



2025 Benefit Enrollment Guide



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BENEFIT VENDOR CONTACT INFORMATION

Bright Horizons

1-866-610-6761

Back Up Care

www.bhlogin.brighthorizons.com

Ed Assist

www.kennedykrieger/edassist.com

Business Health Services (BHS)

(Provides our Employee Assistance Program)

6225 Smith Ave., Suite 203

Baltimore, MD 21209

1-800-327-2251

www.bhsonline.com (username KENNEDY)

CareFirst

Mail Administrator

PO Box 14115

Lexington, KY 40512

1-833-378-2103

www.carefirst.com

COBRA Participant Services

Administered by WEX

1-866-451-3399

email cobraadmin@wexhealth.com

www.wexinc.com

CVS - Caremark

(Administers our Prescription plan)

P.O. Box 94467

Palatine, IL 60094-4467

1-866-644-7527

www.caremark.com

Delta Dental

(Administers our Dental plans)

One Delta Drive

Mechanicsburg, PA 17055

1-800-932-0783

www.deltadentalins.com

Fidelity Investments

401(k)

1-800-343-0860

www.fidelity.com/atwork

Fidelity Investments

Health Savings Account

1-800-544-3716

www.fidelity.com/atwork

Labcorp

(In-Network Lab Provider)

1-800-845-6167

www.labcorp.com

Liberty Mutual

(Savings on auto and home insurance)

100 West Rd., Suite 407

Towson, MD 21204

1-800-699-5298

www.libertymutual.com

Quest Diagnostics

(In-Network Lab Provider)

1-866-MYQUEST

www.questdiagnostics.com

The Hartford

(Administers Life Insurance, Short and Long Term Disability, and Critical Illness and Accident plans)

Customer Service: 1-800-523-2233

Disability Claims: 1-800-448-5813

Critical Illness/Accident: 1-866-547-4205

www.thehartford.com/employeebenefits

The Kennedy Krieger Institute

Human Resources Department

707 N. Broadway, Baltimore, MD 21205

1-443-923-5800 | 1-443-923-5805 - fax

benefits@kennedykrieger.org

Transamerica

Permanent Life Insurance with Long Term Care Rider

1-888-763-7474

www.tebcs.com

Vision Service Plan (VSP)

(Administers our Voluntary Vision Plan)

1-800-877-7195

e-mail imember@vsp.com

www.VSP.com

WEX

(Administers our Flexible Spending Accounts and Dependent Care Advantage)

4321 20th Ave SW, Fargo, ND 58103

Toll Free 866-451-3399

Fax 1-888-410-6024

www.wexinc.com

At Kennedy Krieger Institute, we're pleased to offer a comprehensive, competitive benefits package to eligible employees and their eligible dependents. Our goal is to help employees understand their benefits, live healthy lifestyles, and have access to affordable high quality healthcare services.

This Benefit Guide presents a summary of your benefit plan options. Please review each option closely before deciding which plan provides the appropriate coverage for you. For more specific coverage questions, please contact the Kennedy Krieger Institute Human Resources Department at (443) 923-5800 or email benefits@kennedykrieger.org. We hope you'll use this information to educate yourself to make the best choice for your healthcare coverage.

PLEASE NOTE: Any benefits you elect remain in effect during the entire plan year. You may only change your benefit elections during open enrollment, which is held in the Fall of each year, or if you have a family status change as determined by the IRS. A family status change is generally defined as a birth or death of a dependent; marriage or divorce; or you or your spouse's loss or change of employment. **You must notify the Human Resources Department within 30 days of any family status change which will affect your benefit elections. If you do not, your benefit changes must wait until the next open enrollment period, and will go into effect the following plan year.**

PLEASE NOTE: Every effort has been made to ensure that this benefit guide is as complete and accurate as possible. However, should a conflict arise between this booklet and any plan it describes, the terms of the applicable plan document will govern.

MEDICAL PLAN ELIGIBILITY

The following employees shall be eligible for coverage under the *Plan*: all **full-time** (scheduled to work 30+ hours per week) and **part-time employees** who are regularly scheduled to work at least sixteen (16) hours per week. This Plan does not include trainees or temporary, intermittent, and seasonal employees. Please see your Plan Documents for further details.

Additionally, in consideration of the Affordable Care Act (ACA), any employee that averages at least 30 hours each week during the designated "Lookback" period qualifies as full-time and therefore, will be benefit eligible during the plan year (January 1st through December 31st).

Generally, under the Lookback Eligibility Definition, whether you are eligible for Plan Benefits during a particular plan year depends upon whether you worked an average of 30 hours per week over the course of a measurement period (which is considered to be full-time under the Affordable Care Act) that takes place before the plan year begins. This is called the "Lookback" method—Kennedy Krieger looks back at your prior service to determine whether you will be considered full-time and eligible for benefits during the next plan year.

EFFECTIVE DATE OF COVERAGE

Medical Plan benefits begin the first of the month following date of hire for Staff, Senior Staff and Faculty employees.

Welcome to CareFirst BlueCross BlueShield

We're excited to support Kennedy Krieger employees and families in their healthcare journey. Here are some highlights of your medical plan:



Great benefits

- Choose the doctor you want from the largest network of providers.
- National coverage—you are covered at home and away from home.
- No charge, no deductible for in-network preventive care benefits.



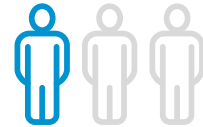
Convenience

- CloseKnit offers virtual-first primary care 24/7/365 for our members through an easy-to-use app. CloseKnit's dedicated Care Teams offer preventive and urgent care, behavior and mental health services, chronic condition prevention and management, disease management and more.
- My Account—our secure personalized portal helps you manage your health information anytime, anywhere.
- Digital tools are available to you 24/7/365.



Health and wellness

- Wellness—access resources and tools to help you reach your personal health goals, from staying physically active and eating healthier to breaking unhealthy habits and managing chronic conditions.
- Care Navigation—a Behavioral Health Care Manager gives members a chance to be heard and can help them find a path forward. This service is available to everyone; call the CareFirst Support Line at 800-245-7013 for assistance.
- LGBTQ+ members can contact our dedicated gender services specialist for help navigating care and understanding benefits. Visit member.carefirst.com/members/health-wellness/staying-healthy/gender-services.page for assistance.



1 in 3 people
are covered by
Blue nationally¹



1.7M providers
across the
U.S. representing
**96% of hospitals and
83% of doctors**²



Find a Doctor

¹ BCBSA Blue Facts, February 2022

² BCBSA Blue Facts, December 2023

CloseKnit is a registered trademark owned by, and is the trade name of, Atlas Health, LLC. Atlas Health, LLC d/b/a. CloseKnit provides telehealth services to CareFirst BlueCross BlueShield members.

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Support for Some of Life's Biggest Transitions

Personalized insights on health and fertility at your fingertips

Whether you're trying to get pregnant or looking for tips to manage menopause, Ovia* can help! Included with your CareFirst WellBeingSM program, Ovia offers support for your reproductive health, including pre-conception, looking to conceive, conception and perimenopause/menopause. It's easy to get started! Just choose your goal: cycle tracking, trying to conceive, or managing menopause and the Ovia app will customize your experience to deliver personalized insights, tips and content.



Pregnancy

- Maternity and mental health
- Pregnancy loss
- Adoption and surrogacy resources



Parenting

- Postpartum and infant feeding support
- Interconception health
- Child and parental well-being



Women's Health and Prevention

- Fertility and family building
- Menopause support
- Behavioral health

* Services and resources offered through Ovia Health, a leading women's health company.

WOMEN'S HEALTH AND FAMILY FOCUSED BENEFITS

2025 Enhanced Infertility Treatment Benefits Plan Changes

1. For single individuals, waiving requirement for a diagnosis of infertility and requirement for physician recommendation.
2. Expanding coverage for members to be able to access IVF benefits without first pursuing IUI.
3. Expanding coverage to allow cryopreservation, storage and thawing of sperm, oocytes and embryos (when medically necessary during treatment).
4. Expanding coverage to allow use of donor oocytes/sperm/embryos.
5. Expanding coverage to cover PGT-A testing for those >35 years of age or who have had recurrent pregnancy losses.

Ready to make progress toward your health goals? Follow these steps to get started today!

1. Log in to your CareFirst WellBeing account or create one at carefirst.com/wellbeing
2. Under *Achieve*, choose *Programs* to view your women's health programs
3. Select *Ovia* and follow the prompts to get started
4. Download the **Ovia app** and explore



2025 RX Plan (FYI): Caremark RX infertility MAB already increased to 100K effective 07/01/2024.

CareFirst BlueCross BlueShield (CareFirst) has partnered with Sharecare, Inc. to provide you with well-being improvement resources. Both CareFirst and Sharecare are committed to protecting the confidentiality of your information. We do not share individual data with your employer and will never sell your data. However, due to the public nature of Ovia's online community, the information you share on the forums can be seen by others.

Sharecare, Inc., is an independent company that provides health improvement management services to CareFirst members. Sharecare, Inc. does not provide CareFirst BlueCross BlueShield products or services and is solely responsible for the health improvement management services it provides.

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SUM6541-1E (10/24) ■ Kennedy Krieger



WOMEN'S HEALTH AND FAMILY FOCUSED BENEFITS



3 EASY STEPS

Get Started with Your Benefits

1

SIGN UP

Join today - create your account with Bright Horizons in minutes.

2

ACCESS YOUR BENEFITS

Gain instant access to your employer-sponsored services.

