



BENEFIT SUMMARY 2018

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QUESTIONS?

Rachel Postle at (651) 229-1360 or rpostle@tpt.org

This document provides a brief summary of your benefits. It does not contain all of the details described in the official plan documents and contracts. If there is any discrepancy between what is summarized here or any verbal descriptions of the plan and the official plan documents and contracts, the plan documents and contracts will govern.

Eligibility for TPT's plans is the first of the month following 30 days of employment. Most plans require working a regular schedule of at least 20 hours per week; health plans require working a regular schedule of 30 hours per week for eligibility.

NOTE: Most plans are available separate from electing other plans. However, election of the High Deductible Health Plan is required before you can elect the HSA.

Any plan not elected at the time of eligibility, will require a qualifying life event to make changes or elections.

Payroll periods are two weeks and employees are paid every other Friday.

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TWIN CITIES PBS

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HEALTH PLAN SUMMARIES HealthPartners®

Twin Cities PBS offers three health plans from HealthPartners Perform Network to all benefit-eligible employees who work at least 30 hours per week.

About the Health Plans Employees have the choice between three plans, the \$30-80%, the \$500-75% Three for Free and the \$2000 High Deductible plan with an HSA. A summary of benefits is listed below. Preventive care is covered at 100% and there are no referrals needed for these plans.

In-Network Feature	\$30-80%	\$500-75% Three for Free	\$2,000 HSA w/RX
Annual Deductible	None	\$500/single; \$1,500/family	\$2,000/single; \$4,000/family
Out of Pocket Maximum	\$2,000/single; \$6,000/family	\$3,000/single; \$6,000/family	\$2,000/single; \$4,000/family
Preventive Care <i>Physical, Pre- & Post-Natal, Immunizations, Well Child</i>	You pay nothing	You pay nothing	You pay nothing
Office Visits	You pay \$30 per visit	Receive 3 visits* per person covered at 100%. After the 3 visits, you pay 25% after deductible	You pay nothing after deductible
Convenience Clinics	You pay \$10 per visit	No charge for first 3 visits*; 25% after that	You pay nothing after deductible
Virtuwell	First 3 visits free; \$10 per visit thereafter	First 3 visits* free; 25% after deductible Thereafter (3 free visits are counted separate)	You pay nothing after deductible
Urgent Care	You pay \$30 per visit	No charge for first 3 visits*; 25% after that	You pay nothing after deductible
Allergy Injections	You pay 20%	\$2 copay per visit	\$2 copay per visit
Hospital ER	You pay \$100 per visit	You pay 25% after deductible	You pay nothing after deductible
Ambulance, Hospital	You pay 20%	You pay 25% after deductible	You pay nothing after deductible
Prescription Drugs			
<i>Retail 31 day supply</i>	\$12/generics \$35/brand \$50/non-formulary	\$12/generics \$35/brand \$50/non-formulary	You pay nothing after deductible
<i>Mail Order 93 day supply</i>	\$24/generics \$70/brand \$100/non-formulary	\$24/generics \$70/brand \$100/non-formulary	You pay nothing after deductible
<i>Specialty</i>	You pay 20% up to \$200 max per scrip, per 31-day supply	You pay 20% up to \$200 max per scrip, per 31-day supply	You pay nothing after deductible
<i>Preventive Rx</i>	N/A	N/A	Retail: \$12/generics \$45/brand Mail Order: \$24/generics \$90/brand

Per Pay Check	OA \$2,000	Three For Free	\$2000 HSAw/Rx
Single	\$81.79	\$49.95	\$32.55
Family	\$260.90	\$181.13	\$137.47

DENTAL PLAN SUMMARY

Twin Cities PBS offers dental coverage through Delta Dental Minnesota to all benefit-eligible employees who work at least 20 hours per week.

About the Dental Plan This is a comprehensive plan for all dental services and covers preventive care at 100% in-network. You may use any dentist for your dental services; however, using an in-network provider will reduce your out-of-pocket costs. Delta offers two different networks to dentists, ask your dentist for the details of which network coverage they use.

