



2011 BENEFITS OF EMPLOYMENT

Last revised 02-01-11

BENEFIT	EFFECTIVE	BENEFIT	FULL-TIME 36+ hours	PART-TIME 24+ hours	PER DIEM As needed
HEALTH INSURANCE BENEFITS Health premiums are deducted on a pre-tax basis, unless an after-tax basis is requested in writing. Health benefits include Healthy Lifestyles and additional EyeMed coverage.					
HRA Plan 1 See plan booklet for more details	First of month following date of hire	Preventive Care is 100% covered. Includes routine exams, health screenings, childhood immunizations, well-baby care, gynecological visits, etc. Also includes medications from preventive meds list. Prescriptions, Outpatient/Inpatient Care, ER Visit, Ambulance, Chiropractic, Nursing or Rehab Facilities, etc. are subject to: <ul style="list-style-type: none"> \$2000 deductible for individual or \$4000 deductible for family. 20% coinsurance up to \$2000 per individual or \$4000 per family per calendar year. Annual Out of Pocket Maximum is \$4000 per individual or \$8000 per family. Employer Fund Contribution is \$900 per individual or \$1800 per family per calendar year. Can earn \$100 (individual) or \$200 (individual+spouse) for completing Health Assessment Online. <p><i>Deductible is waived if services are received from NLH (refer to attached deductible waiver outline).</i></p>	<u>Bi-weekly</u> Individual \$95.89 Emp/Children \$179.44 Two person \$195.69 Family \$262.99	<u>Bi-weekly</u> Individual \$115.00 Emp/Children \$220.00 Two person \$240.00 Family \$325.00	N/A
HRA Plan 2 See plan booklet for more details	First of month following date of hire	Preventive Care is 100% covered. Includes routine exams, health screenings, childhood immunizations, well-baby care, gynecological visits, etc. Also includes medications from preventive meds list. Prescriptions, Outpatient/Inpatient Care, ER Visit, Ambulance, Chiropractic, Nursing or Rehab Facilities, etc. are subject to:	<u>Bi-weekly</u> Individual \$66.72 Emp/Children \$123.76 Two person \$133.92 Family \$180.79	<u>Bi-weekly</u> Individual \$90.00 Emp/Children \$170.00 Two person \$185.00 Family \$250.00	N/A

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HRA Plan 2 <i>Continued from page 1</i>		<ul style="list-style-type: none"> • \$2500 deductible for individual or \$5000 deductible for family. • 20% coinsurance up to \$2500 per individual or \$5000 per family per calendar year. • Annual Out of Pocket Maximum is \$5000 per individual or \$10,000 per family. • Employer Fund Contribution is \$900 per individual or \$1800 per family per calendar year. • Can earn \$100 (individual) or \$200 (individual+spouse) for completing Health Assessment Online. <p><i>Deductible is waived if services are received from NLH (refer to attached deductible waiver outline).</i></p>			
HSA Plan See plan booklet for more details	First of month following date of hire	<p>Preventive Care is 100% covered. Includes routine exams, health screenings, childhood immunizations, well-baby care, gynecological visits, etc. Also includes medications from preventive meds list.</p> <p>Prescriptions, Outpatient/Inpatient Care, ER Visit, Ambulance, Chiropractic, Nursing or Rehab Facilities, etc. are subject to:</p> <ul style="list-style-type: none"> • \$3000 deductible for individual or \$6000 deductible for family. • 20% coinsurance up to \$2950 per individual or \$5900 per family per calendar year. • Annual Out of Pocket Maximum is \$5950 per individual or \$11,900 per family. • Employer Fund Contribution is \$900 per individual or \$1800 per family per calendar year. • Can earn \$100 (individual) or \$200 (individual+spouse) for completing Health Assessment Online. <p><i>Deductible is NOT waived if services are received from the hospital.</i></p>	<u>Bi-weekly</u> Individual \$50.52 Emp/Children \$92.82 Two person \$100.57 Family \$135.13	<u>Bi-weekly</u> Individual \$62.00 Emp/Children \$104.00 Two person \$115.00 Family \$150.00	N/A

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Flexible Spending Account	Upon employment	Pre-tax accounts for medical and dental premiums, as well as for non-reimbursed health and dependent care expenses.	Eligible	Eligible	N/A
Stipend	First of month following date of hire	If employees opt out of our health insurance and can provide evidence of coverage elsewhere, (i.e. spouse's employer) we will pay the employee a stipend of \$1200/year, <i>paid over 26 pay periods</i>	Eligible	Eligible	N/A
VOLUNTARY VISION					
Eye Med Vision <i>Not a pre-tax benefit</i>	First of month following date of hire	Employees may opt to purchase the Eye Med Vision plan even if they are not participating in a New London Hospital health plan, or they wish to cover dependents that are not on their New London Hospital insurance plan.	Eligible	Eligible	N/A
DENTAL INSURANCE BENEFIT					
Dental premiums are deducted on a pre-tax basis, unless an after-tax basis is requested in writing					
Delta Dental	First of month following date of hire	Coverage includes: 100% preventative, 80% routine, 50% major services, and Orthodontic coverage subject to \$25 deductible. Rollover feature for calendar year cap (\$1,000).	<u>Bi-weekly</u> Individual \$5.82 Two person \$10.62 Family \$20.28	<u>Bi-weekly</u> Individual \$7.75 Two person \$14.82 Family \$26.64	N/A
BASIC GROUP LIFE INSURANCE					
ING	First of month following successful completion of 3 months	<ul style="list-style-type: none"> Life Insurance Coverage is equal to 1X annual salary Accidental Death & Dismemberment coverage provides double the face value of the policy should you die as a result of an accident Dismemberment benefits are payable according to a schedule provided in the certificate of coverage 	Provided by NLHA	N/A	N/A
VOLUNTARY SUPPLEMENTAL LIFE and ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE					
ING	First of month following successful completion of 3 months	Life coverage: Choose from \$10,000 to \$500,000 of term life insurance for employee. Can purchase up to 50% of your coverage for your spouse. Can also purchase Accidental Death & Dismemberment coverage. Children of insured employees may be covered for \$5,000 or \$10,000.	Employee paid	N/A	N/A

