

ROCHESTER INSTITUTE OF TECHNOLOGY

Retirement Information for 2025

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.

Eligibility for Retirement⁽¹⁾

Age, years of service, and date of hire (or adjusted date of hire, if applicable) determines an employee's eligibility for retirement from RIT.

You will find your date of hire in Oracle Employee Self-Service (<https://myinfo.rit.edu/>). Click on the My Employment Information link and you will see the date, called *Adjusted Service Date*.

The eligibility rules have changed over time and are described below and on the next page.

Employees Hired Before January 1, 2019, who

- Were age 45 or older on January 1, 2019 (*date of birth on or before 1/1/1974*) OR
- Under age 45 (*date of birth after 1/1/1974*) with 10 years of regular full-time service (*date of hire on or before 1/1/2009*) or 15 years of qualifying regular part-time service (*date of hire on or before 1/1/2004*) 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. A year of extended part-time service (an employee work classification that existed prior to July 1, 2017) counts as a year of qualifying part-time 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. Time worked as an adjunct does not count towards the service requirement.

Employees Hired Before January 1, 2019, who

- Were under age 45 on January 1, 2019 (*date of birth after 1/1/1974*) AND
- Had less than 10 years of regular full-time service (*date of hire after 1/1/2009*) or less than 15 years of qualifying regular part-time service (*date of hire after 1/1/2004*) 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.*

Service must be regular full-time and/or qualifying regular part-time service. Time worked as an adjunct does not count towards the service requirement.

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. You can also check TIAA and/or Fidelity web sites as follows: <http://www.TIAA.org> and <http://www.fidelity.com>.

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 are not eligible for Medicare and/or your eligible children are under age 26. 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 date of birth 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 2** employees were hired before January 1, 2004 **and** were age 35 or over on January 1, 2008 (*employee date of birth must have been on or before January 1, 1973*).

- **Group 3** employees were hired on or after January 1, 2004. In addition, employees hired before January 1, 2004 **and** who were under age 35 on January 1, 2008 (*employee date of birth was after January 1, 1973*) are in Group 3.

Refer to the *Eligibility for Retirement* section on page 1 of this document to determine your date of hire.

Pre-Medicare Plans and Cost Sharing Information
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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, and POS D plans continue to be available.
 - Employees enrolled in the POS B No Drug Plan in 2024 may opt for this coverage as a retiree through 2025. However, this plan will not be open to new retiree enrollees in 2025 and will be discontinued for all retirees in 2026.
- If your permanent address is outside the POS service area, you would be eligible for the Blue PPO.
- Refer to pages 14 & 15 to review the 2025 Pre-Medicare contributions.

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
Pre-Medicare: ages 50 to 54	<u>Group 2 and Group 3:</u> Retiree pays 100% of the medical premium through the month in which the retiree attains age 55
Pre-Medicare: ages 55 to 64 And Medicare Eligible Dependents (Spouse and Children)	<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. Since our data has shown that pre-Medicare retirees utilize their healthcare benefits to a greater degree than employees, pre-Medicare retirees pay more than employees for their coverage, as follows:</p> <ul style="list-style-type: none"> • <i>Group 2</i> pays double what an employee pays for coverage • <i>Group 3</i> pays 10% more than a <i>Group 2</i> retiree. <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 11th of each month for the next month's coverage and the payment is due by the 1st 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.

What You Get From Medicare

Part A and Part B Original Medicare consists of Part A and Part B.

Part A: Part A provides you with inpatient care, and covers inpatient hospital stays, home healthcare, stays in skilled nursing facilities, and hospice care.

Part B: Part B provides you with outpatient care, and covers physician fees and other medical services not requiring hospitalization. **You must enroll in Part B and pay the Part B premium.** 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 2025 is \$185.00 per month; this amount could be higher based on your income (see important information below about the higher premium).

What You Choose From Via Benefits (Supplemental Plans)

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.

Medicare Advantage

- 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.
- 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.

	<ul style="list-style-type: none"> • 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).
Medigap	<ul style="list-style-type: none"> • Medigap is a supplemental insurance sold by private insurance companies to fill “gaps” in Original Medicare Plan coverage.
Part D	<ul style="list-style-type: none"> • Part D refers to prescription drug coverage, which is available to all people who are eligible for Medicare. • Plans are offered through private insurance companies.

How to Decide

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 (Should we add information about Medicare Part B being delayed if enrolled in an RIT group health plan?)

