



# 2024 Benefits Cost & Coverage **INFORMATION GUIDE**

A comparison of benefit coverage and cost supplement information.

Baylor  
College of  
Medicine

## RESIDENTS AND CLINICAL POSTDOCTORAL FELLOWS

Hello, I'm  
**alex**<sup>®</sup>

**IMPORTANT: Alex just teaches you about your benefits - he does NOT enroll you!**

**YOU MUST LOG INTO MY BAYLOR BENEFITS (WEX) TO ENROLL!**

Alex is your virtual BCM Benefits Counselor! He is the host of an interactive conversation that guides you through the process of learning about your benefits. The experience is:

- Highly interactive, engaging, made by video game developers
- Funny and Alex speaks in plain English—no insurance jargon
- Personalized and customized for each employee
- Like a real conversation—with a benefits expert
- Can be accessed anytime, anywhere there is an internet connection
- Totally anonymous

Alex will assist you with everything from learning about a best-fit medical plan option to calculating life insurance you might need. Don't know what FSA, HSA or LTD means? After five minutes, you'll be out of the dark. Dental insurance? 403(b)? Disability? Alex can help!

[www.myalex.com/bcm/2024](http://www.myalex.com/bcm/2024)

## CORE BENEFITS

The following Core Benefits are provided to eligible trainees at no cost. Additional information about these benefits is located on the BCM InTouch intranet > Services/Resources > Business Administrative > Human Resources > Benefits > Benefit Programs > Benefits at a Glance page.

### Adoption Assistance

Baylor provides adoption assistance reimbursement not to exceed \$3,000 per child for expenses related to adoption agency and placement fees, attorney fees and court costs, immunizations relating to international adoption and reasonable and necessary travel expenses. There is a lifetime maximum of two (2) adoptions per household.

### Basic Life Insurance

Baylor provides two times your base annual salary including applicable fee income (rounded up to the nearest \$1,000) to a maximum of \$125,000. Life insurance benefits are payable as a result of death from most causes.

### Basic Accidental Death & Dismemberment Insurance (AD&D)

Baylor provides one times your base annual salary including applicable fee income (rounded up to the nearest \$1,000) to a maximum of \$1,000,000. AD&D benefits are paid if you die, sustain a dismembering injury, or lose the use of limbs, sight, or hearing as the result of an accident.

### Bright Horizons Care Advantage

Bright Horizons provides backup care for healthy dependent children and mildly ill or recuperating children, adults, and elders. Twenty days of center-based or in-home care are available per employee, per academic year (July 1 – June 30) for a small copay. Bright Horizons provides center-based backup childcare for healthy dependent children between the ages of 6 weeks through 12 years when regular childcare arrangements break down.

### Employee Assistance Program (EAP)

Optum EAP provides professional, confidential counseling to you and your family members for a wide range of issues including emotional distress, marital problems, alcohol/drug abuse, and interpersonal and family problems.

### Financial Coaching by Ayco

Ayco provides services through financial coaching to help employees develop a comprehensive financial plan and goals.

### House Staff Psychiatric Counseling Service

The Psychiatric Counseling Service provides confidential, free counseling to you and your spouse/domestic partner for a wide range of issues including emotional distress, marital problems, alcohol/drug abuse and interpersonal and family problems.

### Long Term Disability (LTD)

Baylor provides disability coverage should you become seriously ill or sustain a serious injury requiring your absence from work for more than 180 days. If your claim is approved, LTD benefits provide 60 percent of your base monthly earnings including applicable fee income up to a maximum monthly benefit of \$32,000.

### Short Term Disability (STD)

Baylor provides STD coverage for you in the event you become ill or sustain an injury. Once you miss work for 30 consecutive calendar days due to illness or injury including pregnancy and you are approved for benefits, this plan provides you with 60 percent of your pay up to a \$750 per week maximum. This program's premium is paid by Baylor and any benefit received by you is taxable income. Coverage is subject to the approval of the insurance company and could be denied.

### Paid Time Off (PTO)

Paid Time Off (PTO) – Baylor provides 9 days of paid time off each academic year. The days must be used for special circumstances and any requests are approved at the Program Director's discretion.

### Sick Pay

Baylor provides replacement of your salary in the event of short-term illness or injury of yourself or an immediate family member. You are entitled to 14 days of paid sick time each academic year. No more than 10 days per calendar year can be used for an immediate family member.

### Vacation Pay

Residents and Fellows are eligible for 21 days of vacation time per academic year. Vacation days used during the course of the year are deducted from the bank of days.

### BeWell by BCM Well-Being

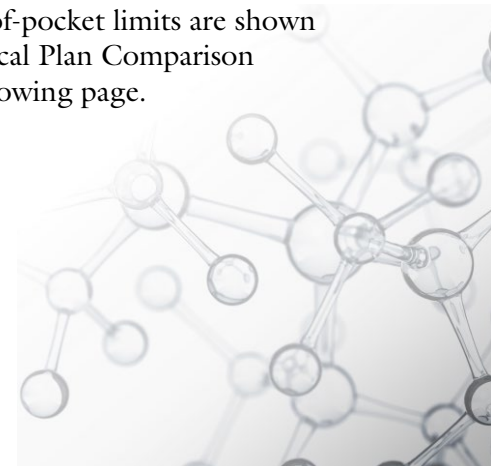
Baylor's award-winning wellness program, BCM BeWell, offers employees educational opportunities, healthy eating and fitness center discounts, fun and exciting challenges, biometric screenings, an interactive wellness portal, and much more!

