage.** In addition to Medicare prescription drug coverage, the plan you elect will include access to benefits from RIT that may help you cover the cost of catastrophic prescription drug expenses. Annually, the Federal Centers for Medicare and Medicaid Services (CMS) determines the

Part D prescription drug amounts. For 2019, “catastrophic” refers to prescription drug expenses that are greater than \$5,100 in a year. See below for details.

You must enroll in medical coverage through Via Benefits to be eligible for the HRA and the Catastrophic Rx HRA.

### What is an HRA?

A Health Reimbursement Arrangement (HRA) is an account, provided by RIT if you enroll in medical coverage through Via Benefits, which you can use to be reimbursed for eligible healthcare expenses. Reimbursements are not taxable to the retiree for expenses for the retiree and spouse, but are taxable for expenses for the domestic partner. Here is how it works:

- When you enroll for supplemental Medicare medical coverage through Via Benefits, RIT will establish a joint HRA for you and your eligible spouse/partner, if applicable. At the beginning of each calendar year, RIT will credit your account with the applicable HRA amount(s).
- You can use the funds to be reimbursed for eligible premiums and/or your share of qualifying out-of-pocket healthcare expenses during the year. After you enroll in medical coverage through Via Benefits, they will send you a *Funding Guide to Reimbursement* that explains the reimbursement process.
- Any dollars remaining in your HRA at the end of the calendar year **will roll over automatically** for you to use in future years, as long as you continue medical coverage through Via Benefits.
- Claims for reimbursement must be submitted by June 30 for the prior calendar year in order to be reimbursed.

### HRA Eligible Expenses

Healthcare expenses that are eligible for reimbursement are as follows:

- Medical, prescription drug, dental, and vision premiums (*pre-tax deductions from a paycheck are not eligible for reimbursement*)
- Medicare Part B premiums
- Qualifying out-of-pocket medical (excludes prescription drugs), dental, and vision expenses such as deductibles, copays and your share of coinsurance

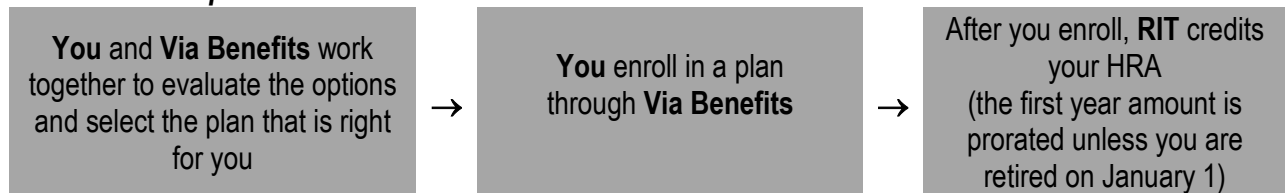
Healthcare expenses that are not eligible for reimbursement are as follows:

Medical

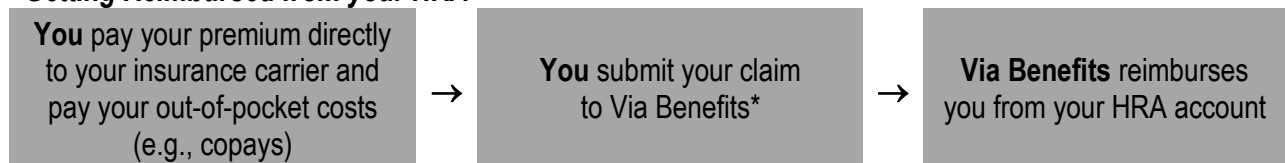
- Prescription drug out of pocket costs (e.g., deductible, copays)
- Long-term care premiums and out-of-pocket expenses are not eligible for reimbursement.

### How the HRA Works

#### **The HRA Set Up Process**



#### **Getting Reimbursed from your HRA**



\* Some insurance companies send proof of your premium payment to Via Benefits so you can be automatically reimbursed for your premium without submitting a manual claim to Via Benefits for reimbursement. Ask your Benefit Advisor about Via Benefits’ “Automatic Reimbursement.”



