

FOR YOUR BENEFIT

ELIGIBILITY & ENROLLMENT

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REGULATORY NOTICES



# 2024 BENEFITS SUMMARY

REGISTERED NURSES MHS (NYSNA)

**Corporate Human Resources Division**  
**HR Benefits Office**

Montefiore Medical Center  
111 East 210<sup>th</sup> Street Bronx, NY 10467-2490

[montebenefits@montefiore.org](mailto:montebenefits@montefiore.org)  
[www.mymontebenefits.com](http://www.mymontebenefits.com)

## Montefiore Einstein



## FOR YOUR BENEFIT

[www.MyMonteBenefits.com](http://www.MyMonteBenefits.com)

[www.MyMonteBenefits.com](http://www.MyMonteBenefits.com) gives you and your family members easy, one-stop access to everything you need to know about your Montefiore Benefits Program.

- **Spotlight On** – Check here often for useful articles, important notices and the latest information about Montefiore's Benefits Program including Annual Enrollment materials.
- **Resource Center** – You'll find Contact Information, Forms, Resources and Regulatory Notices (print versions are available upon request).
- **For Your Benefit**
  - *Montefiore's Benefits Program* – Learn about your options for Healthcare coverage, Flexible Spending Accounts, Life, Accident & Disability Insurance and saving for your future financial security.
  - *Voluntary Benefits* – Direct access to Employee Discounts, Individual Insurance Policies and Special Promotions. You may enroll at any time during the year.
  - *Eligibility & Enrollment* – Find out who is eligible and how to enroll in Montefiore's Benefits Program.
  - *Life Events* – Learn how changes in your marital and family status affect your benefits.
- **Retirement Center** – Essential information if you are thinking of retiring.

## Montefiore Benefits Program

Montefiore's Benefits Program covers many different areas, which can be tailored to best fit your needs, forming a comprehensive benefits package.

Before you enroll in Montefiore's Benefits Program, it is important to familiarize yourself with your benefit options. Be sure to register for the Benefits Orientation webinar on [www.MyMonteBenefits.com](http://www.MyMonteBenefits.com).

- Select "IF YOU WORK FOR: Montefiore Medical Center – Enter Here".
- Click on the Benefits Orientation photo.
- Under the NYSNA section, everything you need to know as a new plan participant is available to view and/or print, including a Rate Sheet and Medical Comparison.
- Click on the "Click here to register for the 2024 RN Benefit Orientation Webinar" link.
- Once you register you will be emailed a link to the Benefits Webinar.



## ELIGIBILITY & ENROLLMENT

### Eligibility

You are eligible to enroll in the Montefiore Registered Nurses Benefits Program if you are employed by Montefiore Health System in an eligible position covered by a collective bargaining agreement with the New York State Nurses Association (NYSNA) and are a regular or temporary nurse and work at least 50% of a full-time schedule.

Your family members are also eligible for coverage. Eligible family members include your spouse and children (including stepchildren, legally adopted children, and children for whom you are legal guardian) whom you can cover through December 31 of the year they reach age 26.

Coverage begins the first of the month on or after your date of hire. For example, if your hire date is 1/6/2024, you are eligible for benefits effective 2/1/2024. If your date of hire is the first of the month, benefits will start on the first of that month (i.e., your date of hire).

### Enrollment

When you first begin at Montefiore and each year thereafter during the Fall Annual Benefits Open Enrollment Period, you have the opportunity to elect your benefit options.

You enroll online at Montefiore's Enrollment Website – [www.montebenefits.com](http://www.montebenefits.com) – or call the Benefits Enrollment Call Center at **888.860.6166** Monday through Friday between 8am and 8pm EST. You'll speak to an enrollment specialist who will help you enroll.

### Enrolling a Family Member

To enroll a family member, you must provide proof of that individual's family status with a copy of the following documentation:

- Marriage License or the first page of your most recent tax return (1040 form).
- Birth Certificate, Affidavit of Dependency, final Adoption Decree or Court Order.
- Please send the documents via email, fax or mail to:
- Email: [mmcdepverify@winstonbenefits.com](mailto:mmcdepverify@winstonbenefits.com)
- Fax: **732.903.1166**
- Mail: **Winston Financial Services**  
Montefiore Dependent Audit  
PO Box 430  
Manasquan, NJ 08736

If you have any questions:

- About the enrollment process or the Enrollment Website, you can use the online Chat feature for assistance (Monday through Friday between 8am and 8pm EST). Just click on the Chat icon on the top, right toolbar after you log in.
- Regarding your benefits, contact the HR Benefits Office at **914.349.8531** or at [montebenefits@montefiore.org](mailto:montebenefits@montefiore.org).