## HEALTHCARE CHOICES & COSTS

Baylor College of Medicine's Comprehensive Medical Plan offers one medical option for Baylor Residents and Clinical Postdoctoral Fellows. This option is administered by UnitedHealthcare (UHC) and utilizes the Choice Plus network of health care providers. Baylor offers an enhanced custom network made up of certain Baylor St. Luke's physicians (BCN) and facilities. This enhanced BCN network provides lower copays and higher coinsurance levels. A list of participants is located on the Human Resources – Benefits intranet page. ***The Affordable Care Act requires a social security number for ALL dependents enrolled in the medical plans offered by Baylor.***

### ResidentCare PPO Option

- The ResidentCare PPO Option utilizes a network of physicians at special negotiated rates. Choice Plus network provider information is available online at [www.myuhc.com](http://www.myuhc.com), or you can call 1.877.BAYLOR1 (1.877.229.5671).
- Baylor offers an enhanced custom network made up of certain Baylor St. Luke's physicians (BCN) and facilities. This enhanced BCN network provides lower copays and coinsurance levels. A list of participants is located on the Human Resources - Benefits intranet page.
- You can go to any physician or medical facility for services in a PPO regardless of whether they are in or out-of-network. Your annual deductible, copayment levels, and annual out-of-pocket maximum will be affected by whether or not you use a network physician or medical facility.
- There is a deductible if you use a PPO network facility or hospital. The deductible does not apply to physician office visits; however, a copay is required.
- There is a lower copay to see certain Baylor or St. Luke's physicians or facilities (BCN).
- Infertility treatment and testing MUST occur at the Baylor Family Fertility Center or a UHC Center of Excellence. The lifetime maximum for Infertility Testing & Treatment is \$15,000 (medical) and \$3,500 (pharmacy).
- Emergency room (ER) treatment within the network is subject to a copay, and the remaining expenses are paid at 90 percent for the UHC Choice Plus network or 95 percent for the BCN network after your deductible is met until you reach your out-of-pocket maximum.
- Any covered services provided in an in-network Urgent Care or Convenience Care facility will be subject to a copay.
- Copays do not apply toward the deductible, including copays for prescription drugs and visits to physicians, Urgent Care facilities, or ERs.
- Medical and prescription drug copays, coinsurance and deductible payments apply toward the out-of-pocket maximum. For example, if you are required to pay 10 percent of the network medical expense, that dollar amount will go toward satisfying your annual out-of-pocket maximum.
- Any service provided in a PPO network physician's office including charges for office visits, treatment, and testing will be subject to a copay (copay based on Primary Care or Specialist services).
- Virtual office visits are available for non-emergency conditions like flu, cold, pink eye rashes and fever. The cost is your normal PCP copay in the UHC network. Virtual visits does not include coverage for behavioral health.
- If you select a physician outside the Choice Plus network or the BCN network (out-of-network), your expenses are subject to a larger deductible, and negotiated rates are paid at a 50 percent coinsurance rate.
- When you reach your annual out-of-pocket maximum, negotiated rates are paid at 100 percent for the remainder of the calendar year. Specific out-of-pocket limits are shown on the 2024 Medical Plan Comparison located on the following page.





# HEALTHCARE CHOICES & COSTS

## ResidentCare PPO Option (CONTINUED)

Medical Plan		You Pay		Baylor Pays	Total Monthly Cost
		Semi-Monthly	Monthly	Monthly	
Resident Care PPO	Individual Only	\$0	\$0	\$638.72	\$638.72
	Individual + Spouse	\$183.73	\$367.46	\$1,507.49	\$1,874.95
	Individual + Child(ren)	\$136.51	\$273.02	\$1,308.55	\$1,581.58
	Individual + Family	\$244.26	\$488.51	\$1,929.66	\$2,418.17

\* If you are providing coverage for your domestic partner who is not a tax dependent, the portion of the premium relating to your domestic partner will be deducted on an after-tax basis and the remaining balance of the premium will be paid on a pre-tax basis. Contact HR-Benefits at 713.798.1500 or ask-residentcare@bcm.edu if you have additional questions.

## INSURANCE TERM GLOSSARY

**Coinsurance** percent of expense you pay

**Convenience Care Facility** health care clinics located in retail stores, supermarkets, and pharmacies that treat minor illnesses and provide preventive health care services (i.e., CVS Minute Clinic, and Walgreens Healthcare Clinic, etc.)

