

Your well-being, our priority
NON-WASHINGTON STATE BENEFITS GUIDE 2024

What's Inside

- 3 Welcome to the Allen Institute Benefits!
- 4 Eligibility
- 4 When to Enroll & Make Changes
- 5 Helpful Benefit Terms & Definitions
- 6 Valuable Health & Wellness Resources
- 9 Choosing the Right Care
- 10 Medical Coverage
- 11 Medical Plan Comparison
- 13 How the Health Savings Account (HSA) Works
- 14 Vision Coverage
- 15 Dental Coverage
- 16 Cost for Coverage
- 18 Flexible Spending Accounts (FSAs)
- 19 Life & AD&D Insurance
- 20 Disability Coverage
- 21 401(k) Retirement Plan
- 23 Additional Benefits
- 25 Time Off
- 26 Leave of Absence
- 27 Your Benefit Contacts



This guide provides an overview of the benefits program. It is not intended to be a complete description of the benefits or official summary plan descriptions for these programs. If there is a conflict between this guide and the official plan documents, the plan documents will govern. The Allen Institute reserves the right to modify or terminate any of the described benefits at any time and for any reason. The descriptions of these benefits are not a guarantee of current or future employment or benefits. For information about the specific plans available to you, please contact Human Resources.



Welcome to the Allen Institute Benefits!

As we reflect on the first 20 years of history of the Allen Institute, our benefits team looks forward to the next 20 years of supporting the brilliance of our employees with excellent benefits options. We honor the diversity and talent of our team through our unrelenting focus on human health for each of us and our focus on helping you live your most healthy, fulfilled lives.

The Allen Institute is proud to offer you and your family new and improved options in this year's comprehensive benefits package. We appreciate all the feedback we received during our 2023 benefits survey which supported making these changes a reality. You asked and we listened.

We know your income is important to you and your family. In an effort to make sure it is protected, we have added several enhancements including; a new life, disability and leave of absence administrator to make it easier to access Allen support during critical times, the Allen Institute's first voluntary critical illness insurance plan to give you more options for financial support when critical illness occurs, and increased the long term disability benefit, eliminating the need for a buy-up option.

Improvements for mental health services and care include expanding access to care under the Cigna plans by offering Cigna insurance coverage for out-of-network mental health providers at the same coverage as in-network providers. And a new employee assistance program (EAP) will offer better service, access, and technology so you can better use the services our EAP offers.

For the dental plan, we made changes to include posterior composites as a covered benefit, increased the annual maximum and increased the orthodontia benefit.

This clickable guide to help you understand your benefits options and make the best choice while enjoying clean, intuitive navigation. We encourage you to take the time to review the benefits guide before choosing your coverage.

If you have any questions about your benefits, reach out to Benefit Resource Center, your carriers, or directly to your benefits team.

Petra Smith
Executive Director



This Guide Is Clickable

This guide is designed to give you quick access to your benefits information.

Have a Benefits Question?

Allen Institute's Dedicated **Benefits Team** is here to help.



Eligibility

Regular or limited term employees working at least 20 hours per week are eligible for benefits on the 15th of the month (if hired on the 1st-15th) or 1st of the following month (if hired after the 15th).

Eligible dependents may also be enrolled in the Allen Institute's benefits. Dependent verification is required. Eligible dependents include:

- Legal spouse or registered domestic partner*
- Children up to age 26, including biological, adopted, stepchildren, and children of a domestic partner
- Children of any age, if incapable of self-support due to mental or physical disability

***Note: If you choose to cover a domestic partner and/or the children of a domestic partner, you will pay premiums for their coverage on a post-tax basis and the Allen Institute subsidy will be considered taxable income to you. Speak with Payroll and/or a tax professional to learn more about how this could impact you.**

How to Enroll

Benefits enrollment is done through Oracle. New hires will receive an email from the Benefits team with instructions on how to enroll. Employees can use Oracle throughout the year to manage their dependents, emergency contacts, home address, contact information, update benefits mid-year, and enroll in the wellness reimbursement program.