### About Catastrophic Prescription Drug Coverage

If you enroll in Medicare Part D prescription drug coverage through Via Benefits, whether through a separate prescription drug plan or as part of a Medicare Advantage plan that includes prescription drug coverage, your coverage will include access to benefits from RIT that may help cover “catastrophic” prescription drug costs that Medicare does not cover.

In 2019, if you enter the “catastrophic” level of Medicare Part D — which begins when you meet the annual true out-of-pocket maximum (referred to as TrOOP) set by Medicare each year — you will pay \$3.40 for generic drugs and \$8.50 for brand drugs or 5% of the drug cost, **whichever is greater**. The catastrophic level is reached when a participant reaches the Medicare prescription drug threshold of \$5,100 of prescription drug expenses.

Keep in mind that most participants will not enter the annual “catastrophic” level of coverage but, for those who do, RIT is providing this benefit for additional protection. ***This benefit is in addition to the funds that are in your own HRA.***

While RIT has defined a specific overall annual limit for this catastrophic coverage, it is expected that it will be sufficient to cover the needs of those retirees who reach this level of need. There is an annual limit to the amount an individual retiree can receive; in 2019, the amount is \$1,800. Reimbursements are not taxable unless they are for a domestic partner.

Via Benefits will administer the catastrophic prescription drug coverage; information about the reimbursement process is included in the *Funding Guide to Reimbursement*, which Via Benefits will mail to you after you have enrolled in medical coverage. For more information on catastrophic prescription drug coverage, please speak with a Benefit Advisor from Via Benefits.

### 2019 HRA Amounts and Information

The different cost sharing groups described above also apply to the HRA. Retirees in the different groups have different HRA amounts. Within each group, there are differences as well. In Groups 2 and 3, RIT provides a larger subsidy to the retiree compared to the spouse/partner. In addition, there is a lower RIT subsidy for those who were part-time employees compared to those who were full-time employees. This is consistent with RIT’s history of providing different levels of support for the different groups. The 2019 HRA annual amounts are as follows. If you enroll through Via Benefits mid-year, the HRA in that first year will be prorated.

Cost Sharing Group	Employee Work Classification	Retiree HRA Amount	Spouse/Partner HRA Amount
2	Full-time	\$1,900	\$1,700
2	Part-time	\$1,425	\$1,275
3	Full-time	\$1,700	\$1,500
3	Part-time	\$1,275	\$1,125

*Please note that RIT’s longstanding policy has been that “newly-acquired” family members added after retirement do not receive an RIT subsidy. For example, if a retiree is single at retirement and later marries, the new spouse has access to coverage through Via Benefits but RIT will not provide an HRA subsidy.*

If you cover an eligible spouse/partner, the HRA will be a joint account, which means both of you can be reimbursed for eligible premiums and qualifying out-of-pocket costs up to the amount in your combined HRA. Any unused funds will roll over to the next year, each year; there is no maximum amount or cap that can be rolled over. The HRA is an annual amount that will be credited each January. If you enroll through Via Benefits mid-year, the HRA in that first year will be prorated.

To help you understand the value of the HRA, we encourage you to look at plans that are available in your geographic area on the Via Benefits website (<https://my.viabenefits.com/RIT>) or contact a Benefit Advisor at Via Benefits at (888) 586-0693/V. Prior to October 1, you will see current year plans and rates; the new year's plans and rates will become available each year around October 1. In 2018, there are some plans available through Via Benefits for a \$0 premium in many geographic areas, including the areas where RIT has the largest concentration of retirees: New York, including the Rochester area, Arizona, California, Florida, North Carolina, Texas, and Virginia.

How can an insurance company offer a plan for a \$0 premium? Insurance companies can offer a \$0 premium plan because the federal government pays them a flat fee to provide Medicare benefits.

Many insurance companies offer a variety of Medicare Advantage plans with a range of different deductible, copay and coinsurance amounts with corresponding premiums. These plans have annual out-of-pocket maximums to protect retirees from huge costs. There are also Medicare Supplement plans and Medicare prescription drug plans available.