3

GET RECOMMENDATIONS

See suggestions matching your family's life stages and interests.



Support Services Available to You and Your Family

1. Access to Sitters and Nannies through SitterCity

- Download the app and start searching for sitters and nannies today
- Waived membership fees (\$150 value) for Sittercity's premium database of sitters and virtual sitting.

2. Access to Primary Child Care Solutions

- Jump ahead on Bright Horizons center waitlists or get tuition discounts at our partner centers.

3. Emergency Back-Up Care when:

- Your child's school is closed, and you need to be at work
- A regular caregiver isn't available
- Your elderly Mom or Dad needs support in their home, or yours

4. Academic Support and Tutoring

- Get exclusive discounts on tutoring, test prep, and enrichment classes from high-quality education partners

5. Guidance and Well Being Resources

- Explore resources that offer practical and proven advice on topics from time management, mental health and resilience to parenting and career progression.

Additional benefits include resources to help find elder care, pet care, housekeeping, and more!

Use your network ID and password to set up a **Bright Horizons** account and enjoy a variety of family support benefits. Just punch in this URL to get started! <https://my.bright Horizons.com/>

Eligibility: Budgeted 30 hours or more, per week.

FAMILY FOCUSED BENEFITS

New in 2025! Paid Parental Leave Enhancement

All active employees are eligible for **six weeks of paid leave, following the birth or adoption of a child.** This benefit can be used by either parent. Staff employees are eligible the first of the month after the successful completion of the initial 6 month evaluation period. Faculty and Senior Staff are eligible first of the month following hire date.

ELIGIBILITY AND BENEFITS

- Employees who become new parents through the birth of their child (including those via surrogate) or through the legal adoption of a child aged 12 years or younger.
- Only regular full-time or part-time employees are eligible for this benefit; temporary and intermittent employees do not qualify.
- Employees receive compensation equivalent to 100% of their average weekly earnings.

New in 2025! Adoption Assistance Increase

Bringing a new child into your life is one of the most exciting times for families. The Institute is committed to providing financial support for adoption assistance. All employees (Staff, Senior Staff and Faculty) working a minimum of 30 hours per week, who have completed two years of service can receive \$10,000 per child (up to \$20,000) for the adoption of a child under the age of 12. Staff employees are eligible the first of the month following the successful completion of the 6 month evaluation period. Faculty and Senior Staff are eligible first of the month following hire date.



KEYS TO WELLNESS



MISSION

To educate and empower employees to become knowledgeable healthcare consumers and make lifestyle choices that help them achieve their own individual goals.

VISION

That every employee participates in one or more wellness activity annually.

KEYS TO WELLNESS

FITNESS	NUTRITION	MINDFULNESS	FINANCIAL	CONNECTION
Engage in 30 minutes of moderate activity 5 days per week.	Eat a balanced diet containing 5 or more servings of fruits and vegetables daily.	Practice focusing on the present, to heighten awareness and create balance.	Take an active role in managing finances to become financially fit now and in the future.	Thriving through togetherness and belonging.

WELLNESS OFFERINGS

Institute Wide Challenges Yoga Classes	Wellness Webinars Weight Watchers Subsidy	Gym Membership Discounts Financial Workshops
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Interested in promoting wellness events and a culture of wellness at your location?
Please e-mail Keystowellness@kennedykrieger.org and let us know you are interested in becoming a Wellness Champ.

Unlock Your Best Self!





Join Blue365® and start saving today!

With the Blue365 wellness discount program, great deals are yours for every aspect of your life—like 20% off at Reebok.com, discounted nutrition products or a gym membership for only \$29 a month.

To take advantage of Blue365, register now at carefirst.com/wellnessdiscounts. It's an online destination featuring healthy deals and discounts exclusively for our members.

Just have your CareFirst member ID card handy. If you have medical coverage, use your member ID number to register for Blue365. If you do not have CareFirst medical coverage, but instead only have wellness, vision, dental or disability benefits, enter 233 instead of a member ID number.

In a couple of minutes, you will be registered and ready to shop. Every week, we will send a special deal straight to your email inbox.

Check out these top brands with discounts just for you:

Beltone

chewy

eye Med

fitbit

fitness your way
by Twity Health

GARMIN

Hotels.com™

jenny CRAIG

PHILIPS sonicare

QualSight LASIK

Reebok

TruHearing™

Walt Disney World

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CST2251-1P (5/22)

Blue365
Because health is a big deal™

Give yourself permission

Embrace your best you
—mind, body, and life

With WeightWatchers®
you can:

- Discover thousands of healthier recipes.
- Get on a roll with exercise tracking.
- Tame stress with guided meditations.
- Share the love with a 24/7 support squad.



\$0 / Special pricing on select plans*

WW.com/wellness • Access ID: 61518



Already a WeightWatchers member?

Call customer service at 866-204-2885 to sync your account.

*Pricing reflects the cost of an eligible WW membership plan through your organization. If your membership includes a monthly payment, it is required in advance. You'll be automatically charged each month, if applicable, in accordance with company pricing until you cancel. Pricing may adjust to the standard monthly rate if your relationship with your organization changes or terminates, or the agreement between your organization and WW terminates.

Weight Watchers is the trademark of WW International, Inc. ©2024 WW International, Inc. All rights reserved.

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Noom

Be your healthiest you.

Ready to join the millions of Americans already using Noom?¹ Now you can join Noom at no cost as part of your CareFirst BlueCross BlueShield (CareFirst) health plan benefits. CareFirst is focused on whole health and aims to meet the needs of our members in all aspects of their lives. That's why we've made Noom available through our well-being program.

The Noom app is designed to help you achieve and maintain a healthy weight. It can also help lower the risk for chronic conditions like diabetes.

What makes Noom different? Their approach. Noom's personalized, psychology-based techniques will help you better understand your relationship with food. You'll be more mindful of habits and gain the knowledge and support needed for lasting change.

Here's how Noom makes it a little easier:

Daily lessons on your terms

Gain confidence with practical knowledge you can use right away. How much time you spend on each lesson is up to you. So it's easy to fit Noom into your schedule.

Get and stay motivated

With optional one-on-one coaching and support groups, you can choose the kind of support you need to keep going.

At your speed

Noom's tracking tools are designed to empower you to hit your goals at a pace that's comfortable for you.

There are certain requirements to participate in Noom, like:

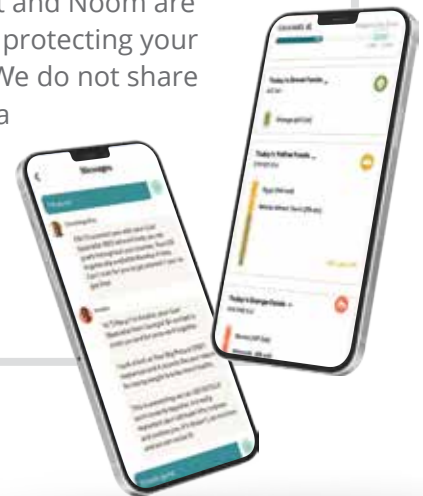
- Being 18 years of age or older with a BMI of 25 or greater;
- Having been identified as having prediabetes; or
- Being at risk for developing prediabetes.

If you've already been diagnosed with diabetes, we encourage you to receive additional support. You can do this by enrolling in disease management coaching through CareFirst WellBeingSM.

Ready to get started?

Log in or sign up for CareFirst WellBeing. Once logged in, select *You* followed by *Benefits*. Next, click *Health & Fitness* and then *Noom*.

Remember, there's no cost to you and your privacy is assured. Both CareFirst and Noom are committed to protecting your information. We do not share individual data with your employer. We will never sell your data.



¹ Noom internal client data

Noom is brought to you on behalf of your CareFirst WellBeing program. Noom is an independent company that provides health improvement management services to CareFirst members. Noom does not provide CareFirst BlueCross BlueShield products or services and is solely responsible for the health improvement management services it provides.

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Change your eating habits. Make lasting weight loss possible.

At CareFirst BlueCross BlueShield (CareFirst), we aim to meet the needs of our members in all aspects of their lives. That's why we're offering Eat Right Now through your health plan benefits. Eat Right Now is an innovative program that combines neuroscience and mindfulness to help you and your relationship with eating and make meaningful lifestyle changes that last. The program can help you lose 5-7% of your body weight and significantly reduce the risk of developing type 2 diabetes.

You get

- Short daily video lessons: learn proven techniques for adopting healthy habits
- Text-based coaching with qualified behavioral health experts
- 24/7 peer support within a friendly community moderated by behavior change specialists
- Weekly calls: Clinical professionals, such as Dr. Jud, address habit change plus your specific questions

To be eligible for Eat Right Now, you must meet certain BMI requirements and not have clinical reasons that prevent you from participating, like pregnancy. Based on the onboarding assessment, you will be placed in the appropriate program track based on your goals for weight loss and/or diabetes prevention.

Ready to get started?

Log in to or sign up for **CareFirst WellBeingSM**. Once logged in, select **You** followed by **Benefits**. Next, click **Health & Fitness** and then **Eat Right Now**.

"Usually, my weight is all over the place but with the exercises, I've been more consistent with water throughout the day and have paid more attention to the why when I eat."

- Eat Right Now Program Participant

Eat Right Now
by **sharecare**

This well-being program is administered by Sharecare, Inc., an independent company that provides health improvement management services to CareFirst members. Sharecare, Inc. does not provide CareFirst BlueCross BlueShield products or services and is solely responsible for the health improvement management services it provides.

