

Welcome to Your 2023 Benefits!

At Princeton, you are part of a diverse community with a broad range of experiences, perspectives, and needs. To help you and your family thrive, we offer a robust range of benefits to support your physical, mental, and financial wellness.

Benefits 2023
provides highlights
of the benefits programs
available to benefitseligible faculty and
staff of Princeton
University.

This communication is intended to be a Summary of Material Modifications (SMM) for the healthcare, life insurance, retirement, and other benefits plans and programs. It describes your benefits plans including any changes effective January 1, 2023. Although Princeton intends to continue these benefits, the University reserves the right to amend or terminate

these plans at any time. You can find full details regarding coverage, eligibility, and limitations in the Summary Plan Descriptions (SPDs) and Certificates of Coverage on our website. You may also request to receive a paper copy of an SPD or a Certificate of Coverage by contacting the Benefits Team.

As a requirement of the Patient Protection and Affordable Care Act (PPACA), Princeton must provide a Summary of Benefits Coverage (SBC) to all participants and their dependents. The SBC is designed to provide you with a summary about a health plan's benefits and coverage to help you better understand and evaluate your health insurance choices. An SBC for each medical plan is available on our website. You may request a paper copy of any SBC by contacting the Benefits Team.

If there are any discrepancies between the information in this publication, verbal representations, and the plan documents, the plan documents always govern.

You are entitled to receive this SMM under the Employee Retirement Income Security Act of 1974 (ERISA). You also have other important rights under ERISA. These are explained in more detail on our website.

Human Resources Benefits Team (609) 258-3302 benefits@princeton.edu | hr.princeton.edu/thrive







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When It's Time To Enroll

The following pages provide information about eligibility for and enrolling in your benefits.

Eligibility

You are eligible for benefits if you are a regular or term biweekly- or monthly-paid employee who fills an approved budgeted position on the regular payroll. Regular and term employees are scheduled to work 50% or more of the normal workweek schedule (36¼ or 40 hours, depending on the position) for 4.5 months or more and receive pay directly from the University. Postdoctoral research fellows are eligible for benefits regardless of their duty time. Most benefits begin on your date of hire.

	Regular HR Staff	Regular Dean of the Faculty	Visiting Faculty	Postdoc. Research Fellow	Visiting Fellow ¹
Medical and Prescription Drug ² Plans	✓	✓	√	✓	√
Health Savings Account (HSA)	√	✓	√	√3	
Dental Plans	√	✓	√	✓	
Vision Plan	√	✓	√	✓	
Castlight	✓	✓	√	✓	
My Health Coach and Incentive Programs ⁴	✓	✓		✓	
Health Advocate	✓	✓	√	✓	
2nd.MD and Medical Certainty Consult ⁴	✓	✓		✓	
Supplemental Health Plans	√	✓	√	✓	
Healthcare FSA	✓	✓	√	√3	
Dependent Care FSA	✓	✓	√	√3	
Life Insurance	√	✓	√	✓	
Princeton University Retirement Plan (PURP)	✓	✓	√ 5	\ 6	
Retirement Savings Plan	✓	✓	✓	✓	✓
Short Term Disability ⁷	✓	✓	✓		✓
Long Term Disability	✓	✓			
Long Term Care Plan	✓	✓			
Legal Services Plan	✓	✓	√	✓	
Commuter Benefits Program	✓	✓	✓	√3	

- 1 Unpaid postdoc. research fellows and visiting fellows may be eligible for medical and prescription drug plan coverage. Contact your department for further information.
- 2 Exceptions exist for J-1 visa holders. See page 3.
- 3 Deductions for an HSA or FSA and/or the Commuter Benefits Program can only be taken pretax from the wage supplement.
- 4 You must be enrolled in a Princeton medical plan to receive incentive.
- 5 Visiting Faculty may be eligible for PURP. Contact your department for further information.
- 6 Eligible for a 10% wage supplement in lieu of PURP contributions.
- 7 Eligibility and disability benefits may vary. Contact the Benefits Team for further information.

J-1 Visa Holders

Employees on a J-1 Visa may elect medical coverage from either the HMO Plan or J-1 Visa Plan, except for employees who live in California who are only eligible for the J-1 Visa Plan.

If you are a J-1 Visa holder, the U.S. government requires that you and your dependents have health insurance coverage for the entire time you are an exchange scholar at Princeton University. If you waive the medical coverage offered by Princeton, you must be covered for health

insurance through your home country, institution, or private policy. The health insurance must meet certain requirements. For more information visit j1visa.state.gov/sponsors/how-to-administer-a-program/.

Princeton provides up to \$50,000 toward expenses associated with a medical evacuation to your home country and up to \$25,000 for the repatriation of remains.

Dependent Eligibility and Verification

Eligible dependents include a spouse and eligible children until December 31 of the year in which they turn 26. Eligible children include biological, step, adopted, and foster children or children for whom you are the legal guardian. Coverage is available to eligible children regardless of student, residential, or marital status; the spouse and/or children of an eligible child are not eligible. Children who are physically or mentally challenged and become disabled before the end of the calendar year in which they turn 26 may still be eligible for coverage.

Ineligible dependents include:

- · Civil union or domestic partners
- Former stepchildren of ex-spouses, even if you are required to provide health insurance coverage as dictated under a Qualified Medical Child Support Order (QMCSO)
- Extended family members—mother, father, siblings, grandparents, in-laws, etc.—under any circumstances.

Verification

You must provide dependent verification documentation within 31 days from the effective date of your coverage for each dependent you are enrolling in Princeton's health plans.

Please submit copies of documents by fax to (609) 258-5920 or by email to dv31@princeton.edu. If you are sending the documents via SecureSend at secureSend.princeton.edu (log in to SecureSend with your NetID and password), you must address the email to dv31@princeton.edu. You can also call the Benefits Team at (609) 258-3302. All documentation is kept confidential.

DEPENDENT VERIFICATION: **Documentation Required**

Below is a list of required dependent verification documentation. We reserve the right to request additional documentation as necessary.

SPOUSE

Marriage certificate¹ and most recently filed tax return with Social Security numbers and all financial information redacted, i.e., blacked out, by the employee

BIOLOGICAL CHILD²

Birth certificate3

ADOPTED CHILD²

Legal adoption papers

STEPCHILD²

Birth certificate including names of biological parents and employee's marriage certificate

LEGAL WARD²

Legal guardianship papers showing full financial support and custody responsibilities

FOSTER CHILD²

Official placement papers

- 1 Foreign nationals can provide current visa documentation showing marriage in lieu of a marriage certificate.
- 2 Must be under age 26 at the time of enrollment. Once enrolled, coverage can continue through the calendar year in which the child turns 26.
- 3 Foreign nationals can provide current visa documentation listing dependent child(ren) in lieu of a birth certificate(s).

When To Enroll or Make Changes

You can enroll or make changes to your benefits during certain time periods.

New Hires

Newly hired employees must enroll in a healthcare plan within 31 days from your date of hire, otherwise you will have no coverage with Princeton in 2023 unless you experience a qualifying status event. Coverage is effective on your date of hire. If you are on a J-1 Visa and do not enroll or waive coverage, you will be defaulted into the J-1 Visa Plan with individual coverage only.

The chart below summarizes when new hires can enroll in benefits and when coverage is effective.

Benefit	When You Can Enroll/When Coverage Is Effective
Healthcare (Medical, Dental, Vision) Plans	Enroll within 31 days of your date of hire. Coverage is effective on your date of hire.
Flexible Spending Accounts and Life insurance	Enroll within 31 days of your date of hire. Coverage is effective on the first of the month following your date of hire (or, if you are hired on the first day of the month, on that day).
Short Term Disability and Long Term Disability Plans	You are automatically enrolled on your date of hire.
Princeton University Retirement Plan (PURP)	You are automatically enrolled on the first day of the month following your date of hire (or, if you are hired on the first day of the month, on that day).
Retirement Savings Plan	You are eligible to participate on your date of hire. You must be receiving pay directly from Princeton or be a postdoctoral research fellow, regardless of duty time. Princeton University automatically enrolls you in the Retirement Savings Plan at 5% of your pay on your date of hire. You can change your election or waive out of the plan at any time. If you waive out of the plan within 90 days of the first contribution, you may withdraw all your automatic contributions.
Staff Educational Assistance Plan	You are eligible within 30 days of your one year anniversary of benefits-eligible service.
Children's Educational Assistance Plan	You are eligible after five years of benefits-eligible service. The plan is governed by certain rules if you have a break in service.

See the chart on **page 6** for information on how to enroll.

New Hire Payroll Deductions

If your coverage is effective between the 1st and 15th of the month, you will be charged a full month premium. If your coverage is effective between the 16th and 31st, your deductions will start the following month.



All Employees

All eligible employees have the opportunity to enroll in or make changes to benefits coverage each fall, during the Open Enrollment period, for benefits effective January 1 of the following year.

Qualifying Status Events

Your health and welfare benefits remain in effect for the calendar year, unless you experience a qualifying status event, like:

- · Marriage or divorce
- · Birth or adoption of a child
- · Death of a spouse or child
- A loss or gain of benefits eligibility for yourself, a spouse, or a child
- Transition from full-time to part-time status, or vice versa, that changes eligibility for benefits for you or a spouse
- · You or a spouse take or return from an unpaid leave of absence
- Any significant change in your family's healthcare plan coverage through a spouse's healthcare plan

If you experience a qualifying status event, you must make changes to your coverage within 31 days, or within 90 days for the birth or adoption of a child. Since these changes must comply with IRS regulations, you must provide proper documentation for your change, such as a birth certificate or divorce decree, and your benefits changes must be consistent with the qualifying status event. Most changes are effective the first day of the month following the date of the event (or, if the date of the event is the first day of the month, on that day). In the case of birth or adoption, the effective date is retroactive to the date of the birth or adoption.

If your qualifying status event is not listed in HR Self Service (under "Life Event"), contact the Benefits Team for assistance.

Retiree Benefits Eligibility

Princeton provides retiree health benefits to employees who meet certain age and service requirements. For those hired or rehired on or after January 1, 2003, you must be at least age 55, have at least 10 years of benefits-eligible service, and meet the "rule of 75" where age plus benefits-eligible service equals 75. For full eligibility details, visit hr.princeton.edu/retiree-eligibility-enrollment or contact the Benefits Team.