**Copay** fee you pay for specific services in plan

**Deductible** amount you pay before the Plan begins to pay

**Emergency Care** care provided due to acute life-threatening situations including excessive bleeding, chest pains, loss of consciousness

**In-network** services you receive from physicians/hospitals within the network (fees have been discounted)

**Newborn Care** any claim for a newborn that experiences health issues (including jaundice) will not be processed until the baby is added as your dependent within 60 days of birth

**Out-of-network** services you receive from a physician or hospital outside the network (you pay retail for these services) and charges are subject to negotiated rates

**Out-of-pocket** how much you pay before the Plan begins to pay 100% of claims for the remainder of the calendar year

**PCP** a Primary Care Physician (PCP) is a medical doctor who provides both the first contact for a person with an undiagnosed health concern as well as continuing care of varied medical conditions (All doctors consisting of Family Practice, General Practice, Internal Medicine, and Pediatrics.)

**Urgent Care** Facility a facility used to treat patients who have an injury or illness that requires immediate care but is not serious enough to warrant a visit to an emergency room

# MEDICAL PLAN OPTIONS COMPARISON CHART

Baylor Custom Network(BCN) = Baylor St. Luke's | UHC Network = UnitedHealthcare Network

Services	In-Network	Out-of-Network																											
<b>ANNUAL MAXIMUM</b>	No annual maximum																												
<b>ANNUAL DEDUCTIBLE</b>	\$150 per person/\$450 per family	\$350 per person/\$1,050 per family																											
<b>ANNUAL OUT-OF-POCKET MAX</b> Includes deductible, medical & Rx copays	\$1,500 per person/\$4,500 per family	\$7,500 per person/\$22,500 per family																											
<b>AMBULANCE SERVICE</b>	Plan pays 90%	Plan pays 90%																											
<b>ANCILLARY SERVICES</b> Such As: Radiology, Pathology, Anesthesiology, Laboratory, X-Ray	Plan pays 90% after deductible	Plan pays 50% after deductible																											
<b>CHIROPRACTIC MANIPULATION</b>	Plan pays 90% after deductible	Plan pays 50% after deductible																											
	Limited to 35 visits per calendar year																												
<b>NEW - VIRTUAL OFFICE VISITS WILL HAVE THE SAME COPAY AS IN-PERSON OFFICE VISITS.</b>																													
<b>OFFICE VISIT - BCN NETWORK<sup>1</sup></b>	\$15 copay	N/A																											
<b>OFFICE VISIT/VIRTUAL OFFICE VISIT - UHC NETWORK</b>	\$25 copay	Plan pays 50% after deductible																											
<b>SPECIALIST - BCN NETWORK<sup>1</sup></b>	\$15 copay	N/A																											
<b>SPECIALIST - UHC NETWORK</b>	\$25 copay	Plan pays 50% after deductible																											
<b>DURABLE MEDICAL EQUIPMENT<sup>2</sup></b>	Plan pays 90% after deductible	Plan pays 50% after deductible																											
	Pre-authorization required for any item more than \$1,000.																												
<b>EMERGENCY ROOM CARE - BCN NETWORK<sup>1</sup></b>	Plan pays 95% after you pay \$75 copay and deductible Emergency care copay waived if admitted	Plan pays 90% after you pay \$75 copay and deductible Emergency care copay waived if admitted																											
<b>EMERGENCY ROOM CARE - UHC NETWORK</b> Acute Life-Threatening Situations/Excessive Bleeding/ Chest Pains/Loss of Consciousness	Plan pays 90% after you pay \$75 copay and deductible Emergency care copay waived if admitted	Plan pays 90% after you pay \$75 copay and deductible Emergency care copay waived if admitted																											
<b>HOME HEALTH CARE<sup>2</sup></b>	Plan pays 90% after deductible	Plan pays 50% after deductible																											
	Limited to 60 visits per calendar year.																												
<b>HOSPICE CARE</b>	Plan pays 90% after deductible	Plan pays 50% after deductible																											
	Limited to 6 months total/maximum of 30 days inpatient/\$25,000 lifetime maximum																												
<b>HOSPITAL STAY - BCN NETWORK<sup>1</sup></b>	Plan pays 95% after \$100 hospital copay and deductible	N/A																											
<b>HOSPITAL STAY - UHC NETWORK<sup>2</sup></b>	Plan pays 90% after \$100 hospital copay and deductible	Plan pays 50% after \$250 hospital copay and deductible																											
<b>NEWBORN CARE - BCN NETWORK<sup>1</sup></b>	Plan pays 95% after deductible	N/A																											
	Charges will not be covered unless newborn is enrolled within 60 days of birth. Contact Benefits at 713.798.1500.																												
<b>NEWBORN CARE - UHC NETWORK<sup>2</sup></b>	Plan pays 90% after deductible	Plan pays 50% after deductible																											
	Charges will not be covered unless newborn is enrolled within 60 days of birth. Contact Benefits at 713.798.1500.																												
<b>OUTPATIENT SURGERY - BCN NETWORK<sup>1</sup></b>	Plan pays 95% after \$100 hospital copay and deductible	N/A																											
<b>OUTPATIENT SURGERY - UHC NETWORK<sup>2</sup></b>	Plan pays 90% after \$100 hospital copay and deductible	Plan pays 50% after \$250 hospital copay and deductible																											
<b>THERAPY</b> Physical/Cardiac/Speech Pulmonary/Occupational	Plan pays 90% after deductible	Plan pays 50% after deductible																											
	60 visits per condition annually (limits apply). See SPD for details.																												
<b>PRESCRIPTION DRUGS</b> Brand name drugs covered only when prescribed and specified in writing by a physician	<table border="1"> <thead> <tr> <th>Copay</th> <th>Short-term 30-day supply (retail)</th> <th>Mail-order 90-day supply<sup>3</sup></th> </tr> </thead> <tbody> <tr> <td>Tier 1 (generic)</td> <td>\$10</td> <td>\$20</td> </tr> <tr> <td>Tier 2 (preferred)</td> <td>\$25</td> <td>\$50</td> </tr> <tr> <td>Tier 3 (non-preferred)</td> <td>\$50</td> <td>\$100</td> </tr> <tr> <td><b>Specialty</b></td> <td></td> <td>N/A</td> </tr> <tr> <td>Tier 1 (generic)</td> <td>\$100 copay</td> <td></td> </tr> <tr> <td>Tier 2 (preferred)</td> <td>\$150 copay</td> <td></td> </tr> <tr> <td>Tier 3 (non-preferred)</td> <td>\$225 copay</td> <td></td> </tr> <tr> <td colspan="3">Preventative covered at 100%</td> </tr> </tbody> </table>	Copay	Short-term 30-day supply (retail)	Mail-order 90-day supply <sup>3</sup>	Tier 1 (generic)	\$10	\$20	Tier 2 (preferred)	\$25	\$50	Tier 3 (non-preferred)	\$50	\$100	<b>Specialty</b>		N/A	Tier 1 (generic)	\$100 copay		Tier 2 (preferred)	\$150 copay		Tier 3 (non-preferred)	\$225 copay		Preventative covered at 100%			Not covered unless CVS/Caremark network pharmacy is used
Copay	Short-term 30-day supply (retail)	Mail-order 90-day supply <sup>3</sup>																											
Tier 1 (generic)	\$10	\$20																											
Tier 2 (preferred)	\$25	\$50																											
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Preventative covered at 100%																													
<b>SKILLED NURSING FACILITY</b>	Plan pays 90% after deductible	Plan pays 50% after deductible																											
	Limited to 100 days per calendar year																												
<b>URGENT CARE FACILITY</b>	\$25 copay <sup>4</sup>	Plan pays 50% after deductible <sup>4</sup>																											
<b>WELLNESS BENEFIT</b> Including but not limited to: Annual Physical, Well-Child Exam, Well-Woman Exam, Mammograms, Prostate Screening	Plan pays 100%	Plan pays 100%																											

