

# 2012

## GUIDE TO BENEFITS



### Represented Employees

*The Johns Hopkins Hospital*

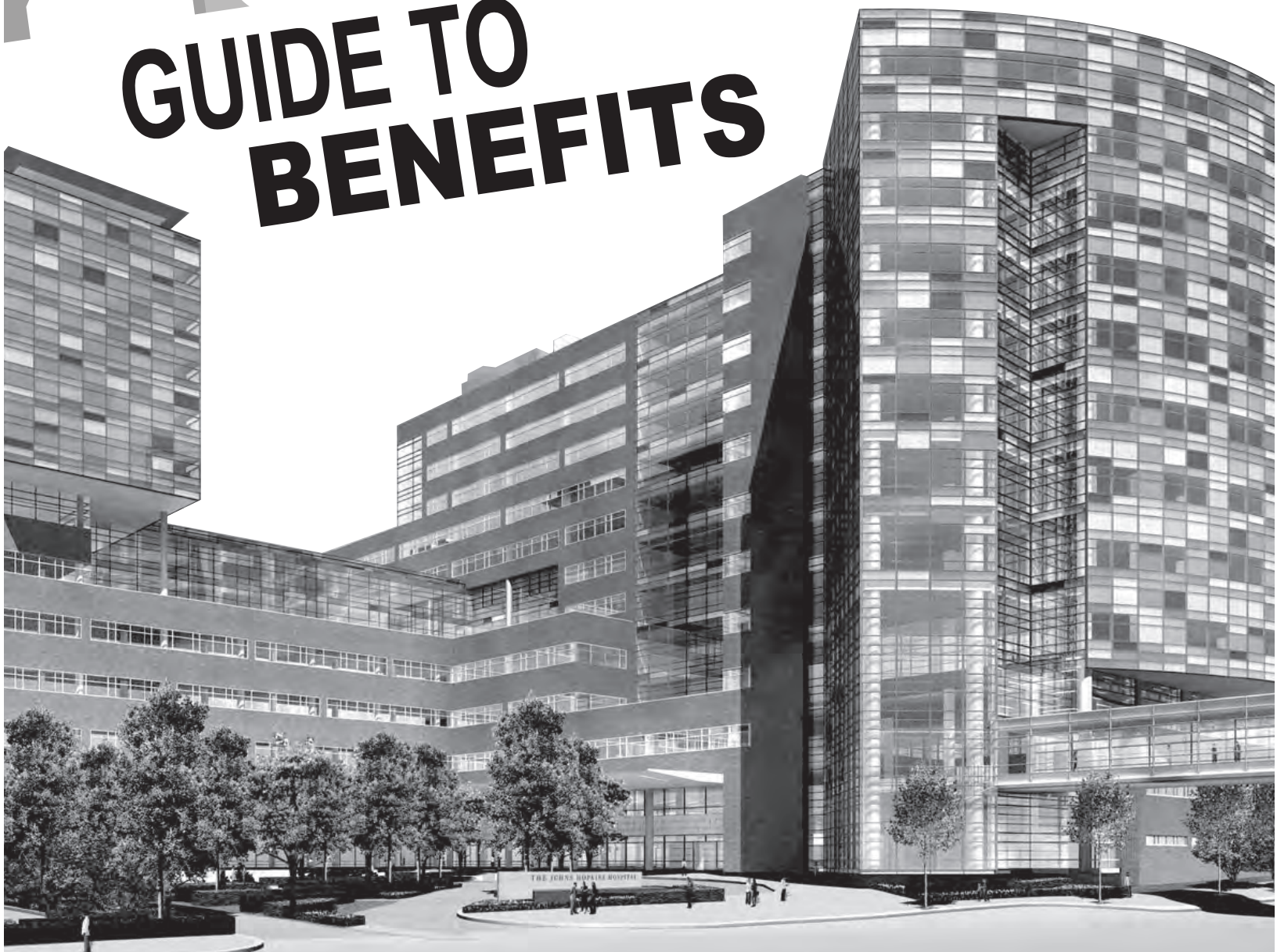


**JOHNS HOPKINS**  
MEDICINE



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*The Johns Hopkins Hospital*



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MEDICINE

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## IMPORTANT INFORMATION Phone Numbers

<b>Aflac</b>		410-729-8905	<a href="http://www.aflac.com">www.aflac.com</a>
<b>Bright Horizons</b>	Johns Hopkins Family Day Care Center	410-614-4111	<a href="http://www.jhbrighthorizons.org">www.jhbrighthorizons.org</a>
<b>Ceridian</b>	COBRA Questions	800-261-2393	
<b>EHP</b>	Care Management Program Claims or Coverage Questions	410-762-5213 410-424-4450	<a href="http://www.ehp.org">www.ehp.org</a>
<b>Employee Labor Relations</b>		410-955-6783	<a href="http://www.hopkinsmedicine.org/jhhr/consultinglaborrelations">www.hopkinsmedicine.org/jhhr/consultinglaborrelations</a>
<b>Faculty &amp; Staff Assistance Program (FASAP)</b>		443-997-7000	<a href="http://www.fasap.org">www.fasap.org</a>
<b>HR Service Center/ Benefits Office</b>		410-995-6208	<a href="http://www.hopkinsmedicine.org/jhhr">www.hopkinsmedicine.org/jhhr</a>
<b>Hyatt Legal Plans</b>	Prepaid Legal	800-821-6400	<a href="http://www.legalplans.com">www.legalplans.com</a>
<b>Johns Hopkins Federal Credit Union</b>		410-955-6116	<a href="http://www.jhfcu.org">www.jhfcu.org</a>
<b>Lincoln Financial Group</b>		410-955-5828	<a href="http://www.hopkinsmedicine.org/jhhr/pension">www.hopkinsmedicine.org/jhhr/pension</a>
<b>MetLife</b>	Auto & Homeowners Insurance Pet Insurance	800-GET-MET8	<a href="http://www.metlife.com/mybenefits">www.metlife.com/mybenefits</a>
<b>Occupational Health</b>		410-955-6211	<a href="http://www.hopkinsmedicine.org/hse/occupationalhealth">www.hopkinsmedicine.org/hse/occupationalhealth</a>
<b>Parents in a Pinch</b>	Back Up Child & Adult Care	800-688-4697	<a href="http://www.parentsinapinch.com">www.parentsinapinch.com</a>
<b>Pension Office</b>	Retiree Medical & Dental Retirement Questions	410-955-5970	<a href="http://www.hopkinsmedicine.org/jhhr/pension">www.hopkinsmedicine.org/jhhr/pension</a>
<b>Unum</b>	Long Term Care	888-868-6745	<a href="http://www.unum.com">www.unum.com</a>
<b>Wellnet</b>		410-955-9538	<a href="http://www.hopkinsmedicine.org/jhhr/wellnet">www.hopkinsmedicine.org/jhhr/wellnet</a>
<b>Workers' Compensation</b>		410-955-6433	<a href="http://www.hopkinsmedicine.org/hse/workerscompensation">www.hopkinsmedicine.org/hse/workerscompensation</a>
<b>WorkLife</b>	Child & Adult Care Referrals Live Near Your Work YMCA Child Care Center	443-997-7000	<a href="http://www.hopkinsworklife.org">www.hopkinsworklife.org</a>

# Introduction

Because we value the people who work here, The Johns Hopkins Hospital (JHH) is proud of the collection of benefits made available to you. Since the benefits provided to you are an important part of your total compensation as a Hopkins employee, you are encouraged to take some time to read this Guide and become familiar with its contents. This Guide gives you a brief description of the benefits offered and is not intended to be a complete source of information on the plans. For more detailed information, please refer to the Summary Plan Description available online at [www.hopkinsmedicine.org/jhr](http://www.hopkinsmedicine.org/jhr) or at the HR Service Center/Benefits Office, Phipps 455. As you review the Guide, please note the key information in this introduction section. This section was designed to answer some of the common questions new employees have when deciding to enroll in benefits.