Changes Allowed Without a Qualifying Status Event

Regardless of whether you have a qualifying status event, you can make these changes during the year:

Elect, change, or stop contributing to the Health Savings Account (HSA) if enrolled in the CDHP medical plan

Elect or change beneficiary designations

Elect, change, or waive coverage under supplemental, spousal, or child life insurance evidence of insurability (EOI) may be required

Elect, change, or terminate group long term care coverage—EOI is required

Elect, change, or terminate participation in the Retirement Savings Plan

How To Enroll or Make Changes

You can enroll and make most benefits elections through HR Self Service at <u>princeton.edu/selfservice</u>. Once logged in, select Benefit Details. Voluntary Benefits (Supplemental Health Plans and Legal Services Plan) are available through Winston Benefits.

The following chart outlines how to view, enroll, or make changes to your benefits:

Benefit	Actions You Can Take	Where To Go	
Medical Plans Dental Plans Vision Plan Life Insurance	Enroll and make changes Enroll and make changes, designate beneficiaries	 HR Self Service Go to princeton.edu/selfservice Click Log In Here Enter your netID and password From HR Self Service, select Benefit Details 7 days a week between 8:00 a.m. and midnight 	
Health Savings Account	Enroll	HR Self Service (see above)	
(HSA)	Change your contributions	Contact the Benefits Team at benefits@princeton.edu	
	Manage accounts, file claims for reimbursement	Go to payflex.com Your Benefits ID number is required to register with PayFlex. Find your Benefits ID number in HR Self Service under Benefit Details.	
Flexible Spending	Enroll	HR Self Service (see above)	
Accounts (HFSA, DFSA)	Manage accounts, file claims for reimbursement	Go to payflex.com Your Benefits ID number is required (see above)	
Commuter Benefits	Enroll and make changes	Go to payflex.com Your Benefits ID number is required (see above)	
Supplemental Health Plans	 Enroll and make changes Talk to a benefits counselor to choose which plans are right for you 	• Call (855) 393-3601 Monday through Friday, 8:30 a.m. to 8:00 p.m., or	
Legal Services Plan	Enroll and make changes	Access myprincetonbenefits.com	
Retirement Savings Plan	Enroll, change your contributions	HR Self Service (see above)	
	Manage account and investments, designate beneficiaries	tiaa.org/princeton, or call (800) 842-2776	
Princeton University Retirement Plan	Manage account and investments, designate beneficiaries	tiaa.org/princeton, or call (800) 842-2776	

If you do not have access to a computer, kiosks for online access and enrollment are available at the locations listed below. HR Self Service is accessible via mobile device.

- East Pyne: Chancellor Green Rotunda
- 100 Overlook Center, Suite 400: Office of Human Resources



How To Go Paperless

If you prefer to receive benefits communications by email instead of print, select "Go Paperless" in HR Self Service. Your selection takes effect immediately for all future communications except those that the Office of Human Resources determines necessary to communicate to you in paper form.



Stay Healthy With Medical Coverage

Princeton University offers a range of comprehensive medical plan options:



Consumer Directed Health Plan (CDHP)-Aetna



Princeton Health Plan (PHP)—Aetna and UnitedHealthcare



HMO Plan-Aetna

All plans listed above cover preventive services—like annual exams, colonoscopies, and mammograms—at 100% in-network before deductible. Prescription drug coverage is provided through OptumRx. The Comparing Your Options chart on pages 10 and 11 provides an overview of coverage by plan.

If you are on a J-1 Visa, you are eligible to enroll in the HMO Plan or J-1 Visa Plan. For more information on the J-1 Visa Plan, <u>refer to page 9</u>.

offers affordable,
comprehensive
healthcare plans with
the flexibility to select
coverage that best
meets your needs.

Consumer Directed Health Plan with Health Savings Account

The Consumer Directed Health Plan (CDHP), administered by Aetna, provides three levels of coverage: in-network preferred, in-network non-preferred, and out-of-network. This plan has the lowest premium contributions and helps you manage deductibles and other out-of-pocket expenses with a tax-advantaged Health Savings Account (HSA).

For most in-network services and prescription drug coverage, you must first meet a deductible of \$1,500/ individual or \$3,000/family before coverage is provided. For family coverage, there is no individual deductible, so the family deductible must be reached before coverage begins. However, there is an individual out-of-pocket maximum (OPM). If an individual incurs expenses that exceed the individual OPM (\$3,000), covered expenses for that individual are reimbursed at 100% through the end of the calendar year, even if the full family OPM (\$6,000) has not yet been met. Other family members would have to satisfy the remaining portion of the family OPM before their expenses are reimbursed at 100%. See page 10.

If you elect coverage under the CDHP, you have the option to enroll in an HSA administered by PayFlex. The HSA is an

account you own and can contribute to on a pretax basis to pay for healthcare expenses now, as well as in the future. Your account is yours to keep even if you leave Princeton or retire.

If you elect the HSA, Princeton will contribute \$200 for individual coverage and \$400 for family, spouse, or employee and child(ren) coverage into your HSA in a lump sum on an annual basis. You can also contribute money to your HSA on a pretax basis through payroll deductions. You are not required to contribute any funds to receive Princeton's contribution. You can only use your HSA contributions after you have contributed them. The chart below shows how contributions can add up relative to IRS limits.

Important Reminders About HSA Contributions and Exclusions: Under IRS regulations, if you enroll in the HSA, you cannot participate in a healthcare flexible spending account (FSA), enroll in Medicare, or be covered under another medical plan that is not an IRS-qualified high deductible plan. Additional rules and exclusions apply. Visit our website at hr.princeton.edu/thrive/wellness-resources/health-savings-account and review A Consumer's Guide to the Health Savings Account for details.

Maximize Your Contributions

	Individual Coverage	Family, Spouse, or Employee and Children Coverage
Princeton Contributions	\$200	\$400
2023 Maximum IRS Contribution Limit (includes Princeton contributions)	\$3,850	\$7,750
Catch-up Contributions if Age 55 or Older	Additional \$1,000	Additional \$1,000

HSA Advantages

- You and Princeton contribute to your HSA, which can be used to pay for eligible healthcare expenses including deductibles, prescription drugs, and more
- There is a triple tax advantage money is contributed tax-free, grows tax free, and distributions used for eligible expenses are tax-free
- You can **invest your funds** once your account balance reaches \$1,000
- Unused money rolls over from year-to-year and is yours to keep, even
 if you leave or retire from Princeton
- You can elect, change, or end your HSA elections at any time during the year by contacting the Benefits Team at <u>benefits@princeton.edu</u>.





Medical Plan ID Cards

When you enroll or make changes to your medical coverage, you'll receive an ID card in the mail at home. You can print a temporary ID card though the provider website. You'll receive a separate ID card for the Prescription Drug Plan.

Princeton Health Plan

The Princeton Health Plan (PHP), administered by Aetna or UnitedHealthcare, is a point-of-service plan. Like the CDHP, the PHP provides three levels of coverage: in-network preferred, in-network non-preferred, and out-of-network. Although you are not required to elect a primary care physician (PCP), we recommend you select and use a PCP for yourself and your family members to help manage care. You do not need a referral to visit a specialist.

The UnitedHealthcare PHP maintains a list of specialist categories with in-network tiered providers (Premium Tier 1), who have demonstrated higher quality and efficiency of patient care. You are charged a higher amount for utilizing an in-network non-tiered provider in certain specialist categories. See page 10, or visit hr.princeton.edu/thrive/health/2023-unitedhealthcare-princeton-health-plan.

For the PHP, out-of-pocket maximums are based on your annual base salary as of January 1, 2023, or your date of hire, if later (see page 10).

HMO

With the HMO Plan administered by Aetna, you must select a PCP from within the HMO network to manage all your healthcare needs. Your PCP gives you the necessary referrals to visit a specialist. Healthcare services are covered only when provided by your selected PCP or specialist to whom you are referred.

Due to state regulations, if you live in California, you are not able to elect coverage under the HMO Plan. If you and/ or your dependents reside outside of NJ, NY, and PA, you should check that the HMO network is available in your area prior to electing coverage.

Picwell Helps You Choose Your Plan

Access <u>princeton.picwell.com</u>, an online decision support tool for help selecting a medical plan for you and your family. Picwell asks a few questions and uses your answers to provide a personalized health cost prediction and ranking for each medical plan you are eligible to elect. Personal information is anonymous and is not stored or shared.

I-1 Visa Plan

Employees here on a J-1 Visa may elect coverage from either the HMO Plan or the J-1 Visa Plan, both administered by Aetna. The J-1 Visa Plan is only available to non-U.S. citizens on a J-1 Visa, and is the default option for J-1 Visa holders who do not elect a medical plan.

Although you can utilize any hospital, facility, or physician of your choice, you can take advantage of Aetna's negotiated rates if you select a physician in Aetna's Open Choice PPO network. Using network providers may lower your out-of-pocket expenses. If you use a doctor outside of the Open Choice PPO network you must submit a claim form to Aetna to be reimbursed for expenses. Reimbursement though this plan does not begin until you or your dependents reach the annual deductible. After reaching the deductible, you pay 20% for eligible services until you reach the out-of-pocket maximum.

Comparing Your Options

Please note: The dollar or percentage amounts in the chart below reflect the patient-paid portion of the incurred medical costs.