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The MyBHS Portal



The MyBHS Portal provides participants with access to services, information about your program and offers resources, assessments and trainings on a variety of well-being and skill-building topics.

TOPICS INCLUDE:

- Emotional Well-Being
- Crisis and Disaster
- Personal Growth
- Relationships
- Financial
- Legal
- Resilience and more!

FEATURES:

- **Access to Services** - Services are available by submitting an online services request form, call or texting, or live chat.
- **Services Overview** - Contains a summary of the services available to you.
- **Resources & Tips** - Topics that help you prepare for and handle most major life events. The content comes from world-renowned publishers like Harvard Health publications, NOLO legal press and NBC Universal.
- **Café Series Webinars** - Featured and archived webinars allow on-demand and unlimited access to previously presented webinars on various well-being topics.
- **Training Center** - An expanding library of self-paced courses for personal and professional development. Courses take approximately 45 to 60 minutes to complete.
- **Assessments and Calculators** - Interactive tools and assessments on health, wellness and personal growth.
- **Financial Calculators** - From mortgages to retirement planning, 100s of interactive calculators to crunch numbers on everything from auto loans to savings goals.
- **Legal Forms** - Free, easy-to-use legal forms.
- **In The News** - Resources for current events that may have an impact on an individual's overall well-being.

Access the MyBHS Portal
online or via the app.

portal.BHSONline.com

ID: **KENNEDY**



ALSO ACCESSIBLE
THROUGH THE BHS APP

Search BHS APP where you download apps.





Behavioral Health Programs and Resources



Care navigation

A Behavioral Health Care Manager gives members a chance to be heard and can help them find a path forward. This service is available to everyone; call the CareFirst Support Line at **800-245-7013** for assistance.

LGBTQ+ members can contact our dedicated gender services specialist for help navigating care and understanding benefits.



Provider network

Over 425,000 mental health providers are now available across Blue Cross and Blue Shield companies nationwide. CareFirst makes it easy to find and access services covered by individual medical plans. The directory offers members the ability to search for clinicians by specialty, ZIP code and more.



CloseKnit

Our CloseKnit virtual practice offers an integrated experience between primary and behavioral health care. CloseKnit providers can assess behavioral health needs to help members connect with therapists and psychiatrists.



Substance use disorder support

CareFirst offers 24/7 clinical counseling and direct scheduling (within 48 hours) for adolescents and adults to improve access to substance use disorder treatment. Call the CareFirst Support Line at **800-245-7013** for assistance.



Unwinding

Unwinding is an evidence-based, digital resource based on mindfulness. It helps users deal with stress, build resilience, and develop a more focused, aware and mindful approach to life and work.

Individual benefits vary. Members should log in to their carefirst.com account to see which programs are available through their health plan.

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Online Virtual Primary Care Services

What is CloseKnit?

CloseKnit is a different kind of primary care practice. Instead of going to a doctor's office, your "visit" is done through an easy-to-use app—anytime, anywhere, 24/7/365.

There are only two requirements for eligibility:

- 18+ years old
- Enrolled in a CareFirst BlueCross BlueShield health plan
(Excluding Medicare and Medicaid programs)



Benefits of CloseKnit

- A Care Team that knows your history & your goals
 - Chat with your Care Team 24/7/365
 - Concierge support to navigate bills & benefits
 - A dedicated team to help with coordination for in-person and specialty care
 - Fully integrated with your CareFirst BlueCross BlueShield Benefits
- Complies with all personal and security standards

How to Get Started

1 Download the app

Use your phone or tablet to download the CloseKnit app.

3 Share your health priorities

Create a profile with basic information so our Care Team can best support your needs.

2 Register for an account

Enter your email address and verify the code sent.

Enter your name and member ID as they appear on your CareFirst BlueCross BlueShield insurance card.

Create and confirm a password of your choosing.

You're all set!

You can start accessing care immediately.



INVESTING IN YOU

DISABILITY PLANS

The Institute provides eligible employees Short Term Disability (STD) and Long Term Disability income protection from a covered injury, illness or pregnancy. All employees are enrolled automatically, and there are no employee premium contributions required. All employees must complete an application for Short Term Disability and Long Term Disability, and if approved, are responsible for ensuring their medical provider is updating The Hartford on a regular basis.

STAFF ELIGIBILITY AND BENEFITS

- Must be budgeted to work a minimum of 30 hours per week or more.
- Coverage begins the first of the month, following 6 months of employment.
- There is a 21-day elimination period. Disability benefits begin on the 22nd consecutive day of disability. Long Term Disability benefits begin on the 181st day of Disability.
- Disability benefits provide 60% of your pre-disability earnings per week, for a maximum of 180 days, minus the 21-day elimination period.
- Long Term Disability benefits are equal to 60% of your base weekly wage up to a monthly maximum of \$10,000.

FACULTY AND SENIOR STAFF ELIGIBILITY AND BENEFITS

- Faculty and Senior Staff must be budgeted to work 20 hours per week or more.
- Coverage becomes effective the first day of the month, following date of hire.
- Disability benefits provide 100% salary continuation of pre-disability earnings for up to 180 days.
- Long Term Disability benefits equal to 60% of your base weekly wage up to a monthly maximum of \$10,000.



KENNEDY KRIEGER INSTITUTE RETIREMENT SAVINGS PLANS - 401(k)

The Retirement Savings Plan provides you with the best opportunity to save for your future. With the ease of regular payroll deductions, and the advantage of tax-deferred savings (lowering your taxable income), participation in the Kennedy Krieger Institute Retirement Savings Plan just makes sense.

Make the most of your retirement savings and contribute at least 6% to get the full employer matching potential!

Employee Retirement Savings Plan

Key Features of the plan include:

- **Base Contribution** - An Institute base contribution of 3% of pay.
- **Automatic Enrollment in the Plan¹** - Automatically enroll employees at 6% of your pay on a pre-tax basis, unless you contact Fidelity to change your contribution.
- **Automatic Increase Program** - Automatically increase the amount you defer by 1% on an annual basis, up to 10%.
- **Vesting** - You are immediately 100% vested in your own contributions to the Plan. Employer contributions for the Savings plan are vested 100% after 2 plan years.
- **Faculty and Senior Staff employees** will receive an additional 5% of pay contribution that will either go directly to 401(k) plan or be added to employees' bi-weekly paycheck as taxable income.

¹If you do not designate an investment choice; your contribution will be invested in the Fidelity Freedom® Fund - Class K.

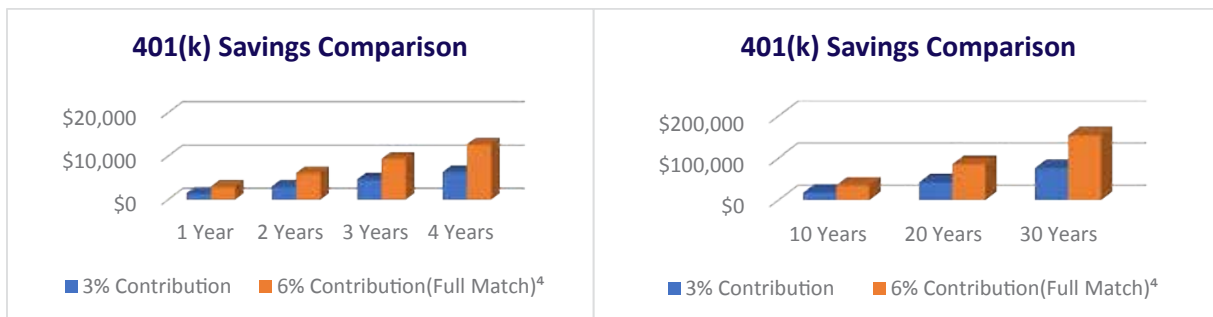
Roth 401(k)

- Roth 401(k) allows you to contribute after-tax dollars to your account and then withdraw tax-free dollars when you retire.²
- Just as with a traditional 401(k):
 - You elect how much of your salary you wish to contribute.
 - Your combined contributions to a Roth 401(k) and a traditional pretax 401(k) cannot exceed IRS limits.
 - Your contribution is based on your eligible compensation.

²A distribution from a Roth 401(k) is federal tax free and penalty free, provided the five-year aging requirement has been satisfied and one of the following conditions has been met: age 59½, disability, or death.

Matching Contributions

- Institute matching contributions equal to:
 - **\$0.25 on the dollar up to 6% of your bi-weekly earnings** for employees with **less than 5 years of service**.
 - **\$0.50 on the dollar up to 6% of your bi-weekly earnings** for employees with **5 or more years of service**.
- The charts³ below represent how your savings can add up over time if you are taking full advantage of the employer match:



³These hypothetical examples assume the following: (1) starting annual gross salary of \$40,000; (2) Monthly tax contributions are for a period of 1, 2, 3, 4, 10, 20, or 30 years (3) An annual rate of return of 3%. (4) The ending values do not reflect taxes, fees or inflation. If they did, amounts would be lower. Earnings and pre-tax contributions.

⁴Example of contributing 6% and taking advantage of the full employer match.

Beneficiary Information

***Important Reminder: All employees MUST elect a primary beneficiary for their 401(k) retirement account. To do this, make sure you have their Social Security Number, Date of Birth and follow the steps below:**

- Log on to Fidelity NetBenefits® at www.NetBenefits.com
- Go to Menu in the top left side of your screen
- Click on Profile
- Click on Beneficiaries

For more information, contact Fidelity Investments at 1-800-343-0860, or visit Fidelity NetBenefits® at www.NetBenefits.com

INVESTING IN YOU

Student Debt Relief Program

Realizing the financial strain that student debt can cause, the Institute has partnered with Fidelity Investments to help pay down your student debt faster! You can save significantly on interest payments and free up your money for other goals!