When to Enroll & Make Changes

The choices you make when first eligible are in effect for the remainder of the plan year. It is important to review the benefit options and choose the best coverage for you and your family.

Employees have three opportunities to enroll in or make changes to their benefits:

1. Within 30 days of their hire date
2. During the annual open enrollment period
 - Effective January 1, 2024, the plan year runs from January 1 - December 31
 - Open Enrollment, which will take place November 6 through November 17, 2023, allows employees to make changes to their benefits, add or drop dependents, and participate in a flexible spending account
3. Within 30 days of a qualified change in family status. Examples include:
 - Marriage, divorce, or legal separation
 - Birth or adoption of a child
 - Death of a dependent
 - Loss or gain of other health coverage for you and/or dependents
 - Change in employment status or Medicaid/Medicare eligibility for you or a dependent
 - Receipt of a Qualified Medical Child Support Order

Contact benefits at benefits@alleninstitute.org for more information or to update your benefits following a qualifying mid-year life event.



Helpful Benefit Terms & Definitions

Review these terms, which may be referenced throughout this guide, to better understand the Allen Institute's benefits program.

Benefit Acronyms

AD&D Accidental Death & Dismemberment	EAP Employee Assistance Program
FSA Flexible Spending Account	HDHP High Deductible Health Plan
HMO Health Maintenance Organization	HSA Health Savings Account
LTD Long-Term Disability	OOPM Out-of-Pocket Maximum
PPO Preferred Provider Organization	STD Short-Term Disability

Balance Billing

The amount billed to the patient after health insurance has paid the provider under the health insurance plan.

Copay

A fixed dollar amount paid by the patient to the provider at the time of service.

Coinsurance

The percentage of the cost for each covered service that is paid by the member until the health plan's out-of-pocket maximum is reached.

Deductible

The amount the member pays each plan year before the plan begins paying benefits. Not all covered services are subject to the deductible.

Member

A person covered under the health plan, either the enrolled employee or covered dependent.

Formulary

A list of drugs (generic and brand name) chosen by the health plan that are preferred by the health plan to treat medical conditions.

In-Network Care

Care provided by contracted doctors and hospitals within the plan's network of providers. This enables participants to receive care at a reduced rate compared to care received by out-of-network providers.

Out-of-Network Care

Care provided by a doctor or at a facility outside of the plan's network. Out-of-pocket costs may be higher and services subject to balance billing.

Out-of-Pocket Maximum

The maximum amount the member pays each year before the plan begins paying 100% for covered expenses. This limit protects you from unexpected, catastrophic expenses.

Premium

The monthly cost to the employee to participate in the selected health plan. Employees pay their premiums through regular payroll deductions.

Preventive Care

Routine healthcare, including annual physicals and screenings, to prevent disease, illness, and other health issues. In-network preventive care is covered at 100%.

Urgent Care

Visit urgent care for sudden illnesses or injuries that are not life-threatening. Urgent care centers are helpful when care is needed quickly to avoid developing more serious pain or problems.



Valuable Health & Wellness Resources

Benefits Resource Center (BRC)

Insurance coverage and processes can be complicated. The BRC helps you and your family members* make informed healthcare decisions and save money. The BRC assists with:

- Locating providers
- Benefit plan questions
- Eligibility and allowable family status election changes
- Claims escalation, appeal, and resolution processes
- Medicare basics and how it works with your group plan
- Obtaining case management services
- Assistance with disability claims
- Filing out-of-network claims

Call the BRC at **(866) 468-7272** or reach them via email at brcwest@usi.com.

*Eligible family members include your spouse/partner and dependents.

Benefits at Your Fingertips

Download the USI MyBenefits2GO app for access to important benefits information, such as plan summaries and carrier contacts, right from your mobile phone. To get started, enter the code Q78545.