		CDHP with HSA			Aetna PHP			UnitedHealthcare PHP)	НМО	J-1 Visa
	In-Network Preferred	In-Network Non-Preferred	Out-of-Network ¹	In-Network Preferred	In-Network Non-Preferred	Out-of-Network ¹	In-Network Preferred	In-Network Non-Preferred	Out-of-Network ¹	In-Network Only	In- or Out- of Network ¹
Annual Deductible Individual/Family	\$1,500	/\$3,000	\$3,000/\$6,000	\$200,	/\$400	\$750/\$1,500	\$200	/\$400	\$750/\$1,500	\$0	\$500/\$1,000
Out-of-Pocket Maximum (OPM) Individual/Family	\$3,000	/\$6,000 ²	\$6,000/\$12,000 ²		see salary tiers belov	N		see salary tiers below		\$2,500/\$5,000	\$2,500/\$5,000
Salary Tiers • \$75,000 and under • \$75,001-\$150,000 • \$150,001 and over	N/A	N/A	N/A	, ,	/\$3,100 /\$4,700 /\$6,200	\$4,500/\$9,000 \$4,700/\$9,400 \$6,200/\$12,400	\$2,350	/\$3,100 /\$4,700 /\$6,200	\$4,500/\$9,000 \$4,700/\$9,400 \$6,200/\$12,400	N/A	N/A
Physician Visits											
Preventive Care and Immunizations ³	Ş	80	50% after deductible	\$	0	40% after deductible	\$	80	40% after deductible	\$0	20% after deductible
Teladoc General Medicine	\$49 until deductil	ble is met, then \$0	N/A	\$	0	N/A	\$	00	N/A	\$0	\$49 until deductible is met, then \$0
Primary Care Physician (PCP)	20% after	deductible	50% after deductible	\$20 0	copay	40% after deductible	\$20	copay	40% after deductible	\$20 copay	20% after deductible
Standard Specialists	20% after	deductible	50% after deductible	\$35 (copay	40% after deductible	\$30	copay	40% after deductible	\$25 copay	20% after deductible
Tiered Specialists ⁴	N	/A	N/A	N.	/A	N/A	\$30 copay ⁴	\$60 copay ⁴	40% after deductible	N/A	N/A
Emergency Services											
Urgent Care Center	\$0 after o	deductible	50% after deductible	\$30 0	copay	40% after deductible	\$30	copay	40% after deductible	\$25 copay	20% after deductible
Emergency Room (No coverage for non- emergencies)		\$0 after deductible			\$175 copay (waived if admitted))		\$175 copay (waived if admitted)		\$175 copay (waived if admitted)	20% after deductible
Inpatient Hospital Services ⁵											
Medical and Surgical Procedures	20% after	deductible	50% after deductible	10% after	deductible	40% after deductible	10% after deductible ⁴	20% after deductible ⁴	40% after deductible	\$175 copay	20% after deductible
Mental Health	20% after	deductible	50% after deductible	10% after	deductible	40% after deductible	10% after	deductible	40% after deductible	\$175 copay	20% after deductible

¹ If you choose to go out-of-network under the CDHP and PHP, costs above 180% of the Medicare allowable rate are your responsibility.

If you choose to go out-of-network under the J-1 Visa, costs above the 70th percentile of Fair Health are your responsibility.

Medical Insurance for Business Travel Outside the U.S.

When traveling on University-approved business outside of the U.S., benefits-eligible employees and accompanying family members are covered by an international travel medical policy through SOS International. For details go to travel.princeton.edu/international-sos.



² The OPM is on an individual basis. If any covered person exceeds the individual OPM, covered expenses for that person are reimbursed at 100%, even if the full family OPM has not yet been met.

³ Includes seven well-baby visits in the first year of a child's life.

⁴ For UHC Tiered Specialists, see *Preferred Providers and Laboratories* on https://hr.nceton.edu/thrive/health/2023-unitedhealthcare-princeton-health-plan

⁵ Coverage requires precertification.

Comparing Your Options (continued)

For more details about each plan, review this overview of key features. All plans include prescription coverage; **see page 14**. More information about all the plans is available on our website at **hr.princeton.edu/thrive**.

Please note: The dollar or percentage amounts in the chart below reflect the patient-paid portion of the incurred medical costs.

		CDHP with HSA			Aetna PHP			UnitedHealthcare PHI	P	НМО	J-1 Visa
	In-Network Preferred	In-Network Non-Preferred	Out-of-Network ¹	In-Network Preferred	In-Network Non-Preferred	Out-of-Network ¹	In-Network Preferred	In-Network Non-Preferred	Out-of-Network ¹	In-Network Only	In- or Out- of Network ¹
Outpatient Services											
Surgical Procedures ² Independent Facility/Hospital	20% after	deductible	50% after deductible	10% afte	er deductible	40% after deductible	10% after deductible ³	20% after deductible ³	40% after deductible	\$0/\$75 copay	20% after deductible
Laboratory ⁴	\$0 after deductible	40% after deductible	Not covered	\$0	40% after deductible	Not covered	\$0	40% after deductible	Not Covered	\$0	20% after deductible
Radiology (X-Ray) Independent Facility/Hospital	\$0 after deductible/	/20% after deductible	Not covered	\$0/20% af	ter deductible	Not covered	\$0/20% after	er deductible	Not covered	\$0/\$50 copay	20% after deductible
Hi-Tech Radiology ² (MRI, CAT, etc.) Independent Facility/Hospital	\$0 after deductible/	/20% after deductible	Not covered	\$0/20% af	ter deductible	Not covered	\$0/20% afte	er deductible	Not covered	\$0/\$100 copay	20% after deductible
Mental Health	20% after	deductible	25% after deductible	\$20) copay	25%; no deductible	\$20	copay	25%; no deductible	\$20 copay	20% after deductible
Annual Eye Exam/ Prescription Eyeglasses and/or Contact Lenses	Not c	overed	Not covered	Not	covered	Not covered	Not c	overed	Not covered	\$25 copay ⁵	Not covered
Physical Therapy (100 visits per calendar year)	20% after	deductible	50% after deductible	10% afte	er deductible	50% after deductible	10% after	deductible	50% after deductible	\$15 copay	20% after deductible
Chiropractic Care (20 visits per calendar year)	20% after	deductible	50% after deductible	\$35	5 copay	40% after deductible	\$30	copay	40% after deductible	\$25 copay	20% after deductible
Acupuncture (20 visits per calendar year)	20% after	deductible	50% after deductible	\$35	5 copay	40% after deductible	\$30	copay	40% after deductible	\$25 copay	20% after deductible

- 1 If you choose to go out-of-network under the CDHP and PHP, costs above 180% of the Medicare allowable rate are your responsibility.

 If you choose to go out-of-network under the J-1 Visa, costs above the 70th percentile of Fair Health are your responsibility.
- 2 Coverage requires precertification.
- 3 For UHC Tiered Specialists, see *Preferred Providers and Laboratories* on <u>hr.princeton.edu/thrive/health/2023-unitedhealthcare-princeton-health-plan</u>
- 4 Quest Diagnostics and LabCorp are preferred labs.
- 5 \$70 reimbursement for frames or lenses once every 2 years, and a 100% reimbursement provided to children up to age 18 for frames and lenses each year.



Family Planning and Fertility

These services are covered under all of the medical plans in-network through Kindbody. <u>See page 23</u> and visit <u>hr.princeton.edu/thrive/wellness-resources/fertility-family-planning-benefits-kindbody</u>.

Limits on Out-of-Network Costs

You may seek care outside the network for all plans except for the HMO. However, not all out-of-network services are covered, and they can cost significantly more than in-network services. For this reason, when you choose to go out-of-network the maximum the plans reimburse is limited using data provided by Medicare. This amount, called the *recognized charge*, is calculated at 180% of the Medicare allowable rate for most services. You will be responsible for costs above the allowable rate. For the J-1 Visa Plan, out-of-network costs are subject to reasonable and customary limits.

11 • Learn. Choose. Thrive.

Medical Plan Rates

The chart below provides monthly contribution costs, which are deducted pretax from your pay. Biweekly-paid employee deductions are taken twice a month; if you receive a third paycheck in a month, deductions are not taken.

Monthly Rates

monthly rates						
	Employee	Employee and Children	Employee and Spouse	Employee and Family		
Aetna Consumer Directed Health Plan (CDHP)	\$21	\$63	\$85	\$127		
Aetna or UnitedHealthcare Princeton Health Plan (PHP)	\$129	\$359	\$456	\$675		
Aetna HMO Plan		Refer to the salary tiers ¹ below				
\$75,000 and under	\$79	\$229	\$308	\$473		
\$75,001-\$150,000	\$82	\$242	\$324	\$496		
\$150,001 and over	\$87	\$252	\$338	\$518		
Aetna J-1 Visa Plan	\$0	\$288	\$383	\$583		

¹ Your salary tier is based on your annual base salary as of January 1, 2023, or your date of hire, if later.

Get The Most Out Of Your Medical Plan

Whichever Princeton medical plan you choose, it's important to ensure you get the most value from your coverage.

Precertification

Various services such as inpatient stays, certain tests and procedures, outpatient surgery, and high-tech radiology require precertification by Aetna or prior authorization by UnitedHealthcare. If you do not use an in-network provider, you are responsible for obtaining precertification.

Preferred Labs

Quest Diagnostics and LabCorp are the preferred labs for both Aetna and UnitedHeathcare. If you use any other in-network lab, you are charged more and must meet the annual deductible. There is no coverage for out-of-network lab services. Employees enrolled in Aetna and UnitedHealthcare medical plans have access to the Quest lab located in the Princeton University McCosh Health Center.

Centers of Excellence and Institutes of Quality

UnitedHealthcare offers access to Centers of Excellence (COEs) for cancer/oncology care, congenital heart disease (CHD), bariatric procedures, ventricular assist devices, spine and joint issues, transplant solutions, and neonatal resource services. Aetna offers Institutes of Quality (IOQs) for CHD, behavioral health, transplant services, bariatric surgery, and orthopedic procedures for joints and spine.

Princeton provides an enhanced travel and lodging benefit for you and a family member whenever you use a COE or IOQ for certain medical procedures. For information, contact the Benefits Team.

Teladoc Telemedicine

Employees and their dependents enrolled in a Princeton medical plan have access to Teladoc virtual telemedicine services 24/7 at teladoc.com/princeton or 855-835-2362:

- General medicine: Connect with a board-certified doctor 24/7 who can diagnose, recommend treatment, and prescribe medication for issues like cold/flu, fever, and more. Visits are covered at 100% for all plans.
- Mental health: Participants aged 18 and older can talk to a
 licensed health provider—including psychiatrists, psychologists,
 and counselors—who can provide both therapy and medication
 management for issues like depression, bipolar disorder,
 anxiety, and substance use. Visits are covered at the same cost
 as in-network in-person mental health visits.
- Dermatology: Teladoc's board certified dermatologists will diagnose skin issues and treat common conditions like acne, psoriasis, eczema, and more. Visits are covered at the same cost as in-network in-person specialist visits.

Castlight

If you are enrolled in a Princeton medical plan, you can access Castlight to keep track of all your healthcare benefits in one place, at no cost to you:

- Compare prices and quality ratings for doctors, hospitals, and medical services
- Know if your provider is in-network and how much you'll pay before you get care
- Understand what's covered by your plan and track your spending
- View breakdowns of your past medical and prescription expenses
- · Read patient reviews of doctors and specialists
- · Find information on resources to manage your health

Navigating the Plans

To find an in-network provider, you can use our Health Advocate or Castlight programs, or search on each provider's website:



Aetna

aetna.com/dsepublic/#/princeton



UnitedHealthcare Choice Plus Network

myuhc.com

Aetna and UnitedHealthcare offer their own virtual mental health services:



Aetna

Call MDLive at (855) 824-2170 or go to mdlive.com/bhcomm, call Inpathy at (800) 442-8938, or go to aetna.com/dsepublic/#/princeton or call Aetna at (800) 535-6689.