<sup>1</sup> Refer to the BCN Network list located on the Human Resources - Benefits intranet page for more information about the providers and facilities included in the custom network.  
<sup>2</sup> All plans require pre-authorization for all out-of-network inpatient hospitalizations, inpatient chemical dependency/mental health stays, outpatient surgical procedures, home health care services, and skilled nursing services. All durable medical equipment over \$1,000 regardless of network status must be pre-authorized. Failure to pre-authorize as stated will result in a \$500 penalty. Call UnitedHealthcare at 1.877.BAYLOR1 (1.877.229.5671) at least 48 hours prior to the request.  
<sup>3</sup> For added convenience, 90-day mail-order prescriptions can be picked up at your local CVS pharmacy.  
<sup>4</sup> May be subject to deductible and coinsurance for ancillary services.  
\* Specific drugs are paid at 100% per the Affordable Care Act and Internal Revenue Service and are available for review on the Human Resources - Benefits intranet page.

# HEALTHCARE CHOICES & COSTS

**Dental PPO Plan** Baylor's Comprehensive Medical Plan offers one dental plan administered by UnitedHealthcare (UHC). You can choose to seek dental treatment in the UHC dental network, Dental Options PPO, or outside the network. A higher level of dental benefit coverage is provided when you use UHC dental network providers. Your annual deductible and copayments are affected by whether or not you use a network or out-of-network provider. Network provider information is available at [www.myuhc.com](http://www.myuhc.com)

Service Category	In-Network	Out-of-Network	
Annual Deductible for Basic & Major Services	\$50/participant   \$150/family	\$100/participant   \$300/family	
Annual Maximum Benefit for Basic & Major Services	\$3,000/participant	\$2,000/participant	
Services	In-Network You pay/Plan pays	Out-of-Network You pay/Plan pays	Description of Services
<b>Preventative</b>	0% / 100%	20% / 80%	<ul style="list-style-type: none"> <li>Two oral exams and cleanings per year</li> <li>Bitewing X-rays: limited to two series per calendar year</li> <li>Two periodontal prophylaxis per year</li> </ul>
<b>Basic</b>	10% / 90%	30% / 70%	<ul style="list-style-type: none"> <li>Emergency palliative treatment</li> <li>Fillings</li> <li>Fixed space maintainers</li> </ul>
<b>Major</b>	20% / 80%	50% / 50%	<ul style="list-style-type: none"> <li>Anesthesia</li> <li>Crowns</li> <li>Inlays/Onlays</li> <li>Bridgework</li> <li>Dentures</li> <li>Oral Surgery*</li> <li>Root Canals</li> <li>TMJ Treatment</li> </ul> <p>*Includes extractions; subject to \$5,000 lifetime maximum</p>
<b>Orthodontia</b>	40% / 60%*	50% / 50%*	<ul style="list-style-type: none"> <li>Appliances and services to correct the positioning of teeth</li> <li>Benefit available for children through age 18 only</li> </ul> <p>* Lifetime maximum/participant: \$2,500 (in-network); \$1,500 (out-of-network)</p>