## ELIGIBILITY & ENROLLMENT

### Verify Your Personal Information

If you need to make any changes to your personal information, please email the HR Benefits Office at [montebenefits@montefiore.org](mailto:montebenefits@montefiore.org).

- You are required to enter a Primary Contact name and telephone number. It is important for Montefiore to know who to contact on your behalf in the event of an emergency.
- Enter your family member information. You must include each dependent's name, date of birth and Social Security Number.
- List your beneficiary designation(s) information for life insurance coverage. Be sure you have each beneficiary's name, date of birth and Social Security Number.

### Select Your Benefits

- You may elect or waive coverage in each benefit area. If you wish to waive coverage you must actively elect that option.
- Make your benefit elections for Medical, Dental, Vision, and Additional Contributory Life Insurance.
- Enroll family members for healthcare coverage.
- You must make a Healthcare and/or Dependent Care Flexible Spending Account election each year if you want either or both of these accounts.
- Designate a beneficiary for your Life and AD&D Insurance.

### Complete Your Enrollment

After you have completed your "To Do" list, select "Complete Enrollment" to review your elections. You can:

- Return to the benefits selection process and make changes, as long as the Election Period is open.
- Select "Exit Enrollment" to complete the selection process and receive a confirmation number. A benefits summary displays your confirmation number.

**The benefits selection process is not complete until you receive a confirmation number.**

### If You Don't Enroll

If you don't enroll within 30 days after you become eligible, you will default to the following coverages and will not be able to make any changes during the year until the next Annual Benefits Open Enrollment Period, unless you have a qualified change in status:

- Registered Nurses Health Plan – medical coverage for yourself only.
- Registered Nurses Dental Benefits – dental coverage for yourself only
- Vision Plan – vision coverage for yourself only
- Basic Non-contributory Life Insurance
- Business Travel Accident (BTA) and Accidental Death and Dismemberment Insurance.

You will not have coverage for any family members.





## HEALTHCARE

### Medical

Your Medical benefits pay for a variety of medical services and supplies in and out of the hospital. As an eligible registered nurse, you can choose Montefiore's Registered Nurses Health Plan, or you can elect no coverage. The Registered Nurses Health Plan is designed to encourage you to make use of Montefiore providers and facilities. Of course, you're free to use any physician or facility you choose.

### Preferred Provider Networks

Montefiore has contracted with Anthem (formerly Empire) for access to its Anthem Indemnity Network of physicians, hospitals and other healthcare providers. You can visit any physician in any specialty without a referral. Services received through Anthem's Indemnity Network are discounted but adhere to the cost-sharing percentages for in-network and out-of-network care established by the Plan.

### Care Guidance

The Care Guidance Program for Montefiore associates provides you with a Personal Health Nurse (PHN) who will work one-on-one with you for as long and as often as you need. This is a voluntary program that can provide support and resources to help you, or a member of your family, manage your or their health. Montefiore provides this program at no cost to Montefiore associates and their family members who are covered by Montefiore's Anthem BlueCross BlueShield medical plans (formerly Empire). All services are completely confidential and at any point in time, you have the opportunity to OPT OUT of the program. For more information, call **855.MMC.WELL (855.662.9355)** or email **mmccareguidance@montefiore.org**.

### Cost

If you are a regular full-time RN, Montefiore pays the full cost of medical coverage for you and your eligible family members. Eligible part-time nurses are required to contribute toward the cost of coverage on a pro rata basis based on the number of hours worked.

IF YOU USE THIS NETWORK, THE PLAN PAYS 100% OF THE SERVICES AND SUPPLIES PROVIDED BY:	
Hospitals and Other Facilities	Montefiore Moses Hospital, Jack D. Weiler Hospital (Einstein), The Children's Hospital at Montefiore, Montefiore Mt. Vernon Hospital, Montefiore Wakefield Hospital, Montefiore New Rochelle Hospital, Westchester Square, White Plains Hospital, Montefiore Nyack Hospital, Montefiore St. Luke's Cornwall Hospital, Montefiore Ambulatory Surgical Facilities, Department of Radiology, Montefiore Imaging Center, Advanced Endoscopy Center, Burke Rehabilitation Hospital, New York GI Center, and Montefiore Einstein Advanced Care.
Laboratories	Montefiore Moses Hospital, Jack D. Weiler Hospital (Einstein), The Children's Hospital at Montefiore, Montefiore Mt. Vernon Hospital, Montefiore Wakefield Hospital, Montefiore New Rochelle Hospital, Westchester Square, Montefiore Nyack Hospital and Montefiore St. Luke's Cornwall Hospital
Physicians and Therapists	<ul style="list-style-type: none"><li>• A Montefiore Medical PCP at a medical group facility</li><li>• A salaried Montefiore specialist at a Montefiore facility</li><li>• Highland Medical, P.C.</li></ul>
<b>Note:</b> If you do not enroll within 30 days of the date you first become eligible, you will automatically be enrolled in Registered Nurses Health Plan medical coverage for <b>yourself only</b> .	