UnitedHealthcare

Go to **myuhc.com**, click Find a Provider, Behavioral Health Directory, Employer and Individual Plans, People, and Virtual Care.

Visits are covered at the same cost as in-network in-person mental health visits.

Minimizing Costs

To minimize costs, consider using the resources outlined in this section, as well as:

- Urgent Care Centers instead of Emergency Rooms for non-life threatening emergencies
- · Independent outpatient facilities
- · Independent radiology centers
- · In-network providers



Prescription Drug Plan

All Princeton medical plans provide prescription coverage through OptumRx. The plan uses a formulary, which is a list of prescribed medications—both generic and brand-name—proven to be both clinically and cost effective. Prescriptions are categorized into three tiers that determine your cost. If you or your physician chooses a brand name drug that has a generic equivalent, you pay the difference between the cost of the brand name drug and the generic drug, plus the generic copay. A limited number of brand name prescriptions may be less expensive than generics. In these instances, when you fill the prescription for the brand name drug, you will pay the generic copay.

Certain preventive prescriptions, as well as contraceptives, are covered at 100%. This applies to generic and preferred brand drugs as well as some prescribed over-the-counter (OTC) drugs.

You can call OptumRx at 877-629-3117.

Maintenance Medications and Mail Order

If you take certain prescriptions monthly, you can purchase a three-month supply through mail order at the same cost of a two-month supply at retail.

OptumRx App

Download the OptumRx mobile app for easy, on-the-go access to your personalized health information and prescriptions

If you fill your maintenance medication through a retail pharmacy for more than three months, subsequent refills cost twice the retail pharmacy copayment. Use retail pharmacies for short-term prescriptions, such as antibiotics.

Appeals and Specialty Medications

If your physician prescribes a non-preferred or excluded medication due to negative results you experienced when using a preferred or generic medication, such as an allergic reaction, you may be eligible for coverage through a clinical exception. Your doctor can file a tier-lowering prior authorization (PA) request on your behalf with OptumRx. Specialty medications may only be covered through the OptumRx Specialty Services Pharmacy.

Copay Card Solutions Program

This program leverages manufacturer copay assistance programs, commonly referred to as coupons, to reduce costs for specialty medications. Contact OptumRx for details.

	CDHP with HSA	Aetna PHP	UnitedHealthcare PHP	нмо	J-1 Visa Plan	
Prescription Drugs	Coverage is provided after the deductible is met. Exceptions for immediate coverage are preventive drugs and IRS-designated drugs for chronic conditions. Prescription drug costs count toward your OPM.	There is a separate OPM for prescription drugs of \$3,500/\$7,000 family.				
Generic	\$5	retail pharmacy/30-da	ay supply, \$10 mail-orde	r/90-day supply		
Preferred Brand	\$25 retail pharmacy/30-day supply, \$50 mail-order/90-day supply					
Non-Preferred Brand	\$40 or member pays the difference for retail pharmacy/30-day supply, \$80 or member pays the difference for mail-order/90-day supply ¹					

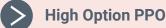
¹ If you fill your maintenance medication through a retail pharmacy for more than three months, subsequent refills cost twice the retail pharmacy copayment.

Take Care of Your Smile with Dental Coverage

We know dental health is important for you and your family including regular check-ups and preventive care. You have three dental plan options to choose from, offering a range of coverage:

Basic Option PPO

The Basic Option PPO Plan, administered by MetLife, provides limited coverage for preventive, basic services, periodontal services, and surgical extractions only. If you receive services out-of-network, reimbursement is based upon the maximum allowable charge.



The High Option PPO Plan, administered by MetLife, provides comprehensive coverage for preventive, basic, and major services. You can receive in-network services as well as out-of-network services with reimbursement based on reasonable and customary limits. Limited orthodontia coverage is provided.



DMO

The DMO Plan, administered by Aetna, is an HMO-style plan that covers eligible preventive, basic, and major services. You must choose a primary care dentist from the Aetna DMO directory to receive coverage, and all care must be coordinated through your primary care dentist. There is no coverage for out-of-network services.

Dental Plan Rates

The chart below provides monthly contribution costs, which are deducted pre-tax from your pay. Biweekly-paid employee deductions are taken twice a month; if you receive a third paycheck in a month, deductions are not taken.

Monthly Rates

	Employee	Employee and Children	Employee and Spouse	Employee and Family
MetLife Basic Option PPO Plan	\$6	\$19	\$15	\$33
MetLife High Option PPO Plan	\$51	\$99	\$103	\$142
Aetna DMO Plan	\$9	\$17	\$19	\$26

Choosing a Provider

For a directory of network dentists, access:



MetLife Basic Option PPO or High Option PPO: <u>metlife.com/mybenefits</u>, select the PDP Plus network



Aetna DMO: aetna.com/dsepublic/#/princeton

Dental Plan ID Cards

You can print a temporary MetLife
ID card online at metlife.com/
mybenefits. The Aetna DMO Plan
does not issue ID cards since
they are not needed
for services.

Comparing Your Options

Please note: The dollar or percentage amounts in the chart below reflect the patient-paid portion of the incurred dental costs.

		Basic Option PPO	High Opt	High Option PPO		
		In-Network or Out-of-Network	In-Network	Out-of- Network ²	ln-Network Only	
Annual Deductible	Annual Deductible (Individual/Family)		\$50 / \$150 (for basic and major services)	\$50 / \$150 (for basic and major services)	\$0	
Annual Maximum	Benefit	\$2,000	\$2,000	\$1,500	None	
Preventive and Diagnostic Services ³	Examinations and visitsX-ray servicesCleaningsFluoride treatments	\$0 in-network / out-of-network reimbursed at 100% of the maximum allowable charge	\$0	\$0	\$0	
Basic Services	 Amalgam (silver) fillings Root canal therapy (anterior teeth) Composite fillings (anterior teeth only) Stainless steel crowns Uncomplicated extractions Periodontal scaling 	50% in-network / out-of-network reimbursed at 50% of the maximum allowable charge	20%	30%	\$0	
Major Services ⁴	 High noble metal and porcelain inlays High noble metal restorations Crowns Root canal therapy, molars)⁵ Implants⁶ Periodontal surgeries Impacted extractions 	Only periodontal surgeries and impacted extractions are covered at 50% in-network/out-of-network reimbursed at 50% of the maximum allowable charge. Other services not covered, but may receive up to a 35% discount from in-network providers.	40%	50%	40%	
Orthodontia ⁴ for children and adults	Orthodontics	Not covered. May receive up to a 35% discount from in-network provider.	50% Lifetime max \$2,000	50% Lifetime max \$1,500	50% No lifetime max	
Basis for Out- of-Network Reimbursement		Maximum allowable charge	Negotiated fee	80th percentile of reasonable and customary charges	Negotiated fee	

- 1 You must select a primary care dentist directly with Aetna.
- 2 Reimbursement is based on reasonable and customary charges so you may be balance billed.
- 3 Visit limitations may apply. Consult the Summary Plan Descriptions at hr.princeton.edu/thrive for more details.
- 4 If you began treatment under the MetLife Basic Option PPO Plan for major or orthodontic services and are considering moving to the Aetna DMO Plan, these services are not covered by Aetna. The lifetime maximum includes amounts paid through all other plans.
- 5 Included in the basic services category for MetLife Basic and High Option dental plans.
- 6 Limitations apply. Request a predetermination of benefits from Aetna or MetLife prior to treatment.

See Things Clearly with Vision Coverage

The Vision Plan through MetLife provides coverage for certain vision care expenses. Your benefits are higher when you receive care in-network. In any calendar year, the Vision Plan provides:

- Two pairs of prescription glasses or
- · One pair of prescription glasses and an allowance for contact lenses or
- · Double your contact lens allowance

Vision Plan Benefits

This chart provides an overview of Vision Plan benefits. More details are available at hr.princeton.edu/thrive.

Choosing a Provider & Plan ID Cards

For a directory of vision care providers, visit metlife.com/mybenefits and choose the MetLife Vision PPO.

If elected, you will receive an ID card in the mail.

		In-Network	Out-of-Network	
Annual Exam	Comprehensive vision exam	\$10 copayment	100% with reimbursement up to \$45	
Prescription Lenses	Single visionLined bifocalsProgressivesLined trifocalsLenticular	\$10 copayment ¹ applied to lenses and frames	 100% with reimbursement up to: \$30 for single vision \$50 for lined bifocals \$50 for progressives \$65 for lined trifocals \$100 for lenticular 	
Frames	All	 100% with coverage up to \$155 after a \$10 copayment¹ 100% with coverage up to \$85 after a \$10 copayment at Costco, Walmart, or Sam's Club 	100% with reimbursement up to \$70	
Prescription Contact Lenses	Evaluation feesFitting costs	Copayment not to exceed \$60	Not covered	
	 Materials 	100% with reimbursement up to \$140	100% with reimbursement up to \$140	

¹ If purchasing lenses and frames together, one \$10 copayment applies.

Vision Plan Rates

The chart below provides monthly contribution costs, which are deducted pre-tax from your pay. Biweekly-paid employee deductions are taken twice a month; if you receive a third paycheck in a month, deductions are not taken.

Monthly Rates

	Employee	Employee and Children	Employee and Spouse	Employee and Family
Vision Plan	\$15.54	\$25.46	\$25.00	\$41.05

Get a Tax Advantage with Flexible Spending Accounts

Flexible Spending Accounts (FSAs), administered through PayFlex, allow you to set aside money pretax to pay for eligible expenses, which reduces your taxable income. When you pay out-of-pocket for an eligible expense, you request reimbursement from your account. The Healthcare Flexible Spending Account (HFSA) is for health-related expenses, and the Dependent Care Flexible Spending Account (DFSA) is for dependent care expenses.

You must make new elections for the FSAs each year during Open Enrollment. Elections do not automatically carry over from year-to-year. You have until March 31, 2024, to submit claims for eligible expenses you incur during the 2023 calendar year. If your employment with Princeton ends, expenses incurred after your termination date are ineligible for reimbursement. The Healthcare FSA may be continued through COBRA.