Dental PPO		You Pay		Baylor Pays	Total Monthly Cost
		Semi-Monthly	Monthly	Monthly	
		Individual Only	\$0	\$0	
Individual + Spouse	\$15.92	\$31.83	\$56.41	\$88.24	
Individual + Child(ren)	\$11.37	\$22.75	\$50.78	\$73.53	
Individual + Family	\$29.30	\$58.60	\$73.78	\$132.38	

**Voluntary Vision Care Plan** Administered by Eyemed, which provides a network of thousands of optometrists, opticians, and ophthalmologists. You can seek vision care services in the vision network, Insight, or outside the network. Provider information is available to you online at [www.eyemedvisioncare.com](http://www.eyemedvisioncare.com). Employees may receive enhanced benefits for exams and frames by using Plus Providers within the current network.

Service	Your Cost	Out-of-Network Reimbursement
<b>Exam with dilation as necessary (once annually)</b>	\$10 Copay	\$45
<b>Frames (once every 12 months)</b>	\$140 allowance; 80% of balance over \$140	\$70
Standard Plastic Single Vision	\$10 Copay	\$30
Bifocal	\$10 Copay	\$50
Trifocal	\$10 Copay	\$65
Standard Progressive	\$10 Copay	\$80
Premium Progressive		
Tier 1	\$30 Copay	\$80
Tier 2	\$40 Copay	\$80
Tier 3	\$55 Copay	\$80
Tier 4	\$10 Copay; 80% of charge less \$120 allowance	\$80
<b>Contact Lenses</b>		
Standard Exam (fit & follow-up)	Paid in full; includes fit and two follow-up visits	\$40
Premium Exam (fit & follow-up)	10% off retail price, then apply \$40 allowance	\$40
Conventional Lenses (once every 12 months)	\$140 allowance; 85% of balance over \$140	\$105
Disposable Lenses (once every 12 months)	\$140 allowance, plus balance over \$140	\$105
Medically Necessary (once every 12 months)	Paid in full	\$200
<b>LASIK/PRK Vision Correction</b>	15% off retail price or 5% off promotional pricing	N/A

Vision Care		You Pay		Baylor Pays	Total Monthly Cost
		Semi-Monthly	Monthly*	Monthly	
		Individual Only	\$4.54	\$9.08	
Individual + 1 Dependent**	\$8.62	\$17.23	N/A	\$17.23	
Individual + Family**	\$12.70	\$25.40	N/A	\$25.40	

\*\*If you are providing coverage for your domestic partner who is not a tax dependent, the portion of the premium relating to your domestic partner will be deducted on an after-tax basis and the remaining balance of the premium will be paid on a pre-tax basis. Contact HR-Benefits at 713.798.1500 or [ask-insurance@bcm.edu](mailto:ask-insurance@bcm.edu) if you have additional questions.

# FSA AND OPTIONAL LIFE INSURANCE CHOICES & COSTS

## Flexible Spending Accounts (FSAs)

UnitedHealthcare is the administrator for FSAs. FSAs are subject to Internal Revenue Service rules and regulations. You must plan carefully when using an FSA because if you don't use the money in your FSA, you lose it. Expenses must be incurred in 2024 and you have until March 31, 2025 to file for reimbursement. When submitting an FSA claim for reimbursement, keep proof of claim submission including fax confirmation sheet or proof of mailing from the U.S. Postal Service.

### Healthcare FSA

- Set money aside before federal income and FICA taxes are withheld for reimbursement of out-of-pocket health care expenses not covered by a medical, dental, and/or vision plan.
- Health Care FSA maximum of \$3,200 on a pre-tax basis.
- Some eligible FSA expenses include your deductible, adult or children's orthodontics, Lasik surgery, copays for office visits or prescription drugs, and certain over-the-counter drugs as defined in the Patient Protection and Affordable Care Act.
- After you've made your initial contribution, if you wish you may log onto [www.myuhc.com](http://www.myuhc.com) and enroll for automatic reimbursement.

### Dependent Care FSA

- Set money aside before federal income and FICA taxes are withheld for reimbursement of child care and elder care expenses.
- Dependent Care FSA maximum is \$5,000 per family on a pretax basis.
- To be eligible for Dependent Care FSA reimbursement, you must be dependent upon a care provider in order to go to work.