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 likely enrolled in Medicare Part A when you turned age 65. Therefore, if you are already enrolled in Part A, you would only need to enroll in Medicare Part B when you retire. If you did not enroll in Medicare Part A at age 65, you will need to do so when enrolling in Medicare Part B. This information applies to your spouse as well.

You and/or your spouse 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. The Medicare coverage needs to be effective the first of the month after you retire (e.g., if you retire June 30, your Medicare coverage must be effective July 1).

[Form CMS-40B \(Application for Enrollment in Medicare Part B\)](#) can be found on the Medicare website.

IMPORTANT: At the top of the Part B application, write the effective date you are requesting (the first of the month after you retire).

If you and/or your spouse are Medicare-eligible at retirement and you have been enrolled in RIT employee medical coverage, you will need a form from RIT Human Resources to submit with your Medicare Part B application.

About three months before your retirement, please complete the Service Request in the RIT Service Center (RSC) portal (help.rit.edu) called [Request Medicare Part B Employer Form \(Request for Employment Information, Form CMS-L564\)](#). RIT Human Resources will complete and send this form to you so you can submit it with your Medicare Part B application. This form verifies that you have had coverage under an employer group plan; this verification is important because without it, you may be subject to a Part B late enrollment penalty since you are enrolling in Medicare after age 65.

Send the completed Application for Enrollment in Medicare Part B along with the Request for Employment Information Form CMS-L564 form to your local Social Security office by fax or mail. Search for your local office at <https://www.ssa.gov/locator/> to find the office nearest you.

Medicare Part B Premium

The standard Part B premium amount in 2025 is \$185.00. If your modified adjusted gross income as reported on your IRS tax return from two (2) years prior to your retirement (e.g., if you retire in 2025, the income information would be from your 2023 tax return) is above a certain amount, you will pay the standard premium amount and an Income Related Monthly Adjustment Amount (IRMAA). IRMAA is an extra charge added to your premium. You will find details about IRMAA, including the income information at www.medicare.gov.

If you are subject to the IRMAA charge and believe your income will be lower in retirement, you can request a reduction in the IRMAA by completing the [Medicare Income-Related Monthly Adjustment Amount-Life-Changing Event](#) form (Form SSA-44) found on the Social Security website (www.ssa.gov). RIT Human Resources can provide you with a letter confirming your retirement date that you can submit with the form as proof. To request the letter, please contact the RIT Service Center (contact information can be found on last page of this document).

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 several different Medicare plans available in your geographic area, including those offered by leading national and regional insurance companies such as 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 2025 will not be available until after October 1, 2024. 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 supplemental Medicare 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.

You must enroll in supplemental Medicare medical coverage through Via Benefits to be eligible for the HRA.

RIT determines annually if it will make a contribution to the HRA, and if so, how much it will be.

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. For example, claims for reimbursement for calendar year 2024 must be submitted no later than June 30th, 2025.

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

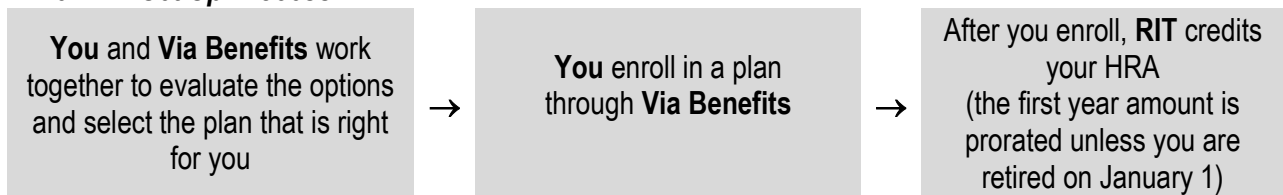
Healthcare expenses that are not eligible for reimbursement are as follows:

Medical

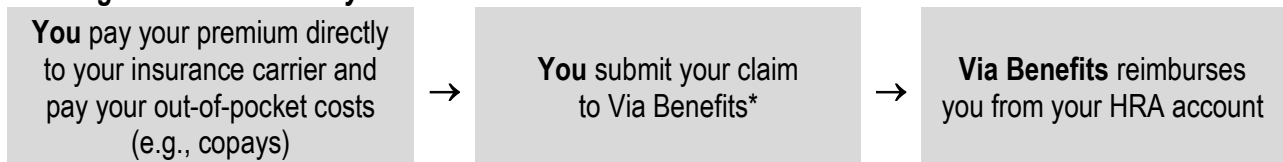
- Prescription drug out of pocket costs (e.g., deductible, copays)
- Long-term care premiums and out-of-pocket expenses

How the HRA Works

The HRA Set Up Process



Getting Reimbursed from your HRA



* See the next section about enrolling for automatic reimbursement.