Virtual Primary Care

Virtual primary care services allow you to connect with a primary care physician in the midst of your busy life. Your virtual primary care physician will oversee your health and coordinate your care.

To schedule an appointment, choose from the following providers:

Cigna (MDLIVE)

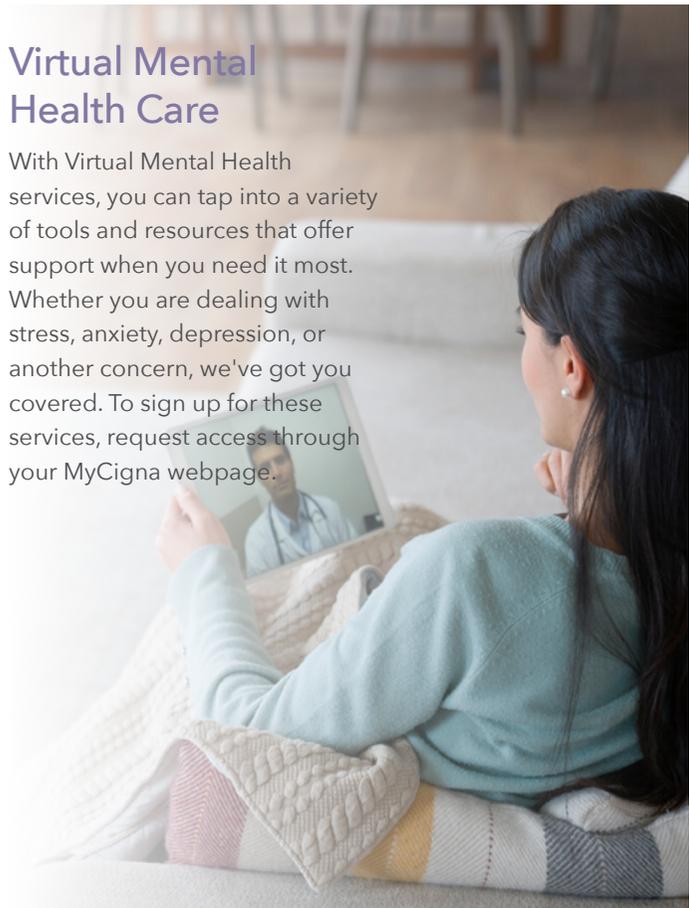
mdliveforcigna.com



Valuable Health & Wellness Resources (continued)

Virtual Mental Health Care

With Virtual Mental Health services, you can tap into a variety of tools and resources that offer support when you need it most. Whether you are dealing with stress, anxiety, depression, or another concern, we've got you covered. To sign up for these services, request access through your MyCigna webpage.



Cigna

- **Alma:** Alma connects you with in person or virtual therapists and psychiatrists that match your needs and preferences.
- **Brightline:** This national pediatric behavioral health program offers online support for children ages 18 months-17 years and parents.
- **Bicycle Health:** Bicycle Health offers virtual care for substance use disorders and addiction with accessible support and personalized treatment.
- **Brightside Health:** Receive personalized treatment plans online.
- **Equip:** Equip offers a dedicated virtual care team to provide high-quality family-based therapy for the support and recovery from eating disorders.
- **Ginger:** Confidential mental healthcare through coaching via text-based chats, self-guided learning activities, and video-based therapy.
- **Grow Therapy:** Grow Therapy allows you to select a suitable therapist who shares your identity, and specializes in your desired areas, with both in-person and virtual sessions.
- **Happify:** Digital self-directed activities, games, and guided meditations to help you build resilience and improve your mental health.
- **Headway:** Headway offers virtual and in-person therapy and medication management. Speak with a licensed mental health professionals via real-time appointment booking.
- **iPrevail:** Relieve stress with interactive video lessons 1:1 coaching, support communities, and online wellness activities.
- **Meru Health:** Get help for anxiety, depression, and burnout from online mental health providers.
- **Sondermind:** Affordable mental healthcare from licensed providers, in-person and online.
- **Talkspace:** Access to a licensed provider anytime, anywhere through text, audio, and video sessions.
- **Path:** Connect with the right therapist based on your preferences and specialty needs. You can access video appointments in under 48 hours, with evening and weekend slots available for individuals, couples, and families.
- **Monument:** Monument helps you achieve lasting recovery from addiction through personalized virtual care.
- **NOCD:** NOCD delivers virtual support for those managing obsessive-compulsive disorder (OCD).