The Institute will pay \$100 per month directly to employees' loan holders. Payment will go directly toward the loan balance. There is a lifetime maximum of \$10,500, and eligibility requirements include being budgeted for 30 hours or more per week and completion of the six month evaluation period. Loans must be held in employees' name to be eligible. To get started please log in to Fidelity Net Benefits.

For additional information contact studentdebtrelief@kennedykrieger.org



Education Assistance Programs

The Institute supports employees and their dependents, who choose to pursue higher education, achieve their individual and academic goals through several educational assistance programs. The cost of higher education has escalated over time and in some cases has put college out of reach for many. For that reason, the Institute is committed to investing in you and your family to help offset the cost of college courses from accredited colleges or universities through a range of educational assistance programs.

All applications through the **Education Assistance Program** are processed through EdAssist. Log on to <https://www.kennedykrieger.edassist.com> for more information or to submit an application.

****Please note:** Use your Network ID and password to log on to EdAssist.

- 1. Tuition Assistance:** Receive up to **\$10,500** per calendar year towards an Undergraduate, Graduate or Doctorate degree! Employees must complete their six-month initial evaluation period and work 16 or more hours per week to be eligible. Faculty and Senior Staff are eligible immediately. **Academic Advising:** Meet with an expert to get a customized education plan that will help you meet your goals, get help with the admissions process, and figure out how to pay. (Tuition Reimbursement program only)
- 2. Dependent Tuition Grant:** Receive up to **\$32,000** per year per dependent towards the cost of their Undergraduate degree. **Employees must have 5 or more years of service**, with 1,000 hours worked in each eligible year, and work 30 or more hours per week. Faculty and Senior Staff must be budgeted for at least 30 hours per week and are eligible immediately.
- 3. Tuition Remission:** Reimbursement for Faculty and Senior Staff employees up to **\$5,250** per calendar year for certain continuing education (CEU's and CME's) classes and personal enrichment classes. This program also provides some limited benefits to eligible employee's spouse and dependents. Eligibility is immediate.

PRE-TAX FLEXIBLE SPENDING ACCOUNT BENEFITS



Eligibility

All Staff, Faculty/Senior Staff budgeted 16 hours per week.

This plan is administered by WEX Benefits.

Your Open Enrollment election will apply to expenses incurred between January 1 and December 31 of plan year. You must re-enroll each year that you want a Flexible Spending Account. A “Grace period” has been added for Dependent Care and Medical flexible spending accounts. **You will have an additional 2 1/2 months to use your funds after the end of the plan year.**

WEX Benefits is our plan administrator. WEX is a provider of FSA services. Their address is 4321 20th Ave. SW, Fargo, ND 58103. Their website is www.wexinc.com.

A Flexible Spending Account is a tax-advantaged way for you to pay for certain medical and/or day care expenses. This added benefit allows you to pay for these expenses using pre-tax dollars, lowering your taxable income and resulting in a higher take home pay.

How An FSA Can Save You Money

Your contributions to an FSA are exempt from Federal taxes (Income, FICA and Medicare) and in most cases state and local taxes as well. (Note: Medical and Dependent Care FSA contributions by New Jersey residents are subject to state tax, as are Dependent Care FSA contributions made by Pennsylvania residents.) **Most participants save at least 28%** (savings vary by employee’s tax bracket).

How Much Can You Direct Into Your FSA?

ACCOUNT	MAXIMUM (PER YEAR)	MINIMUM (PER YEAR)
Medical Care FSA	\$3,200*	\$130
Dependent Care FSA	\$5,000	\$130

**Please note that these are 2024 maximums and the maximums for 2025 may go up after the printing of this guide.*

Medical Care FSA helps pay for eligible medical expenses such as, but not limited to:

- Deductibles, coinsurance and copayments required by your health, prescription, dental or vision plans.
- Vision care including glasses, contact lenses, solution and Laser Eye Surgery.
- Dental expenses including orthodontia.

Dependent Care FSA helps pay for eligible expenses such as, but not limited to:

- Child care expenses for dependents through age 12 that allow the employee and/or their spouse (if married) to work.
- Care for an elderly parent or disabled spouse.

Never use your FSA Debit Card to pay for services covered by your medical or dental plan.

PRE-TAX FLEXIBLE SPENDING ACCOUNT BENEFITS



This plan is administered by WEX Benefits

Dependent Care FSA provides tax relief for day care costs for children through age 12 and adult day care. Eligible expenses include day care provided by a licensed facility or in-home dependent care, before/after school care programs, pre-school and summer day camp.

- Your dependent day care expenses must be incurred to allow you (and your spouse if you are married) to work or look for work.
- You must use the funds as payment for dependent care to someone you claim as a dependent.
- This benefit program would be in lieu of the Federal Child Care Tax Credit that you may claim when filing your annual tax return. Consult with a tax advisor to determine which plan is most suitable to your situation.

Dependent Care Advantage (This plan is offered at no cost to you!)

The **Dependent Care Advantage** is another benefit designed to assist Institute employees with expenses related to child care for dependent children **up to age 10** that allows the employee, and if married, their spouse, to work outside the home. **You must enroll in this benefit each year that you have an eligible child.**

The Institute will contribute up to \$2,000 per year to employees earning under \$100,000, to your Dependent Care Spending Account for each child through age 6. Employees earning over \$100,000 per year will receive \$1,200 per year for dependents age 0-6. The Institute will contribute up to \$600 for each child age 7-10 for whom you pay childcare expenses. This amount is pro-rated for accounts effective after January 1st. You do not have to contribute any additional out of pocket money to the Dependent Care Spending Account in order to receive the Kennedy Krieger Institute contribution.

ELIGIBILITY:

- You must be a regular employee working a minimum of 16 hours per week and have dependent care costs directly related to your work schedule.
- Employees working between 16 and 29 hours per week are eligible for the benefit at 50%.
- Employees classified as temporary, intermittent or working less than 16 hours per week are not eligible.
- If you and your spouse are both Kennedy Krieger Institute employees, only one employee will be eligible to participate.

The Dependent Care Advantage is an **employer contribution** and follows all of the guidelines of the Dependent Care Spending Account. However, contributions are only made for dependent children who are **up to age 10** as of January 1st of the plan year, or as of the date the employee becomes benefit eligible.



FSA's, as authorized by the Internal Revenue Service (IRS), stipulate that you must forfeit any funds remaining in your account at the end of the plan year or grace period or within 90 days of your termination date. Other limitations apply.

QUALIFIED HIGH DEDUCTIBLE PLAN AND HEALTH SAVINGS ACCOUNT (HSA's) INFORMATION

What is a Qualified High Deductible Plan (QHDP)?

A qualified high-deductible health plan, or “QHDP,” is a type of health insurance plan that has a higher annual deductible than a traditional insurance plan, yet offers tremendous savings on lower monthly premiums. Furthermore, when enrolled in a QHDP, participants become eligible to participate in a Health Savings Account (HSA) which allows participants to set aside pre-tax money for healthcare expenses.

How does the QHDP plan work?

- Participants use the same network as the PPO Gold and Silver Plan
- There are no copays for physician visits or prescriptions, however, coinsurance does apply to all medical and prescription charges
- Participants with employee only coverage must meet their annual deductible before coinsurance benefits pay for covered expenses
- Participants covering one or more dependents must meet the entire Family Deductible before coinsurance benefits begin to cover ANY covered family member
- Any number of covered family members may help to satisfy the in-network family out-of-pocket expense limit, but no family member will incur more than the individual in network Out Of Pocket Maximum. For out of network services, the family OOPM needs to be met before the Plan pays in full.
- Prescription expenses count towards the annual deductible

What is a Health Savings Account? (HSA)

An HSA is an individually owned savings account that allows participants to set aside pre-tax dollars through payroll deductions for medical expenses. As a result, contributions are not included in gross income and not subject to federal income tax. Furthermore, withdrawals from the HSA account to pay for qualified medical expenses are also tax free. Additionally, the contributions you make to the HSA can be invested (like an IRA). Any interest or earnings on those investments are also tax free.

Who is eligible to participate in an HSA?

Participants must be enrolled in a Qualified High Deductible plan to be eligible to enroll in an HSA.

What are the tax advantages?

Participants are eligible for triple tax advantages!

1. Payroll deductions are pre-tax
2. Earnings are tax free
3. Withdrawals for eligible medical expenses are tax free

What kind of medical expenses are typically paid from the HSA?

Participants can use money from the HSA to pay for medical and prescription expenses until their annual deductible is met. HSA monies can also be used for the balance billed services after the Plan pays coinsurance for covered services.

What happens to money I deposit that isn't spent on medical expenses?

Your pre-tax deposits will continue to roll over from year-to-year and grow tax free! The HSA account is yours and the assets in the account will always belong to you whether you remain employed, take a position with a different company, or retire.

HEALTH SAVINGS ACCOUNTS (HSA's)

This plan is administered by Fidelity



Eligibility

1. Participants must be enrolled in the Qualified High Deductible Plan to be eligible to enroll in the Health Savings Account (HSA).
2. Participants enrolling in the HSA must spend down any Flexible Spending Account (FSA) balance, if any from the preceding plan year by 12/31. If participants have any remaining FSA balance on the first day of the new year, enrollment and contributions in the HSA cannot begin until May 1st of the new plan year.

How does the HSA plan work?