## Things to Know and Consider Before You Enroll

- 1. Compare medical and dental plans.** This Guide gives you an outline on all available medical and dental plans. Take time to compare the differences and make a decision based on your family's needs.
- 2. Who is eligible?** All employees regularly scheduled to work 20 or more hours per week are eligible for most benefits.
- 3. Who can I cover?** Most legal dependents can be covered. This includes your legal spouse or same-sex domestic partner and your dependent children/stepchildren up to age 26.
- 4. What will I need to enroll?** You will need the social security numbers and birth dates for you and any dependents you wish to cover. You will also need a copy of your children's birth certificates as well as a copy of your marriage license or domestic partnership affidavit.
- 5. Is this Guide really important?** Johns Hopkins offers a variety of choices for benefit coverage, including many voluntary benefits. Take some time to review this Guide with your family and learn about them all. It will give you a description of all your options; however, more detailed information can be obtained by reading the Summary Plan Description, visiting the benefit section of the Human Resources Web site [www.hopkinsmedicine.org/jhhr](http://www.hopkinsmedicine.org/jhhr) or calling our HR Service Center/Benefits Office at 410-955-6208.
- 6. When is the deadline to enroll?** Failure to enroll on time results in a lack of coverage. All newly hired employees have **30 days** from their date of hire to complete the online enrollment and submit the appropriate documentation to the Human Resources department. However, the earlier the enrollment process is completed, the earlier I.D. cards can be processed and mailed. During the annual fall Open Enrollment period, you will be able to make any needed changes.
- 7. When and how can I make changes to my coverage?** Enrollment is done during your first 30 days of employment or during the Open Enrollment period. There are other times during the year when you can make changes, but only if you have a qualifying change in status or life event as specified by IRS regulations.
- 8. How do I pay for benefits?** Benefits are paid through payroll deduction on a bi-weekly basis; most are done as pre-tax deductions.
- 9. Where can I get help?** You can visit the HR Service Center/Benefits Office on the 4th floor of the Phipps Building or call 410-955-6208 to speak with a Benefits Specialist.

## Qualifying Status Changes

According to IRS regulations, if you have a family status change during the year, you may change your medical, dental, AFLAC and/or life insurance benefits within 30 days of the qualifying change. You must make your change through the online enrollment system and return the appropriate accompanying documentation to the HR Service Center/Benefits Office, Phipps 455, within the 30-day limit. Visit <https://portal.johnshopkins.edu/jhhsenrollment> to make your change.

### Qualifying changes include

- Marriage, divorce, legal separation or annulment
- Birth, adoption, placement for adoption or appointment of legal guardianship of a child
- Death of a dependent
- Gain or loss of a dependent's coverage
- A change in your or your dependent's employment status due to a switch between full-time and part-time, a strike or lockout, or an unpaid leave of absence
- A significant change in the cost of coverage under a health plan provided by an independent, third-party provider
- A significant change in your or your spouse's medical care coverage that is related to your spouse's employment
- An unpaid leave of absence for you or your spouse under the Family and Medical Leave Act (FMLA)
- A change in your dependent's eligibility (e.g., due to being over the age limit)
- A change in your or your dependent's work site or residence, only if a change in residence will have an effect on your benefits
- A judgment, decree or order that requires you to cover a dependent
- Your or your dependent's eligibility for COBRA
- Your or your dependent's eligibility for Medicare or Medicaid (you may change the current election for the eligible person only)
- Same-sex domestic partners can only become uninvolved for reason of ending relationship (affidavit needs to be signed by both parties)
- Any other event that qualifies as a family status change under the Internal Revenue Code (with the approval of the plan administrator) to be consistent with the status change

You may only make benefit changes that are consistent with one of the qualifying family status changes listed above. You may change your level of medical coverage (i.e., yourself or family), but you may not change your medical plan.

## Open Enrollment

JHH provides an Open Enrollment period each year to give all employees an opportunity to review and/or elect any benefit plans for the next plan year.

The Open Enrollment period is held during the fall of each year, and all benefits elected during this period go into effect on January 1 of the following year. Prior to the start of every Open Enrollment period, the HR Service Center/Benefits Office notifies all eligible employees of the dates when elections can be changed.

Open Enrollment is the only time employees have to change coverage unless they have a qualifying status change. We highly recommend that all plan participants take advantage of this once-a-year opportunity to review benefit elections and adjust coverage to suit individual and family needs.

Healthy@Hopkins is a free program designed to help you stay healthy and avoid major illnesses. The key elements of the program are:

- A confidential personal wellness profile (PWP) to recognize and understand any current health hazards
- Health management programs to help you stop smoking, lose weight, reduce stress, start exercising, etc.
- Care management programs to help you manage chronic health conditions
- Healthy@Hopkins Rewards Program

## HEALTHY@HOPKINS REWARDS PROGRAM

This cutting edge program offers remarkable incentives to help you and your enrolled family members reach optimum health. Your membership in the Healthy@Hopkins Rewards Program gives you access to a wealth of health care knowledge. Once you've joined, whether you work online or make healthy choices daily, you can easily earn the points that lead to Wellness Rewards.

Joining is easy! Simply complete an application, one online health course, and a confidential Personal Wellness Profile. After becoming a member, simply meet the quarterly point requirement to earn your Wellness Rewards.

It literally pays to pay attention to *Your Good Health*. Employees regularly scheduled to work 30 or more hours per week and weekend option nurses earn a \$20 bi-weekly Wellness Reward each quarter after after meeting the quarterly point requirement. Employees regularly scheduled to work 20-29 hours per week earn a quarterly \$25 Wellness Reward.

Enroll now for *Your Good Health*. Log on to <https://portal.johnshopkins.edu/jhhsclasses> to join the Healthy@Hopkins Rewards Program today!

## PERSONAL WELLNESS PROFILE (PWP)

This short, private survey helps you understand your health risks and identifies areas that need improvement. The PWP is administered by Wellnet; JHHSC/JHH will not have access to any personal data that is gathered. Johns Hopkins Employer Health Programs (EHP) will analyze the combined data and provide JHHSC/JHH with consolidated reports to use in planning wellness programs and offerings. Paper copies of the PWP are available in the HR Service Center/Benefits Office in Phipps 455 or it can be completed online at <https://portal.johnshopkins.edu/jhspwp>.

If your PWP results show that you qualify for one of our asthma or diabetes care management programs, you may be eligible to obtain your condition-related prescription drugs for no co-pay for a period of time.

## CARE MANAGEMENT INCENTIVES

If you have already been diagnosed with a chronic condition such as asthma or diabetes, Healthy@Hopkins can teach you how to better manage it through Care Management Programs (CMP). While you're being treated, your condition-related medication can be purchased with no co-pay.

By completing the PWP and contacting EHP Care Management at 410-762-5213 to enroll in a CMP, you may qualify. If your medical claims show that you are currently being treated for diabetes or asthma, EHP may contact you directly. **If you agree to participate in the care management program for one of these conditions, you must sign an agreement. This agreement covers the actions you need to take to complete the program, and it will describe the rules around having your co-payments waived for condition-related prescription drug medication for a period of time.**

While you're enrolled in EHP's Care Management Program, you will be paired with a registered nurse who will:

- Work with you to set and achieve personalized health goals
- Provide you with education and resources for managing your symptoms
- Regularly review, with you, your medications, vital signs and other appropriate health information
- Help you work with your primary care provider and other specialist physicians to coordinate care

To find out more about the program, please call 410-762-5213 or (toll-free) 800-261-2396, or send an e-mail to [healthyhopkins@jhhc.com](mailto:healthyhopkins@jhhc.com).