Healthcare Flexible Spending Account

With the Healthcare Flexible Spending Account (HFSA), you can contribute on a pretax basis between \$100 and the IRS limit per year (\$2,850 for 2022). See hr:princeton.edu/thrive/wellness-resources/healthcare-flexible-spending-account for the 2023 limit. You can use the account to pay for eligible healthcare expenses—like deductibles, copays, over-the-counter medications, etc. for you or your IRS-qualified dependents. You'll receive a PayFlex debit card to pay for eligible expenses directly from your account, rather than waiting for reimbursement. If you use the debit card, PayFlex may require you to provide documentation to substantiate the claim per IRS regulations.

HFSA ROLLOVER

At the end of the calendar year, if you have an unused balance between \$50 and the IRS limit per year (\$570 for 2022), it will automatically roll over to the following year's account if you are an active benefits-eligible employee—even if you do not elect a new account for the following year. Any balance below \$50 or above the IRS limit at the end of the year will be forfeited.

Dependent Care Flexible Spending Account

With the Dependent Care Flexible Spending Account (DFSA), you can contribute on a pretax basis between \$100 and the IRS limit of \$5,000 per year (\$2,500 if married and filing separately) to pay for eligible dependent care expenses for children 12 years and under. Your DFSA may be used to pay for eligible expenses for any dependents living with you, including those who are physically or mentally unable to care for themselves, and for whom you can claim as dependents as defined by Internal Revenue Code Section 152. Eligible expenses include day care, a private nanny, preschool or nursery school, before- and after-school programs, and summer day camps.

Depending on your household income, it might be advantageous to claim dependent care expenses on your federal income tax return instead of electing a DFSA. The IRS does not permit you to claim the expenses on your tax return when you use a DFSA. According to IRS rules, you are not allowed to roll over unused funds at the end of the year—any money in your account will be forfeited. See https://hr.princeton.edu/thrive/wellness-resources/dependent-care-flexible-spending-account for more information.



Discover More Protection with Supplemental Health Plans

Princeton offers three optional Supplemental Health Plans through MetLife to complement your medical plan coverage:



Accident Insurance



Hospital Indemnity Insurance



Critical Illness Insurance

These programs provide financial assistance through a lump-sum payment to spend however you choose if you experience an unexpected medical event. The payment can be used to cover out-of-pocket medical expenses or for food, utility bills, or any other expenses. Additional information about these plans is available at at hr.princeton.edu/thrive/wellness-resources/supplemental-health-plans.

For Help Choosing and to Enroll

Benefits counselors from Winston
Benefits are available to help
you choose which plans are
right for you. Contact Winston
Benefits at myprincetonbenefits.com
or call (855) 393-3601 if you
have questions or to enroll
as a new hire or during
Open Enrollment.

Accident Insurance

Accident Insurance provides payment for specific injuries and events resulting from a covered accident. The plan also includes coverage for accidental death and dismemberment. You can choose between a low or high plan option.

Monthly Rates

Plan	Employee	Employee and Children	Employee and Spouse	Employee and Family
Low Plan	\$4.23	\$8.55	\$7.76	\$10.71
High Plan	\$9.12	\$18.37	\$16.64	\$23.05

Supplemental Health Plan Benefits

All three plans provide financial protection with:

- Coverage for you, a spouse, and covered child(ren)
- Lump-sum payment to use however you see fit
- · No health questions or physical exams required
- Premiums paid through after-tax payroll deductions
- Portable coverage—you take your policy with you if you leave Princeton



Hospital Indemnity Insurance

Hospital Indemnity Insurance provides payment if you have a hospital admission and a daily benefit amount for hospital confinement or accident-related inpatient rehabilitation for up to 31 days.

Monthly Rates

Employee	Employee and Children	Employee and Spouse	Employee and Family	
\$10.31	\$17.77	\$23.08	\$31.95	

Critical Illness Insurance

Critical Illness Insurance provides payment when you or a covered dependent is diagnosed with a covered illness. You have the option to elect coverage at an initial benefit amount of \$10,000 or \$20,000, which is paid upon the first diagnosis (coverage for a spouse or child is at 50% of the initial benefit). The plan pays a recurrence benefit for certain covered conditions, if an initial benefit has been paid for the covered condition. The plan may also pay a partial benefit for certain conditions. Covered illnesses include:

- · Alzheimer's disease
- · Heart attack
- · Coronary artery bypass graft
- Full benefit cancer (not all types of cancer are covered and/or are covered at a partial benefit)
- Kidney failure
- Stroke
- · Major organ transplant

Monthly Rates by Age (Rate per \$1,000)

Age Range	Employee	Employee and Children	Employee and Spouse	Employee and Family
< 25	\$0.09	\$0.16	\$0.14	\$0.21
25-29	\$0.10	\$0.17	\$0.16	\$0.22
30-34	\$0.17	\$0.24	\$0.26	\$0.33
35-39	\$0.28	\$0.35	\$0.42	\$0.49
40-44	\$0.47	\$0.53	\$0.69	\$0.76
45-49	\$0.75	\$0.81	\$1.10	\$1.17
50-54	\$1.14	\$1.21	\$1.67	\$1.74
55-59	\$1.65	\$1.72	\$2.42	\$2.49
60-64	\$2.42	\$2.49	\$3.55	\$3.62
65-69	\$3.71	\$3.78	\$5.44	\$5.50
70+	\$5.62	\$5.69	\$8.25	\$8.32

Multiply the benefit amount (e.g., \$20,000) by the rates shown above, divide by \$1,000, and round to two decimals to calculate the monthly rate. Your rates are based on your age as of January 1, 2023 or your date of hire, if later. For example: If you elect \$20,000 of coverage and are age 50, your monthly rate would be $$20,000 \times $1.14 = $22,800 / 1,000 = 22.80 .

Find More Ways to Be Well

In addition to healthcare benefits, Princeton offers several resources for wellness support. For more details, go to hr.princeton.edu/thrive.

Employee Wellness Center

At the Employee Wellness Center @ 350 Alexander, you'll find on campus support to help you care



for yourself and your family, so you can thrive at work and at home. Schedule a free, confidential appointment with the following partners to meet your physical, mental, and financial wellness needs:

- My Health Coach for managing chronic conditions or reaching your health goals
- Carebridge, Princeton's Employee Assistance Program, for counseling sessions
- Doctors In Your Office for annual physicals
- TIAA and CAPTRUST for financial advising
- Isles for budgeting, saving, and reducing debt

Appointments are required, and all meetings take place in private rooms to ensure confidentiality.

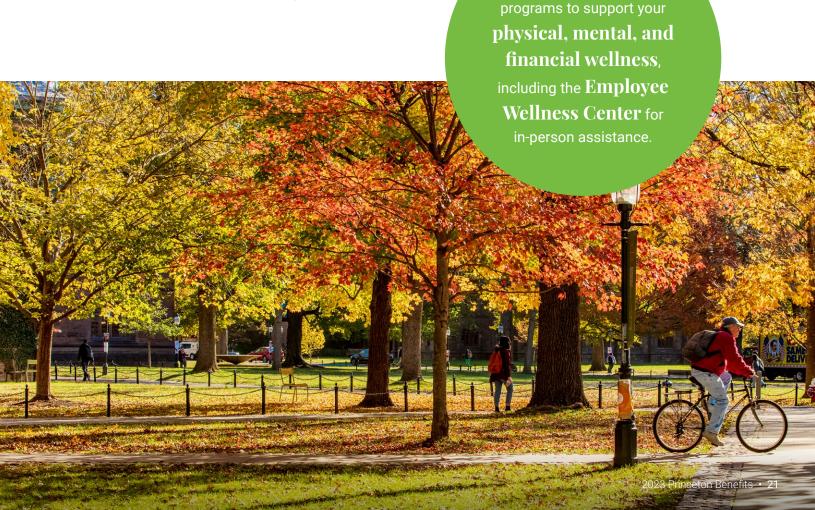
Employee Assistance Program

The Employee Assistance Program (EAP), offered through Carebridge, is available to help navigate life's challenges at myliferesource.com (company Code: TW8AE) or 800-437-0911. All benefits-eligible faculty and staff and their dependents are eligible for this no-cost program, regardless if enrolled in a Princeton medical plan.

Carebridge provides eight free face-to-face, confidential counseling sessions, per issue, per person. Counseling services are also available virtually for issues related to anxiety, depression, relationship issues, substance use, grief, and more.

In addition, the EAP provides referral services and can answer questions about child and elder care, financial counseling, pet services, relocation, legal matters, and more.

Princeton provides many



Princeton encourages you to take advantage of a wide variety of wellness programs.

My Health Coach

My Health Coach, offered through TrestleTree at princeton. mytrestletree.com or 866-237-0973, provides you and your eligible dependents free, confidential assistance to achieve your personal health goals, and in some cases, incentives to manage chronic medical conditions. Health coaches are healthcare professionals who meet with you in person at the Employee Wellness Center or by phone, and partner with you to transform your health goals into a personalized plan. You do not need to be enrolled in a Princeton medical plan to participate. You can meet with them to discuss:

- · Developing a fitness plan
- · Nutrition counseling and weight loss
- Managing stress
- · Quitting smoking

Condition Management Incentive Programs

These incentive programs are offered to eligible employees and their dependents enrolled in a Princeton medical plan. You must participate in health coaching and follow other rules provided by My Health Coach. The programs apply if you are diagnosed with:

- · Diabetes or pre-diabetes,
- · High blood pressure or high cholesterol, or
- Obesity

The programs provide a copay waiver through OptumRx for certain prescription drugs (and diabetes supplies). For diabetes or pre-diabetes, you can receive a \$250 taxable cash incentive in your paycheck. For obesity, you may be eligible for up to \$50 annually for support tools.