## YOUR COST IF YOU USE:

	RN MONTEFIORE PROVIDER NETWORK	ANTHEM INDEMNITY NETWORK	OUT-OF-NETWORK
<b>Financial</b>			
Individual/Family Deductible	None	\$50/\$150	Not covered
Individual/Family Out-of-pocket Maximum (Deductible + Copayment + Coinsurance)	\$5,600/\$11,200	\$5,600/\$11,200	Not covered
Inpatient Care • Illness or Injury • Mental Health/Substance Abuse Care • Physical/Occupational Therapy or Rehab	\$0	\$0	\$0
High-Tech Radiology Services (including diagnostic MRI, MRA, CAT Scan, PET, Nuclear Cardiology)	\$0	\$0	\$0
Outpatient Surgery	\$0	\$0	\$0
Hospice – 210 days	\$0	\$0	\$0
Skilled Nursing Facility – 120 days	\$0	\$0	\$0
<b>Emergency Room Care</b>			
• Bona Fide Emergency	\$0	\$0	\$0
• Other than Bona Fide Emergency	\$0	\$0	\$0
• Urgent Care Facility	\$0	20% <sup>1</sup> coinsurance after deductible	20% <sup>2</sup> coinsurance after deductible
Preventive Care – Routine Physical Exam with PCP including OB/GYN; Routine Child Exam/ Immunizations; Routine Mammography	\$0	\$0	You may be balanced billed for amounts in excess of the in-network reimbursement
Outpatient Diagnostic and Laboratory Tests X-rays, Bone Density, Blood, Urine, etc.	\$0	20% <sup>1</sup> coinsurance after deductible	20% <sup>2</sup> coinsurance after deductible
<b>Physician Services (office visits)</b>			
• Primary Care Physician including OB/GYN and Mental Health/Substance Abuse Care	\$0	20% <sup>1</sup> coinsurance after deductible	20% <sup>2</sup> coinsurance after deductible
• Specialists	\$0	20% <sup>1</sup> coinsurance after deductible	20% <sup>2</sup> coinsurance after deductible
• Chiropractic Care – 10 visits	\$0	20% <sup>1</sup> coinsurance after deductible	20% <sup>2</sup> coinsurance after deductible
• Surgery	\$0	\$0 up to \$2,000 then 20% <sup>1</sup> coinsurance after deductible	\$0 up to \$2,000 then 20% <sup>2</sup> coinsurance after deductible
Home Health Care – 200 visits	\$0	\$0	\$0
Maternity	\$0	\$0 up to \$2,000 then 20% <sup>1</sup> coinsurance after deductible	\$0 up to \$2,000 then 20% <sup>2</sup> coinsurance after deductible
Allergy Testing and Treatment	\$0	20% <sup>1</sup> coinsurance after deductible	20% <sup>2</sup> coinsurance after deductible
Physical, Occupational and Speech Therapy	\$0	20% <sup>1</sup> coinsurance after deductible; 20% <sup>1</sup> coinsurance for physical therapy	20% <sup>2</sup> coinsurance after deductible; 20% <sup>2</sup> coinsurance for physical therapy

<sup>1</sup> If services are billed by a facility, then percentages are applied to covered charges which are based on the rate paid to like-kind Anthem in-network facilities if the facility is within the Anthem area (i.e., the New York metropolitan area including NJ and CT) or the facility's actual charge if it is outside of the Anthem area.

<sup>2</sup> Reasonable and Customary charges are based on 330% of the National Medicare Physician Fee Schedule. Anthem establishes its payment schedule for out of network claims based on the 70th percentile of these charges. The Plan benefit is then determined by applying the cost-sharing percentage (80%) to this amount; you are responsible for paying the balance of the bill to the provider.



Prescription Drug Benefits

Prescription drug benefits are included in your medical coverage.