## EMPLOYEE HEALTH AND WELLNESS CENTER

The Employee Health and Wellness Center is located on the 3rd floor in the Phipps Building. You are able to see a nurse practitioner for the treatment of pink eye, colds, sore throat, etc., without having to take time from work for off-site doctors appointments. A block of time is reserved daily, in the morning and at lunch time, for walk-ins. **There is no cost to you to be seen in the Employee Health and Wellness Center.** Call 410-614-1620 to make an appointment.

## Wellnet

Wellnet provides a variety of wellness-related programs and educational materials on a range of topics, including:

- Weight management, Smoking cessation, Prenatal counseling, Health screening/risk appraisals, Health fairs, and Exercise programs.

### HEALTH SCREENINGS

Health screenings are offered by Wellnet to all employees on all shifts. Screenings are staffed by health professionals, offering immediate results and include the following:

- Blood Pressure - Cholesterol/Glucose - Body Composition/Weight - Bone Density
- Personal Wellness Profile - Individualized Counseling

### SMOKING CESSATION PROGRAMS

If you're interested in participating in the "Kick Butt" campaign designed to help you put an end to tobacco use, Wellnet and EHP have many resources available to help you with your goal.

#### Programs and Products

- Prescription and non-prescription tobacco cessation products available through EHP Plans
- Health coaching (in person or telephone)
- FREE tobacco cessation quit kits
- Massage, acupuncture and reflexology
- Oral screenings

#### Smoking Cessation Classes

- Fresh Start Tobacco Cessation
- Tobacco Hypnosis
- Thinking about Quitting
- Tobacco Cessation Support Groups
- Understanding Tobacco Cessation Aids

### WALKING PROGRAM

The Wellnet/Healthy@Hopkins walking group, which meets inside the Wolfe Street lobby, walks for 30 minutes on Tuesdays and Fridays. For a schedule and maps of the many inside and outside walking routes of the East Baltimore campus and several off-site locations, please visit: [www.insidehopkinsmedicine.org/wellnet](http://www.insidehopkinsmedicine.org/wellnet).

### FITNESS REIMBURSEMENT PROGRAMS

Receive up to \$50 per calendar year for purchasing cardiovascular home gym equipment or participating in community based or on-site Wellnet sponsored fitness classes and walking groups.

Also, receive a 50 percent reimbursement for participating in an on-site Weight Watchers programs by attending at least 75 percent of 17 week program. Pre-approval is required prior to reimbursement.

For more information on any Wellnet service, please contact them directly at 410-955-9538.

# Education

## Tuition Assistance

After 60 days of employment, employees regularly scheduled to work 20 hours or more per week are eligible for educational assistance to help with continuing education.

Assistance is reimbursed only if you attend an accredited college or technical or vocational school. Courses must lead to licensure or degree or meet the criteria of business or operational necessity (job-required). Internet courses are also covered under the program as long as they meet the same criteria of non-Internet courses. In this educational partnership, you agree to work for JHH for a predetermined period of time after satisfactory completion of the courses. Satisfactory completion of courses is a “C” or better for undergraduate courses and a “B” or better for graduate courses.

### EMPLOYEES HIRED JANUARY 1, 2007 OR LATER

Employees hired Jan. 1, 2007 or later are eligible for tuition assistance up to a maximum of \$10,000 per academic year (Sept. 1 to Aug. 31) for undergraduate study and \$15,000 per academic year (Sept. 1 to Aug. 31) for accelerated MBA/MHS programs.

### EMPLOYEES HIRED PRIOR TO JANUARY 1, 2007

Employees hired prior to Jan. 1, 2007 are eligible for tuition assistance up to a maximum of \$10,000 per academic year (Sept. 1 to Aug. 31) or 18 credits per academic year, whichever is greater, for undergraduate studies or Masters or PhD programs. Employees in accelerated MBA/MHS programs are eligible for up to 24 credits per academic year.

### JOHNS HOPKINS SCHOOL OF NURSING

When attending the Johns Hopkins School of Nursing, the maximum reimbursement is \$15,000 per academic year (Sept. 1 to Aug. 31).

**Please note:** Any payments received for either Tuition Assistance or Advancement will be less any academic fees and scholarship and/or grant monies you receive.

## Tuition Advancement

Tuition advancement is available for employees who earn less than \$35,000 annually. Tuition advancement lowers your out-of-pocket expenses by providing payment directly to the school before your classes begin. The percentage of tuition reimbursement/advancement depends on the number of hours you are regularly scheduled to work each week, as shown below:

SCHEDULED HOURS PER WEEK	REIMBURSEMENT AMOUNT
20-29	50%
30-39	75%
40	100%

After satisfactory completion of the last semester, you must agree to work for JHH based on the total dollars received under the tuition assistance or advancement programs.

DOLLARS REIMBURSED	SERVICE PAYBACK
Up to \$4,999	1 year of service
\$5,000 +	2 years of service

Unsuccessful completion of your courses requires you to reimburse JHH before other tuition assistance is approved. Also, employees must remain at the same employment status during the service payback as when classes started. Employees working 40 hours and receiving 100 percent reimbursement must continue a

40-hour schedule. Employees working fewer than 40 hours are allowed to increase their work hours but cannot decrease their hours to less than when classes began.

Be sure to refer to the Tuition Policy for more detailed information on how each program works and the most current updates. Visit [www.hopkinsmedicine.org/jhhr/policiesprocedures](http://www.hopkinsmedicine.org/jhhr/policiesprocedures).

**Please note:** For additional information on other available assistance, contact the Joint Training Commission at 410-955-6783 before enrolling in any course or program.

## Dependent Child Tuition

Full-time employees who have at least two years of continuous service working 40 hours per week are eligible to receive payment toward tuition for their dependent children. Employees can receive payment for full-time (a minimum of 12 credit hours per semester) undergraduate tuition and mandatory academic fees. The two-year eligibility cut-off dates for requesting assistance are Oct. 1 for Fall semester and Feb. 1 for Spring semester. This benefit is available only during periods in which the employee is working full time. Each parent is eligible to receive this benefit if he or she is a full-time employee.

Payment is for 50 percent, **less taxes**, of each dependent child's full-time, undergraduate tuition and mandatory academic fees up to a maximum of 50 percent of The Johns Hopkins University's freshman undergraduate tuition. Payment is limited to four years of full-time, undergraduate study per dependent child at any accredited, degree-granting institution.

Accredited institutions that do not offer degrees, but instead issue diplomas or certificates, are not eligible. Payments are available for mini-sessions and summer courses only if the courses will count toward a degree, the dependent child is a full-time student participating in the Dependent Tuition Plan for both Fall and Spring semesters, and the student has not received the maximum grant allowance for the academic year. Room and board, books, part-time and graduate study are not eligible.

If other tuition scholarship support is received in addition to the Hopkins tuition aid, **the total combined tuition support may not exceed 100 percent of the tuition and mandatory academic fees**. If scholarship support is applicable to room and board and/or meal expense, it must be indicated on the tuition bill so that it may be excluded from any scholarship offset.

### REPAYMENT

If the parent does not maintain full-time status or has a change in job classification that will affect eligibility, or if the student does not maintain full-time student status, the parent is required to refund 100 percent of the Hopkins aid. If the student withdraws before the end of the academic cycle, the parent is expected to refund the Hopkins aid according to the institution's withdrawal policy. If money is not refunded, JHH will consider the student to have used the entire benefit for that cycle.

