

**TEMPLE UNIVERSITY BENEFIT SYNOPSIS
ADMINISTRATION T25 and BELOW**

Benefits Eligibility	<i>Begins on the first day of full-time employment</i>
Health Insurance/Prescription	<i>Personal Choice/CareMark Prescription Plan or Keystone Health Plan East/CareMark Prescription Plan</i>
Personal Choice /CareMark Prescription	
Employee Contribution	<i>Monthly Cost</i>
Single Coverage	\$124.39
Family Coverage	\$280.98
Keystone Health Plan East/CareMark Prescription	
Employee Contribution	<i>Monthly Cost</i>
Single Coverage	\$122.25
Family Coverage	\$272.71
Aetna Dental Insurance	
Employee Contribution	<i>Monthly Cost</i>
Single Coverage	\$5.54
Family Coverage	\$16.74
Vision Care	<i>Vision evaluation and provision of eyeglasses once every two years provided by the University. You may elect a \$25 allowance contact lenses in lieu of eyeglasses.</i>
Employee Contribution	<i>None</i>
Group Term Life	<i>Prudential Insurance Company</i>
Standard Policy	<i>Employee coverage only: \$10,000</i>
Employee Contribution	<i>None</i>
Optional Supplemental Insurance	<i>1.5, 2 or 3x times annual base salary to a maximum supplemental policy of \$490,000</i>
Employee Contribution	<i>Employee pays premium based on age per \$1,000 of insurance. Under 30 years old \$0.04, 30-34 \$0.06, 35-44 \$0.07, 45-49 \$0.11, 50-54 \$0.17, 55-59 \$0.32, 60-64 \$0.48, 65-69 \$0.93, 70+ \$1.51</i>
Maximum Total Life Insurance Policy	<i>Not to exceed \$500,000</i>
Survivor Income Insurance	<i>Provides percentage of salary to spouse and children</i>
Employee Contribution	<i>Monthly Cost</i>
Spouse	\$27.00
Children	\$7.00
Spouse & Children	\$34.00
Accidental Death and Dismemberment	<i>Employee and dependent(s) coverage available Minimum policy \$10,000 Maximum Policy \$150,000</i>
Employee Contribution	<i>Monthly Cost</i>
Single Policy	\$0.15 per \$10,000 of insurance
Family Policy	\$0.25 per \$10,000 of insurance
Short Term Disability Insurance	<i>Prudential Insurance Company Elimination period 4 weeks Monthly Benefit: 60% of benefit base salary Maximum Benefit period: 22 weeks Benefit Continuation</i>
Employee Contribution	<i>Employee pays premium</i>
	<i>Monthly Cost</i>
	\$24.75

