



The supplemental fringe benefits indicated in this document are offered by the Brody School of Medicine to faculty and administrators (class I) who support the success of the Brody School of Medicine and who meet the eligibility requirements as outlined below. The Brody School of Medicine reserves the right to periodically revise its fringe benefits programs and timely notifies participants of such revisions and their effective dates.

Class I – Eligibility Requirements for BSOM Supplemental Fringe Benefits:

- Clinically active MD, DO, or equivalent with the rank of Assistant Professor, Associate Professor, or Professor, or the title of Clinical Assistant Professor, Clinical Associate Professor, or Clinical Professor; or
- Clinically active PhD, PsyD, or equivalent who is subject to the Clinical Faculty Compensation Plan; or
- Senior-level administrators with the following titles: Executive Dean, Executive Vice Dean, Senior Associate Dean, Associate Dean, Executive Director of ECU Physicians, Associate or Assistant Vice Chancellor primarily supporting the Brody School of Medicine; and
- Employed in a permanent position with a full-time equivalent (FTE) of 0.75 or greater.

Class I – BSOM Supplemental Fringe Benefits Program Includes:

- Medical Reimbursement Plan (SHERPA)
- Dental Reimbursement Plan
- Employer Paid Dependent Health Insurance
- Group Long-Term Disability Insurance
- Accidental Death & Dismemberment (AD&D) Insurance
- Group Term Life Insurance
- Voluntary Group Term Life Insurance (employee paid through payroll deduction)
- Voluntary Disability Income Protection (*employee paid through self-pay*)

Medical Reimbursement Plan Supplemental Health Expense Reimbursement Plan Agreement (SHERPA)

The Class I Supplemental Fringe Benefits Program includes a supplemental medical reimbursement plan, which is a selfinsured program for eligible faculty, their legal spouse, and dependent children (up to age 26). SHERPA covers qualifying out-of-pocket expenses (co-pays, co-insurance, deductibles) for services which are payable under the faculty member's primary health insurance plan. *TRICARE is not considered an allowable base health plan under SHERPA*.

Professional Services, Technical Services, Anesthesiology (surgical only), Lab Services, and Facility Fees provided by the following are eligible, *and does not include ECU Health/Vidant Medical Groups unless specified below:*

- ECU Physicians https://ecuphysicians.ecu.edu/find-a-doctor/
- ECU Health Medical Center located at 2100 Stantonsburg Road, Greenville, NC
- ECU Health Cancer Care
- ECU Health Endoscopy Center
- ECU Health Gastroenterology
- ECU Health Neurosurgery (physicians services only, excludes physical therapy and other therapy services)
- ECU Health Orthopedics
- ECU Health Radiation Oncology
- ECU Health SurgiCenter
- ECU Health Urology

Speech, Hearing, or Physical Therapy are provided as part of allowable care if received at:

• ECU Physicians or ECU Allied Health

Care provided for the following within Greenville, NC:

- Ear, Nose, Throat
- Infertility (limited to services not provided by ECU Physicians allowable provider for advanced infertility care is Duke)
- Ophthalmology (excluding routine eye exams and eyewear)
- Radiology (limited to services not provided by ECU Physicians imaging and interpretation services only)

As an added benefit, prescription purchases from the ECU Physicians Pharmacies are covered at 100% when the drug has full, unrestricted FDA market approval and is covered by the primary base health plan.

ECU Physicians Pharmacy Locations - https://ecuphysicians.ecu.edu/pharmacy/locations/

Treatment required because of an emergency while an employee or dependent is outside of Pitt County may be reimbursed at 80%, if seen by an in-network provider for a covered expense.

The maximum annual benefit under SHERPA is \$50,000 per plan year (January through December) for the faculty member and all their dependents combined with a limit of \$5,000 per plan year for any one occurrence.