JHH will reimburse the employee directly when a copy of the bill from the school is provided. All payments made on behalf of employees will be fully taxable and subject to withholding rules.

**Please note:** JHH reserves the right to request evidence of the dependent status of persons listed on the Dependent Tuition Program Application.

## College Savings Plans

You can start saving now for your child's college expenses with the College Savings Plans of Maryland. Your money in the College Savings Plans can be used at nearly any college in the country. The two savings plans offered are the Maryland Prepaid College Trust and the Maryland College Investment Plan. The Maryland Prepaid College Trust allows you to lock in one to five years of future college tuition at today's prices. The Maryland College Investment Plan offers 10 diverse investment options and is managed and distributed by T. Rowe Price. You can invest a minimum of \$25 monthly or up to a maximum of \$250,000 per child. For more information, contact the HR Service Center/Benefits Office, Phipps 455, or call 410-955-6208.

# Insurance

## Short Term Disability

Employees who are regularly scheduled to work 20 or more hours per week are automatically eligible to participate in Short Term Disability, effective the first day of the month following your date of hire. However, you must complete your probationary period to be eligible to receive STD benefits. Coverage is provided at no cost to you. If approved, Short Term Disability benefits replace 60 percent of your bi-weekly base pay for up to 24 weeks of disability, after a 14-day elimination period, as long as you are under a doctor's care. If you become disabled and have accumulated sick or vacation hours that you have not used, this time will be used to supplement your short term disability payments. Short term disability benefits are separate from Family Medical Leave (FML) benefits.

## Long Term Disability

Employees regularly scheduled to work 20 or more hours per week are eligible to purchase Long Term Disability insurance. Long Term Disability replaces 60 percent of your monthly base pay, to a maximum of \$8,000 per month, after you have been continuously disabled for 26 weeks. Benefits may continue up to age 65 as long as you are certified disabled by the insurance carrier. If you begin to receive disability benefits after age 60, your benefits continue as long as you are certified disabled, based on the schedule shown in the Summary Plan Description. If you are certified disabled due to a mental illness, benefits are paid up to a maximum of 24 months.

### PROOF OF GOOD HEALTH

When electing disability insurance when initially hired, you are not required to provide proof of good health. However, if you are electing coverage any time after your first 30 days of employment, you will need to provide proof of good health.

The insurance company must approve your coverage before your new benefit can become effective. Payroll deductions will not begin until coverage is approved.

### COST OF COVERAGE

To calculate the bi-weekly cost of your coverage, use this chart and the following formula.

YOUR AGE	BI-WEEKLY RATE PER \$100 OF COVERED SALARY
Under 25	\$.0042
25-29	\$.0060
30-34	\$.0098
35-39	\$.0140
40-44	\$.0172
45-49	\$.0238
50-54	\$.0306
55-59	\$.0364
60-64	\$.0368
65-69	\$.0516
70 & over	\$.0650

$$(\text{HOURLY RATE}) \times (\# \text{ OF SCHEDULED WORK HOURS}) \times (\text{RATE FROM TABLE}) = \text{BI-WEEKLY COST OF COVERAGE}$$

For example: If you are regularly scheduled to work 40 hours per week and your hourly rate is \$10.50 and you are 30 years old, your calculation would look like this: **\$10.50 x 40 x \$.0098 = \$4.12 bi-weekly.**

## Long Term Care Insurance

Long Term Care insurance is a voluntary program that can help you preserve your independence and financial security, and help relieve your family members of the burden of making decisions about how to pay for care should you suffer an injury or illness and need home or nursing home care.

Signing up for coverage is simple, and you can pay your premiums through convenient payroll deduction. Coverage is also available for spouses and parents of employees. Discounts are available for preferred health and spousal coverage. Visit [www.unum.com](http://www.unum.com) for more information.

## Family and Medical Leave

Up to 12 weeks of unpaid job-protected leave is given to employees for certain family and medical reasons under the Family and Medical Leave Act (FMLA) of 1993. You are eligible if you have worked for JHH for at least one year and for 1,250 hours over a period of 12 months. Family Medical Leave (FMLA) runs concurrently with any other paid or unpaid leave (i.e., short-term disability, workers' compensation, vacation, sick, or any unpaid absence that qualifies under FMLA). For more information on FMLA, please refer to the Family Medical Leave Policy on the HR Web site at [www.hopkins-medicine.org/jhhr](http://www.hopkins-medicine.org/jhhr), or contact the HR Service Center/Benefits Office at 410-955-6208.

## Basic Life & Accidental Death and Dismemberment

All employees who are regularly scheduled to work 20 to 29 hours per week and have completed 12 months of service are eligible for \$4,000 of Basic Life Insurance in the event of their death.

All employees who are regularly scheduled to work 30 to 40 hours per week are eligible to receive \$1,000 of Basic Life Insurance during their first 12 months of service. After 12 months of service, employees are eligible for one times their annual salary, up to \$50,000.

Basic Life Insurance coverage also includes Basic Accidental Death and Dismemberment (AD&D) Insurance. AD&D coverage is equal to the amount of life insurance coverage to which you are entitled. AD&D insurance may pay benefits if you die or suffer certain serious injuries as a result of an accident.

## Business Travel Insurance

Twenty-four-hour business travel protection is provided for all types of accidents that may occur while an employee is on a business trip. Coverage starts when the employee leaves his/her home or office—whichever occurs last—and continues until the employee returns to his/her home or office—whichever occurs last. Coverage excludes death from accidents resulting while traveling to and from work, bona fide vacations and leaves of absence.

All benefit-eligible employees are also covered by WorldNet for business and non-business travel. The service provides 24-hour assistance on any travel emergency 100 miles or more from home or in a foreign country. For more information contact the HR Service Center/Benefits Office, Phipps 455 or call 410-955-6208.

# Medical Benefits

## Johns Hopkins Employer Health Program (EHP)

JHH offers two medical plans from which you can choose the best coverage for you and your family. Please review the plan highlights and comparison charts below that emphasize the differences in the two. For more detailed information, please refer to the Summary Plan Description available online at [www.hopkinsmedicine.org/jhhr](http://www.hopkinsmedicine.org/jhhr) or at the HR Service Center/Benefits Office, Phipps 455.

The fair market value of benefits provided to domestic partners and their children (who are not dependents of the employee) under Internal Revenue Code Section 152 constitutes taxable income to the employee to the extent the value exceeds any amount paid by the employee for the benefits.

JHH will withhold and report taxes for all employees receiving benefits for domestic partners and their children. The calculation of imputed benefits table—to help you determine the imputed, noncash income that will be taxable based on your coverage election—can be obtained by contacting the HR Service Center/Benefits Office, Phipps 455.

### **BASIC PLAN**

The EHP Basic Plan offers in-network benefits only. Claims for any visits or services obtained outside the EHP network will not be paid.

- You must choose a Primary Care Physician (PCP) for benefit coverage
- Females ages 14 and older must choose an OB/GYN and PCP
- Referrals are mandatory
- Any preventive PCP and OB/GYN visits have no co-pay
- No infertility or gastric bypass benefits
- No out-of-network benefits except for life-threatening emergencies
- Co-pay waived for participants enrolled in EHP's Care Management Program for the treatment of asthma and diabetes

### **PREMIUM PLAN**

#### **In-Network Benefits**

- Visit any network doctor — NO REFERRALS REQUIRED
- Any preventive PCP and OB/GYN visits have no co-pay
- Infertility and gastric bypass benefits after \$1,000 deductible and pre-authorization (does not apply to dependent children)
- Co-pay waived for participants enrolled in EHP's Care Management Program for the treatment of asthma and diabetes

#### **Out-Of-Network Benefits**

- 70 percent coverage for most services after a \$500 individual deductible or a \$1,000 family deductible

## COMPARISON CHART

The following chart provides a side-by-side comparison of the two Johns Hopkins EHP medical plans.