IF YOU USE:	GENERIC	PREFERRED (FORMULARY)	NON-PREFERRED (NON-FORMULARY)
<b>Montefiore Outpatient Pharmacies</b>			
• Montefiore Pharmacy Formulary Drugs			
◦ up to a 90-day supply for refills and all other medications	\$0	\$0	\$0
<b>Express Scripts</b>			
• Retail Pharmacy <sup>1</sup> (up to a 30-day supply for each prescription)			
• Home Delivery Pharmacy Service			
◦ up to a 90-day supply for refills and all other medications	\$7 copay	\$10 copay	\$20 copay

<sup>1</sup> If you use a non-participating pharmacy in an area where there is a participating pharmacy available, your reimbursement will be 75% of the R&C cost of the prescription.

Prescription Drug Out-of-Pocket Maximum

Your share of expenses for prescriptions obtained from Montefiore outpatient pharmacies, Express Scripts participating retail pharmacies, home delivery pharmacy service or out-of-network pharmacies is limited to \$1,250 for any one covered person (\$2,500 for a family) in a calendar year. Once that maximum is reached, the Plan pays 100% of any remaining prescription drug expenses for that individual for the rest of the calendar year.

If you purchase a brand name medication (preferred and non-preferred) when a generic equivalent is available, you are responsible for the retail or mail order generic copayment plus the difference in cost between the generic and the brand name medication. The difference in cost between the generic and the brand name medication is not included in the out-of-pocket maximum and is not eligible for 100% reimbursement after the out-of-pocket maximum has been met.



## HEALTHCARE

### Dental

You can waive coverage or select one of the following:

- Cigna Dental Care (DHMO) — Under the DHMO, if you use a network primary care dentist, you make copayments only for specified covered services. You have no deductibles to pay, no claim forms to fill out and you don’t have to wait to be reimbursed.
- Montefiore’s Registered Nurses Dental Plan — administered by Cigna. You are free to use any dentist you choose including the Total Cigna DPPO Network and Montefiore’s Department of Dentistry.

If you are a regular full-time RN, Montefiore pays the full cost of the Cigna DHMO or Montefiore’s Registered Nurses Dental Plan for you and your eligible family members. Eligible part-time nurses are required to contribute toward the cost of coverage on a pro rata basis based on the number of hours worked.

**Note:** If you do not enroll within 30 days of the date you first become eligible, you will automatically be enrolled in Montefiore Medical Center Dental Benefits for Registered Nurses dental coverage for yourself only.

	DHMO (IN-NETWORK ONLY)	REGISTERED NURSES DENTAL PLAN
Dentists	Use DHMO dentist	Use any dentist
Annual Deductible	None	\$25 (for all services combined)
Annual Maximum Benefits (for each covered person)	None	\$2,250
Preventive & Diagnostic Services	100%	80% <sup>1</sup> coinsurance after deductible
Basic Services	70% coinsurance	80% <sup>1</sup> coinsurance after deductible
Major Services	70% coinsurance	50% <sup>1</sup> coinsurance after deductible
Orthodontics	50% coinsurance	80% <sup>1</sup> coinsurance after deductible
Lifetime Orthodontic Maximum	None	\$3,000

<sup>1</sup> Based on DPPO contracted fee schedules.



Vision

UnitedHealthcare Vision Plan provides in-network, covered-in-full benefits (up to the plan allowance and after applicable copay) for a comprehensive exam, eyeglasses with standard single vision, lined bifocal, or lined trifocal lenses, or lenticular lenses, standard scratch-resistant coating and the frame, or contact lenses in lieu of eyeglasses.

Copays for in-network services	
Exam	\$10.00
Materials	\$15.00
Benefit frequency	
Comprehensive Exam	Once every 12 months
Spectacle Lenses	Once every 12 months
Frames	Once every 24 months
Contact Lenses in Lieu of Eyeglasses	Once every 12 months
Frame benefit	
Private Practice Provider	\$150.00
Retail Chain Provider	\$150.00
Lens options	
Standard scratch-resistant coating lenses are covered in full. Other optional upgrades may be offered at a discount. (Discount varies by provider.)	
Contact lens benefit	

**Covered-in-full elective contact lenses** – The fitting/evaluation fees, contact lenses, and up to two follow-up visits are covered in full (after a copay). If you choose disposable contacts, up to 4 boxes are included when obtained from a network provider.

**All other elective contact lenses** – A \$125 allowance is applied toward the fitting/evaluation fees and purchase of contact lenses outside the covered selection (materials copay does not apply).