### **Important HRA details**

- For those retirees who cover an eligible spouse/partner, the HRA will be a joint account, which means you both can be reimbursed for eligible premiums and qualifying out-of-pocket costs up to the total HRA balance.
- Any unused funds will roll over to the next year; there is no maximum amount or cap that can be rolled over; whatever the balance is can be rolled over year to year.
- The HRA is an annual amount that will be credited each January. For those who enroll through Via Benefits mid-year, the HRA in that first year will be prorated. For example, if you enroll July 1, the HRA in the first year would be one-half of that year's annual amount.
- If you married or entered a domestic partnership after your retirement from RIT, your spouse/partner would be eligible to obtain coverage through Via Benefits, but they would not have an HRA credit nor would they be able to access your HRA funds.
- If you cover an eligible domestic partner, reimbursements from the HRA for your domestic partner's claims will be taxable to you (this does not apply to reimbursements to you or your spouse). RIT will issue a Form 1099 annually for your tax reporting.
- **IMPORTANT if you work for RIT after retirement:** under Federal law, if you (or your spouse/partner) become employed by RIT after you have retired, in any position, including an adjunct position, you (and your spouse/partner) will NOT be eligible for reimbursement from the HRA for qualifying premiums or expenses that occur during the time you are employed by RIT. Once you leave RIT's employment, you will regain access to all of your unused HRA dollars.
  - a. If you return to RIT as an adjunct or in a regular faculty or staff position that is expected to last less than six months, you can remain in the retiree coverage through Via Benefits without access to the HRA while you are employed by RIT. After you re-retire, RIT will add the HRA credit(s) you otherwise would have received if you had not been working at RIT and your HRA balance will be available to you for expenses incurred *after* you stop working at RIT.
  - b. If you are hired in a regular faculty or staff position that is expected to last six months or more, your retiree coverage through Via Benefits will end and you will be eligible to enroll in the RIT employee coverage. There will be no HRA credits during your RIT re-employment period. You may enroll through Via Benefits when you later re-retire from RIT and you will receive an HRA credit for the year you re-retire, prorated based on your re-retirement date. For example, if you re-retire June 30, you would receive 50% of that year's HRA amount since you will be enrolled for half the year. Any balance that was in your HRA at the time you were re-employed will be reinstated when you re-retire.

Note that this rule does not apply if you are employed by a third-party such as Datrose.

## THE FOLLOWING INFORMATION APPLIES TO ALL RETIREES

### **Medical Coverage Changes After Retirement**

Access to coverage is one of the guiding principles for RIT's retiree medical benefits. This means that you can elect medical coverage at retirement or you can waive coverage at retirement. If you waive coverage at retirement, you will continue to be eligible for coverage under RIT's program in the future (when you can enroll, cancel, or change coverage is described below).

In addition, you can add eligible family members to your coverage after retirement. If they were your family members at the time of your retirement, the cost sharing for the coverage will be as described above. If, however, you add a family member who was not your family member at the time of retirement (e.g., you were single when you retired and later married), you can add this new family member, but RIT will not subsidize the cost of the coverage.

If the new family member is pre-Medicare, you would pay the full premium for that person. If the new family member is Medicare-eligible, the person would be eligible for coverage through Via Benefits, but they would not be eligible for an HRA credit, nor could they use your HRA for reimbursements.

### **Your Spouse/Partner's Medical Coverage**

Your spouse is eligible for coverage in the same manner you are – that is, before Medicare eligibility, the RIT coverage would be your spouse's primary coverage, even if you are eligible for Medicare; and, after Medicare eligibility, Medicare would be your spouse's primary coverage, even if you are not eligible for Medicare. The rules and process discussed above are the same for your spouse as they are for you.

## Vision Care Coverage

Retirees continue to be eligible for the Vision Care coverage and pay the same amount that employees pay for the coverage. If you are enrolled in the Vision Care Plan, you will continue this coverage into retirement. Lifetime Benefit Solutions would bill you monthly for this coverage. If you are not enrolled at the time of your retirement, you can enroll in a future Open Enrollment period. You can enroll, cancel, or change coverage annually.