SHERPA will follow the North Carolina State Health Plan limitations and exclusions for medical services. If the service received is provided by ECU Physicians, the ECU Physicians will submit a claim to your primary health insurance plan. After receiving payment from the primary health insurance plan, ECU Physicians will direct bill the Supplemental Fringe Benefits Office to process the remaining payment. Out-of-pocket expenses for services received at an allowable outside provider as indicated above are suitable for reimbursement provided the expense is for an eligible service as defined by the State Health Plan. To request reimbursement for services rendered by eligible providers outside of ECU Physicians, a faculty member should submit the following documentation to the Supplemental Fringe Benefits Office:

- A completed SHERPA claim form,
- The Explanation of benefits (EOB) from the base health plan along with an itemized statement of services received,
- An itemized bill from the provider, which should include the patient's name, provider's name, date of service, description of services provided, the charge, and the amount the base health plan coverage, and
- Proof of payment for the portion the base health insurance plan did not cover.

Previous balances or balance-forward bills are not accepted, and services paid with Flexible Spending Accounts are not reimbursable under SHERPA.

Reimbursements are paid in the pay period that falls on the 15th of each month. If proper documentation is provided to the Supplemental Fringe Benefits Office by the 20th of the month, reimbursement will be processed in the following month's first payroll cycle. Reimbursements or payments made on behalf of an employee under this plan are included as part of the monthly gross income for the purpose of calculating federal and state taxes.

For each plan year (January through December), claims with a date of service on or before December 31st must be submitted within 6 months of the plan year end, or by no later than June 30th of the following year.

Upon separation or ineligibility, all claims must be submitted within 30 days of the separation or ineligibility date.

If a primary work assignment requires faculty to work and reside more than 30 miles outside of Greenville, the faculty member will be eligible for reimbursement of services comparable to eligible services outlined above; eligible medical care must be provided within the county of the primary work assignment.

A person may be committing insurance fraud if he or she submits a claim containing a false or deceptive statement with intent to defraud (or knowing that he or she is helping defraud) an insurance company. If changes occur after submission of a claim, it is the employee's responsibility to notify the Supplemental Fringe Benefits Office of such changes immediately. Failure to do so may subject an employee to disciplinary action in a manner consistent with applicable university policies and state statutes.

Dental Reimbursement Plan

The Class I Supplemental Fringe Benefits Program includes a self-insured dental reimbursement program for eligible faculty, their legal spouse, and dependent children (up to age 26). Faculty members receive reimbursement for 100% of dental expenses not to exceed \$1,000 for each covered member each plan year (January through December). *Reimbursements for dental savings plans purchased through a dental office, orthodontics, appliances, implants, or any cosmetic dentistry, such as teeth whitening, are not covered under this program.*

If an eligible employee is employed in a position with a full-time equivalent (FTE) of 0.75 or greater, but less than 1.00, covered dental expenses will be pro-rated consistent with the FTE. For example, if an employee is employed with a 0.75 FTE and a request to be reimbursed for services in the amount of \$100 is submitted, the reimbursement would be processed for \$75.

If a faculty member or any eligible dependent of the faculty member has a dental insurance plan, this dental plan becomes the primary dental insurance plan. Reimbursements under this dental reimbursement plan take place after insurance has been filed with the primary insurance plan. If a faculty member or their covered dependents have a primary dental insurance plan, the faculty member should submit the following documentation to the Supplemental Fringe Benefits Office once a claim with their insurance plan has been filed:

- Explanation of benefits (EOB) from the primary dental insurance plan along with an itemized statement of services received, and
- Proof of payment for the portion the primary insurance plan did not cover.

If a faculty member or their covered dependents do not have a primary dental insurance plan, the faculty member should submit the following documentation to the Supplemental Fringe Benefits Office:

- Itemized receipt showing the services received and who received the services, and
- Proof of payment for the entire bill.