### Health Care Spending Account MasterCard

(also used for Dependent Care expenses, if applicable)

- Provided to all employees who participate in a FSA
- Instant payment for qualified medical, prescription, dental, vision care, and dependent care expenses directly from your FSA account

## Supplemental Life Insurance

See rates in table below

Life insurance coverage in addition to the Basic Life insurance benefit provided by Baylor at no cost to you (one and a half times your base annual salary).

- Choices are 1x, 2x, 3x, or 4x your base annual salary including applicable fee income up.
- Cost is based on your age.
- Rates are based on monthly cost per \$1,000 of coverage with a \$500,000 maximum (or \$1 million maximum benefit when combined with Basic Life).
- These premiums are not subject to pre-tax treatment and may increase during the calendar year due to change in age or salary.

**Example:** If you earn \$40,000 and are 37 years of age and you elect Supplemental Life coverage at two times your base annual salary, your amount of supplemental coverage is \$80,000 and your age factor is \$.054 per \$1,000 of coverage. Divide \$80,000 by 1,000 and multiply the result by \$.054 to calculate your monthly premium. ( $\$40,000 \times 2 = \$80,000 \div 1,000 = 80 \times \$.054 = \$4.32/\text{mo.}$ )

## Dependent Life Insurance

See rates in table below

Life insurance coverage for your dependents — spouse/ domestic partner and/or child(ren)

- Spouse/Domestic Partner: \$25,000 or \$50,000
- Child: \$10,000 for each eligible dependent child (through age 25); only one parent can cover child if both are BCM benefits eligible employees.
- Cost is based on your age for Spouse/Domestic Partner. \$1/month for child
- Rates are a flat monthly rate, and not subject to pre-tax treatment
- If you and your spouse are both BCM benefits eligible employees, you can't enroll your spouse for dependent life.

YOUR AGE	Under 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
<b>Supplemental Life: Cost Per \$1,000 Coverage</b>	\$0.038	\$0.043	\$0.054	\$0.081	\$0.141	\$0.230	\$0.378	\$0.534	\$1.015	\$1.609
<b>Dependent Life-Spouse: Monthly Cost for \$25,000 of Coverage</b>	\$0.95	\$1.08	\$1.35	\$2.03	\$3.53	\$5.75	\$9.45	\$13.35	\$25.38	\$40.23
<b>Dependent Life-Spouse: Monthly Cost for \$50,000 of coverage</b>	\$1.90	\$2.15	\$2.70	\$4.05	\$7.05	\$11.50	\$18/90	\$26.70	\$50.75	\$80.45
<b>Dependent Life-Child: Monthly Cost for \$10,000 of coverage</b>	\$1.00									



## SUPPLEMENTAL AD&D AND VOLUNTARY PROGRAMS CHOICES & COSTS

### Supplemental Accidental Death & Dismemberment Insurance (AD&D)

Supplemental AD&D insurance coverage is in addition to the Basic AD&D insurance benefit provided by Baylor at no cost to you (one times your base annual salary).

- Choices are available in increments of \$100,000 up to a maximum election of \$1,000,000
- Coverage can be elected for yourself only or you and your eligible dependents
- Cost is based on the principal sum of insurance in force
- These premiums are not subject to pre-tax treatment

COVERAGE OPTION	EMPLOYEE ONLY <i>Flat Monthly Rate</i>	EMPLOYEE+ FAMILY <i>Flat Monthly Rate</i>
\$100,000	\$2.00	\$3.50
\$200,000	\$4.00	\$7.00
\$300,000	\$6.00	\$10.50
\$400,000	\$8.00	\$14.00
\$500,000	\$10.00	\$17.50
\$600,000	\$12.00	\$21.00
\$700,000	\$14.00	\$24.50
\$800,000	\$16.00	\$28.00
\$900,000	\$18.00	\$31.50
\$1,000,000	\$20.00	\$35.00
FAMILY COVERAGE	WITH CHILDREN	WITHOUT CHILDREN
SPOUSE/ DOMESTIC PARTNER	50% of Employee Coverage	60% of Employee Coverage
CHILD(REN)	\$50,000 Each Child	N/A

### Voluntary Group Legal Services

- Legal services are offered at a low monthly fee for you and your eligible dependents through LegalEASE.
- Provides access to experienced attorneys to assist you by telephone or in person.
- Examples of some covered services:
  - Bankruptcy
  - Child support
  - Codicils
  - Consumer protection
  - Divorce
  - Identify theft defense
  - Living trusts
  - Living wills
  - Powers of attorney
  - Traffic ticket dismissal
  - Wills
- Cost is \$17.90 per month (\$8.95 semi-monthly).

### TO ENROLL, CANCEL OR LEARN MORE

Call 1.888.416.4313 (press #1) or visit [legaleaseplan.com/bcm](http://legaleaseplan.com/bcm)

## RETIREMENT

### 403(b) Tax-Deferred Investment Plan

You are automatically enrolled at 3% of your salary in this voluntary plan that allows you to save for retirement on a tax-deferred basis. You can also choose to make Roth contributions on an after-tax basis. Your contributions are automatically invested in the State Street Target Retirement Funds through Fidelity, but you may elect to invest other funds chosen by BCM for the Plan with Fidelity Investments or TIAA. You may increase/decrease contributions at any time, up to the maximum allowed by law.