Services	Delta Dental PPO	Delta Premier	Out-of-network*
Calendar Year Maximum <i>Per Person</i>	\$2,000	\$1,500	\$1,500
Orthodontia Lifetime Maximum <i>Per eligible child</i>	\$1,500	\$1,000	\$1,000
Annual Deductible <i>Does not apply to preventive, diagnostic or orthodontics</i>	\$25/Single \$75/Family	\$50/Single \$150/Family	\$50/Single \$150/Family
Diagnostic & Preventive <i>Exams, cleaning, x-rays, fluoride, sealants</i>	You pay nothing	You pay nothing	You pay nothing
Basic Services <i>Emergency treatment for pain, space maintainers, silver fillings, white fillings</i>	You pay 10%	You pay 20%	You pay 20%
Endodontics, Periodontics	You pay 40%	You pay 50%	You pay 50%
Oral Surgery	You pay 10%	You pay 20%	You pay 20%
Major Restoratives, Prosthetics, Prosthetic Repairs and Adjustments	You pay 40%	You pay 50%	You pay 50%
Orthodontics <i>Dependent children only, up to age 19</i>	You pay 20%	You pay 50%	You pay 50%

Dental Plan Premiums are shown on a per pay period basis:

Per Check Rates	You Pay
Employee	\$8.00
Family	\$29.00

HEALTH SAVINGS ACCOUNT (HSA)

Twin Cities PBS sponsors health savings accounts to help you pay for medical expenses on a pre-tax basis. The HSA year is January 1 through December 31.

Maximum contributions are **\$3,450/single** or **\$6,850/family** for 2018. Your health savings account is offered through **Optum Bank**.

FLEXIBLE SPENDING ACCOUNTS (FSA)

Twin Cities PBS sponsors flexible spending accounts to help you pay for everyday medical and child care expenses on a pre-tax basis. The FSA year is January 1 through December 31.

- Medical care:** You can set aside pre-tax contributions for medical, dental and vision expenses not paid by your (or your spouse's) insurance plans up to \$2,650 depending on your election. **Note that at the end of the plan year, \$500 may be carried over in the Medical Care account. If you have any amount over \$500, it will be forfeited at the end of the plan year (i.e., "use it or lose it").**
- Limited medical care:** For those with a high deductible health plan, you can elect a limited flexible spending account to be used for dental and vision expenses not paid by your (or your spouse's) insurance plans up to \$2,650 depending on your election.
- Dependent care:** You can set aside pre-tax contributions for dependent care expenses up to \$5,000 per plan year.

VISION INSURANCE

Twin Cities PBS offers vision coverage through EyeMed to all benefit-eligible employees who work at least 20 hours per week.

About the Vision Plan. This plan covers prescription glasses, contact lenses and frames. This coverage does not cover eye exams since they are covered at 100% through group health plans, like ours.

Services	In Network	Out Of Network
Prescription Glasses	\$25 copay (progressive copays range from \$90 to \$135)	N/A
Contact lenses	\$130 allowance, 15% off balance	Reimbursed up to \$130
Frames	\$130 retail allowance, 20% off balance	Reimbursed up to \$91
Standard Single Lenses	100% after copay	Reimbursed up to \$30
Standard bifocal	100% after copay	Reimbursed up to \$50
Standard trifocal	100% after copay	Reimbursed up to \$70
Standard Progressive	100% after copay	Reimbursed up to \$50
Online Provider	www.glasses.com	
Laser vision correction	15% of retail price or 5% off promotional price	

Per Pay Check	
Single	\$2.09
Family	\$5.34

LIFE AND AD&D

Twin Cities PBS provides group term life and Accidental Death and Dismemberment (AD&D) insurance through Lincoln Financial Group to all active full-time and part-time employees at no cost to the employee.

Coverage is equal to 2x your annual earnings up to a maximum of \$500,000, plus an additional \$20,000. In terms of figuring life insurance coverage, "annual salary" does not include overtime pay, bonuses or other compensation not received as basic wages. Coverage will end on the last day of employment.

The Life Insurance reduction schedule, in compliance with the Age Discrimination Employment Act (ADEA), will reduce to 65% at age 67 and to 55% at age 70.

It is important to remember to change your beneficiary if your life situation changes. The beneficiary you named when you signed up for your life insurance remains the beneficiary unless you file a change.

