Health Care, Dental, and Vision Plans

As a new resident, coverage under UAB’s group health care, dental, or vision plans begins on the date of employment. Residents, who wish to enroll in one of UAB’s health care, dental, or vision plans, may do so within 31 days of hire date or a qualifying life event. If you do not enroll during the times stated above, you will be unable to join until Annual Open Enrollment. UAB’s health care, dental, and vision plans are stand alone programs. Premiums for health, dental, and vision insurance are deducted from your paycheck on a pre-tax basis.

Your monthly health care deductions are as follows:

<table>
<thead>
<tr>
<th>Health Care Providers</th>
<th>Single</th>
<th>EE + Child(ren)</th>
<th>EE+Spouse or EE+Spouse and Child</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>Viva Choice</td>
<td>$76.00</td>
<td>$257.07</td>
<td>$307.07</td>
<td>$366.18</td>
</tr>
<tr>
<td>Viva UAB</td>
<td>$88.89</td>
<td>$270.66</td>
<td>$320.60</td>
<td>$408.88</td>
</tr>
<tr>
<td>Viva Access</td>
<td>$153.94</td>
<td>$469.34</td>
<td>$519.34</td>
<td>$663.73</td>
</tr>
<tr>
<td>Blue Cross/PMD</td>
<td>$182.77</td>
<td>$557.24</td>
<td>$607.24</td>
<td>$843.34</td>
</tr>
</tbody>
</table>

Your monthly dental care deductions are as follows:

<table>
<thead>
<tr>
<th>Dental Care Plans</th>
<th>Single</th>
<th>EE + Child(ren)</th>
<th>EE+Spouse or EE+Spouse and Child</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>BCBS Basic</td>
<td>$18.78</td>
<td>$32.17</td>
<td>$36.38</td>
<td>$48.05</td>
</tr>
<tr>
<td>BCBS Comprehensive</td>
<td>$35.74</td>
<td>$61.12</td>
<td>$69.10</td>
<td>$91.24</td>
</tr>
</tbody>
</table>

**BCBS Dental Plan Basic Option** - Preventive and diagnostic are covered at 90% usual, customary, reasonable (UCR). Basic services are covered at 90% UCR subject to a $25 deductible.

**BCBS Dental Plan Comprehensive Option** - In addition to the Basic dental benefits, the Comprehensive plan covers major services at 60% UCR subject to the deductible. Orthodontics is covered at 50% UCR up to a $1,000 lifetime maximum per patient.

Your monthly vision plan deductions are as follows:
The VSP plan offers employees coverage for routine eye exams, lenses and frames, contacts, and discounts for LASIK eye surgery. The Basic vision plan includes new replacement frames every other calendar year. The Premier vision plan includes new replacement frames every year. Both plans offer in-network and out-of-network coverage. UAB Eye Care, the University Optometric Group (private faculty practice group at UAB) and the UAB Department of Ophthalmology – Ophthalmology Services Foundation all participate in the VSP network.

**Retirement Plans**

**Voluntary Retirement Programs 403(b) and 457(b) Plans**

- **403(b) Plan**
  The 403(b) plan is a voluntary, defined-contribution, pre-tax as well as Roth after-tax plan governed by the Internal Revenue Code 403(b). Eligible employees can choose between both TIAA and VALIC for investments. There are no University matching contributions under this plan.

- **457(b) Plan**
  UAB also offers a voluntary, defined-contribution, pre-tax as well as Roth after-tax plan governed by Internal Revenue Code 457(b). Similar to the 403(b) plan, the 457(b) plan offers the same expanded investment options and convenient payroll deductions. Eligible employees can choose between both TIAA and VALIC for investments. There are no University matching contributions under this plan.

**Flexible Spending Accounts**

Pretax reimbursement accounts administered by PayFlex for eligible medical and dependent care expenses. You can set aside pre-tax money via payroll deductions to pay for health care and dependent care expenses not covered by your benefit plan. Money set aside in these accounts will reduce your taxable income, providing you more value for the dollar.

You can set aside up to $2,600 in 2018 for a health care account. For dependent care accounts, you can set aside $5,000 or $2,500 for married taxpayers filing separate returns. Residents must enroll within 31 days from date of hire, qualifying life event, or during the annual open enrollment period.