Automatic Reimbursement for Premiums

You may find that enrolling in one of the automatic reimbursement programs is convenient for you. There are two types of automatic reimbursement depending on your insurance carrier. You would work with Via Benefits to enroll in the program that is right for you.

1. **Automatic Reimbursement (A/R):** This feature is only available if your insurance carrier notifies Via Benefits when you have paid your premium. If you enroll in this feature, whenever there is a change in your premium amount, your insurance carrier will automatically notify Via Benefits and you would be reimbursed the new amount. *Note: Excellus BlueCross BlueShield does not participate in the A/R feature.*
2. **Recurring Premium Reimbursement:** This feature is available if your insurance carrier does not participate in the A/R feature. You submit the appropriate form and documentation to enroll in the recurring premium reimbursement feature. Via Benefits is not automatically update the amount when there is a change in your premium. Therefore, you would need to submit to Via Benefits a new recurring premium request form and documentation when there is a change in your premium. *Note: If you are enrolled in an Excellus BlueCross BlueShield plan, you would need to enroll in the recurring reimbursement program and update your premium amounts when there is a change.*

2025 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. RIT has determined that it will fund the HRA for 2025 as follows. If you enroll through Via Benefits mid-year, the HRA in the first year will be prorated.

Cost Sharing Group	Employee Work Classification	Retiree HRA Amount	Spouse/Partner HRA Amount
2	Full-time	\$2,016.59	\$1,804.31
2	Part-time	\$1,512.45	\$1,353.24
3	Full-time	\$1,804.31	\$1,592.05
3	Part-time	\$1,353.24	\$1,194.05

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, subject to RIT's annual decision whether or not to fund the HRA. If you enroll through Via Benefits mid-year, the funding for 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 2025, there are some plans available through Via Benefits for a \$0 premium in many geographic areas, including within the Rochester area.

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.
- If both you and your spouse/partner are RIT retirees, you will each need to elect whether you will have a joint HRA or a separate HRA. If you do not both elect the joint HRA, you will have separate HRAs. You will not be able to change the election, but if you divorce/terminate your domestic partnership in the future, the account would be separated prospectively.
- 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 HRA credits or 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 and you would be eligible for an HRA credit, provided RIT has approved one for that year.
 - 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. Before your spouse is eligible for Medicare, the RIT medical plan would be your spouse's primary coverage, even if you (the retiree) are eligible for Medicare. After becoming eligible for Medicare, 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

Your participation in the Vision Care Coverage ends at retirement. Retirees may elect to continue participation in the Vision Care Coverage for up to 18 months under the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA). The cost of this coverage is the full cost plus a 2% administrative charge as allowed under current law.

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 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.

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.

Legal Services Plan

Retirees are eligible to enroll in one of two direct pay plans offered by MetLifeLegal Plans (formerly Hyatt Legal Services). Retirees can learn more about these two options by calling **MetLife Legal Plans Client Service Center at 800-821-6400**.

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. Retirees must submit a Tuition Waiver for Retirees service request through the RIT Service Center once per academic year. 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 Time and Sick Leave

Employees (staff and 12-month faculty) who retire will receive compensation for their accrued, unused vacation time as soon as administratively possible after the retirement date. Any unused sick/personal time (nonexempt employees) is not paid out unless the individual retires on June 30 (or the last business day of June if June 30 falls on a weekend). Sick leave for exempt employees is not paid out. Grandfathered sick time for those who have remaining time from 2005 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 George Eastman Hall.

Facilities and Services

If you show your Retiree ID Card, you have access privileges to RIT facilities and services, such as the Student Life Center and Wallace Library.

Better Me Wellness Benefits

Retirees continue to be eligible for a number of Better Me Wellness Benefits as outlined below. For more information, please refer to their website at www.rit.edu/BetterMe.