**Necessary contact lenses** – Covered in full after applicable copay.

A **Maternity Benefit** to help ensure optimal eye health for pregnant and breastfeeding women is also available. The maternity vision benefit offers:

- Coverage for a second eye exam each plan year at no additional premium cost.
- Coverage for a new pair of glasses (frames and lenses) at no additional premium cost if the vision prescription changes 0.5 diopter or greater in a plan year.

UnitedHealthcare Vision will not require proof of pregnancy.

Montefiore’s Vision Plan includes UnitedHealthcare’s **Children’s Eye Care Program** for members up to age 13 — at no additional cost.

For covered children under the age of 13, the Children’s Eye Care Program provides:

- A second eye examination each plan year.
- A second pair of glasses (frames and lenses) if as the result of the second exam there is a prescription change of 0.5 diopter or more. A diopter is the unit used to measure the optical power of the lens an eye requires.

Polycarbonate lenses for dependent children are also available at no additional cost.

SERVICES	OUT-OF-NETWORK REIMBURSEMENTS UP TO (COPAYS DO NOT APPLY)
Exam	\$50.00
Frames	\$45.00
Single Vision Lenses	\$50.00
Bifocal Lenses	\$60.00
Trifocal Lenses	\$80.00
Lenticular Lenses	\$80.00
Elective Contacts in Lieu of Eyeglasses	\$125.00
Necessary Contacts in Lieu of Eyeglasses	\$210.00
Laser vision benefit	
UnitedHealthcare Vision is partnered with the Laser Vision Network of America (LVNA) to provide our members with access to discounted laser vision correction providers. Members receive 15% off usual and customary pricing, 5% off promotional pricing at over 500 network provider locations and even greater discounts through set pricing at LasikPlus locations. For more information, call 1.888.563.4497 or visit <a href="http://www.uhclasik.com">www.uhclasik.com</a> .	



## FSA/BTA INSURANCE

### Flexible Spending Accounts

< You can establish a Flexible Spending Account (FSA) to pay out-of-pocket healthcare and/or dependent care expenses for you and your family members with dollars that are never taxed. Your contributions are deducted from each bi-weekly paycheck before taxes are calculated and withheld, lowering your taxable income.

- Use the Healthcare Account to pay out-of-pocket healthcare expenses for you and anyone you claim as a dependent on your federal income tax return – as well as children to age 26, regardless of whether they are dependent upon you – and whether or not they are enrolled in Montefiore's medical and/or dental plans. You may contribute up to \$3,200 each year to this account.
- Use the Dependent Care Account to pay day care related expenses for children under age 13 and/or an incapacitated adult you claim as a dependent on your federal income tax return. The care must be necessary so that you (and your spouse if you are married) can work. You may contribute up to \$5,000 each year to this account.

### Business Travel Accident (BTA) Insurance

In addition to your Life and Accident Insurance, this plan pays benefits in case of your death or dismemberment as the result of an accident while traveling on Montefiore business. Montefiore provides BTA Insurance equal to four times your annual base salary (minimum benefit \$100,000; maximum benefit \$1,000,000) at no cost to you. >



## DISABILITY, LIFE & ACCIDENT INSURANCE

### Disability

Disability benefits provide you with partial or full pay if you are ill or injured and unable to work. Benefits are provided under the following programs: Short Term Disability (includes Paid Sick Leave, New York State Statutory Disability, and Supplementary Sick Pay), Intermediate Term Disability, and Basic Long Term Disability (LTD). You have the option of purchasing additional LTD coverage.

### Life & Accident Insurance

Life Insurance pays a benefit to your beneficiary if you die from any cause while coverage is in effect. The benefit provides protection all during your active career with Montefiore, as long as you remain eligible.

- **Basic Non-contributory Life Insurance** – Montefiore provides Basic Non-contributory Life Insurance based on your annual salary (maximum coverage of \$60,000) – at no cost to you
- **Additional Contributory Life Insurance** – You can elect Additional Contributory Life Insurance of 25%, 50%, 75%, or 100% of your Basic Non-contributory Life Insurance. You pay the cost of any additional contributory coverage based on the amount of coverage you choose and your age.