The Supplemental Fringe Benefits Office will seek verification of expenses and dental insurance reimbursement prior to approving and processing payment. **Previous balances or balance forward bills are not accepted, and services paid with** *Flexible Spending Accounts are not reimbursable.*

Failure to file with your primary dental insurance plan (if a primary insurance plan exists), may subject you to disciplinary action in a manner consistent with university policies and state statues. In addition, a person may be committing insurance fraud if he or she submits a claim containing a false or deceptive statement with intent to defraud (or knowing that he or she is helping defraud) an insurance company. If changes occur after submission of a claim, it is the employee's responsibility to notify the Supplemental Fringe Benefits Office.

Reimbursements are paid in the pay period that falls on the 15th of each month. If proper documentation is provided to the Supplemental Fringe Benefits Office by the 20th of the month, reimbursement will be processed in the following month's first payroll cycle. Reimbursements are included as part of the employee's monthly gross income for the purpose of calculating federal and state taxes.

For each plan year, claims with a date of service on or before December 31st must be submitted within 6 months of the plan year end, or by no later than June 30th of the following year.

Upon separation or ineligibility, all claims must be submitted within 30 days of the separation or ineligibility date.

Dependent Health Insurance

The University provides partially paid health insurance coverage for permanent full-time employees with a full-time equivalent (FTE) of 0.75 or greater. The State Health Plan offers University employees the choice between two Preferred Provider Organization (PPO) plans: Enhanced 80/20 Plan or Basic 70/30 Plan. The cost of employee coverage varies by plan, but employees can reduce their premiums by completing the tobacco attestation wellness premium credit as a new hire and during open enrollment each year.

Participants who enroll in State Health Plan coverage are responsible for paying their portion of coverage, but the Supplemental Fringe Benefits Program will cover the cost of dependent coverage (if enrolled). Premiums paid for dependent coverage are included as part of gross income for the purpose of calculating federal and state taxes. Newly hired or newly eligible employees can enroll in the State Health Plan coverage the first day of the month following the month in which they are hired or become eligible.

Group Long-Term Disability Insurance

The Class I Supplemental Fringe Benefits Program includes disability insurance at no cost to the employee under a group policy with the Lincoln National Life Insurance Company. Premiums for this coverage are employer paid.

The benefit covers 60% of a faculty member's salary (up to a maximum monthly benefit of \$20,000) starting 180 days after a faculty member is out of work due to injury, illness, or surgery, and continues up to age 65 or until Social Security Normal Retirement Age (SSNRA), whichever is later. Benefits paid are reduced by amounts received from Social Security Disability and most other group disability programs, including benefits received from the Disability Income Plan of North Carolina. Benefit payments received under this policy are taxable to the recipient. This policy requires the employee to file all disability benefits to which the employee is entitled and must inform the Lincoln National Life Insurance Company about any other disability benefits that become payable.

Voluntary Disability Income Protection Insurance

Faculty can maximize income protection with voluntary disability coverage. Voluntary disability coverage can pay benefits through a maximum benefit period if a faculty member cannot perform the substantial and material duties of their specialty, regardless of whether he or she is working in another job.

Premiums for this coverage are paid by the faculty member with after-tax income and therefore, benefits could be received tax-free. Because of the programs buying power, the plan includes discounted premiums and unisex rates. If a faculty member separates from the University, coverage is portable, and the discounted rate will remain with the policy.

To request personalized information, please contact the Human Resources Supplemental Fringe Benefits Office.

Accidental Death & Dismemberment Insurance (AD&D)

The Class I Supplemental Fringe Benefits Program includes AD&D insurance for the eligible faculty member and each of their qualifying dependents under a group policy with the Lincoln National Life Insurance Company. Premiums for this coverage are employer paid.

Faculty Coverage: Class I Faculty - \$300,000

Dependent Coverage: Legal Spouse - \$50,000 Dependent Child(ren) - \$50,000 per child

AD&D insurance benefits for faculty are reduced by 35% of the original amount by age 70 and an additional 15% of the original amount by age 75. Dependent children are eligible for coverage until age 26.