COVERED SERVICES	BASIC PLAN	PREMIUM PLAN	
	In-Network Only	In-Network	Out-of-Network
<b>Calendar Year Deductible</b>			
Per individual	None	None	\$500
Per family	None	None	\$1,000
<b>Calendar Year Out-of-Pocket Maximum</b>			
Per individual	None	None	\$3,200
Per family	None	None	\$6,400
<b>Treatment of Illness or Injury</b>			
Primary care office visit	100% after \$10 co-pay	100% after \$15 co-pay	70% of R&C after deductible
Specialty care office visit	100% after \$20 co-pay	100% after \$30 co-pay	70% of R&C after deductible
Laboratory test and X-rays	100%	100%	70% of R&C after deductible
Radiology test <i>CT Scans, PET Scans, MRIs</i>	\$20	\$30	
<b>Preventive Services</b>			
General Office Visit	100%	100%	70% of R&C after deductible
Well child care	100%	100%	70% of R&C after deductible
Mammogram	100%	100%	70% of R&C after deductible
GYN exam	100%	100%	70% of R&C after deductible
<b>Immunizations and Inoculations</b>			
For common communicable diseases	100%	100%	70% of R&C after deductible(b)
Allergy tests and serum	100%	100%	70% of R&C, after deductible
<b>Prescription Drugs</b>			
In-network pharmacy only <i>34-day supply, includes oral contraceptives and limited smoking cessation products</i>		\$10 co-pay – generic \$25 co-pay – preferred brand \$50 co-pay – non-preferred brand	
90-day supply for maintenance drugs		\$30 co-pay – generic \$75 co-pay – preferred brand \$150 co-pay – non-preferred brand	
Mail-order		\$20 co-pay – generic \$50 co-pay – preferred brand \$100 co-pay – non-preferred brand	
Over the counter* <i>Prescribed Prilosec OTC, Claritin OTC and Claritin D OTC</i>		\$0 co-pay*	
<b>Surgical Procedures</b>			
Inpatient and outpatient services <i>Pre-authorization required</i>	100%	100%	70% of R&C, after deductible (a)
Inpatient hospitalization <i>Pre-authorization required</i>	\$100 co-pay per hospital admission	\$100 co-pay per hospital admission	\$500 co-pay per hospital admission, then 70% of R&C, after deductible (a)
Gastric bypass <i>Pre-authorization required</i>	Not covered	100% at JHH institutions only, after \$1,000 deduction	Not covered
Professional services for inpatient and outpatient surgery <i>Pre-authorization required</i>	100%	100%	70% of R&C, after deductible (a)

*continued on next page*

COVERED SERVICES	BASIC PLAN	PREMIUM PLAN	
	In Network Only	In-Network	Out-of-Network
<b>Reproductive Health</b>			
Maternity care	100%	100%	70% of R&C, after deductible (a)
Infertility services \$30,000 lifetime maximum (includes prescription drugs, limited to 3 attempts)	Not covered	100% at JHH institutions only, after \$1,000 deduction (b)	Not covered
<b>Home Care and Therapy</b>			
Home health care 40 visits per year; must be coordinated through Care Management	100%	100%	70% of R&C, after deductible
Physical and occupational 60 visits per year combined	100% (e)	100% (e)	70% of R&C, after deductible (e)
Speech therapy	100% (b)	100% (b)	70% of R&C, after deductible (b)
Durable medical equipment	100%	100%	70% of R&C, after deductible
<b>Chiropractic Care</b>	100% after \$10 co-pay (c)	100% after \$15 co-pay (c)	70% of R&C, after deductible (c)
<b>Acupuncture</b>	100% after \$10 co-pay	100% after \$15 co-pay	70% of R&C, after deductible
<b>Mental Health and Substance Abuse</b>			
Inpatient care for mental health	\$100 co-pay per hospital admission	\$100 co-pay per hospital admission	\$500 co-pay per hospital admission, then 70% of R&C after deductible (a) (b)
Outpatient treatment for mental health	\$20 co-pay	\$20 co-pay	70% of R&C, after deductible (b)(d)
Inpatient care for substance abuse	100%(a)	100%(a)	\$500 co-pay per hospital admission, then 70% of R&C after deductible
Outpatient treatment for substance abuse and alcohol detoxification	\$20 co-pay	\$20 co-pay	70% of R&C, after deductible
<b>Urgent Care</b>	\$15 co-pay	\$15 co-pay	70% of R&C after deductible
<b>Emergency Services</b>			
Co-pay waived only if admitted	\$125 co-pay	\$125 co-pay	\$125 co-pay

(a) \$500 penalty applies for failure to obtain pre-authorization. Failure to obtain pre-authorization can result in denial of benefits.

(b) Must be pre-authorized by Care Management.

(c) Restricted to initial exam and X-rays, and spinal manipulation up to \$1,500 per year.

(d) Services for outpatient mental health and substance visits are applied to the calendar year deductible.

(e) Must be pre-authorized after 12 visits.

\* Requires written prescription

**NOTE:**

1) "R&C" is the reasonable and customary allowance for an expense.

2) For a list of network hospitals and PCPs who are accepting new patients, check the EHP Provider Directory, available at the HR Service Center or call EHP at 410-424-4450. You may also visit EHP's Web site at <http://www.ehp.org>.

3) If your spouse/same-sex domestic partner also works for JHHSC/JHH, you cannot be covered as both an employee and dependent. In addition, your eligible dependent(s) may only be covered by one parent's plan.

## Pharmacy

You **must** obtain prescription drugs from a Network pharmacy to receive benefits under both the Basic and Premium Plans. Certain medications will require pre-authorization before prescriptions can be filled. There may also be limits on the quantity of medications that you can receive for certain prescriptions.

### TIER PHARMACY BENEFIT STRUCTURE

- **Tier One: Generic Drugs (lowest co-pay)** Contain the same active ingredients and are chemically and therapeutically equivalent to brand-name medications
- **Tier Two: Preferred Brand Drugs (middle co-pay)** Offer the most therapeutically safe and effective treatment for most medical conditions.
- **Tier Three: Non-Preferred Brand (highest co-pay)** Often have either a generic equivalent or a preferred-brand alternative.

Talk to your PCP if you have any questions regarding which tier is best for you.

### OVER-THE-COUNTER MEDICATIONS

Over-the-counter (OTC) drugs and medications can typically be obtained without a prescription, regardless of whether or not your doctor gives you a prescription for it. However, prescriptions drug benefits are provided for Prilosec OTC, Claritin OTC and Claritin-D OTC, but only if your doctor prescribes these drugs and you show the pharmacist your prescription at the time of purchase. No co-pay applies when you obtain a prescription for Prilosec OTC, Claritin OTC and Claritin-D OTC.

## Vision Coverage

### JOHNS HOPKINS ROUTINE VISION CARE NETWORK

The EHP medical plans cover a full range of vision care services through the Johns Hopkins Routine Vision Care Network. You can receive Johns Hopkins Routine Vision Care Network services at any of these provider sites:

- Wilmer Eye Institute at The Johns Hopkins Hospital
- Green Spring Station Pavilion I
- Severna Park
- Johns Hopkins Bayview Medical Center
- White Marsh
- Pearle Vision Centers at Johns Hopkins
- Penn Optical

For a complete listing of provider sites, refer to the list of Johns Hopkins Routine Vision Care providers, available from EHP online at [www.ehp.org](http://www.ehp.org).