MSK Direct Cancer Support

MSK *Direct*, through Memorial Sloan Kettering Cancer Center, provides direct access to a team of professionals who specialize in cancer care to guide eligible faculty, staff, and their loved ones through the process of diagnosis and treatment and oversee the care experience every step of the way. MSK *Direct* is provided at no cost. Whether you need treatment, a virtual or in-person second opinion, or expert guidance on topics like prevention and caregiving, MSK *Direct* can help get you excellent care—whether at one of the three MSK facilities in New York or New Jersey, or close to home. UnitedHealthcare and Aetna participants have access to MSK as an in-network provider. MSK *Direct* will:

- Offer an appointment with the appropriate specialist within two business days of calling
- Gather necessary medical records before the patient's first appointment
- Answer questions, coordinate the services, help navigate critical steps, and optimize the care experience

2nd.MD-Expert Medical Opinion

When you have a critical healthcare concern, you should be focused on one thing—getting the best care possible. 2nd.MD provides confidential expert medical opinion services, at no cost, for you and your eligible dependents. 2nd.MD is available whether or not you are enrolled in a Princeton medical plan. Services include:

- Expert second opinion: If you are faced with a new diagnosis, possible surgery, or a chronic condition, 2nd.MD will connect you with leading doctors from top medical institutions via phone or video call for a consultation and expert medical opinion, typically within 3-5 days.
- Find a doctor: 2nd.MD can direct you to personalized local support with high-quality in-network specialists for any issue, including mental health concerns.
- Expert support: 2nd.MD's Care Team will provide clinical guidance, education, and support for any medical concerns or questions.
- Medical Certainty Consult: If you are enrolled in a Princeton medical plan and are considering knee, back, or hip surgery, you will be eligible to receive a \$400 taxable cash incentive if you receive an expert medical opinion prior to surgery.

Health Advocate

Health Advocate, available at 866-695-8622, helps you and your family members, including parents and in-laws, navigate the healthcare system. All medical and personal information remains confidential. You do not need to be enrolled in a Princeton medical plan to use the benefit. You will be assigned to a Personal Health Advocate (PHA) who can:

- · Resolve billing and claim issues
- · Explain benefits coverage and health conditions
- · Schedule tests, appointments, and second opinions
- · Find providers and hospitals
- Assist with a wide variety of elder care services, including Medicare claims

AbleTo Therapy and Support

AbleTo provides virtual therapy and emotional support to help with the stress and anxiety that comes with a medical condition or life change. You will work with two AbleTo specialists, a therapist, and a behavioral coach, for eight weeks.

You and/or your dependents must be enrolled in a Princeton medical plan to access AbleTo. There are no fees or copays if you are enrolled in the PHP, HMO Plan, or J-1 Visa Plan. For CDHP participants, the initial consultation costs \$300, and subsequent visits cost \$275; visits are then covered at 100% after the deductible is met.

Princeton's robust
wellness programs provide
extra support for you
to get and stay well
whether you are looking for health
coaching, need help managing
a medical condition, or want
a second opinion.

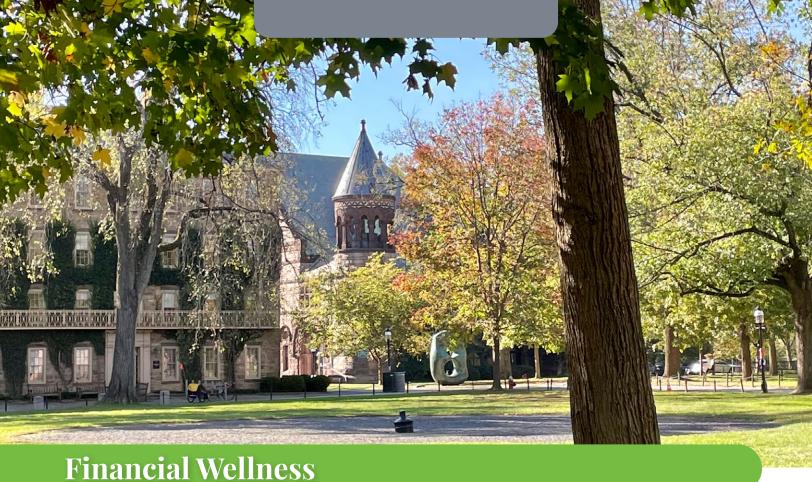
Fertility and Family Planning Services

Adoption and Surrogacy Benefit

Princeton's adoption and surrogacy benefit provides eligible employees with a reimbursement up to a \$40,000 lifetime limit per family. Expenses include agency and placement fees, court costs and attorney fees, travel expenses, and more.



Princeton is pleased to provide fertility and family planning services. In addition, our adoption and surrogacy benefit is substantial—up to \$40,000.



Tilialiciai Wellifess

Princeton's programs to support your financial wellness include life insurance, disability and leave programs, retirement plans, financial advice, continuing education support, and more. For more details, go to hr-nrinceton.edu/thrive.

Care For What Matters

Life insurance offers financial protection for you and your loved ones.

Life Insurance

Princeton provides Basic Life and Accidental Death and Dismemberment (AD&D) Insurance and Business Travel Accident Insurance at no cost to you. You can also choose to purchase Supplemental Life Insurance for you, as well as spousal and/or child life insurance. The cost for these optional benefits is deducted from your pay on an after-tax basis.

At age 60, basic life and AD&D and Supplemental Life Insurance coverage is reduced based on the age reduction chart at hr.princeton.edu/thrive/wellness-resources/life-insurance-plans. If you leave or retire from Princeton, your coverage terminates the day your employment ends. You will have 31 days to convert or port your coverage to an individual policy. Information on your options will be provided directly from The Hartford.

BASIC LIFE AND AD&D

Basic Life and Accidental Death and Dismemberment (AD&D) Insurance coverage is provided through The Hartford at no cost to you. Coverage is equal to one times your annual base salary, rounded up to the next \$1,000, up to a maximum of \$500,000. For AD&D Insurance, if you suffer the loss of your eyesight or a limb or die because of an accident, this insurance pays a lump sum to you or your beneficiaries.

Choosing Beneficiaries

It's important that you choose your beneficiaries in HR Self Service for life insurance coverage, and review them periodically to be sure that they are current.

Evidence of Insurability (EOI)

Some elections require Evidence of Insurability (EOI). The EOI form is available at hr.princeton.edu/thrive/wellness-resources/life-insurance-plans. Contact the Benefits Team for assistance with the employer portion of the form, and then submit the form directly to The Hartford. If approved, you'll receive notice to log in to HR Self Service and elect the approved supplemental life insurance level to activate your coverage.

SUPPLEMENTAL LIFE

You can elect Supplemental Life Insurance coverage for up to six and one-half times your annual base salary, up to a maximum of \$1.5 million. The maximum basic life and Supplemental Life Insurance benefit is \$2 million.

You may elect coverage during Open Enrollment or because of a qualifying status event, up to one times your base salary, or increase coverage by an additional one times your base salary, provided the increase does not raise your amount of Supplemental Life Insurance above \$500,000, or three times your base salary. Evidence of Insurability (EOI) is required for any election over three times your base salary or \$500,000. You may elect Supplemental Life Insurance any time during the year, but EOI is required.

Monthly Rates by Age

Age Range	Rate per \$1,000
< 30	\$0.046
30-34	\$0.058
35-39	\$0.069
40-44	\$0.081
45-49	\$0.104
50-54	\$0.162
55-59	\$0.301
60-64	\$0.451
65-69	\$0.879
70+	\$1.423

For example: If you are age 35, earn \$55,250 and have elected three times your base salary for supplemental life insurance, your monthly supplemental life insurance cost is calculated as follows: $\$55,250 \times 3 = \$165,750$ rounded up to the nearest \$1,000, which would be \$166,000, divided by $\$1,000 = 166 \times \$0.069 = \$11.45$.

SPOUSAL LIFE

If you are enrolled in Princeton's Supplemental Life Insurance, you can elect \$10,000, \$25,000, or \$50,000 of spousal life insurance coverage. If the amount you elect exceeds the amount of your Supplemental Life Insurance, your spousal life insurance amount is incrementally decreased. The cost of spousal life insurance is based upon the spouse's date of birth and utilizes the same rates as Supplemental Life Insurance listed to the left.

You may elect spousal life insurance 31 days from your date of hire or date of marriage without EOI. In addition, you may elect spousal life insurance at any time during the year, but EOI is required.

If an employee's spouse is also a benefits-eligible employee of Princeton University and eligible for coverage under the supplemental term life insurance plan, the employee is not eligible for spousal life insurance. Your spouse may be covered as either an employee or a dependent, not both.

CHILD LIFE

If you are enrolled in Princeton's Supplemental Life Insurance, you can also elect to cover eligible dependent children with \$5,000 or \$10,000 of child life insurance coverage. You may elect child life insurance at any time without EOI requirements. For the definition of a dependent child, refer to page 3.

The cost per family unit is \$.79/month for \$10,000, or \$.40/month for \$5,000. You must cover all children for the same amount of child life insurance—either \$5,000 or \$10,000. For example, if you have three children and you elect \$10,000 of coverage, your monthly cost is \$.79 for all three children. If both parents are employees of Princeton University and eligible for benefits, only one parent may cover the children.

Evaluating Your Life Insurance Needs

- Access the life insurance calculator tool at thehartford.com/dm/coverageadvisor/life.html
- Check out the cost estimator at thehartford.com/cost/princeton

BUSINESS TRAVEL ACCIDENT

Princeton University provides Business Travel Accident Insurance coverage at no cost to you if you die because of an accident while on authorized University business. Coverage is equal to five times your annual base salary rounded to the nearest \$1,000, up to a maximum benefit of \$500,000. Beneficiaries are those selected under your Basic Life and AD&D Insurance coverage. At age 60, coverage is reduced based on an age reduction schedule.

Long Term Care Plan

The Group Long Term Care Plan through Genworth is available to eligible employees, spouses, parents, grandparents, parents-in-law, and grandparents-in-law. Applicants must be U.S. citizens or permanent resident

aliens and meet other requirements to apply. Family members over the age of 75 are not eligible. Approval is not guaranteed and rates are subject to future increases. You or your family members pay the full cost on an after-tax basis and are billed directly by the plan administrator. A medical questionnaire is required to enroll. Individuals under age 65 who enroll within 31 days of eligibility can complete an abbreviated questionnaire. Those over 65 or those who do not apply within 31 days of eligibility must complete a full medical questionnaire.

This plan provides a variety of services, often referred to as "custodial care," for people who are unable to care for themselves. Medicare and private health insurance plans or disability coverage typically do not provide coverage for long term care needs.

Protect Your Income

Disability and Leave programs offer financial protection if you cannot work due to illness, injury, or in certain other cases. Princeton provides Short Term Disability and Long Term Disability coverage at no cost to you.

Disability Plans

SHORT TERM DISABILITY

LONG TERM DISABILITY

For protection beyond when Short Term Disability benefits end, Princeton also provides a Long Term Disability plan through The Hartford as of your date of hire. The plan provides benefits if you are disabled and unable to work for more than 26 weeks. You'll receive benefits equal to 66.67% of your pre-disability base salary earnings up to \$15,000 per month. Income you receive from Social Security Disability

and Workers' Compensation, if applicable, offsets Long Term Disability benefits received. See hr.princeton.edu/thrive/wellness-resources/long-term-disability-plan.