FOR	BENEFITS BEGIN	PLAN BENEFITS EQUAL
<b>Short Term Disability</b>		
• <b>Paid Sick Leave</b>	On your first day of absence	100% of your base salary. You accrue 7 1/2 hours for each calendar month worked (900 hours maximum)
• <b>New York State Statutory Disability</b>	On the 8th calendar day of absence	50% of base salary; maximum benefit \$170/week (26-week maximum in 52-week period)
• <b>Supplementary Sick Pay</b>	After you have completed 90 continuous days at Montefiore and after your Paid Sick Leave is exhausted, while you receive New York State Disability	Maximum combined benefit \$280/week (\$110 plus \$170 NY State Statutory Disability benefits) (26-week maximum)
<b>Intermediate Term Disability</b>	After 180 days when short term disability benefits stop	Maximum benefit \$170/week (26-week maximum)
<b>Long Term Disability</b>	After 365 days of disability (when intermediate benefits stop)	50% of predisability earnings (maximum benefit \$430/month)

Accidental Death & Dismemberment (AD&D) Insurance pays full benefits in the event of your death; partial benefits if you lose hearing, sight or limb as the result of an accident. Montefiore automatically provides \$60,000 of AD&D Insurance to you..



## PAID TIME OFF/TUITION/SCHOLARSHIP

### Paid Time Off

Your Paid Time Off Benefits include:

- Vacation: 20 days per year (25 days after 5 years of employment).
- Holidays: 9 Hospital; 4 Personal.
- Probationary Period: Regular full time RN is 4 months. Regular part-time RN is 6 months.
- Weekends: 24 complete weekends per year
- Sick Leave: 12 days. Paid Sick Leave accruals are pro-rated for part-time RN's, based on the percentage of the full-time schedule worked.

### Tuition Reimbursement

Montefiore's reimburses 100% of your tuition, up to 18 credits each academic year (September 1 through August 31) for job-related courses leading to an undergraduate or graduate degree at an accredited institution.

You are eligible for the Tuition Reimbursement Program if you are a regular full-time RN or a regular part-time RN working at least 50% of a full-time schedule. Part-time RNs are eligible to receive a pro-rated benefit.

### Scholarship Program

The Montefiore Scholarship Program was established to provide incentives and the opportunity for the children of Montefiore associates to undertake a college education. Full-time regular associates (employed by Montefiore for at least one year prior to application) with children enrolling in the upcoming fall semester at accredited two-or four-year colleges, are invited to apply for a scholarship under the Montefiore Scholarship Program. Scholarships are awarded based on demonstrated financial need. Applications must be submitted by July 1, in advance of the fall semester.





## FINANCIAL SECURITY

### Financial Security

Montefiore makes a contribution to the NYSNA Pension Plan on your behalf in accordance with the terms of the Collective Bargaining Agreement.

The Montefiore Medical Center 403(b) Plan provides an excellent tool to help you save for your future financial security. You make your own investment decisions based on your investment strategy and the level of risk you are willing to accept. You can change your allocations and transfer amounts among investment options. You may be eligible to borrow from your accounts and, under certain circumstances, you may make a withdrawal. At any time during the year, to participate in the Plan, decline participation, direct your investments, change your contribution percentage, or, if you are eligible, make a “catch-up” contribution, contact Fidelity at 800.343.0860 or go to [www.netbenefits.com/atwork](http://www.netbenefits.com/atwork).

#### Your Pre-Tax Payroll Directed Contributions

A pre-tax contribution is a contribution to the Plan that you elect to have automatically deducted from your paycheck before Federal and, in general, state and local income taxes. Pre-tax payroll contributions are subject to Federal Social Security taxes. Your account is credited with investment earnings based on your portfolio's performance and accumulate tax-free while they remain in the Plan.

Upon distribution, pre-tax payroll contributions and earnings in your account will be subject to income taxation. If you make a withdrawal before reaching age 59½, you may be subject to a 10% Federal tax penalty. You are always 100% vested in your contributions.

#### Your Roth After-Tax Payroll Directed Contributions

A Roth contribution is a contribution to the Plan that you elect to have deducted from your paycheck after Federal, state and local income taxes and Federal Social Security taxes are withheld.

Qualified distributions of Roth after-tax contributions plus any earnings on those contributions will be tax-free if you are at least 59½ years old and have maintained the Roth account for at least five years. If the distribution is not qualified, your earnings on the after-tax contributions are subject to income taxes at the time of withdrawal and a 10% early distribution tax.

#### Limits on Payroll Directed Contributions

You may elect to contribute up to 70% of your compensation to the Plan on a pre-tax basis, Roth after-tax basis or a combination of the two.

#### Maximum Contributions

You may simultaneously make both pre-tax payroll directed contributions and Roth after-tax payroll directed contributions to the 403(b) Plan. However, your combined maximum contribution cannot exceed the annual Internal Revenue Service maximum.

For 2024, you can save up to a maximum of \$23,000. If you are age 50 or older in 2024, an additional catch-up contribution of \$7,500 – for a combined maximum of \$30,500 – will be made unless you “opt out” and choose not to contribute this additional catch-up amount..