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Employee Assistance Program (EAP)

The Employee Assistance Program (EAP), through SupportLinc, offers confidential, value-added programs and services for work, home, personal, or family issues at no charge. These services help employees and their families overcome challenges while saving time and money.



The EAP provides access to:

- Up to 6 face-to-face in person or virtual sessions per incident per year
- Child care and elder care assistance
- Financial and legal resources
- Identity theft victim resources
- Online stress management and prevention
- And more

Contact the EAP anytime, day or night at **(888) 881-5462** or supportlinc.com.

Watch for information about the new EAP to be released in January.

Wellness Reimbursement Program

Benefit eligible employees who work 20 hours or more per week are eligible for reimbursement on an abundance of incredible wellness benefits related to health, fitness, and wellbeing for themselves and their dependents. Some of these outstanding programs include trainers, health spa memberships, cooking classes, dance lessons, and personal coaching.

There are also financial wellness benefits providing financial advisers, seminars, help covering home buyer expenses, and much more. The reimbursement program covers 75% of the cost up to \$140 per month. Download the MyNavia Mobile app to easily submit your receipts. Enrollment is required to participate in the Wellness Reimbursement Program. For more information about the program, go to Allen Connect > HR > Benefits > Physical Health > [Wellness Reimbursement Program](#).



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Choosing the Right Care

When you need medical attention, knowing the right place to go for care will save time and money and help address any medical condition effectively.

Medical Plan Provider Networks



Whenever you seek care, choosing providers from within your health plan network can save you money. Each of the medical plans features a network of doctors, hospitals, clinics, and other healthcare providers. It is important to understand the provider network for your plan before you choose and use your medical benefits.

How to Decide Where to Go

\$	\$\$	\$\$\$	\$\$\$
Virtual Primary Care Visit 	Primary Care Provider (PCP) 	Urgent Care Center 	Emergency Room (ER) 
<i>(Non-Life-Threatening)</i>	<i>(Non-Life-Threatening)</i>	<i>(Non-Life-Threatening)</i>	<i>(Life-Threatening)</i>
Benefit: <ul style="list-style-type: none"> Lower cost Speak to a doctor from anywhere Reduced waiting room time Reasons to go: <ul style="list-style-type: none"> Headaches Fever & flu symptoms Cough, cold & sore throat Skin irritations & rashes Counseling services Psychiatry services 	Benefit: <ul style="list-style-type: none"> In-person examination Reasonable price in-network Familiarity with patient Reasons to go: <ul style="list-style-type: none"> Earaches & infections Preventive care Headaches Regular treatment for chronic conditions Abdominal pain Skin irritations & rashes Fever & flu Urinary tract infection Back & joint pain 	Benefit: <ul style="list-style-type: none"> Lower cost than an ER visit Same-day visits often available Reasons to go: <ul style="list-style-type: none"> Earaches & infections Minor cuts, bumps, sprains & burns Fever & flu symptoms Allergic reactions Animal bites Mild asthma Headaches Urinary tract infections Back & joint pain 	Benefit: <ul style="list-style-type: none"> Necessary for life-threatening conditions Reasons to go: <ul style="list-style-type: none"> Sudden numbness or weakness Disorientation or difficulty speaking Seizure or loss of consciousness Severe cuts or burns Overdoses Uncontrolled bleeding Coughing or vomiting blood Heart attack or chest pain



Medical Coverage

At the Allen Institute, our goal is to help employees reach their highest potential and be the best version of themselves. This starts with placing a priority on health. Choosing the right plan to meet your needs is the first step to living your healthiest life.