- Participants elect an annual contribution they would like to set aside in the HSA. The institute initiates pre-tax payroll deductions to be deposited in the employees individually owned HSA account.
- Participants can change their bi-weekly payroll deductions throughout the plan year as they choose!
- Participants typically use the pre-tax payroll HSA deposits to pay for out-of-pocket medical expenses such as physician visits, lab charges, prescriptions, dental and vision services (for themselves and covered dependents) until the annual deductibles for their Qualified High Deductible Plan are met. Then the QHDP kicks in and pays coinsurance for qualified medical expenses. Plan participants also use HSA monies for balance billed medical expenses.
- All HSA deposits (and any earnings) that have not been spent for eligible medical expenses roll over into the next Plan year.

For a complete list of eligible expenses please visit the Fidelity Investments web site at <http://www.fidelity.com/atwork>.

Participants use the Fidelity Investments portal to:

- Check their balance
- Pay providers
- Review transactions
- View insurance claims
- Invest in mutual funds
- Submit requests for reimbursement

Employer Matching Contributions

To help offset costs associated with higher deductibles, the Institute offers matching contributions to your Health Savings Account.

- Employee Only Coverage: dollar for dollar up to \$500 per year
- Covering Dependents: dollar for dollar up to \$1,000 per year

Maximum Annual Contribution

ACCOUNT	MAXIMUM (PER YEAR)
Health Savings Account (Employee Only QHDP Coverage)	\$4,300
Health Savings Account (Covering one or more dependents on QHDP)	\$8,550
Catch-up Contribution, age 55+	\$1,000

Individuals may be excluded from HSA eligibility if they are:

- Covered under a spouse's or dependents employer's health plan that is not a Qualified High Deductible Plan.
- Claimed as a dependent on someone else's taxes.
- Covered by Medicare (Part A and/or Part B).
- Covered under a Medical Savings Account (MSA) or Health Reimbursement Arrangement (HRA), unless the coverage under the MSA or HRA is limited to permitted benefits or specific benefits not provided by the Qualified High Deductible Plan.
- Covered under a Flexible Spending Account. This means that if you have an FSA today, you must spend all of your FSA dollars by December 31, if you want to contribute in a HSA effective January 1.

SUMMARY OF MEDICAL BENEFITS



	PPO GOLD		PPO SILVER		Qualified High Deductible	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
Medical Benefits						
Deductible (Individual/Family)	\$600 / \$1,200	\$1,200 / \$2,400	\$800 / \$1,600	\$1,500 / \$3,000	\$2,000 / \$4,000	\$4,000 / \$8,000
Coinsurance	90%	70%	80%	60%	80%	60%
Maximum Coinsurance Out-of-Pocket Individual/Family (Includes deductibles, office, hospital and prescription copays)	\$3,000 / \$6,000	\$5,000 / \$10,000	\$3,800 / \$7,600	\$6,000 / \$12,000	\$4,000 / \$8,000	\$8,000 / \$16,000
CVS Minute Clinic & Other Participating Retail Clinics	\$5	N/A	\$5	N/A	Deductible then 80%	N/A
Physician Office Copay Participants will pay the family physician copay for in-network PT, OT and Speech Service appointments.	\$20 Family Phys.* \$35 Specialist	Deductible then 70%	\$30 Family Phys.* \$45 Specialist	Deductible then 60%	Deductible then 80%	Deductible then 60%
Routine Well Child Care and Immunizations	100%	Deductible then 70%	100%	Deductible then 60%	100%	Deductible then 60%
Routine Preventive Care (age 7 - adults)	100%	Deductible then 70%	100%	Deductible then 60%	100%	Deductible then 60%
Inpatient Care	\$200 inpatient copay per admission (maximum 3 per year) + applicable Deductible & Coinsurance				Deductible then 80%	Deductible then 60%
Inpatient/Outpatient Surgery	Deductible then 90%	Deductible then 70%	Deductible then 80%	Deductible then 60%	Deductible then 80%	Deductible then 60%
Diagnostic and X-ray	Deductible then 90%	Deductible then 70%	Deductible then 80%	Deductible then 60%	Deductible then 80%	Deductible then 60%
Emergency Room **	Deductible then 90% after \$50 copay	Deductible then 90% after \$50 copay	Deductible then 80% after \$50 copay	Deductible then 80% after \$50 copay	Deductible then 80%	Deductible then 80%
Mental Health and Chemical Dependency Care***						
Inpatient	Deductible then 90%	Deductible then 70%	Deductible then 80%	Deductible then 60%	Deductible then 80%	Deductible then 60%
Outpatient	\$20 copay	Deductible then 70%	\$30 copay	Deductible then 60%	Deductible then 80%	Deductible then 60%
Lifetime maximum	unlimited	unlimited	unlimited	unlimited	unlimited	unlimited

Prescription Drugs Benefits	PPO GOLD	PPO SILVER	Qualified High Deductible
	(CVS Caremark)	(CVS Caremark)	(CVS Caremark)
Prescriptions Deductible Retail (generic/preferred/non-preferred) Mail Order (generic/preferred/non-preferred)	\$50 Individual/\$100 Family \$10/\$30/\$50 \$20/\$60/\$100	\$65 Individual/\$130 Family \$13/\$35/\$55 \$26/\$70/\$110	Deductible then 80%
Specialty Rx on Program Drug List** ...if not participating in PrudentRx ...if participating in PrudentRx	30% after deductible \$0	30% after deductible \$0	30% after deductible Not Available

***Mental Health and Substance Abuse inpatient and outpatient services will be treated as any illness.
 * Family Physician = Family Practice, Internist, Pediatrician and Gynecologist ** \$50 ER copay waived if admitted applies to Gold and Silver plans only. Note: There is a limit of 30 day supply of prescription at the pharmacy and there is a formulary or preferred list of medications with 3-tier copays. Medical deductibles and coinsurance cross apply in and out of network. Medical deductibles and coinsurance cross apply in and out of network.
 ** Program Drug Program List may be updated periodically; chart shows 30-day benefit.

IN-NETWORK LAB PROVIDERS

Please note: Employees can go to either Quest Diagnostics or LabCorp for labwork, they are both in-network. Laboratory testing is subject to deductibles.

Quest Diagnostics
www.questdiagnostics.com



Labcorp
www.labcorp.com



In order to provide a comprehensive & cost-effective prescription drug program for you and your family, Kennedy Krieger has contracted through its partnership with CVS to offer the PrudentRx Solution for certain specialty medications. Prudent Rx works in conjunction with your CVS/Caremark pharmacy benefits to save you money. PrudentRx is only available for the PPO Gold and PPO Silver plans.

What is it?

The PrudentRx Solution assists members by helping them enroll in manufacturer copay assistance programs. Specialty medications on the Program Drug List will be subject to a 30% co-insurance, following satisfaction of any applicable deductible. However, if a member is participating in PrudentRx, which includes enrollment in any available manufacturer copay assistance program for their specialty medication, the member will have a \$0 out-of-pocket responsibility for their prescriptions covered under the Solution.

How to Enroll?

If you currently take one or more specialty medications included in the Program Drug List, you will receive a welcome letter from PrudentRx that provides information about the solution as it pertains to your medication. All eligible members must call PrudentRx at the number listed below to register for any manufacturer copay assistance program available for your specialty medication.

If you or a covered family member are not currently taking but will start a new medication covered under the Solution, you can reach out to PrudentRx or they will proactively contact you.

PrudentRx can be reached at **800-237-2767** to address any questions regarding the PrudentRx Solution.

The PrudentRx program does not take the place of CVS/Caremark.



**The PrudentRx Program Drug List may be updated periodically.*

EMPLOYEE MEDICAL CONTRIBUTIONS

12-MONTH EMPLOYEES FULL-TIME AND PART-TIME RATES

Medical Employee Contributions Bi-Weekly Per Pay (26 Pays)	Full-Time Rates (30+ Hours per week)		
	PPO GOLD	PPO SILVER	Qualified High Deductible
EE Only	\$93.00	\$69.00	\$44.00
EE + Spouse	\$194.00	\$150.00	\$98.00
EE + Child	\$169.00	\$127.00	\$88.00
EE + 2	\$269.00	\$205.00	\$142.00
EE + 3 or more	\$335.00	\$247.00	\$169.00

Part-Time Rates (16-29 Hours per week)		
PPO GOLD	PPO SILVER	Qualified High Deductible
\$174.00	\$146.00	\$87.00
\$318.00	\$272.00	\$211.00
\$304.00	\$255.00	\$189.00
\$435.00	\$359.00	\$268.00
\$501.00	\$405.00	\$300.00

11-MONTH EMPLOYEES FULL-TIME AND PART-TIME RATES

Medical Employee Contributions Bi-Weekly Per Pay (24 Pays)	Full-Time Rates (30+ Hours per week)		
	PPO GOLD	PPO SILVER	Qualified High Deductible
EE Only	\$100.75	\$74.75	\$47.67
EE + Spouse	\$210.17	\$162.50	\$106.17
EE + Child	\$183.08	\$137.58	\$95.33
EE + 2	\$291.42	\$222.08	\$153.83
EE + 3 or more	\$362.92	\$267.58	\$183.08

Part-Time Rates (16-29 Hours per week)		
PPO GOLD	PPO SILVER	Qualified High Deductible
\$188.50	\$158.17	\$94.25
\$344.50	\$294.67	\$228.58
\$329.33	\$276.25	\$204.75
\$471.25	\$388.92	\$290.33
\$542.75	\$438.75	\$325.00

10-MONTH EMPLOYEES FULL-TIME AND PART-TIME RATES

Medical Employee Contributions Bi-Weekly Per Pay (22 Pays)	Full-Time Rates (30+ Hours per week)		
	PPO GOLD	PPO SILVER	Qualified High Deductible
EE Only	\$109.91	\$81.55	\$52.00
EE + Spouse	\$229.27	\$177.27	\$115.82
EE + Child	\$199.73	\$150.09	\$104.00
EE + 2	\$317.91	\$242.27	\$167.82
EE + 3 or more	\$395.91	\$291.91	\$199.73

Part-Time Rates (16-29 Hours per week)		
PPO GOLD	PPO SILVER	Qualified High Deductible
\$205.64	\$172.55	\$102.82
\$375.82	\$321.45	\$249.36
\$359.27	\$301.36	\$223.36
\$514.09	\$424.27	\$316.73
\$592.09	\$478.64	\$354.55

* Faculty/Senior Staff budgeted for 16 hours or more per week pay FT rates.