VOLUNTARY SUPPLEMENTAL LIFE AND AD&D – EMPLOYEE PAID

Twin Cities PBS provides you the opportunity to enroll in additional term life and Accidental Death and Dismemberment (AD&D) insurance through Lincoln Financial Group. This coverage is paid for by you.

	Guarantee Issue	Increment	Maximum
Employee	\$150,000	\$10,000	\$500,000 or 5x annual earnings
Spouse	\$30,000	\$5,000	Lesser of \$250,000 or 2.5 x the employee amount
Child(ren)	\$10,000	\$10,000	\$10,000

During your initial enrollment period, you are able to enroll in up to the Guarantee Issue amount without Evidence of Insurability. If you choose to decline coverage now, you will need to provide evidence of insurability at a later date in order to enroll in the Voluntary Life coverage.

SHORT AND LONG TERM DISABILITY

Twin Cities PBS provides Short and Long Term Disability coverage at no cost to the employee.

Short Term Disability (STD) and Long Term Disability (LTD) insurance is available to all full-time and part-time regular employees offered through Lincoln Financial Group. STD and LTD are programs that continue a portion of your salary in case of lost time due to medical disability. STD benefits begin after an eight (8) day waiting period, on the 9th calendar day of an illness/disability. LTD begins on the 91st calendar day of an illness/disability.

NOTE: LTD premiums are taxed as a default option, if you choose to not pay taxes on the premiums; you must make the election and will be taxed on the benefit at the time of going on LTD.

401(k) RETIREMENT PLAN

Twin Cities PBS offers a 401(k) retirement and savings plan with Principal Financial to all employees except those who are considered “Talent” per the AFTRA agreement. You will be enrolled in this plan the 1st of the month following 30 days of service unless you opt-out.

The maximum salary contribution per year for 2018 is \$18,500 with a \$6,000 catch-up to those 50 years of age or older. A matching contribution is made based on the chart. The vesting for the match is automatic at 100%.

Employee Contribution	TPT Matching Contribution
1%	1%
2%	1.5%
3%	2.0%
4%	2.5%
5%	3.0%
6%+	3.5%

REFERRAL INCENTIVE PROGRAM

Twin Cities PBS recognizes the value of employee referrals to hiring great staff. **TPT** will present employees with a cash bonus or a gift certificate of their choice for a referral that results in hiring the referred candidate.

- Staff members \$250
- Producers/Managers \$400
- Executive Producers/Directors \$600
- Part-time membership reps \$100

VACATION

Employees will receive annual vacation leave benefits based upon their years of service:

Status	Years of Service	Working Days
Full Time Employees	0-2	10
	3-7	15
	8-15	20
	16+	25
Alternative Work Schedule Employees	0-2	Pro-rated based on the number of hours worked
	3-7	
	8-15	
	16+	

It is important to remember that accrued unused vacation in excess of 40 hours for regular full time employees is forfeited at the end of each fiscal year (August 31). Forty hours of accrued vacation may be carried into the new fiscal year.

SICK LEAVE

TPT recognizes that from time to time our employees are sometimes unable to work because of illness or injury. For this reason, we provide a paid sick leave plan for all employees. *TPT* provides full time employees with 80 hours of sick leave **per fiscal year** and a an accrual of 1 hour of leave for every 30 hours worked for all other employees.

HOLIDAY

Twin Cities PBS offers employees the following eleven paid holidays per year:

- New Year’s Eve Day
- Martin Luther King Day
- Independence Day
- Thanksgiving Day
- Christmas Eve
- Floating Holiday (one per fiscal year)
- New Year's Day
- Memorial Day
- Labor Day
- Friday following Thanksgiving
- Christmas Day

PARKING DISCOUNTS

As an employee of Twin Cities PBS, you are eligible for to purchase discounted monthly parking.

METROTRANSIT DISCOUNTS

As an employee of Twin Cities PBS, you are eligible to purchase discounted MetroTransit Go-To cards through payroll deduction. We purchase the stored value cards of \$20 increments starting at \$20 per month.

TPT MEMBERSHIP

Become a member and support **TPT**. Elections must be for at least \$2.50 per pay. Deductions are not pre-tax and you will receive a tax notification from Membership at the end of the year. With your membership, you will receive a year's subscription to **TPT** Magazine, Daily Program Guide, as well as a Member Benefit Card, good for hundreds of dollars of discounts.