When deciding which medical plan is right for you and your family, it is important to consider the total cost of coverage. This includes the cost of premiums as well as the out-of-pocket costs for services. While each medical plan covers in-network preventive screenings in full, the plans vary on annual deductibles, copays, and levels of coinsurance. This means you may pay higher out-of-pocket costs with one plan versus another. The ideal medical plan should cover most of your health needs with out-of-pocket costs that meet your budget.

Benefit	Cigna PPO	Cigna HDHP
Primary Care Physician required		
Referrals needed for specialists		
Annual deductible to satisfy	✓	✓
Copayment for services	✓	
Coinsurance for services	✓	✓
In-network coverage	✓	✓
Out-of-network coverage	✓	✓
Eligible to enroll in HSA		✓
Eligible to enroll in Healthcare FSA	✓	
Includes vision coverage	✓	✓

Days vs. Visits

Under the Cigna PPO and HDHP plans, your service maximums are measured in days instead of visits. That means that if you are enrolled in one of these plans and you visit a Physical Therapist, a Massage Therapist, and an Occupational Therapist all in the same day, that counts as one day toward your maximum.



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Medical Plan Comparison

Plan Features	Cigna PPO		Cigna HDHP	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Annual Deductible Individual/Family	\$500/\$1,500		\$1,600/\$3,200 (aggregate*)	
Annual Out-of-Pocket Maximum Individual/Family	\$4,000/\$8,000 (Cross-accumulates between in-network and out-of-network)		\$4,000/\$8,000** (Cross-accumulates between in-network and out-of-network providers)**	
Allen Institute Annual HSA Contribution Individual/Family	N/A		\$960/\$1,920	
	You pay:		You pay:	
Preventive Care Visit	Covered in full	30% after deductible	Covered in full	40% after deductible
Physician Office Visit	\$20 copay	30% after deductible	20% after deductible	40% after deductible
Lab & X-ray	10% after deductible	30% after deductible	20% after deductible	40% after deductible
Urgent Care	\$25 copay	30% after deductible	20% after deductible	40% after deductible
Emergency Room (copay waived if admitted)	\$200 copay, then 10% after deductible		20% after deductible	
Inpatient & Outpatient Hospital Services	10% after deductible	30% after deductible	20% after deductible	40% after deductible
Outpatient Mental Health Services***	\$20 copay per office visit, 10% coinsurance for all other services	20% coinsurance all services	20% after deductible coinsurance for all services	20% coinsurance after deductible for all services
Outpatient Rehabilitation	\$20 copay (40 days/year)	30% after deductible 40 days/year (comb. with in-network)	20% after deductible (25 days/year)	40% after deductible (25 days/year)
Chiropractic	\$20 copay (40 days/year)	30% after deductible 40 days/year (comb. with in-network)	20% after deductible (25 days/year)	40% after deductible (25 days/year)
Fertility Services	\$20,000 lifetime max after deductible	Not covered	\$20,000 lifetime max after deductible	Not covered

*Aggregate deductible: If more than one person is covered on the Qualified High Deductible Health Plan, the family deductible amount will need to be satisfied before services are covered for that individual.

**An individual on family coverage will not have their out-of-pocket limit exceed \$4,000 in a calendar year.

***Coverage and pre-authorization requirements for inpatient services vary. Please check with your insurer for more information.



HEALTH BENEFITS

TERMS & DEFINITIONS • HEALTH & WELLNESS • CHOOSING THE RIGHT CARE • MEDICAL • PLAN COMPARISON • HOW THE HSA WORKS • VISION • DENTAL • COST FOR COVERAGE

Plan Features	Cigna PPO	Cigna HDHP
	In-Network Only	In-Network Only
Prescription Drugs: Retail (up to a 30-day supply)		
Generic	\$10 copay	20% after deductible
Preferred Brand*	\$35 copay	
Non-Preferred Brand*	\$75 copay	
Prescription Drugs: Mail Order (up to a 90-day supply)		
Generic	\$20 copay	20% after deductible
Preferred Brand*	\$70 copay	
Non-Preferred Brand*	\$150 copay	

*If you choose a brand name drug when a generic is available, you pay the difference in cost.