SUMMARY OF VISION BENEFITS

Employees may choose between the Standard Vision Plan or Vision Service Plan (VSP).

Standard Vision Plan

This plan is available at no additional cost to employees that enroll in the PPO Gold or the PPO Silver medical plans. This is a reimbursement plan. Employees may go to any provider of their choice and there is no vision insurance card needed. The vision claim form is on the HR intranet page.

STANDARD VISION PLAN SERVICES	BENEFITS
Vision Exams	100% reimbursement up to \$100 every other year
Frames, Lenses and/or Contacts	100% reimbursement up to \$150 every other year.
Per pay Premium	\$0-Included in medical plan premiums

Vision Service Plan (VSP)

Employees have the option to enroll in a vision plan with significantly enhanced benefit coverage. **This plan is administered through Vision Service Plan (VSP)** and requires a voluntary pre-tax payroll deduction. Similar to a medical plan, enrolled participants can choose in or out of network providers. Employees and Senior Staff/Faculty must be budgeted 16 or more hours per week to be eligible for the plan, and are not required to be enrolled in any of the medical plans. There is no vision insurance card needed.



VSP VISION PLAN SERVICES	IN-NETWORK	OUT-OF-NETWORK
Benefit Frequency: Includes examinations, lenses, frames and contact lenses.	12 Months	12 Months
Routine Eye Exam	\$10 Copay	Up to \$71 Allowance
Frames	\$200 allowance then 20% Discount Frames at Costco will have \$110 allowance	\$70 Allowance
Base Lenses		
Single Vision Lens	\$25 Copay	\$32 Allowance
Bifocal Lens	\$25 Copay	\$50 Allowance
Trifocal Lens	\$25 Copay	\$65 Allowance
Contact Lenses		
Medically Necessary	\$25 Copay	\$322 Allowance
Disposable	\$130 Allowance	\$115 Allowance
Conventional	\$130 Allowance	\$115 Allowance

NEW! With VSP LightCare, you can use your frame and lens benefit to get non-prescription eyewear such as sunglasses or blue light filtering glasses – from your VSP network doctor.

EMPLOYEE CONTRIBUTIONS FOR VSP

Employee contributions are bi-weekly per pay

	12 MONTH EMPLOYEES	11 MONTH EMPLOYEES	10 MONTH EMPLOYEES
EE Only	\$4.15	\$4.50	\$4.90
EE + Spouse	\$9.70	\$10.51	\$11.46
EE + Child	\$9.11	\$9.87	\$10.77
EE + 2	\$9.93	\$10.76	\$11.73
Employee + 3 or more	\$14.64	\$15.86	\$17.30

SUMMARY OF DENTAL BENEFITS



This plan is administered by Delta Dental

We recognize that many factors affect the choice of a dentist and therefore employees have an option to choose a dentist from the Delta Dental PPO Participating Dentist (PPO), Delta Dental Premier Participating Dentist (Premier), and Non-Participating Dentist. This assures that you have full access to the dental treatment you need from the dental office of your choice. Your total out of pocket payment is the least if you go to a Delta (PPO) dentist, is more if you go to a Delta Premier dentist and will likely be the highest if you go to a non-participating dentist. Payment by Delta Dental for any single procedure that is a covered service will be made upon completion of the procedure. Payment for care is applied to the calendar year deductible and maximum benefit based on the date of service. After you have satisfied your deductible requirement, Delta Dental will provide payment for covered services at the percentage indicated in the Benefit Summary Chart, up to the maximum for each enrollee in a calendar year.

A List of Delta Dental Participating Dentists May Be Obtained By:



Visiting the Delta Dental Web site at deltadentalins.com, or calling Delta Dental directly at 1-800-932-0783. You can also check your claim status on the Delta Dental website.

	GOLD DENTAL PLAN		SILVER DENTAL PLAN	
	DELTA PPO/ DELTA PREMIER	OUT-OF-NETWORK	DELTA PPO/ DELTA PREMIER	OUT-OF-NETWORK
Deductible	\$70/person; \$210/family	\$70/person; \$210/family	\$70/person; \$210/family	\$70/person; \$210/family
PLAN PAYMENT AFTER DEDUCTIBLE				
Diagnostic (includes exams, x-rays) NOTE: no more than 2 in a calendar year period)	100% Not subject to deductible	100% Not subject to deductible	100% Not subject to deductible	100% Not subject to deductible
Preventive (includes cleaning twice in a calendar year period, fluoride treatments to age 19, sealants to age 19)	100% Not subject to deductible (3 cleanings)	100% Not subject to deductible (3 cleanings)	100% Not subject to deductible (2 cleanings)	100% Not subject to deductible (2 cleanings)
Basic Restorative & Oral Surgery (includes amalgam and composite fillings)	80% Subject to deductible	80% of MPA* Subject to deductible	80% Subject to deductible	80% of MPA* Subject to deductible
Endodontic/Periodontic	80% Subject to deductible	80% of MPA* Subject to deductible	50% Subject to deductible	50% of MPA* Subject to deductible
Prosthodontics Procedures for replacement of missing teeth by construction or repair of bridges and partial or complete dentures; implants surgical placement and removal; implant supported prosthetics, including repair and recementation	50% Subject to deductible	50% of MPA* Subject to deductible	50% Subject to deductible	50% Subject to deductible
Major Restorative (includes crowns, inlays)	50% Subject to deductible	50% of MPA* Subject to deductible	50% Subject to deductible	50% of MPA* Subject to deductible
Calendar Year Maximum (Diagnostic/Preventive/Basic)	\$2,000 per person	\$1,500 per person	\$2,000 per person	\$1,500 per person
Orthodontia Benefit (eligible dependents up to age 19)	50%	50% of MPA*	50%	50% of MPA*
Adult Orthodontia (eligible employees, their spouses and dependents age 20-26)	50%	50% of MPA*	Not covered	Not covered
Orthodontia Lifetime Maximum	\$2,000	\$2,000	\$2,000	\$2,000

Note: If the total charge for a treatment plan is expected to exceed \$300, pre-determination is a condition of approval of the charges for payment. The dentist must submit the claim form in advance of performing the services. *All employees are responsible for charges above maximum plan allowance.

EMPLOYEE DENTAL CONTRIBUTIONS

12-MONTH EMPLOYEES

*Dental Employee Contributions Bi-Weekly Per Pay (26 Pays)	Full-Time Rates (30+ Hours per week)	
	PPO GOLD	PPO SILVER
EE Only	\$11.00	\$8.00
EE + Spouse	\$19.00	\$14.00
EE + Child	\$15.00	\$12.00
EE + 2	\$27.00	\$21.00
Employee + 3 or more	\$33.00	\$26.00

Part-Time Rates (16-29 Hours per week)	
PPO GOLD	PPO SILVER
\$16.00	\$12.00
\$27.00	\$20.00
\$21.00	\$16.00
\$37.00	\$29.00
\$47.00	\$37.00

11-MONTH EMPLOYEES

*Dental Employee Contributions Bi-Weekly Per Pay (24 Pays)	Full-Time Rates (30+ Hours per week)	
	PPO GOLD	PPO SILVER
EE Only	\$11.92	\$8.67
EE + Spouse	\$20.58	\$15.17
EE + Child	\$16.25	\$13.00
EE + 2	\$29.25	\$22.75
Employee + 3 or more	\$35.75	\$28.17

Part-Time Rates (16-29 Hours per week)	
PPO GOLD	PPO SILVER
\$17.33	\$13.00
\$29.25	\$21.67
\$22.75	\$17.33
\$40.08	\$31.42
\$50.92	\$40.08

10-MONTH EMPLOYEES

*Dental Employee Contributions Bi-Weekly Per Pay (22 Pays)	Full-Time Rates (30+ Hours per week)	
	PPO GOLD	PPO SILVER
EE Only	\$13.00	\$9.45
EE + Spouse	\$22.45	\$16.55
EE + Child	\$17.73	\$14.18
EE + 2	\$31.91	\$24.82
Employee + 3 or more	\$39.00	\$30.73

Part-Time Rates (16-29 Hours per week)	
PPO GOLD	PPO SILVER
\$18.91	\$14.18
\$31.91	\$23.64
\$24.82	\$18.91
\$43.73	\$34.27
\$55.55	\$43.73

VOLUNTARY BENEFIT OPTIONS

Eligibility

Staff budgeted 30 hours per week and Faculty/Senior Staff budgeted 20 hours per week.