1. Retirees receive a FREE fitness membership at the Student Life Center and Better Me Wellness Center. You will need an RIT Retiree ID card to access these locations; for more information, please refer to their website at <https://www.rit.edu/~w-criw/>. You can obtain an Retiree ID card from the Registrar's Office, 1st floor, Eastman Hall.
 - a. Access to weight room, pool, track, tennis courts, basketball courts, racquetball/squash/pickleball courts
 - b. Access to recreation sports (golf league, pick up soccer, lunchtime basketball, racquet sports list, cycling group, Tough Tigers, volleyball)
2. Retirees have access to the following Better Me services: (* include an additional fee)
 - a. Weight room orientations
 - b. Student Life Center tours
 - c. Personal fitness training*
 - d. Class pass*
 - e. Nutrition coaching (fee for service only)*
 - f. Occupational athletic training*
 - g. Massage therapy*

RIT Retirees Program

RIT's Division of University Advancement works with the Retiree Committee to plan retiree events, such as the annual Retiree Luncheon. We encourage you to visit www.rit.edu/retirees for information on news and events for retirees. You can also view photos from previous retiree events as well as provide your email address so you can receive emails, including the invitation to the annual Retiree Luncheon (there will also be a mailing by U.S. Mail about the luncheon).

***IMPORTANT NOTE:** If you unsubscribe from the University Advancement emails, you will be removed from the email invitation list for the annual Retiree Luncheon.*

The Osher Lifelong Learning Institute

RIT's Osher Lifelong Learning Institute (OLLI) offers both in-person and online non-credit classes for RIT retirees who want to keep exploring and discovering, simply for the joy of learning. In partnership with other OLLIs across the US, RIT's OLLI offers 80+ diverse courses per term. **Beginning in 2025, RIT retirees can take free classes for one trial term.** After the free trial, a small annual membership fee will gain you unlimited access to OLLI classes, the ability to audit up to two RIT undergraduate courses per semester, audiology services at NTID, and more. Contact RIT's OLLI to get started on your lifelong learning journey: www.rit.edu/osher | osher@rit.edu | 585-292-8989/V

Questions

Please check out the Retiring from RIT webpage at <https://www.rit.edu/humanresources/retiring-rit> for more details. If you have any questions, please contact the RIT Service Center (RSC) as follows:

- RSC self-service portal help.rit.edu
- Online Live Chat through the portal
- Call 585-475-5000

⁽¹⁾ 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.

Retiree Benefits Coverage Contributions

CALENDAR YEAR 2025

Pre-Medicare-Group 2*		MONTHLY RETIREE CONTRIBUTION				
PLAN	LEVEL OF COVERAGE	FULL-TIME SALARY LEVEL 1	FULL-TIME SALARY LEVEL 2	FULL-TIME SALARY LEVEL 3	FULL-TIME SALARY LEVEL 4	PART-TIME
Blue Point2 POS A	• Individual	\$416.29	\$616.55	\$724.51	\$833.85	\$892.11
	• 2 Person	\$990.50	\$1,342.20	\$1,525.08	\$1,730.28	\$1,984.52
	• Family	\$1,256.31	\$1,885.13	\$2,115.58	\$2,310.43	\$2,310.43
	• One Parent Family	\$1,140.34	\$1,560.14	\$1,768.78	\$2,000.47	\$2,071.94
Blue Point2 POS B	• Individual	\$324.06	\$486.17	\$576.79	\$668.71	\$784.81
	• 2 Person	\$752.45	\$1,044.95	\$1,192.87	\$1,361.32	\$1,717.16
	• Family	\$993.74	\$1,507.93	\$1,695.85	\$1,911.58	\$2,164.93
	• One Parent Family	\$815.54	\$1,096.52	\$1,238.44	\$1,412.98	\$1,793.63
Blue Point2 POS B No Drug	• Individual	\$24.37	\$124.33	\$181.76	\$226.00	\$408.35
	• 2 Person	\$197.59	\$295.46	\$374.08	\$468.90	\$937.33
	• Family	\$416.03	\$581.19	\$705.49	\$831.78	\$1,256.49
	• One Parent Family	\$211.50	\$336.56	\$417.52	\$518.95	\$1,032.67
Blue Point2 POS D	• Individual	\$26.96	\$143.25	\$200.11	\$256.12	\$229.78
	• 2 Person	\$237.72	\$337.87	\$416.74	\$511.60	\$1,008.98
	• Family	\$455.37	\$621.38	\$744.92	\$870.88	\$1,336.78
	• One Parent Family	\$255.23	\$382.05	\$463.49	\$565.07	\$1,098.64
Blue PPO <i>(outside Rochester area)</i>	• Individual	\$253.82	\$407.74	\$494.08	\$581.23	\$719.24
	• 2 Person	\$595.21	\$869.19	\$1,007.49	\$1,165.50	\$1,569.20
	• Family	\$911.99	\$1,306.74	\$1,483.66	\$1,687.35	\$2,050.05
	• One Parent Family	\$644.29	\$905.12	\$1,036.57	\$1,199.63	\$1,631.10
Dental Coverage - Standard	• Individual	\$33.03	\$33.03	\$33.03	\$33.03	\$33.03
	• 2 Person	\$77.26	\$77.26	\$77.26	\$77.26	\$77.26
	• Family	\$117.59	\$117.59	\$117.59	\$117.59	\$117.59
Dental Coverage - Enhanced	• Individual	\$42.24	\$42.24	\$42.24	\$42.24	\$42.24
	• 2 Person	\$100.22	\$100.22	\$100.22	\$100.22	\$100.22
	• Family	\$153.03	\$153.03	\$153.03	\$153.03	\$153.03