Additional Cigna Resources

Cigna offers resources and online tools to assist members and their families.

- The 24/7 Nurseline provides access to registered nurses who are trained to understand a range of health concerns and provide general health tips, as well as trusted guidance on possible urgent care situations. Call **(800) 564-9286** or **(800) CIGNA24** to connect with a nurse today.
- Prescription diet drug coverage is available for eligible members who need weight management support.
- The eyewear discount program provides a 20% discount on additional pairs of glasses from a Cigna Vision Network eye care professional.
- The myCigna app and secure member portal at my.cigna.com allow members to track deductibles, monitor claims, find a provider, compare costs, and more.
- Hearing aids are covered up to \$3,000 per ear, every 36 months.



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How the Health Savings Account (HSA) Works

Both the Cigna High Deductible Health Plan (HDHP) and the Kaiser HDHP can be paired with a Health Savings Account (HSA), through Navia. An HSA makes it easy to pay for current healthcare costs and save for future healthcare needs.

Benefits of an HSA

- The Allen Institute contributes FREE money to your account!
- Participants can set aside tax-free money to pay for out-of-pocket healthcare expenses.
- An HSA is your bank account. If you leave the organization, the account goes with you.
- All unused funds roll over year to year.
- HSAs can make a great savings account for future healthcare expenses.

HSA Contributions

You can contribute pre-tax dollars from your paycheck up to the annual IRS maximums to pay for eligible healthcare expenses. When you enroll in an HSA, you will receive a debit card.

Your HSA will be administered by Navia. In order to receive employer contributions you must register and activate your HSA account. The Allen Institute will automatically contribute to your HSA on a biannual basis and are deposited with the first paycheck in January and June. New hires receive a prorated amount of this funding based on their benefit eligibility date.

HSA contributions cannot exceed the annual IRS maximums (Please note these include all Allen Institute contributions made on your behalf during the 2024 calendar year):

Coverage Type	2024 Employer HSA Contribution	2024 Maximum Employee Contribution	2024 IRS Contribution Limit (inc. all ER cont.)
Individual Coverage	\$960	\$3,190	\$4,150
Family Coverage	\$1,920	\$6,380	\$8,300
Age 55+ Catch-up Contribution	N/A	Additional \$1,000	

Questions? Refer to [IRS Publication 969](#) for a list of eligible expenses and complete HSA rules.