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VOLUNTARY SHORT TERM DISABILITY					
ING	First of month following successful completion of 3 months	Plan pays 70% of your salary on day 15, up to 26 weeks (depending on nature of disability) for disability due to non-worker's comp accidents, illnesses, and injuries, including maternity leave.	Employee Paid	Employee Paid	N/A
LONG TERM DISABILITY					
ING	First of month following successful completion of 3 months	Provides 50% income replacement for a long term disability. Employee has the option of purchasing an additional 10% replacement coverage at minimal cost.	Provided by NLHA	N/A	N/A
TIME-OFF BENEFITS					
Earned Time Paid time off which includes sick, vacation and holiday time off	<i>Accrual begins upon employment</i> <u>NLHA Holidays:</u> New Years Day Presidents Day Memorial Day Independence Day Labor Day Thanksgiving & the day after Christmas	<u>Rate of Accrual:</u> 1 – 4 yrs = .1115 /per hour = 232 hours or 29 days/yr * 5 – 9 yrs = .1231 /per hour =256 hours or 32 days/yr * 10 – 15 yrs = .1346 /per hour = 280 hours or 35 days/yr * 15 + yrs = .15 /per hour = 312 hours or 39 days/yr * * The example above is based on a 40 hour work schedule	All Full-time and Part-time Employees are eligible regardless of the scheduled hours per week		N/A
Extended Illness Bank	Accrual begins upon employment	<ul style="list-style-type: none"> • Accrual rate per hour = .0231 x 40 = 6 days/yr * • Initiated by employee request for LOA * The example above is based on a 40 hour work schedule	Eligible	N/A	N/A
EXTRA PAY					
Shift Differential	Upon employment	Weekdays: 1 st = 0/hour 2 nd = \$2.00/hour 3 rd = 2.75/hour	Weekends: 1 st = 2.00/hour 2 nd = \$3.50/hour 3 rd = \$4.25/hour	Hospital based employees who work in departments where employees are regularly scheduled to work into the evening, night or on the weekend are eligible.	
Per Diem Premium	Upon employment	<ul style="list-style-type: none"> • 5 - 35% depending upon position and schedule commitment 	N/A	N/A	Eligible
RETIREMENT AND SAVINGS BENEFITS (Pre-tax)					
403(b) Plan	Upon Employment	An employee may elect not to enroll in the retirement plan; however they must complete the enrollment form stating so and return to human resources in a timely manner. Failure to do so will result in an automatic enrollment of 3%.	Any employee regardless of number of hours worked may contribute to their retirement plan.		

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ON-SITE CHILDCARE PROGRAM					
ABC'S Childcare Center	Upon Availability	Extended hours: 6:45AM-5:30PM Weekly 5 day fee structure, reduced schedules are available. Sibling discount available <u>2010 / 2011 EMPLOYEE RATES</u> Infant = \$187.50 / week Toddler = \$178.50 / week Preschool = \$160.50 / Week	Eligible 1 st Priority	Eligible 2 nd Priority	Eligible 3 rd Priority
WELLNESS PROGRAMS					
The Fit Stop	Upon employment & Orientation	<ul style="list-style-type: none"> Complimentary membership to Hospital's Fitness Center \$100 incentive if you work out 10x mo for 6 months 	Eligible	Eligible	Eligible
Breezes Café	Upon employment	Full service café offering healthy nutritional options at a reasonable cost	Eligible	Eligible	Eligible
EDUCATION					
Health Education	Upon employment	Offerings include CPR, Smoking Cessation and other programs.	Eligible	Eligible	Eligible
Tuition Reimbursement	After 1 year of employment	<ul style="list-style-type: none"> Full-time annual maximum = \$2000 Part-time annual maximum = \$1000 All requests initiated by the employee 	Eligible	Eligible	N/A
LITTLE EXTRAS					
Direct Payroll Deposit	Upon employment	Direct deposit for payroll check in participating financial institutions.	Eligible	Eligible	Eligible
EAP	Upon employment	The Employee Assistance Program provides free and confidential short-term counseling on-site.	Eligible	Eligible	Eligible
Credit Union Memberships	Upon employment	We offer access to two credit unions: NH Federal Credit Union, and Service Credit Union, providing checking, savings, and other banking services.	Eligible	Eligible	Eligible
Liberty Mutual	Upon employment	Personal Insurance Program offers discounted insurance: auto, homeowners, etc.	Eligible	Eligible	N/A
Discounts	Upon Employment	Ski passes, Six Flags, Canobie Lake Park, etc.	Eligible	Eligible	Eligible