Vision benefits are paid as follows, depending upon whether you use a Johns Hopkins Routine Vision Care Network provider or an Out-of-Network provider.

COVERED SERVICES	JOHNS HOPKINS ROUTINE VISION CARE NETWORK	OUT-OF-NETWORK
	Basic and Premium	Premium only
<b>Routine exam or contact lens fitting</b> <i>Once every 12 month</i>	100%, after \$10 co-pay	Up to \$35
<b>Materials</b> <i>Once every 12 months</i>	\$10 co-pay, then:	
Single vision	Up to \$75	Up to \$70
Bifocal	Up to \$92	Up to \$80
Trifocal	Up to \$117	Up to \$110
Lenticular	Up to \$176	Up to \$160
<b>Frames</b>	Up to \$70	Up to \$70
<b>Contact lenses</b>		
Medically necessary	Up to \$165	Up to \$165
Elective	Up to \$95	Up to \$95

**Note:** Benefits are provided for necessary or elective contact lenses in lieu of lenses and frames. This means that you can get either eyeglasses or contact lenses in a 12-month period, but not both.

### COST OF COVERAGE

Hopkins pays 92 percent of the cost of coverage for single employers and 85 percent for employees with dependents. You are eligible for the lower non-tobacco user EHP medical premium rate if you certify that you do not use tobacco or that you plan to quit during the 2011 Plan year.

For 2011, bi-weekly, pre-tax contributions for medical coverage (medical, prescription and vision) are as follows for non tobacco users:

EMPLOYEES SCHEDULED 30 OR MORE HOURS PER WEEK		
	EHP Basic	EHP Premium
Employee only	\$24.46	\$26.53
Employee and children	\$73.37	\$79.60
Employee and spouse or same-sex domestic partner	\$91.37	\$99.11
Family-employee, spouse or same-sex domestic partner and children	\$98.70	\$107.06

EMPLOYEES SCHEDULED 20-29 HOURS PER WEEK		
	EHP Basic	EHP Premium
Employee only	\$95.66	\$103.49
Employee and children	\$191.33	\$206.97
Employee and spouse or same-sex domestic partner	\$238.20	\$257.68
Family-employee, spouse or same-sex domestic partner and children	\$257.35	\$278.38

For 2011, bi-weekly, pre-tax contributions for medical coverage (medical, prescription and vision) are as follows for tobacco users:

EMPLOYEES SCHEDULED 30 OR MORE HOURS PER WEEK		
	EHP Basic	EHP Premium
Employee only	\$34.46	\$36.53
Employee and children	\$83.37	\$89.60
Employee and spouse or same-sex domestic partner	\$101.37	\$109.11
Family-employee, spouse or same-sex domestic partner and children	\$108.70	\$117.06

EMPLOYEES SCHEDULED 20-29 HOURS PER WEEK		
	EHP Basic	EHP Premium
Employee only	\$105.66	\$113.49
Employee and children	\$201.33	\$216.97
Employee and spouse or same-sex domestic partner	\$248.20	\$267.68
Family-employee, spouse or same-sex domestic partner and children	\$267.34	\$288.38

# Johns Hopkins Employer Health Program (EHP) Dental

There are two Johns Hopkins EHP Dental Plans from which you can choose. Both plans offer a broad range of dental care services for you and your family. Each of the Johns Hopkins EHP Dental plans offers you the choice to receive dental care services from both in-network and out-of-network dentists. You can save money under either Plan when you use dentists who are in the Johns Hopkins EHP Dental network. You may elect dental coverage even if you opt out of medical coverage.

The two Johns Hopkins EHP Dental plans for you to choose from are the:

- Comprehensive Plan and
- High Option Plan

## COMPARISON CHART

The following chart provides a side-by-side comparison of the two Johns Hopkins EHP dental plans.

COVERED SERVICES	COMPREHENSIVE		HIGH OPTION	
	In-Network	Out-of-Network	In-Network	Out-of-Network
<b>Calendar Year Deductible</b>				
Per individual	None	\$50	None	\$50
Per family	None	\$150	None	\$150
<b>Combined Maximum Annual Benefit</b>	\$1,500 per person		\$3,000 per person	
<b>Preventive Services</b>				
Exams Twice per year	100%	80% of R&C, after deductible	100%	80% of R&C, after deductible
X-rays Once per 36 months	100%	80% of R&C, after deductible	100%	80% of R&C, after deductible
<b>Basic Service</b>				
Fillings	80%	60% of R&C, after deductible	80%	60% of R&C, after deductible
Oral surgery	80%	60% of R&C, after deductible	80%	60% of R&C, after deductible
<b>Major Services</b>				
Crowns, inlays and overlays	50%	30% of R&C, after deductible	60%	40% of R&C, after deductible
Bridges	50%	30% of R&C, after deductible	60%	40% of R&C, after deductible
Orthodontia Lifetime maximum benefit of \$1,500	Not covered	Not covered	50% up to lifetime maximum	Not covered

**Please Note:** Coverage does not extend to services that are provided by an immediate family member.

## COST OF COVERAGE

JHH shares in the cost of your dental care coverage. For 2010, your bi-weekly, pre-tax contributions for dental coverage are as follows:

EMPLOYEES SCHEDULED 30 OR MORE HOURS PER WEEK		
	Comprehensive	High Option
Employee only	\$6.06	\$8.20
Employee and children	\$12.14	\$16.41
Employee and spouse or same-sex domestic partner	\$16.69	\$22.56
Family-employee, spouse or same-sex domestic partner and children	\$18.19	\$24.61

EMPLOYEES SCHEDULED 20-29 HOURS PER WEEK		
	Comprehensive	High Option
Employee only	\$9.09	\$11.49
Employee and children	\$18.20	\$23.13
Employee and spouse or same-sex domestic partner	\$25.03	\$32.18
Family-employee, spouse or same-sex domestic partner and children	\$27.31	\$34.97

# Additional Benefits

## Time Off Benefits

### VACATION

If you are scheduled to work 20 hours or more per week, you are eligible for two weeks of vacation. After six months of employment, you are eligible to use one week (five days) of your vacation entitlement. The remaining week (five days) can be used after the completion of your first year of service. The qualifying date for receiving your annual vacation entitlement is your employment anniversary date. Part-time employees will receive vacation accumulations and vacation pay on a prorated basis, based on their regularly scheduled hours of work.

The following vacation schedule is for full-time employees with one or more years of service.

YEARS OF SERVICE	VACATION DAYS
1 year	10 days per year 80 hours per year
2 years	12 days per year 96 hours per year
5 years	15 days per year 120 hours per year
10 years	21 days per year 168 hours per year
20 years	27 days per year 216 hours per year

### VACATION SELL BACK

Twice a year, in January and July, employees have the opportunity to participate in the Vacation sell back program. This is a voluntary opportunity for employees who have either reached the maximum accrual or just want some extra money to sell back some of their vacation hours.

To participate, employees are required to sell back a minimum of eight hours. There is no maximum amount of hours that can be sold; however, full-time employees are required to keep a minimum vacation balance of 80 hours and part-time employees are required to keep a minimum vacation balance of 40 hours. All vacation sales are voluntary, and all payment is equal to 50 percent of the amount sold.

### FREE DAYS

In addition to vacation time, you are eligible to receive up to three free days per year. During your first year of employment, the number of free days you receive is based on your hire date, as shown in the following chart. Free days can be used after the completion of the 90-day probationary period. All unused free days will expire at the end of the calendar year.