Group Term Life Insurance

The Class I Supplemental Fringe Benefits Program includes group term life insurance for the faculty member and each of their qualifying dependents under a group policy with the Lincoln National Life Insurance Company. Premiums for this coverage are employer paid.

Faculty Coverage: Class I Faculty - \$100,000 **Dependent Coverage:** Legal Spouse - \$10,000 Dependent Child(ren) - \$10,000 per child

Life insurance benefits for faculty are reduced by 35% of the original amount by age 70 and an additional 15% of the original amount by age 75. Dependent children are eligible for coverage until age 26.

Note: IRS regulations require that the imputed value of term life insurance in excess of \$50,000 be reported on an employee's W-2 form as taxable income. Applicable Social Security, Federal, and State taxes based on the imputed value of the employee's coverage are withheld monthly from an employee's paycheck on the 15th of each month.

Voluntary Term Life Insurance

Additional voluntary term life insurance may also be purchased through payroll deduction under a group policy with the Lincoln National Life Insurance Company for faculty, their legal spouse, and/or eligible dependent children. A faculty member must purchase additional term life insurance for themselves to purchase additional voluntary term life insurance for a dependent. Premiums for voluntary group term life insurance are paid for by the employee through payroll deduction on a post-tax basis.

Faculty Coverage - A faculty member or administrator may purchase additional term life insurance in \$10,000 increments, subject to a maximum of five times their annual earnings with an overall maximum of \$1,000,000. Newly eligible faculty under age 70 can enroll in coverage up to \$200,000 without providing evidence of insurability if coverage is purchased within the first 31 days of employment. The maximum coverage for newly eligible faculty 70 years of age or older is \$50,000. Coverage is reduced by 35% when a faculty member reaches age 70 and an additional 15% when the faulty member reaches age 75.

Spouse Coverage - A faculty member or administrator may purchase additional term life insurance for a spouse in increments of \$5,000 when coverage is purchased on the faculty member. Coverage is subject to a minimum of \$5,000 and an overall maximum of \$250,000. Newly eligible faculty may purchase coverage up to \$30,000 for a spouse under age 60 without providing evidence of insurability if purchased within the first 31 days of employment. Coverage amounts are reduced by 35% when a spouse reaches age 70 and an additional 15% when a spouse reaches age 75.

Dependent Child(ren) Coverage - A faculty member or administrator may purchase additional term life insurance for a dependent child when coverage is purchased on the faculty member. Coverage in the amount of \$10,000 may be purchased for dependent children up to age 26.

To enroll in this voluntary benefit, faculty should contact the Supplemental Fringe Benefits Office to request an enrollment form. Coverage purchased in excess of the guaranteed issue or after the initial guaranteed issue period (first 31 days of employment) will be subject to evidence of insurability.

Leave of Absence

All supplemental fringe benefits outlined in this document will stop the day an approved unpaid leave of absence begins. When the faculty member returns and meets all the qualifying requirements the supplemental fringe benefits will resume.

During an unpaid leave of absence, an employee approved for Group Long-Term Disability benefits through Lincoln may continue to receive disability payments, but all other benefits under the Supplemental Fringe Benefits Program will end.

Qualifying Life Events

If a faculty member enrolled in the Supplemental Fringe Benefits Program experiences a qualifying life event, the faculty member should contact the Supplemental Fringe Benefits Office within 30 days of the event to ensure all necessary benefit adjustments are made timely.

Qualifying life events may include, but are not limited to:

- Birth of a child
- Adoption
- Marriage
- Divorce
- Legal Separation
- Death

Dependent children are automatically removed from these benefits as of their 26th birthday, unless documentation is submitted verifying the dependent is disabled.

For additional information about the Brody School of Medicine Supplemental Fringe Benefits Program, please contact the HR Benefits Office.

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BSOM Faculty Fringe Benefits: <u>https://humanresources.ecu.edu/bsom-faculty-benefits/</u> Other University Benefits: <u>https://humanresources.ecu.edu/benefits/</u>