## VOLUNTARY BENEFITS

Montefiore's Voluntary Benefits present a variety of products and services for you and your family. Some offer group discounts and the convenience of payroll deduction. You have direct access and control of your benefits and can enroll at any time during the year.

### Commuter Benefits Program

Whether you use mass transit, drive or a combination of both, you can save money just about any way you commute to work.

Through the Commuter Benefits Program you can qualify for significant tax advantages when you pay your mass transit and parking expenses through pre-tax payroll deductions. Your contributions are automatically deducted from your paycheck before taxes are calculated and withheld. This lowers your taxable income, so you save money on taxes!

It's convenient and easy to use with online ordering and home delivery plus direct payment – you don't have to wait for reimbursement. For more information contact Health Equity/WageWorks at **877.924.3967** or [www.wageworks.com](http://www.wageworks.com).

### 511NY Rideshare

511NY Rideshare is a no cost Ridematching, Traveler Services and Guaranteed Ride Program. You create a profile and find travelers who have similar travel routes and patterns. [511nyrideshare.org](http://511nyrideshare.org).

### Employee Discounts

- Corporate Offers – Save up to 70% on Broadway tickets. [www.CorporateOffers.com](http://www.CorporateOffers.com) **646.290.6419**.
- Virtual Exercise Resources – Physical fitness is important for wellness and wellbeing. Montefiore has discounted arrangements with fitness facilities in all boroughs and also provides access to many free and low-cost virtual offerings. (<https://www.mymontefiorebenefits.com/to-your-health/fitness-programs>).
- PerksConnect – Discounts on products and services from nationally recognized merchants as well as participating local businesses. There are no fees to register and you pay nothing to use the card. [montefiore.perksconnection.com](http://montefiore.perksconnection.com) **877.253.7100** Code: montefioremc.
- Pet Insurance – Nationwide Pet Insurance offers a choice of plans with different levels of coverage. Monthly premiums vary based on the type of plan you elect and the breed, age, and location of your cat or dog. There are also plans for avian and exotic animals. [www.petsnationwide.com](http://www.petsnationwide.com) **877.738.7874**.
- Plum Benefits powered by TicketsatWork — Special offers give you access to the leading travel and entertainment corporate benefits program in the world, [www.plumbenefits.com/signup](http://www.plumbenefits.com/signup) **212.660.1888** Code: ac1025828.
- Wireless Discounts
  - Verizon Connections – [www.verizon.com/connections](http://www.verizon.com/connections).
  - T-Mobile – Advantage Direct **866.464.8662** Code 12425TMOFAV.



## VOLUNTARY BENEFITS

### Special Promotions

- Automobile and Homeowners Insurance offered through:
  - Farmers Auto & Home® – [www.myautohome.farmers.com](http://www.myautohome.farmers.com) 844.296.3581.
  - Travelers – [www.travelers.com](http://www.travelers.com) 888.695.4640.
- Lasik Surgery – Montefiore Laser and Eye Care Center at Montefiore Medical Specialists of Westchester offers LASIK Surgery discounts of 20% off of the regular charge for you and your family members. 718.920.2020.
- Municipal Credit Union – Offers a full range of financial services. [www.nymcu.org](http://www.nymcu.org) 212.693.4900.
- Purchasing Power – Purchase new, brand-name computers, electronics and home appliances through payroll deductions. Shop Purchasing Power's secure website and enjoy the convenience of home delivery direct from the manufacturer. [www.Montefiore.PurchasingPower.com](http://www.Montefiore.PurchasingPower.com) 800.537.3134.

### Voluntary Insurance

You can purchase individual insurance policies offered at group rates.

- Voluntary Insurance Program (VIP) [www.mymmcbenefits.com](http://www.mymmcbenefits.com) 866.795.0355.
  - Critical Illness Insurance.
  - Personal Accident Insurance.
  - Universal Life Insurance with Long Term Care.



## REGULATORY NOTICES

Employers are required to provide regulatory notices regarding your rights and procedures to protect those rights. You may view, download or print a copy of these notices from MyMonteBenefits or request a print version of these notices from the HR Benefits Office by emailing [montebenefits@montefiore.org](mailto:montebenefits@montefiore.org) or by calling **914.349.8531**. Here's a summary of the notices.

**Children's Health Insurance Program (CHIP)** – If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from its Medicaid or CHIP programs.

**Claiming Healthcare Benefits** – Federal law requires your healthcare coverage to provide a process for filing claims for services and supplies that are urgent in nature in addition to procedures for post service claims.