Life And Accidental Death and Dismemberment (AD&D) Insurance

This plan is administered by the Hartford

Life insurance needs can vary greatly from person to person. If you're single, you may not need a lot of coverage. If you have a family you may need more insurance in order to provide the financial stability your family requires in the event of your death or the death of your spouse (or even a child). The Institute understands this and offers you many options to choose from so that you can tailor your insurance needs to match your personal situation.

Basic Life and AD&D

The Kennedy Krieger Institute provides 1.5 times salary (up to \$300,000 maximum) in Basic Life and Basic AD&D coverage to all regular employees who are budgeted to work a minimum of 30 hours per week. The imputed cost of coverage in excess of \$50,000 is subject to Social Security and Medicare Taxes and therefore reported on the employee's W-2. Don't forget to update your life insurance beneficiaries through Navigator. From your dashboard click on *My Profile and Benefits > Benefits > View/Update Life Insurance Beneficiaries*.

****Please note: Basic and Supplemental Life Plan coverage will be decreased by 35% the first of the next calendar year that you attain 70 and by 50% when you attain age 75.**

Supplemental Life and AD&D

You also have the option of purchasing additional Life and AD&D Insurance if you wish to supplement the Institute-provided benefit. You may purchase an additional 1, 2 or 3 times your annual salary (up to \$500,000 maximum).

Evidence of Insurability will be required anytime you elect supplemental life insurance after your initial enrollment opportunity, if you increase the amount of life insurance,

and for amounts over \$200,000. The cost for Supplemental Life and AD&D Insurance is based on your age and the amount of coverage you elect, and it is paid entirely by you on an after-tax basis. A Human Resources Representative can help you calculate the cost of the coverage. You may also refer to the rate chart below for the cost of this coverage.

SUPPLEMENTAL LIFE AND AD&D INSURANCE RATES	
AGE AS OF 1/1/2025	RATE PER \$1,000 OF COVERAGE
>25	\$0.07
25-29	\$0.08
30-34	\$0.10
35-39	\$0.11
40-44	\$0.17
45-49	\$0.25
50-54	\$0.43
55-59	\$0.69
60-64	\$0.88
65-69	\$1.48
*70 or older	\$3.96

Participants losing employee or dependent life insurance coverage may be eligible to convert or port their coverage. Contact benefits@kennedykrieger.org for more information.



VOLUNTARY BENEFIT OPTIONS



Dependent Life

Employees scheduled to work 30+ hours per week have the option of purchasing Dependent Life Insurance for your spouse and/or your child(ren). You may elect to purchase up to an additional \$50,000 of Life Insurance for your spouse (in increments of \$10,000) and up to an additional \$10,000 of Life Insurance for your children (in increments of \$2,000).

Evidence of Insurability will be required anytime you elect Spouse Life Insurance after your initial enrollment opportunity, increase the amount and for amounts of Spouse Life Insurance over \$30,000. The cost for this coverage is paid for entirely by you, it is on an after-tax basis, and it can be calculated by a Human Resources Representative. You may also refer to the charts below for the cost of this coverage.

SUPPLEMENTAL SPOUSE LIFE INSURANCE RATES						
SPOUSE AGE AS OF 1/1/2025	MONTHLY RATE PER \$10,000	\$10,000 PER PAY PERIOD	\$20,000 PER PAY PERIOD	\$30,000 PER PAY PERIOD	\$40,000 PER PAY PERIOD	\$50,000 PER PAY PERIOD
> 25	\$0.50	\$0.23	\$0.46	\$0.69	\$0.92	\$1.16
25-29	\$0.60	\$0.28	\$0.55	\$0.83	\$1.11	\$1.39
30-34	\$0.80	\$0.37	\$0.74	\$1.11	\$1.48	\$1.85
35-39	\$0.90	\$0.42	\$0.83	\$1.25	\$1.66	\$2.08
40-44	\$1.50	\$0.69	\$1.38	\$2.08	\$2.77	\$3.46
45-49	\$2.30	\$1.06	\$2.12	\$3.19	\$4.25	\$5.31
50-54	\$4.10	\$1.89	\$3.78	\$5.68	\$7.57	\$9.46
55-59	\$6.70	\$3.09	\$6.18	\$9.28	\$12.37	\$15.46
60-64	\$8.60	\$3.97	\$7.94	\$11.91	\$15.88	\$19.85
65-69	\$14.60	\$6.74	\$13.48	\$20.21	\$26.95	\$33.69

****Please note: Spouse Life Plan coverage will be decreased by 35% the first of the next calendar year that the spouse attains age 70 and by 50% when they attain age 75.**

*SPOUSE AGE AS OF 1/1/2025	MONTHLY RATE PER \$10,000	\$6,500 PER PAY PERIOD	\$13,000 PER PAY PERIOD	\$19,500 PER PAY PERIOD	\$26,000 PER PAY PERIOD	\$32,500 PER PAY PERIOD
70-74	\$39.40	\$11.82	\$23.64	\$35.46	\$47.28	\$59.10
*SPOUSE AGE AS OF 1/1/2025	MONTHLY RATE PER \$10,000	\$5,000 PER PAY PERIOD	\$10,000 PER PAY PERIOD	\$15,000 PER PAY PERIOD	\$20,000 PER PAY PERIOD	\$25,000 PER PAY PERIOD
75 OR MORE	\$39.40	\$9.09	\$18.19	\$27.28	\$36.37	\$45.46

SUPPLEMENTAL CHILD LIFE INSURANCE RATES				
This benefit applies to all dependent children from age 6 months to age 26.				
PER PAY PERIOD DEDUCTION				
\$2,000	\$4,000	\$6,000	\$8,000	\$10,000
\$0.10	\$0.20	\$0.31	\$0.41	\$0.51

VOLUNTARY BENEFIT OPTIONS



Accident Insurance

ELIGIBILITY

All Staff, Faculty/Senior Staff budgeted 16 hours per week. You have the opportunity to enroll in **Critical Illness insurance for you, your spouse and/or child(ren) with no medical questions asked.** \$10,000 in employee coverage, Dependent children automatically receive 50% of the \$10,000 and covered spouses receive \$5,000 in coverage. Employee must be enrolled in order for spouse to be enrolled.

You have the opportunity to enroll in **Accident insurance for you, your spouse and/or child(ren) with no medical questions asked.**

WHAT IS IT?

With Accident insurance, you'll receive payment(s) associated with a covered injury and related services. You can use the payment in any way you choose – from expenses not covered by your medical plan to day-to-day costs of living such as the mortgage or your utility bills.

Accident insurance provides benefits for covered accidental injuries, related services and treatments.

Examples include:

- Diagnostic exams and other emergency services
- Initial and follow-up physician visits
- Hospital admission and confinement
- Follow-up/recovery services, including physical therapy and chiropractic care
- \$50 Health Screen Benefit payable once per year per covered family member, 25 health screens are covered

WHY DO I NEED IT?

An accident can happen to anyone, and recovery can be costly. Your medical insurance may pick up most of the tab, but leave you with out-of-pocket expenses that add up quickly. Accident insurance can help ease the unplanned financial burden by complementing other insurance you may have, including medical and disability coverage. As medical costs continue to rise, this additional layer of financial protection may make a difference at a time when you and your family need it most.

ACCIDENT INSURANCE RATES BI-WEEKLY - 26 PAYS:

Employee Only \$3.40	Employee & Spouse \$5.37	Employee & Child(ren) \$5.67	Employee & Family \$8.93
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Wellness Benefit

This benefit (for either Accident or Critical Illness) can pay \$50 per calendar year, per insured individual, if a covered health screening test is performed, including blood tests, stress tests, colonoscopies, mammograms and chest x-rays. For more information please call The Hartford at 1-800-523-2233.

VOLUNTARY BENEFIT OPTIONS



Critical Illness

ELIGIBILITY

All Staff, Faculty/Senior Staff budgeted 16 hours per week. You have the opportunity to enroll in **Critical Illness insurance for you, your spouse and/or chil(ren) with no medical questions asked.** \$10,000 in employee coverage, Dependent children automatically receive 50% of the \$10,000 and covered spouses receive \$5,000 in coverage. Employee must be enrolled in order for spouse to be enrolled.

WHAT IS IT?

- With Critical Illness insurance, you'll receive a lump-sum payment when a covered illness is diagnosed. If a previously covered illness returns, and/or you're diagnosed with an additional covered illness, benefits remain payable up to the plan benefit maximum for as long as you are insured under the policy (subject to plan terms and conditions). Your plan includes a \$50 Health Screen Benefit payable once per year per covered family member. You can use the payment in any way you choose.

Expenses not covered by your medical insurance

- Deductibles and coinsurance
- Caregiver expenses
- Travel to and from treatment centers
- Extended rehabilitation needs
- Child care
- Day-to-day living expenses

WHY DO I NEED IT?

A major illness – such as cancer, a heart attack or stroke – can leave you emotionally, physically and financially overwhelmed. Critical Illness insurance can help relieve the financial impact of an illness so you can focus on recovery. Critical Illness insurance can enhance your traditional medical plan. When combined with accident or disability insurance, it can also help ensure that you'll be better prepared to cover out-of-pocket expenses in the event of a serious illness.