Lifetime Benefit Solutions (LBS) will bill you monthly for your coverage. Refer to the section titled *Pre-Medicare Medical Contribution Payments* earlier in this document for billing details.

*Note: There is vision coverage through VSP available from Via Benefits, but the RIT vision coverage is a bit better and has a lower premium than the VSP coverage through Via Benefits.*

## Dental Coverage

If you and/or your spouse/partner are pre-Medicare, you may continue to participate in RIT's employee dental plan. Your cost for coverage would be the full premium equivalent, which is significantly higher than what you are used to paying as an employee. When you are pre-Medicare, Lifetime Benefit Solutions (LBS) will bill you monthly for your coverage. Refer to the section titled *Pre-Medicare Medical Contribution Payments* earlier in this document for billing details.

Once you and/or your spouse/partner become Medicare-eligible, there are dental plan options you can purchase through the Via Benefits Medicare Exchange. You would pay the insurance company directly for these premiums.

## Beneflex

Beneflex (Health Care and Dependent Care Spending Account) participation ends at retirement. You may submit claims with dates of service up to your retirement date. Retirees may continue participation under the Health Care

Spending Account for the remainder of the calendar year in which the retirement occurs under the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA) by paying the full cost plus a 2% administrative charge, as allowed under current law (this would allow the retiree to submit claims with dates of service after the retirement date to withdraw funds that had been contributed but not reimbursed).

RIT's COBRA administrator, P&A Group, will send you information and forms to continue your Health Care Spending Account participation under COBRA and, if you elect to continue, they will send you information on how to pay for it.

**Please Note: If you do not enroll in the COBRA coverage or if you cancel coverage before the end of the calendar year, you cannot re-enroll at a future date.**

### Employee Assistance Plan (EAP)

Your participation in the Employee Assistance Plan (EAP) ends at retirement. Retirees may elect to continue participation in the EAP for up to 18 months under the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA). There is no charge for continuing participation during the COBRA period and there are no waiting periods for any services to be covered.

The COBRA continuation covers you and your eligible family members. You are not required to continue participation for the entire 18 months of COBRA. You may cancel the continuing coverage at any time.

RIT's COBRA administrator, P&A Group, will send you information and forms to continue your EAP participation under COBRA.

**Please Note: If you do not enroll in the COBRA coverage or if you cancel coverage before the 18 months of COBRA has ended, you cannot re-enroll at a future date.**

### Life and AD&D Insurance

Employee, spouse, and child life and AD&D insurance ends at retirement. The coverage is portable which means retirees can continue coverage without completing a health questionnaire; premiums are paid directly to the insurance company. RIT Human Resources will send you information about continuing the coverage at retirement.

The rates for the life insurance coverage are "unismoker" (no differentiation for smoker vs non-smoker). The estimated annual premiums for \$10,000 of coverage are as follows:

- Age 50-54      \$134
- Age 55-59      \$228
- Age 60-64      \$375
- Age 65-69      \$639
- Age 70-74      \$1,034

You can apply to the insurance company for lower rates by answering health-related questions; the insurance company would review the information and approve or deny the lower rates. If denied, you could still have the coverage at the higher rates.

There is an option to convert to whole life insurance, which builds cash value and does not end as long as you keep paying the premiums, but it would be more expensive than the rates noted above. If you continue the coverage as term insurance, it would end at age 80.

### **Identity Theft Protection**

Retirees continue to be eligible for the Identity Theft Protection coverage and pay the same amount that employees pay for the coverage. If you are enrolled in the Plan at retirement, you will continue this coverage into retirement. Lifetime Benefit Solutions would bill you monthly for this coverage. If you are not enrolled at the time of your retirement, you can enroll during a future open enrollment period. You can enroll, change, or cancel coverage annually.

Lifetime Benefit Solutions (LBS) will bill you monthly for your coverage. Refer to the section titled *Pre-Medicare Medical Contribution Payments* earlier in this document for billing details.