Leaves Of Absence

NEW JERSEY FAMILY LEAVE INSURANCE

The New Jersey Family Leave Insurance (NJFLI) law provides eligible employees with up to 12 weeks of paid leave to bond with their child after birth or adoption, or to care for an eligible family member with a serious health condition. NJFLI may provide up to 85% of an employee's average weekly wages, up to a maximum amount that is set each calendar year by the state of New Jersey. NJFLI benefits are approved and paid through the state. Under state law, the University withholds a state tax from employees' paychecks to finance this program. For more information, visit hr.princeton.edu/thrive/health/new-jersey-family-leave-insurance.

If You Are Injured at Work (Workers' Compensation)

If you are injured on the job, contact your supervisor and Occupational Health Services. Go to the nearest hospital or urgent care center for an accident that occurs off hours or in the case of an emergency. If you are eligible, Workers' Compensation provides coverage for medical treatment and wage replacement for an approved absence from work if you suffer a work-related injury, illness, or disability. View the Workers Compensation policy at hr.princeton.edu/thrive/health/workers-compensation.



PAID FAMILY LEAVE

Princeton University provides Paid Family Leave to care for a family member who has a serious health condition, to bond with a newborn, newly adopted child, or newly placed foster child, or to care for a family member who has been a victim of domestic violence or a sexually violent offense. The definition of eligible family member includes child, spouse, domestic partner, parent, sibling, grandparent, grandchild, and any other person related by blood or with whom you have a close association that is the equivalent of a family relationship. The paid leave counts concurrently against the Family Medical Leave Act (FMLA) and the New Jersey Family Leave Act (NJFLA). For more information, visit hr.princeton.edu/myhr/policies/paid-family-leave.

ARRANGING FOR CARE DAYS

Employees with five years of benefits-eligible service are provided with a bank of five days to use to find and arrange care for aging and/or disabled eligible family members, including spouse, children, grandchildren, parents, parents-in-law, grandparents, grandparents-in-law, and siblings. Care services include researching, interviewing, and touring nursing homes, care facilities, assisted living facilities, and home care services. Access hr.princeton.edu/thrive/wellness-resources/arranging-care-days to find out more.

Secure Your Financial Future

To help employees reach their retirement goals, the University offers a very competitive defined contribution plan and a qualified retirement savings plan.

Princeton University Retirement Plan

The Princeton University Retirement Plan (PURP) is a defined contribution plan that helps you save for retirement. The University contributes a percentage of your base salary to your account after each pay period. You choose how you want the University's contributions to be invested among a variety of investment funds. You do not contribute to the plan.

The University provides contributions equal to 9.3% of your salary up to the Social Security wage base and 15% over the wage base, subject to IRS limits. Contributions are:

- Calculated on base salary paid by or through the University (and not by external funding or during leaves of absence without pay).
- Continued until you retire, terminate employment, or change to non-benefits-eligible status.

The plan is administered by TIAA. You can choose to allocate funds among a variety of investments, and change your investments at any time. If you do not choose investments, your contributions default into the Vanguard Target to Retirement Fund closest to the year you reach age 65.

You become fully vested in the plan after 30 months of service. If you leave Princeton University without having reached 30 months of service, PURP contributions are forfeited.

AUTO-ENROLLMENT

Benefits-eligible employees are automatically enrolled as a new hire (see page 2).

IF YOU LEAVE PRINCETON

If you are vested and age 55 or older, there are no restrictions on distributions. If you are vested and under age 55:

- If your balance is \$75,000 or less, you can take a cash distribution or roll your account into an IRA or other qualified plan.
- If your balance is more than \$75,000, you can choose to roll your account into an IRA or other qualified plan.

Certain limitations on receiving a cash distribution may apply based on the type of investments you hold. If you are under age 59½ and take a cash distribution, you may be subject to a tax penalty in addition to ordinary income taxes.

Best-in-Class Retirement Plan

Princeton is proud to offer a best-inclass Retirement Plan with a University contribution of 9.3% of your pay up to the Social Security wage base and 15% over the wage base. You can invest your account in a variety of investment funds.

Accessing Your Accounts

Log on to tiaa.org/princeton to:

- · Establish your account, login and password
- · Name your beneficiaries
- Select your investment allocations

Call (800) 842-2776 to speak with a TIAA representative

Log on to <u>princeton.edu/selfservice</u>, Benefit Details, Life Events to:

- Start or stop your Retirement Savings Plan contributions
- Increase or decrease your Retirement Savings Plan contributions



Princeton's Retirement Savings Plan is a 403(b) Plan that allows you to save for your financial future and invest your contributions in a variety of funds. The University does not contribute to this plan. Your account belongs to you—you are always 100% vested.

Princeton University Retirement Savings Plan

The Retirement Savings Plan is a 403(b) plan that allows you to save money for your financial future. You contribute to your account on a pretax and/or a Roth after-tax basis, subject to IRS limits. The University does not contribute to the Retirement Savings Plan.

In 2022, the calendar year contribution limit was \$20,500. If you are age 50 or older, you may contribute an additional amount (\$6,500 in 2022). See www.irs.gov for 2023 limits. If you contribute pretax and Roth after-tax, the two plans are combined for the purpose of the annual limit. You can start, stop, increase, or decrease your contributions at any time. Please note, if you save pretax and are a resident of New Jersey or Pennsylvania, these contributions are not exempt from state tax when they are deducted from your pay.

The plan is administered by TIAA. You can choose to allocate funds among a variety of investments, and change your investments at any time. If you do not choose investments, your contributions default into the Vanguard Target to Retirement Fund closest to the year you reach age 65.

You are always 100% vested in your Retirement Savings Plan. The Retirement Saving Plan accepts rollovers from previous employer's qualified retirement plans and Individual Retirement Accounts (IRAs).

AUTO-ENROLLMENT

Benefits-eligible employees are automatically enrolled to contribute 5% of eligible compensation on a pretax basis, unless you choose to opt out or make a different election.

ROTH AFTER-TAX CONTRIBUTIONS

You have the option to make contributions on an after-tax basis. Upon distribution, your contributions and earnings on those contributions are distributed tax-free if you receive the payout after age 59½ and it has been at least five years since making your first Roth contribution.

ACCESSING ACCOUNT FUNDS

The Retirement Savings Plan offers three options for withdrawal of funds while you are employed:

 Loans: The minimum loan is \$1,000, and the maximum number of loans allowed from your account at any one time is three. The total of your outstanding loans cannot exceed \$50,000 or 50% of your account, whichever is less.

- Hardship Withdrawal: If you have a financial hardship due to certain qualified reasons (including buying your primary residence, preventing eviction, or paying certain medical expenses) you may be able to take a hardship withdrawal from your account.
- In-Service Distribution: You may take an in-service distribution from your account any time after you reach age 59½ or are approved for a Long Term Disability leave.

CAPTRUST offers **professional**, **confidential**, **unbiased financial advice** at no cost to Retirement Plan participants:

- · Call a Retirement Advice line
- · Meet with a financial counselor
- · Request a personalized Retirement Blueprint

IF YOU LEAVE PRINCETON

If you leave Princeton, you may take distribution of your account or roll it over to an IRA or other qualified plan. If you take your distribution and are under age 59½, you may be subject to a tax penalty in addition to ordinary income taxes.

Investment and Financial Services

Princeton provides a range of no-cost programs and services that provide financial advice:

- CAPTRUST: Independent advisory firm that provides confidential investment and financial advice, at no cost to Retirement Plan participants.
- Isles Financial Solutions (IFS): Money management and credit improvement service to help you take charge of your financial future.

Education Support

The University provides considerable tuition and other support of continuing education for you and your children.

Children's Educational Assistance Plan

Princeton's Children's Educational Assistance Plan is a tuition grant program that helps with the cost of your eligible children's undergraduate and trade school education. You are eligible for the plan after five years of benefits-eligible service. The plan is governed by certain rules if you have a break-in-service. The plan's grant:

- Covers 100% of tuition and mandatory educational fees up to \$20,700 per child for the academic year 2022–2023 and is non-taxable in most circumstances.
- Is available for undergraduate full-time study (12 credits or more) at accredited 2- or 4-year institutions for up to four academic years (eight semester or 12 trimesters or quarters, including summer sessions) for unmarried dependent children. Terms do not need to be consecutive.
- Is also available for accredited trade schools as a taxable grant per IRS regulations.
- Will be available for an additional two terms to pursue an undergraduate degree if a child begins studies at a community college or accredited trade school.
- If you have a child with a disability that requires an academic accommodation, you may be eligible to receive a taxable grant.

See <u>hr.princeton.edu/thrive/wellness-resources/</u> <u>childreneducational-assistance-plan</u> for more information.

Unparalleled Tuition `and Education Fees Grant for Your Children

Princeton's Educational Assistance
Plan provides a tuition grant of up to
\$20,700 per year, per child.

The amount of the grant may be increased each academic year.

College Coach Program

College Coach, offered through Bright Horizons, is a no-cost program designed to help parents and children understand post-high school education options and ease the application process. The service provides tools and resources to help select colleges or trade schools, prepare applications, review essays, and offer guidance regarding financial aid.

Staff Educational Assistance Plan

The Staff Educational Assistance Plan reimburses you for eligible tuition payments for your own undergraduate and graduate education or creditbearing certificate program. The plan covers 85% of tuition and mandatory educational fees at accredited institutions located in the U.S., up to a maximum of \$5,250 per plan year (July 1–June 30). You are eligible within 30 days of your one-year anniversary of benefits-eligible service. See hr.nrinceton.edu/thrive/wellness-resources/staff-educational-assistance-plan for details.

Application and Reimbursement

- Submit your **application for course approval** through HR Self Service within 31 days of the start of the course.
- Request reimbursement within 90 days after completion of a course through HR Self Service. You'll need to upload an official copy of your grade and itemized bill.

Child Care Programs

Employee Child Care Assistance Program

Bright Horizons Back-up Care Program

The Bright Horizons Back-up Care Program provides faculty, staff, and graduate students with back-up care when there are temporary disruptions in your child, adult, and/or elder caregiving arrangements. The program is available 24 hours a day, 365 days a year, for infants through the elderly. Access backup. brighthorizons.com.