Your savings and investment earnings grow tax-free until you request a distribution of your funds.

You are always 100% vested in the money that you contribute to the 403(b) plan. The full value of your 403(b) Tax-Deferred Investment Plan account balance is payable when you retire, if you become disabled or die before retirement, or when you terminate your employment.

### Ayco Financial Coaching

Goldman Sachs  
Ayco Personal Financial Management

Ayco Goldman Sachs is a national leader in financial counseling.

- A unique approach to comprehensive financial counseling
- Pairing a digital platform with unlimited phone-based financial coaching
- Financial coaches help you develop a comprehensive financial plan focused on your goals and priorities



KNOWLEDGE IS POWER

Coaches can help with all areas of your financial life, including:

- Tax planning
- Investment education
- Retirement planning
- Estate planning
- Debt Management (student loans, mortgages, credit)

*The Ayco Company, L.P. ("Ayco"), is a subsidiary of The Goldman Sachs Group, Inc., and an affiliate of Goldman Sachs & Co. LLC, a worldwide, full-service investment banking, broker-dealer and asset management organization.*

## BCM BeWell - A Multidimensional Program Designed for YOU!

BCM BeWell works to educate and inspire a culture of healthy living and wellness throughout the College. Our mission is to meet you where you are in your health and well-being journey. Through our extensive network of tools and resources, we are dedicated to helping you make healthy choices and help you Live Well, Work Well, and BeWell.



### FINANCIAL ONE-ON-ONE

Finances can be tricky if you do not have the right tools. BCM BeWell will continue setting employees up for success by offering **200 BCM BEWELL POINTS** for meeting with a Fidelity or TIAA representative and **250 BCM BEWELL** Points for meeting with an Ayco coach and completing a financial assessment.



### LOOKING FOR AN EASY WAY TO MONITOR HEART HEALTH? HelloHeart

Your benefits include access to HelloHeart. Employees and dependents with high blood pressure and/or taking blood pressure medication are eligible to enroll. When you sign up, you'll receive a free FDA-approved Bluetooth blood pressure monitor as part of your comprehensive heart health program.



### PARTNER PROGRAMS

- Camp Gladiator
- Fitness Center Discounts
- Reason2Race
- Maternity Management
- Real Appeal
- WW
- BCM Well-Being Center

### BEWELL TOGETHER

Your spouse or domestic partner is invited to participate in the BCM BeWell portal, Vitality! Together, you can complete healthy activities that fit your lifestyle, earn points for each activity achieved and get rewarded!

Register today at [www.powerofvitality.com](http://www.powerofvitality.com)

### REAL APPEAL

is an online weight-loss program available at no cost if you, your spouse or adult dependent are enrolled in a Baylor health plan option offered through UnitedHealthcare. The step-by-step online program offers a coach who will lead online meetings to help you lose weight by building healthy habits over time. You will receive tools to track food, activity and weight loss progress in addition to recipes, workout videos and more!



# WORK-LIFE PROGRAMS

## Employee Assistance Program (EAP)

The Employee Assistance Program from Optum EAP offers access to free, convenient, and confidential services, including counseling with a licensed mental health professional. Some of the issues that the EAP can offer services for include:

- Alcohol and drug problems
- Anger management
- Work conflicts
- Relationship Issues
- Financial counseling
- Legal services
- Illness/death of loved ones
- Parenting concerns
- Stress, anxiety, and depression

Optum EAP is here to help you and your family get the most out of life with up to three sessions with an experienced consultant for each issue or problem every calendar year. **Contact Optum EAP at 1.800.622.7276**

## Bright Horizons

**BACK-UP CHILD AND ADULT/ELDER CARE** High-quality, low-copay replacement care for your child in your home or in a center; in-home care for qualified dependents anywhere in the U.S. any time you need an extra hand.

Benefits-eligible employees can access up to 20 days/child or adult family member per academic year (July 1 – June 30) of family care when regular arrangements fall through. Get immediate access to care support at subsidized rates; center-based child care is \$15/child or \$25/family; in-home care for children or adult/elder dependents is \$6/hour.

**NANNIES, ELDER CARE, PET CARE, AND MORE** Free access to a database of nannies and sitters for evening and weekend care, elder care resources, and pet sitters. Also get preferred enrollment access and discounts for regular center-based child care.

**BRIGHT HORIZONS DEPENDENT ELIGIBILITY INFORMATION** Bright Horizons back-up and elder care services are intended for use during scheduled work hours when you are expected to be working.

### Dependents under Age 26

A dependent under age 26, for purposes of the Bright Horizons Program, is defined as:

- your natural child or your domestic partner's child
- your stepchild
- your legally adopted child
- a child placed with you for adoption or foster care or,
- a child for whom you are the legal guardian.

### Dependents Age 26 and older

A dependent age 26 or older, for purposes of the Bright Horizons Program, is defined as:

- your adult child (who is permanently physically or mentally disabled and who remains permanently disabled and dependent upon you for support)
- your spouse/domestic partner or,
- your adult/elder relatives such as parents, parents-in-law, grandparents and siblings.