### **Legal Services Plan**

Retirees continue to be eligible for the Legal Services Plan and pay the same amount that employees pay for the coverage. If you are enrolled in the Plan at retirement, you will continue this coverage into retirement. Lifetime Benefit Solutions would bill you monthly for this coverage. If you are not enrolled at the time of your retirement, you can enroll during a future open enrollment period. You can enroll or cancel coverage annually during the annually.

Lifetime Benefit Solutions (LBS) will bill you monthly for your coverage. Refer to the section titled *Pre-Medicare Medical Contribution Payments* earlier in this document for billing details.

### **Other Coverages**

Short-term and long-term disability, workers compensation, New York State Paid Family leave and other paid coverages end at retirement.

### **Education Benefits**

Retirees and their eligible family members continue to be eligible for tuition waivers (courses taken at RIT) in retirement. Waivers for the retiree are automatic. Waivers for family members are processed after the retiree completes the *Tuition Waiver Form – Family Member Information*. This form must be completed once per academic year. Tuition Assistance, Tuition Scholarship, and Tuition Exchange end at retirement (if retirement occurs in the middle of the academic year in which a child is receiving Tuition Exchange, the Tuition Exchange benefit will continue for the remainder of that academic year).

### **Vacation and Sick/Personal Time Accrual**

Employees (staff and 12-month faculty) who retire will receive compensation for the unused portion of accrued, unused vacation time as soon as administratively possible after the retirement date. Any unused sick/personal time (non-exempts only) is not paid out (unless the individual retires on June 30). Grandfathered sick time is not paid out.

### **Retiree ID Card**

You may obtain a Retiree ID card at the Registrar's Office located on the first floor of the George Eastman Building.

### **Facilities and Services**

By using your Retiree ID Card, you have access privileges to RIT facilities and services, such as the Student Life Center, Wallace Library, and Barnes & Noble @RIT (including the 10% discount on eligible items). You may also continue with your RIT e-mail account. Please note that annually, from the first time your retiree e-mail account is activated, you will receive an e-mail from ITS confirming that you want to continue your RIT e-mail account. If you want to keep the account, simply follow the instructions in the e-mail.

## Other Programs

As a retiree, you continue to be eligible for discounts under RARES, Mercer Voluntary Benefits (auto/homeowner's insurance), and Pet Insurance. In addition, you continue to be eligible for the Vision Care Plan, Group Legal Services Plan, and Identity Theft Protection and can enroll or make changes during the annual Open Enrollment period.

## The Osher Lifelong Learning Institute

The Osher Institute is an innovative educational program dedicated to the enrichment of adults over the age of fifty who believe learning is a lifelong process. Founded in 1987 as an affiliate of RIT, the Osher Institute is run for and by its members. People with broad interests and inquiring minds will find pleasure in extending their knowledge and broadening their understanding of the works around them. There are several membership levels with different fees. The full membership includes audiology services at RIT's Audiology Center. For more details, contact The Osher Lifelong Learning Institute directly at (585) 292-8989/V or refer to their website at <http://www.rit.edu/osher>.

## Questions

Check out the HR web page at [www.rit.edu/benefits](http://www.rit.edu/benefits) for more details. If you have any questions, please contact your benefits representative in the Human Resources Department based on the first letter of your last name as follows:

YOUR LAST NAME	CONTACT	TELEPHONE	EMAIL ADDRESS
A-L	Valerie Liegey	(585) 475-5346/V	<a href="mailto:valpsn@rit.edu">valpsn@rit.edu</a>
M-Z	Brett Lagoe	(585) 475-5983/V	<a href="mailto:blpsn@rit.edu">blpsn@rit.edu</a>

<sup>(1)</sup> You may be ineligible for certain retiree benefits if your employment at RIT is terminated for cause (you would remain eligible for your retirement plan income). Refer to the eligibility section of the Medical Plan summary for details.

*The information in this document is a summary of the benefits as they currently exist. If there is any confusion or conflict regarding plan features, the plan document/contract will be the final authority. RIT reserves the right to change, modify, discontinue, or terminate benefits at any time for any reason.*