CRITICAL INSURANCE RATES BI-WEEKLY - 26 PAYS:

Attained Age Non-Tobacco Biweekly Premium Rates for \$10,000 Coverage Amount			Attained Age Tobacco Biweekly Premium Rates for \$10,000 Coverage Amount		
Age	Employee (Includes Child(ren))	Family (Includes spouse)	Age	Employee (Includes Child(ren))	Family (Includes spouse)
18-24	\$1.13	\$2.05	18-24	\$1.21	\$2.18
25-29	\$1.46	\$2.55	25-29	\$1.63	\$2.82
30-34	\$1.64	\$2.84	30-34	\$1.94	\$3.30
35-39	\$2.02	\$3.39	35-39	\$2.57	\$4.26
40-44	\$2.70	\$4.43	40-44	\$3.79	\$6.16
45-49	\$3.97	\$6.40	45-49	\$6.29	\$10.03
50-54	\$5.35	\$8.54	50-54	\$9.29	\$14.67
55-59	\$7.18	\$11.39	55-59	\$13.37	\$20.98
60-64	\$10.10	\$15.90	60-64	\$19.97	\$31.17
65-69	\$13.99	\$21.82	65-69	\$29.41	\$45.60
70-74	\$19.22	\$29.83	70-74	\$39.75	\$61.83
75-79	\$25.50	\$39.33	75-79	\$47.67	\$73.78
80+	\$30.88	\$47.49	80+	\$54.18	\$83.85

Permanent Life Insurance with Long Term Care

ELIGIBILITY

All Staff, Faculty/Sr. Staff budgeted 16 hours per week.

You have the opportunity to enroll in Guaranteed Issue Permanent Life Insurance with no medical questions asked.

WHAT IS IT?

Transamerica Permanent Life Insurance with Long Term Care is a guaranteed issue life insurance policy. This means that there are no medical questions asked, and no blood work or medical exams required. Transamerica Permanent Life Insurance builds cash value tax-deferred with a guaranteed interest rate. The cash can be borrowed against, and your premium will remain the same for the lifetime of your policy.

Transamerica Permanent Life Insurance includes benefits such as:

- **Guaranteed Interest Rate of 3%**
 - Currently earning 5.25%.
- **Long Term Care Living Benefit Rider**
 - 4% monthly for home or facility.
- **Accelerated Death Benefit for Terminal Condition**
 - Living benefit advance of up to 75% of policy.
- **Waiver of Premium for Layoff and Strike**
 - Protects against lapse for up to 6 months.
- **Chronic Condition Rider**
 - Provides an accelerated death benefit for chronic conditions if someone needs assistance with at least 2 or more Activities of Daily Living (ADLs).

WHY DO I NEED IT?

Transamerica Guaranteed Issue Permanent Life Insurance is available to all employees, with no medical questions asked. While for most life insurance policies, medical conditions and one's overall health can affect how much life insurance they can receive and the premium they will pay, Transamerica Permanent Life Insurance does not. Premiums are based solely on age and smoker or non-smoker status.

If an employee is diagnosed with a qualified condition, having the Chronic Condition Rider on their life insurance policy can help provide income to cover living and care expenses by accelerating the death benefit. It can be used to pay for financial needs such as mortgage, debt, or any care provided by a family member or facility. This simple action can help take the caregiving burden off of your employees' loved ones.

If you are interested and would like to learn more, receive a quote, or get enrolled in your Permanent Life Insurance with Long Term Care policy,

contact William Fedo at the MWE Partnership for assistance!

OR scan the QR code/follow the link below to schedule a virtual 1-to-1 meeting with William Fedo!

WILLIAM FEDO

(443)-863-6504

william.fedo@mwepartnership.com



<https://mwe.mobi/WillFedo>

WORK/LIFE AND ENGAGEMENT

Bank of America

Visit <https://go.bofa.com/KennedyKriegerInstitute> to learn more about special banking benefits from Bank of America

Johns Hopkins Federal Credit Union

All Kennedy Krieger Institute employees are eligible for all Johns Hopkins Credit Union benefits. For more information, contact the Credit Union at 1-410-534-4500 or visit www.jhfcu.org.

Liberty Mutual Insurance

All Kennedy Krieger Institute employees are eligible to receive special group rates on automobile and home insurance with the option of payroll deductions. Employees can contact 1-800-699-5298 or visit www.libertymutual.com for more information or to receive a quote!

Live Near Your Work

The Live Near Your Work Program enables eligible Kennedy Krieger Institute employees to apply for a \$5,000 (\$2,500 from the Institute/\$2,500 from Baltimore City Housing) grant for down payment or closing costs associated with purchasing a home anywhere in Baltimore City. Please refer to the [Live Near Your Work \(LNYW\)](#) page on the Beacon for more information. **Please note: In order to qualify for the grant you must complete a housing counseling session prior to submitting a contract.**

MTA Pass

Kennedy Krieger Institute subsidizes MTA and MARC passes for active employees only. The MTA pass covers unlimited travel on MTA Bus, Light Rail and Metro Subway. Contact Facilities for more information. transportation@kennedykrieger.org

Travel Assistance

Travel Assistance is a valuable travel service brought to you through The Hartford for Institute employees working 30 or more hours per week. Help for travel emergencies is only a phone call away for you and your dependents when traveling 100 miles or more from your primary home. Travel Assistance provides three kinds of services: Pre-Trip Information, Emergency Medical Assistance, and Emergency Personal Services. The Hartford Travel Assistance now also includes Identify Theft Protection Services. Call 1-800-243-6108. Travel Assistance Identification number: GLD-09012

Truist (formerly Suntrust)

To open an account or explore the suite of benefits Truist offers, visit www.truist.com/atwork
@Work Code: 0036496

Will Services

Estate Guidance Will Service is brought to you through The Hartford for all active Kennedy Krieger Institute employees. Whether your assets are few or many, it's important to have a will. It's the only way to ensure that your intentions will be honored in the event of your death. A will states your wishes about who will inherit your property, who will be the guardian of your children, and who will manage your estate. Without a will, those decisions may be left to others. For more information please visit www.estateguidance.com/wills . Use the code WILLHLF.

GLOSSARY OF TERMS

Claims Administrator: Any entity that recommends or determines to pay claims to enrollees, physicians, hospitals or others on behalf of the health benefit plan. Our medical and standard vision plan Claims Administrator is CareFirst BlueCross BlueShield. CVS Caremark is the prescription Claims Administrator, Vision Service Plan (VSP) is our vision Claims Administrator, Delta Dental is our dental Claims Administrator, WEX Benefits is our FSA Claims Administrator and COBRA Administrator, and Fidelity Investments is our HSA Claims Administrator.

Coinsurance: The insured person and the insurer share the hospital and medical expenses in a specified ratio (e.g., 90%:10% or 80%:20%) after the deductible is met.

Copay: The amount you pay for in network office visits or prescription drugs under the Gold or Silver plan.

Covered Expenses: Medically necessary services, supplies or treatments that are recommended or provided by a physician, professional provider or covered facility for the treatment of an illness or injury.

Deductible: A fixed amount of health care dollars, which an individual must pay before health benefits are reimbursed.

Qualified High Deductible Plan Only; Deductibles and Out of Pocket Helpful Information for other than individual coverage.

- The entire Family Deductible must be met before benefits begin to pay out for ANY family member.
- The entire Family Out of pocket Maximum must be met before the plan pays in full for ANY family member.

Dependent Eligibility:

- **Legal Spouse-** The spouse of the *employee* under a legally valid existing marriage with a person of either the same or the opposite sex, unless court ordered separation exists.
- **Your Children-** The *employee's* natural child, stepchild, legally adopted child and a child for whom the *employee* or covered spouse has been appointed legal guardian, provided: The child must be less than 26 years of age regardless of whether tax dependent, student, married or residing with employee.
- An eligible child shall also include any other child of an *employee* or their spouse who is recognized in a Qualified Medical Child Support Order (QMCSO) or National Medical Support Notice (NMSN) which has been issued by any court judgment, decree, or order as being entitled to enrollment for coverage under this plan, even if the child is not residing in the *employee's* household. The child is under age 26 and is not eligible for coverage under an employer-sponsored health plan. The dependent can be married, but his/her spouse and children do not qualify.
- A child who is unmarried, incapable of self-sustaining employment, and dependent upon the *employee* for support due to mental and/or physical disability, and who was covered under the Plan Prior to reaching the maximum age limit or due to other loss of *dependent's* eligibility and who lives with the *employee*, will remain eligible for coverage under the Plan beyond the date coverage would otherwise be lost.

Emergency: The sudden onset of an illness or injury where the symptoms are of such severity that the absence of immediate medical attention could reasonably result in placing the covered person's life in jeopardy or causing other serious medical consequences.

Maximum Co-Insurance Out of Pocket: After the covered person has incurred an amount equal to the out of pocket expense limit, the Plan will begin to pay 100% for covered expenses for the remainder of the calendar year. Included in the Maximum Out of Pocket amount is coinsurance, all co-pays (office, hospital and prescription copays) and deductibles.

Preferred Provider Organization (PPO): A network of medical providers (hospitals, physicians and other healthcare providers) who agree to reduce their fees in exchange for being part of the preferred network. The CareFirst network is your PPO provider.

- Choice of receiving higher benefits when using a preferred provider or lower benefits when using a non-preferred provider.
- Pay an annual calendar year deductible for most services, then co-insurance.
- Pay co-pay for physician office visits.
- No claim form to file in-network.
- Can go to specialist without referral.

Usual, Customary and Reasonable (UCR): The UCR is determined from a statistical review and analysis of the charges for a given procedure in a given zip code area and is used to determine the maximum benefit for out-of-network claims.





Keys to Wellness

Human Resources Department

707 N. Broadway

Baltimore, MD 21205

1-443-923-5800

1-443-923-5805 - fax

www.kennedykrieger.org

benefits@kennedykrieger.org