Onsite Child Care

Princeton University provides access to an excellent child care center on campus for faculty, staff, students, and the community. The center is operated by University NOW Day Nursery School.



More Financial Support

Other programs are available that offer further financial protection.

Legal Services Plan

MetLife Legal Plans provides faculty and staff access to legal representation or advice to help with personal, confidential assistance for a wide range of legal services. Participation in this plan is voluntary. Once you enroll, coverage cannot be terminated mid-year. For more information or to enroll, contact Winston Benefits.

The plan features 14,000 network attorneys with no copayments, claim forms or usage limits in-network. Coverage for out-of-network attorneys is available. Covered legal services include:

- · Trusts, wills, and estate planning
- · Real estate matters and property tax assessments
- · Adoption, guardianship, and juvenile matters
- · Debt matters
- Document review and preparation
- · Immigration issues
- · Defense of civil lawsuits
- Traffic matters
- · Identity protection and credit monitoring
- · 4 hours of counsel for certain non-covered services

Commuter Benefits Program

Through PayFlex's Commuter Benefits Program, employees who travel to work using public transportation—trains, buses, subways, or van pools—can save tax dollars on commuting expenses. Monthly commuting expenses are deducted on a pretax basis from your paycheck and commuter-related products can be ordered online and mailed directly to your home. You can:

- · Order transit vouchers or monthly transit passes
- Pay for parking or order parking vouchers
- · Access a commuter debit card

The monthly maximum deduction amount is determined by the IRS annually. In 2022, the maximum pretax limits for both parking and transit expenses is \$280. The 2023 limits will be posted on our website when available.

USING THE PROGRAM

You can sign up or make changes on a monthly basis at www.payflex.com. You must place your orders by the 10th of each month prior to the month in which you need them. Incurred costs of your commuting expenses are deducted pretax from your paycheck the month after you place an order. You can place orders more than the pretax limit; however, you need to pay for any expenses that exceed the pretax limit with your personal credit card. Any unclaimed contributions are forfeited.



Financial incentives and other benefits are available **if you use alternative transportation** to commute (biking, walking, mass transit, carpooling or vanpooling) and do not have a University parking permit. Learn more by calling Transportation and Parking Services at (609) 258-1339 or online at **transportation. princeton.edu/revise-your-ride**.



Taxation of Your Benefits

Certain benefits offered to you by Princeton University may be offered pretax, after-tax, or subject to imputed income on your W-2.

FORM 1095-C

The Affordable Care Act (ACA) requires certain employers to send an annual statement describing the healthcare coverage available to certain employees—Form 1095-C. If eligible, you will receive your 1095-C from Princeton University on or about February 1. Please make sure that the Social Security numbers (SSNs) provided for you and your dependents are entered in HR Self Service and are accurate.

NEW JERSEY INDIVIDUAL HEALTH INSURANCE MANDATE

The New Jersey Individual Health Insurance Mandate requires New Jersey residents without health coverage to pay a tax penalty. Under the law, New Jersey residents who are subject to the mandate and their dependents must have minimum essential coverage during each month of the year. Additional states have implemented insurance mandates, so if you work outside of New Jersey, check with your state.

DEFINITIONS OF DEPENDENT FOR TAX PURPOSES

Under the definition in Section 152 of the Internal Revenue Code, dependents are defined as:

- Members of your household who maintain their principal place of residence in your home and
- You will furnish over half of their support for the year; in making this calculation, the amount you contribute toward their support must be compared with the amounts received for support by them from all other sources, including any amounts supplied by them and any earnings and
- For the current year, no other taxpayer can claim them as qualifying children for federal income tax purposes

IMPUTED INCOME

IRS regulations require that you pay taxes on the cost or value of certain benefits provided by your employer, even though no money is received. This imputed income is added to your taxable income on your W-2 each year.

MEDICAL PLAN

Your medical premiums are paid on a pretax basis, and your claims are not taxable income. Princeton's subsidy of

your medical premium is shown on your W-2, according to healthcare regulations. This is not taxable income to you.

FLEXIBLE SPENDING ACCOUNTS

Contributions to the HFSA and DFSA are subject to New Jersey State income tax.

LIFE INSURANCE

Princeton provides basic term life insurance. The IRS requires that you pay taxes on the cost of any coverage over \$50,000. This cost is imputed income on your W-2 as determined by the IRS. By paying tax on coverage over \$50,000, death benefits are not subject to federal estate tax upon your death.

PRINCETON UNIVERSITY RETIREMENT PLAN

Contributions and related gains or losses are tax-deferred for federal, state, and FICA tax purposes.

RETIREMENT SAVINGS PLAN

Pretax Savings: Contributions and related gains or losses are tax-deferred for federal income tax. If you live in Pennsylvania or New Jersey, the contributions are subject to state income tax. If you live in New York, your contributions are also tax-deferred for state income tax. All contributions are subject to FICA taxes.

After-tax Savings: Contributions are made after-tax, and the earnings grow tax-free. Withdrawals after age 59½ are tax-free if the distribution is no earlier than five years after contributions were first made.

BACK-UP CARE PROGRAM

The University subsidy for back-up care utilized by a faculty or staff member was \$32.44 per hour in 2022. The total value of the subsidy for the hours you used during the calendar year will be shown on your W-2. If you used the Back-up Care Program for child care and the total value of the subsidy plus the amount charged to your Dependent Care Expense Account equals more than \$5,000 for the year, the amount over \$5,000 is considered taxable income to you in that year. If you use the Program for elder care, the subsidy for each hour used during the year is reported as taxable income to you in that year.

Provider Contacts

Health and Wellness Benefits

Benefit	Provider	Group Number/ Plan ID	Phone Number	Website
Consumer Directed Health Plan	Aetna	486819	(800) 535-6689	hr.princeton.edu/thrive/ health/2023-consumer- directed-health-plan
Healthcare Spending Account	PayFlex	120632	(800) 284-4885	payflex.com
Princeton Health Plan	Aetna	486819	(800) 535-6689	hr.princeton.edu/thrive/ health/2023-aetna-princeton- health-plan
	UnitedHealthcare	196484	(877) 609-2273	hr.princeton.edu/thrive/ health/2023-unitedhealthcare- princeton-health-plan
HMO Plan	Aetna	866100	(800) 535-6689	hr.princeton.edu/thrive/ health/2023-health- maintenance-organization-hmo- plan
J-1 Visa Plan	Aetna	811281	(800) 535-6689	hr.princeton.edu/thrive/ health/2023-j-1-visa-plan
Teladoc Telemedicine (General Medicine, Dermatology, Mental Health)	Teladoc Telemedicine	NA	(855) 835-2362	teladoc.com/princeton
Castlight	Castlight	NA	(866) 207-6344	mycastlight.com/princeton
Prescription Drug Plan	OptumRx	PURPRNCEM	(877) 629-3117	optumrx.com
PPO Dental Plans	MetLife	0138262	(866) 832-5756	metlife.com/mybenefits
DMO Dental Plan	Aetna	397432	(877) 238-6200	aetna.com/dsepublic/#/ princeton
Vision Plan	MetLife	30051158-0008/ MC0011	(855) 638-3931	metlife.com/mybenefits
Flexible Spending Accounts (HFSA, DFSA)	PayFlex	120632	(800) 284-4885	payflex.com
Supplemental Health Plans	MetLife	NA	(800) 438-6388	metlife.com/mybenefits
Enrollment	Winston Benefits	NA	(855) 393-3601	myprincetonbenefits.com
Employee Assistance Program	Carebridge	NA	(800) 437-0911	myliferesource.com Company Code: TW8AE
My Health Coach	TrestleTree	NA	(866) 237-0973	princeton.mytrestletree.com
MSK Direct	MSK	NA	(844) 303-2123	mskcc.org/direct/princeton
2nd.MD	2nd.MD	NA	(866) 841-2575	www.2nd.MD/princeton
Health Advocate	Health Advocate	NA	(866) 695-8622	healthadvocate.com/princeton
AbleTo	AbleTo	NA	(855) 773-2354 (Aetna members) or (833) 881-1468 (United Healthcare members)	member.ableto.com/princeton
Fertility and Family Planning	Kindbody	NA	(833) 216-2345	kindbody.com/princeton-benefit Access code: PRINCETON

Provider Contacts

Financial Wellness Benefits

Benefit	Provider	Group Number/ Plan ID	Phone Number	Website
Basic, Supplemental, Spousal, and Child Life Insurance	The Hartford	681431	(877) 778-1383	mybenefits.thehartford.com
Group Long Term Care	Genworth	NA	(800) 416-3624	genworth.com/groupltc
	(Prior plan) CNA		(Prior plan) (866) 357-8481	Group ID: Princeton Access Code: groupItc
Long Term Disability	The Hartford	681431	(877) 778-1383	mybenefits.thehartford.com
Princeton University Retirement Plan	TIAA (Main)	102861	(800) 842-2776	tiaa.org/princeton
Retilement Flan	TIAA (PPPL)	102865	(800) 842-2776	tiaa.org/princeton
Retirement Savings Plan	TIAA (Main)	102862	(800) 842-2776	tiaa.org/princeton
	TIAA (PPPL)	102866	(800) 842-2776	tiaa.org/princeton
Investment Advice	CAPTRUST	NA	(800) 967-9948	captrustadvice.com
Money Management	Isles	NA	(609) 341-4714	isles.org/our-approach/build- wealth/isles-financial-solutions/
Staff Educational Assistance Plan	Staff Educational Assistance Plan	NA	NA	hr.princeton.edu/thrive/ wellness-resources/staff- educational-assistance-plan
Children's Educational Assistance Plan	Children's Educational Assistance Plan	NA	NA	hr.princeton.edu/thrive/ wellness-resources/children- educational-assistance-plan
College Coach	Bright Horizons	NA	(888) 527-3550	hr.princeton.edu/thrive/ wellness-resources/bright- horizons
Employee Child Care Assistance Program (ECCAP)	Employee Child Care Assistance Program (ECCAP)	NA	NA	hr.princeton.edu/thrive/ wellness-resources/employee- child-care-assistance-program- eccap
Back-up Care Program	Bright Horizons	NA	(877) 242-2737	backup.brighthorizons.com
Legal Services Plan	MetLife Legal Plans	NA	(800) 821-6400	members.legalplans.com Access Code: 9901339
Commuter Benefits Program	PayFlex	120632	(800) 284-4885	payflex.com