**Consolidated Omnibus Budget Reconciliation Act (COBRA)** – COBRA gives workers and their families who lose their health benefits under certain circumstances the right to choose to continue their group health benefits for limited periods of time.

**Family and Medical Leave Act (FMLA)** – FMLA provides up to 12 work weeks of unpaid leave for certain family and medical reasons. If you utilize FMLA leave, you can elect to continue your health coverage provided you pay the required premium. At the end of the leave, you generally have the right to return to the same job or an equivalent position.

**Genetic Information Nondiscrimination Act (GINA)** – GINA prohibits employers, employment agencies, and labor unions from discriminating against employees based on genetic information. It also prohibits insurers from charging higher premiums based on genetic information or from using genetic information in underwriting decisions.

**HIPAA Special Enrollment Rights** – You may request a special enrollment in Montefiore's healthcare coverage under the following circumstances:

- Within 30 days of the date:
  - You or a family member loses other group health plan coverage (such as a spouse's plan).
  - You acquire a new family member through marriage, birth, adoption or legal guardianship.
- Within 60 days of the date you or a family member:
  - Is no longer eligible for coverage under the State's Children's Health Insurance Program (CHIP) or Medicaid.
  - Become eligible for premium assistance under the State's Children's Health Insurance Program (CHIP) or Medicaid.

**Marketplace Notice** – This notice provides some basic information about the Marketplace and employment-based health coverage offered by Montefiore-sponsored group health plans.





## REGULATORY NOTICES

**Medicare Part D Notice** – If you and/or your family members are Medicare-eligible, federal law offers more choices for prescription drug coverage.

**Michelle's Law** – This law extends health benefits eligibility for up to one year for a student dependent child who would otherwise lose coverage due to loss of student status as a result of a medically necessary leave of absence.

**Newborns' and Mothers' Health Protection Act (Newborns' Act)** – The Newborns' and Mothers' Health Protection Act requires group health plans that offer maternity coverage to pay for at least a 48-hour hospital stay following childbirth (96-hour hospital stay in the case of Cesarean section).

**New York City's Earned Safe and Sick Time Act (ESSTA)** – ESSTA provides employees who work in New York City the right to use safe and sick leave for the care and treatment of themselves or a family member and to seek legal and social services assistance or take other safety measures if the employee or a family member may be the victim of any act or threat of domestic violence or unwanted sexual contact, stalking or human trafficking.

**Non-Discrimination Notice** – Montefiore's Benefits Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, religion, sex, national origin, disability, sexual orientation, gender identity or expression, physical appearance or age.

**NY Paid Family Leave (PFL)** – New York Paid Family Leave provides job security and paid time off from work for a specified period of time to care for a new child, a seriously ill family member or if a family member is called to active military service.

**Notice of Privacy Practices** – These privacy rules set limits on how health plans, pharmacies, hospitals, clinics, nursing homes and other direct-care providers use individually identifiable health information.

**Summary of Benefits and Coverage (SBC)** – A Summary of Benefits and Coverage (SBC) is a standardized summary describing the benefits and limitations of each medical option.

**Transparency in Coverage Disclosure** – Transparency in coverage (TIC) regulations require that Montefiore make machine-readable files (MRFs), for the plan we administer and maintain, available to the public. The files contain the negotiated rates for in-network providers and allowed amounts derived from historical claims for out-of-network providers. A machine-readable file is a digital representation of data or information in a file that can be imported or read by a computer system for further processing. They are not means for use by members.

**Uniform Services Employment and Re-employment Rights Act of 1994 (USERRA)** – USERRA protects the job rights of individuals who voluntarily or involuntarily leave employment positions to undertake military service or certain types of service in the National Disaster Medical System. USERRA also prohibits employers from discriminating against past and present members of the uniformed services, and applicants to the uniformed services.

**Women's Health and Cancer Rights Act (WHCRA)** – The Women's Health and Cancer Rights Act (WHCRA) requires group health plans and health insurance issuers, which provide coverage for medical and surgical benefits with respect to mastectomies, to also cover certain post-mastectomy benefits. These benefits include reconstructive surgery and the treatment of complications.

This overview provides only highlights of the Montefiore Associate Benefits & Wellness Program in effect on January 1, 2024 and does not attempt to cover all details. The actual provisions of the plans are governed by the legal documents for each. If there is a discrepancy between the information presented here and the legal documents, the legal documents will govern.

Montefiore expects and intends to continue the plans indefinitely, but reserves the right to change, modify or terminate them, in whole or in part, at any time and for any reason.