DATE OF HIRE	NUMBER OF FREE DAYS
December 1 - February 28	3 days
March 1 - May 31	2 days
June 1 - August 31	1 day

**SICK TIME**

Full-time employees, regularly scheduled to work 40 hours per week, are eligible for paid sick time after the completion of their 90-day probationary period. During the first two years of service, sick time is accrued at the rate of five-sixths (5/6) of one day for each month of employment. After two years of service, employees are eligible for 10 days of sick time per year. Regular part-time employees, scheduled to work 20 or more hours per week, will accrue sick time prorated, based on the number of hours they are scheduled to work. The maximum amount of sick time to be accrued is 65 regular work days (520 hours). Employees may also use sick time for the illnesses of their children, spouse or parent.

**Holidays**

JHH provides you with seven paid holidays each year. You are eligible for the holidays after completing the 90-day probationary period. Part-time employees will be paid for the holidays on a prorated basis according to the number of hours they are scheduled to work. The seven observed holidays are:

- New Year’s Day
- Martin Luther King, Jr. Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Christmas Day

**Other Paid Leave**

JHH grants other paid leave to employees once they have completed the 90-day probationary period, as shown on the chart below:

REASON FOR LEAVE	BENEFIT
Death of immediate family member	Up to three days off within one week of death (prorated for part-time employees)
Jury duty	Employee receives regular pay
Annual military leave	The difference between regular pay and military pay up to 10 days per year

**Retirement Benefits**

**PENSION PLAN**

You can participate in the Pension Plan after one year of employment during which you have worked 1,000 or more hours if you are over 21 years old; or, if you are under 21 and after completing three years of employment and 1,000 or more hours per year. JHH pays the full cost of this basic retirement benefit after you’ve met the five-year vesting requirement. Your benefit is calculated using a formula based on your length of Hopkins service, and your earnings (final average). You may receive additional information by contacting the Pension Office in Phipps 460 or at 410-955-5970.

## TAX-DEFERRED ANNUITY PROGRAM [403(b)]

In addition to your Pension Plan benefit, you may participate in the 403(b) program. New employees will be automatically enrolled in the 403(b) program with an initial 2% pre-tax contribution level, unless you elect not to participate.

You may also elect to have a different percentage of your salary deposited into an account each pay period on a pre-tax or after-tax (“Roth”) basis. There is an annual limit on contributions as determined by the IRS. You may receive additional information by contacting the Lincoln Office in Phipps 493 or at (410) 955-5828.

## RETIREE MEDICAL

Retiring employees who are at least age 62 with 15 years of service may elect to continue their EHP medical plan until they become eligible for Medicare or for a maximum of 36 months, under COBRA. This can help bridge the gap in medical insurance for employees and their spouses prior to Medicare eligibility at age 65. You may receive additional information by contacting the Pension Office at 410-955-5970.

## RETIREE DENTAL

MetLife offers two dental plans to retirees and their dependents at affordable rates. Both plans include a comprehensive network of dentists throughout the country. For more information on the plans, contact the Pension Office at 410-955-5970.

## Adoption

Benefit eligible employees who adopt a child are eligible for a lump sum payment up to a maximum of \$5,000 per child to assist with adoption expenses. This lump sum payment can be used to assist with agency adoption fees, court costs, attorney fees, round-trip transportation to bring the child home or other fees associated with a legal adoption. Contact the HR Service Center/Benefits Office for more information on required documentation or visit [www.hopkinsmedicine.org/jhhr](http://www.hopkinsmedicine.org/jhhr).

## Child and Adult Care Programs

**Back-Up Sick Child and Adult Care:** “Parents in a Pinch” provides emergency child or adult care services on a seven-day-a-week availability. Back-up care providers have been screened, bonded and trained and will come to the employee’s home in those circumstances where this service will enable the employee to go to work. JHH shares in the cost of this service. Pre-registration is required. For more information, contact the HR Service Center/Benefits Office at 410-955-6208 or visit [www.hopkinsmedicine.org/jhhr](http://www.hopkinsmedicine.org/jhhr).

**Child and Adult Care Referrals:** Contact WORKlife at 443-997-7000 or [www.hopkinsworklife.org](http://www.hopkinsworklife.org) to receive assistance with dependent care referrals, including nanny/au pair information, summer camp information, etc., at no cost to you. WORKlife will conduct the search to help you find dependent care.

**Johns Hopkins Family Center:** Child care is available at the Johns Hopkins Family Center, located two blocks south of the corner of Broadway and Orleans Street. Run by Bright Horizons Family Solutions, the center cares for children ages 6 weeks to 5 years. For more information, contact the Family Center at 410-614-4111. Scholarships are also available annually to assist with child day care center costs.

**YMCA:** Child care is available at the YMCA located across the street from our Eastern site at the Harry & Jeanette Weinberg Family Center at Stadium Place on E. 33rd St. Enrollment is available for children from pre-K to 4 years. For more information, contact WORKlife at 443-997-9000 or [www.hopkinsworklife.org](http://www.hopkinsworklife.org). Scholarships are also available annually to assist with child day care center costs.

## Employee Assistance Program

JHH provides an established Employee Assistance Program to help you address various complications that may impact your physical or mental health and/or your ability to perform your job. Contact the Faculty and Staff Assistance Program (FASAP) by calling 410-955-1220.

## AFLAC

AFLAC provides income protection when you miss work because of an accident or injury. They offer cancer, accident, hospital and recovery protection policies, as well as protection if you have a stroke or heart attack. Benefits include services not covered under your medical plan that can be costly, such as travel expenses while seeking treatment, lost wages and home care. You can pay for these voluntary programs through payroll deductions on a pre-tax basis. For more information, visit [www.aflac.com](http://www.aflac.com) or call 410-729-8905.

## Auto/Homeowners Discount Program

MetLife offers special group rates and the opportunity to pay by payroll deduction. In addition to low group rates, you can receive discounts for paying by payroll deduction, your years of JHH service and your good student status. MetLife offers discounts ranging from 10-20 percent. Free quotes are available by calling 1-800-GET-MET-8 or by visiting [www.metlife.com/mybenefits](http://www.metlife.com/mybenefits).

## Pet Insurance

MetLife, through Veterinary Pet Insurance, provides coverage for your pet, including dogs, cats, birds, etc. For more information, call 1-800-GET-MET-8 or visit [www.metlife.com/mybenefits](http://www.metlife.com/mybenefits). Identify yourself as a JHH employee and provide your employee badge I.D. number as verification.

## Credit Union

As a JHHSC/JHH employee, you are eligible to join the Johns Hopkins Federal Credit Union (JHFCU) and take advantage of their competitive, high-quality financial services. Serving the Johns Hopkins community since 1971, JHFCU is a not-for-profit financial institution that is owned by its members. JHFCU provides easy and free access to accounts online, over the phone, or in the branch. With a full range of savings and loan products, five branches located on Hopkins' campuses, plus a network in excess of 29,000 surcharge-free ATMs (including 1,500 M&T and 28,000 CO-OP Network ATMs), JHFCU is a convenient and trusted banking option. To learn more about the benefits of the Johns Hopkins Federal Credit Union, visit [www.jhfcu.org](http://www.jhfcu.org).

## Direct Paycheck Deposit

Enjoy the convenience of having your payroll check deposited directly into your savings or checking accounts. Contact the HR Service Center/Benefits Office or stop by Phipps 4th floor to pick up a Direct Deposit Authorization Form or visit the forms section of the HR Web site at [www.hopkinsmedicine.org/jhr/forms](http://www.hopkinsmedicine.org/jhr/forms).