*** NOTES ABOUT COST SHARING**

1) There are two pre-Medicare cost sharing groups as follows:

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.

2) For pre-Medicare retirees who retired prior to January 1, 2006, refer to Salary Level 2 for your contribution information. For retirees who retired on and after January 1, 2006, refer to the Salary Level you were in prior to retirement.

Retiree Benefits Coverage Contributions

CALENDAR YEAR 2025

Pre-Medicare-Group 3*		----- MONTHLY RETIREE CONTRIBUTION -----				
PLAN	LEVEL OF COVERAGE	FULL-TIME SALARY LEVEL 1	FULL-TIME SALARY LEVEL 2	FULL-TIME SALARY LEVEL 3	FULL-TIME SALARY LEVEL 4	PART-TIME
Blue Point2 POS A	● Individual	\$457.92	\$678.21	\$796.96	\$892.11	\$892.11
	● 2 Person	\$1,089.55	\$1,476.42	\$1,677.59	\$1,903.31	\$1,984.52
	● Family	\$1,381.94	\$2,073.64	\$2,310.43	\$2,310.43	\$2,310.43
	● One Parent Family	\$1,254.37	\$1,716.15	\$1,945.66	\$2,071.94	\$2,071.94
Blue Point2 POS B	● Individual	\$356.47	\$534.79	\$634.47	\$735.58	\$836.17
	● 2 Person	\$827.70	\$1,149.45	\$1,312.16	\$1,497.45	\$1,857.56
	● Family	\$1,093.11	\$1,658.72	\$1,865.44	\$2,102.74	\$2,164.93
	● One Parent Family	\$897.09	\$1,206.17	\$1,362.28	\$1,554.28	\$1,932.80
Blue Point2 POS B No Drug	● Individual	\$26.81	\$136.76	\$199.94	\$248.60	\$449.19
	● 2 Person	\$217.35	\$325.01	\$411.49	\$515.79	\$1,031.06
	● Family	\$457.63	\$639.31	\$776.04	\$914.96	\$1,382.14
	● One Parent Family	\$232.65	\$370.22	\$459.27	\$570.85	\$1,135.94
Blue Point2 POS D	● Individual	\$29.66	\$157.58	\$220.12	\$281.73	\$252.76
	● 2 Person	\$261.49	\$371.66	\$458.41	\$562.76	\$1,109.88
	● Family	\$500.91	\$683.52	\$819.41	\$957.97	\$1,470.46
	● One Parent Family	\$280.75	\$420.26	\$509.84	\$621.58	\$1,208.50
Blue PPO <i>(outside Rochester area)</i>	● Individual	\$279.20	\$448.51	\$543.49	\$639.35	\$791.16
	● 2 Person	\$654.73	\$956.11	\$1,108.24	\$1,282.05	\$1,726.12
	● Family	\$1,003.19	\$1,437.41	\$1,632.03	\$1,856.09	\$2,129.35
	● One Parent Family	\$708.72	\$995.63	\$1,140.23	\$1,319.59	\$1,794.21
Dental Coverage - Standard	● Individual	\$33.03	\$33.03	\$33.03	\$33.03	\$33.03
	● 2 Person	\$77.26	\$77.26	\$77.26	\$77.26	\$77.26
	● Family	\$117.59	\$117.59	\$117.59	\$117.59	\$117.59
Dental Coverage - Enhanced	● Individual	\$42.24	\$42.24	\$42.24	\$42.24	\$42.24
	● 2 Person	\$100.22	\$100.22	\$100.22	\$100.22	\$100.22
	● Family	\$153.03	\$153.03	\$153.03	\$153.03	\$153.03

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