**Health Savings Account**

Only employees enrolled in the Viva Choice CDHP are eligible to participate in a HSA account and will be automatically enrolled in the HSA upon enrollment in the Viva Choice CDHP plan.

UAB will pre-fund your account $400 for single plans and $800 for non-single plans elected during Open Enrollment. Outside of Open Enrollment, UAB pre-fund amounts will be prorated based on the number of months remaining in the calendar year at the time of enrollment. Once funds are available in your account, you can use those funds to pay for eligible expenses. Unused funds roll over from year to year and your HSA stays with you, even if you switch employers, change health plans or retire.

You elect to contribute pre-tax dollars directly through payroll or after-tax dollars on your own, up to the annual limit of $3,450 for single and $6,900 for non-single.

**Life Insurance, Accidental Insurance, Disability**
Group Term Life Insurance – Sponsored
Coverage varies with salary as indicated below.

<table>
<thead>
<tr>
<th>Annual Salary</th>
<th>Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Up to $23,999</td>
<td>$30,000</td>
</tr>
<tr>
<td>$24,000 to $29,999</td>
<td>$37,500</td>
</tr>
<tr>
<td>$30,000 to $39,999</td>
<td>$50,000</td>
</tr>
</tbody>
</table>

$40,000 and above, 125% of salary with a maximum insurance coverage of $300,000.

Group Universal Life Insurance – Voluntary
Rates vary based on age
Maximum Resident Coverage – Up to five times your Basic Annual Earnings or in $50,000 increments to a maximum of the lesser of five times Basic Annual Earnings or $1.4 million.

Guaranteed Issue for Resident – The lesser of three times your Basic Annual Earnings or $500,000; must be elected during the first 60 days of employment without evidence of insurability.

Spouse Life Coverage and Guaranteed Issue – Employee coverage required. Amount elected by you in multiples of $10,000 up to $150,000 not to exceed 100% of employee coverage. Guaranteed Issue amount is $30,000.

Guaranteed Issue for Unmarried Children – Employee coverage required. $1,000 for children 15 days to under 6 months old. $10,000 for children 6 months and older.

Accidental Death and Dismemberment Insurance – Sponsored
Provided at no cost to the resident.
$22,500 for accidental death. Dismemberment coverage varies.

Accidental Death and Dismemberment Insurance – Voluntary
Rates vary based on coverage level.
Maximum Coverage -- up to $500,000

Long Term Disability Insurance (Salary Continuation)
Provided at no cost to the resident.
After a 90-day waiting period, 66 2/3% monthly salary (not to exceed $10,000 per month) for the first 90 days of disability. After 90 days, 60% monthly salary (not to exceed $10,000 per month). This benefit is provided at no cost to the resident.

Other Employee Benefits

Paid Time Off
All leave taken is at the discretion of the resident’s program director, who must take into consideration any restrictions on leave established by the certifying board and/or Residency Review Committee for the specialty and the training requirements of the program.

Each program must provide its residents with written, program-specific policies on leave which must address the effect of leaves of absence, for any reason, on satisfying the criteria for completion of the residency program. A resident may be required by the program director to complete additional training equivalent to any leave taken in excess of that allowed by the training requirements of the program.

Residents must obtain prior approval from the program director, or his/her designee, for all leave, with the exception of emergencies or sudden illness.

The following is a summary of vacation and sick leave policies established by the Hospital, which generally apply to all residents, except as modified by the policies established by the individual programs. To view the complete and current resident leave policy (to include Family and Medical Leave), please review online, page 21, http://www.uab.edu/medicine/home/images/residents/gme_policies_procedures.pdf
**Vacation:**
The working year is defined in terms of 52 weeks, of which a maximum of three (3) work weeks for vacation purposes will be paid by the Hospital. Vacation unused at the end of a year may not be carried forward to the next year. Vacation unused at the time of termination is not reimbursable but may be taken as terminal leave, at the program director's discretion, through June 30.

**Sick Leave:**
Salary deductions generally are not made for time lost due to illness or injury if such time does not exceed three (3) work weeks.

*NOTE: Although every effort has been made to give you accurate information, there could be errors in the content. This summary of benefits is for general guidance only and is not a contract. All benefits are subject to the terms, conditions, and limitations of the contracts governing them. Costs identified above are effective January 01, 2017. Benefit eligibility may differ for employees working other than in a resident position.*