

TEMPLE UNIVERSITY BENEFIT SYNOPSIS TUHNA/PASNAP NURSES PART-TIME	
Benefits Eligibility	<i>Begins on the first day of the month following 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	\$89.62
Family Coverage	\$1,001.07
Keystone Health Plan East/CareMark Prescription	
Employee Contribution	<i>Monthly Cost</i>
Single Coverage	\$85.30
Family Coverage	\$897.29
Dental Insurance	<i>United Concordia</i>
Employee Contribution	<i>Monthly Cost</i>
Single Coverage	\$5.18
Family Coverage	\$53.98
Vision Care	<i>Temple Ophthalmology Vision evaluation and provision of eyeglasses once every two years. You may elect a \$25 allowance towards the cost of contact lenses in lieu of eyeglasses.</i>
Employee Contribution	
Single Coverage	None
Family Coverage	\$3.69

*This synopsis is for informational purposes only. The actual Benefit Plan documents and University policies will
will be controlling.*