## Live Near Your Work Program

The Johns Hopkins Health System, in partnership with the city of Baltimore and the State of Maryland, provides financial assistance to eligible employees who purchase homes near their place of employment through two programs: “Live Near Your Work” and “House Keys 4 Employees.” For more information or to receive an application packet, contact the WORKlife Program at 443-997-7000.

## MTA Transit Plus Program

You are able to purchase MTA monthly transit passes for the bus, light rail and/or Metro subway using pre-tax dollars, at work. When you buy your passes with pre-tax dollars, you save on federal, state and Social Security taxes by lowering your taxable income. For information on how to enroll, contact the HR Service Center/Benefits Office at 410-955-6208 or visit the forms section of the HR Web site at [www.hopkinsmedicine.org/jhr/forms](http://www.hopkinsmedicine.org/jhr/forms).

## Pre-tax Parking

If you park on one of the Hospital’s parking or shuttle lots, you can pay for the cost with pre-tax dollars directly from your paycheck. For more information, contact Parking at 410-955-5333.

## Prepaid Legal

MetLife, through Hyatt Legal Plans, offers a special group rate to employees to participate in their prepaid legal plan. For a deduction of just \$15 per month, you can receive legal advice for a wide range of legal matters, including:

- Identity theft
- Defense of civil lawsuits
- Preparation of wills, powers of attorney
- Pre-marital agreements
- Real estate matters and more

Call 1-800-821-6400 or visit [www.legalplans.com](http://www.legalplans.com) for more information.

## Employee Discounts

### Tickets

Discount tickets are available for employees to a number of area amusement parks in Baltimore and the surrounding area. Discounts are available for places, such as: Six Flags, The Baltimore Zoo and The National Aquarium. Tickets can be purchased at the HR Service Center/Benefits Office when available.

### Prescription Drugs

The Monument Outpatient Pharmacy offers the following discounts when you present your JHHSC/JHH badge at the time of purchase.

*90-day Quantities of Maintenance Prescription Medications:*

For Generic Medications - \$10 Co-Pay **Discount**

For Brand Preferred Medications - \$20 Co-Pay **Discount**

For Brand Non-Preferred Medications - \$40 Co-Pay **Discount**

*Prescription Medications for Quantities Other Than 90-day Supplies:*

For all Medications (Brand Preferred and Generic) - \$5 Co-Pay **Discount**

### Shopping

Employees can also take advantage of online shopping discounts through several programs.

### Hopkins Corporate Perks

By registering with this online program, you will have easy access to discounts up to 75% off brand names and products at your favorite stores. You can even invite friends and family members to join in the savings. Visit <http://hopkins.corporateperks.com> to register with the company code "hopkins".

### PerksCard

The PerksCard program allows you to save money while shopping online or in local merchant stores. You can print valuable coupons online and take them to stores to save. Get your PerksCard by visiting the HRSC, Phipps 455; then visit [www.perkscard.com](http://www.perkscard.com) to register your card and start saving.

For more information on available discounts, contact the HR Service Center/Benefit Office at 410-955-6208 or visit the forms section of the HR Web site at [www.hopkinsmedicine.org/jhhr/forms](http://www.hopkinsmedicine.org/jhhr/forms).

# Eligibility Chart

The following chart highlights the benefits you are eligible to receive depending on the number of hours you are regularly scheduled to work.

BENEFIT PLAN	EMPLOYEES SCHEDULED TO WORK 30 OR MORE HOURS PER WEEK	EMPLOYEES SCHEDULED TO WORK 20-29 HOURS PER WEEK	EMPLOYEE CONTRIBUTION REQUIRED
AFLAC	Yes	Yes	Yes
Auto/Homeowner Insurance	Yes	Yes	Yes
Back-Up Child and Adult Care	Yes	Yes	Yes
Child Day Care	Yes	Yes	Yes
Credit Union	Yes	Yes	Yes
Dependent Tuition <b>Employees working 40 hours only</b>	Yes	No	N/A
Direct Deposit	Yes	Yes	N/A
<b>Life Insurance</b> Basic w/AD&D	Yes	Yes	No
Long Term Care	Yes	Yes	Yes
Medical-Dental-Vision- Prescription Drugs	Yes	Yes	Yes
Paid Time Off	Yes	Yes	N/A
Pension	Yes	Yes	No
Pet Insurance	Yes	Yes	Yes
Prepaid Legal	Yes	Yes	Yes
Retiree Dental	Yes	Yes	Yes
Retiree Medical	Yes	Yes	Yes
<b>Salary Protection</b>			
Short Term Disability	Yes	Yes	No
Long Term Disability	Yes	Yes	Yes
Tax-Deferred Annuity	Yes	Yes	Yes
Tuition Assistance	Yes	Yes	N/A
Wellness Rewards	Yes	Yes	N/A

# Key Facts to Remember

## WHO IS ELIGIBLE?

- All employees regularly scheduled to work 20 or more hours per week are eligible for most benefits.

## WHO CAN BE COVERED?

- Most legal dependents can be covered. This includes your legal spouse or same-sex domestic partner as well as your dependent children/stepchildren, until the end of the month in which they reach age 26, regardless of student status.

### To cover dependents you will need:

- the Social Security numbers and birth dates for your dependents,
  - a copy of your marriage license or same-sex domestic partner affidavit for spouse coverage, and/or
  - a copy of birth certificates for dependent child coverage.
- If your spouse/same-sex domestic partner also works for JHHSC/JHH, you cannot be covered as both an employee and dependent. In addition, your eligible dependents may only be covered by one parent's plan.

## WHEN IS ENROLLMENT?

- All newly hired employees have **30 days** from their date of hire to complete online enrollment and submit proper documentation to the Human Resources Department. Failure to enroll on time results in a lack of coverage.
- During the annual fall Open Enrollment period you will be able to make any needed changes. There are other times during the year when you can make changes but only if you have a qualifying change in status or life event as specified by IRS regulations.

## HOW DO I PAY FOR BENEFITS?

- Most benefits are paid through payroll deduction on a bi-weekly basis; most are done as pre-tax deductions.

## WHERE CAN I GET HELP?

- More detailed information can be obtained by reading the Summary Plan Description in the benefits section of the Human Resources Web site at [www.hopkinsmedicine.org/jhhr/BenefitsWellnet/ForRepresentedEmployees](http://www.hopkinsmedicine.org/jhhr/BenefitsWellnet/ForRepresentedEmployees).
- You can visit the HR Service Center/Benefits Office on the 4th floor of the Phipps Building or call 410-955-6208 if you have questions or need more detailed information.





# JOHNS HOPKINS

M E D I C I N E

The benefits described in this booklet are for represented employees only. You may work for The Johns Hopkins Health System Corporation or for The Johns Hopkins Hospital. The Johns Hopkins Health System Corporation and The Johns Hopkins Hospital expect to continue these plans indefinitely but reserve the right to modify, amend, suspend or terminate any plan at any time and for any reason without prior notification. You will be notified of any changes to these plans and how they affect your benefits, if at all. The plans described in this booklet are governed by insurance contracts and self-insured plan documents, which are available for examination in the HR Service Center. We have attempted to make the explanation of the plans in this booklet as accurate as possible. However, should there be a discrepancy between this booklet and the provisions of the insurance contracts or plan documents, the provisions of the insurance contracts or plan documents will govern. In addition, you should not rely on any oral descriptions of the plans, since the written descriptions in the insurance contracts or plan documents will always govern.

Fall 2011 for 2012 Plan Year

The Johns Hopkins Hospital