**COLLEGE COACH** Through interactive online webinars, this program helps you and your children prepare, develop and adopt constructive learning and working habits for a lifetime of success in school. This program also provides access to webinars to help parents save for college and counseling services for high school students applying to and selecting colleges.

- New hires: Use BCM as your first-time code to register at <https://passport.getintocollege.com/CorpPasscode>
- Existing employees: If you are already registered for Bright Horizons Back-Up Care, sign in using your Back-Up Care username and password.

## REGISTER AT NO COST

<https://clients.brighthouse.com/bcm>  
USERNAME: BCM | PASSWORD: Benefits4You (case sensitive)

## OR CALL

**877.BH.CARES (242.2737)**

## House Staff Psychiatric Counseling Service

The Psychiatric Counseling Service provides confidential, free counseling for you and/or your spouse/domestic partner. Consultation, counseling, brief psychotherapy and crisis intervention for 8 to 12 sessions is provided free of charge by a faculty member of the Baylor Department of Psychiatry. If you and/or your spouse/domestic partner are interested in obtaining counseling, you should contact the Psychiatric Counseling Service at 713.798.4881.

## Pet Insurance

For about \$1 a day, your pets can have nose-to-tail coverage for everything from shots to surgeries. Plus, you're free to use any vet, anywhere. Plans are available for dogs, cats, birds and exotic pets.

As a Baylor employee, you are eligible for a five percent discount on coverage for your pets.\* Premiums are paid through payroll deduction. You may enroll, change plans, or discontinue coverage at any time during the year.

Visit [www.petinsurance.com/bcmedu](http://www.petinsurance.com/bcmedu) or call 877.738.7874 for more information and to get a no-obligation quote.

*\*Discount applies to base medical or wellness plans only.*

# BAYLOR EMPLOYEE DISCOUNTS

- The Office of Communications and the Office of Human Resources have secured discounts for the Baylor College of Medicine community. A range of ongoing offerings, grouped by categories for convenience, is available in the right-hand navigation of the Baylor Employee Discounts site (<https://intouch.bcm.edu/sites/perks-and-discounts/SitePageModern/2280/perks-anddiscounts>). Providers include:
  - AAA Texas
  - AT&T/Verizon
  - Bank of America
  - Dell Computers
  - Dignity Memorial Funeral Services
  - Honey Baked Ham
  - Kidventure
  - Moody Gardens
  - The Houston Zoo, and many more.
- In addition, a number of short-term, seasonal or one-off, specials will be posted when available.
- Questions? Email [pa@bcm.edu](mailto:pa@bcm.edu) or [ask-worklife@bcm.edu](mailto:ask-worklife@bcm.edu).

# BAYLOR EMPLOYEE DISCOUNTS

## Social Security

Social Security is financed by FICA payroll taxes and is paid by both you and Baylor. The maximum is adjusted annually.

## Unemployment Compensation

Your employer reports your wages to the Texas Workforce Commission. If you become unemployed, you may be eligible for unemployment benefit payments. The Texas Workforce Commission determines your eligibility for benefits as well as the amount to which you are entitled. Baylor pays the full cost of this insurance protection.

## Worker's Compensation

This insured program provides benefits in the event you become injured or ill during the course of your work. You are covered by Workers' Compensation from the date you are hired for medical, disability, dismemberment, occupational diseases, and death benefits. The cost of this program is paid by Baylor.

# CONTACT US

## HUMAN RESOURCES - BENEFITS OFFICE



**713.798.1500**  
Dial 7 to speak with the next available benefits representative

**GENERAL BENEFITS**  
[ask-insurance@bcm.edu](mailto:ask-insurance@bcm.edu)

**RETIREMENT**  
[ask-retirement@bcm.edu](mailto:ask-retirement@bcm.edu)

**BCM WELL-BEING**  
[wellness@bcm.edu](mailto:wellness@bcm.edu)

**IN PERSON**  
Fannin Tower  
6624 Fannin St., Suite 1800  
Houston, TX 77030

The materials provided during Open Enrollment serve as a summary of information and outlines material modifications to the benefit programs described in the official Summary Plan Descriptions, Summary of Benefit Coverage, Certificates of Coverage and other plan documents. If there is a conflict between any written or oral statement, the plan documents will govern in all cases. These documents and other federally required notices can be found on BCM InTouch at <https://intouch.bcm.edu/sites/benefits/sitepagemodern/69306/benefits>. The information contained in these documents supersedes and replaces all previous material you may have received. It is important that you are familiar with these documents because they advise you of the details of the coverage and your rights and obligations as an active or terminated employee. These documents also provide information regarding benefit coverage during leaves of absence, documentation required when you have a change in status, as well as various other examples and administrative information. If you are unable to access the BCM Intranet, the Human Resources - Benefits Office can send a hardcopy document to you via intra-institutional mail or regular mail to your home address of record at your request. BCM reserves the right to change or terminate these benefit plans at any time.