HSA Eligibility Requirements

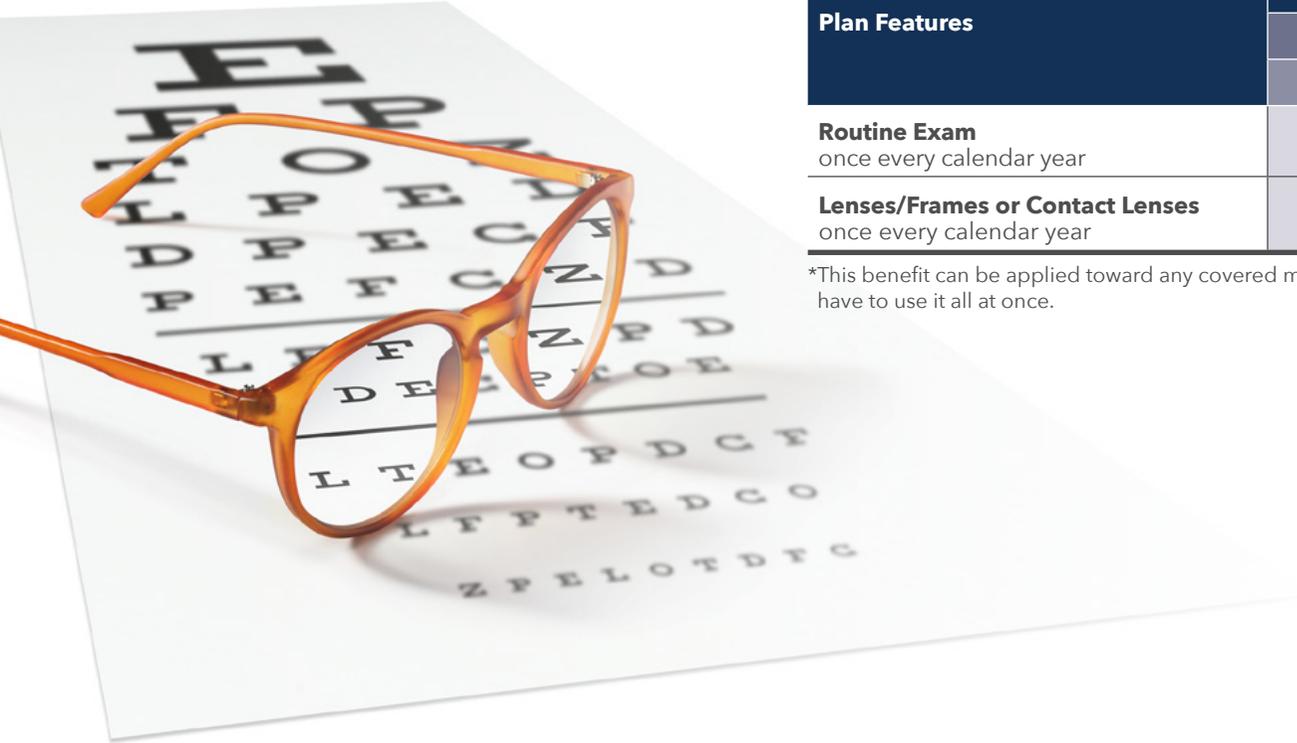
- You must be enrolled in a qualified High Deductible Health Plan (HDHP).
- You cannot be covered under another non-qualified health plan such as an HMO or PPO plan, including your spouse's Healthcare Flexible Spending Account.
- You cannot be enrolled in Medicare or Tricare.
- You cannot be claimed as a dependent on someone else's tax return.



HEALTH BENEFITS TERMS & DEFINITIONS • HEALTH & WELLNESS • CHOOSING THE RIGHT CARE • MEDICAL • PLAN COMPARISON • HOW THE HSA WORKS • VISION • DENTAL • COST FOR COVERAGE

Vision Coverage

Employees are automatically provided vision coverage based on the medical plan they choose.



Cigna Vision

If enrolled in a Cigna medical plan, vision benefits will also be provided through Cigna. Once enrolled in a Cigna plan, visit my.cigna.com and register to find providers. You can also visit eyemed.com.

Plan Features	Cigna Vision Benefits (PPO & HDHP) through EyeMed	
	In-Network	Out-of-Network
	You pay:	Plan reimburses you:
Routine Exam once every calendar year	\$0 copay	Up to \$45
Lenses/Frames or Contact Lenses once every calendar year	\$200 hardware allowance* for either frames or contact lenses	

*This benefit can be applied toward any covered materials (frames, lenses, and/or contacts) and used any time throughout the year. You do not have to use it all at once.



HEALTH BENEFITS TERMS & DEFINITIONS • HEALTH & WELLNESS • CHOOSING THE RIGHT CARE • MEDICAL • PLAN COMPARISON • HOW THE HSA WORKS • VISION • DENTAL • COST FOR COVERAGE

Dental Coverage

Regular dental care is essential to overall health. The Allen Institute's dental plan helps you maintain a healthy smile through regular preventive dental care and offers coverage to fix problems early.



Plan Features	Delta Dental of Washington	
	Premier/PPO Dentists	Non-Participating Dentists*
	You pay:	You pay:
Calendar Year Deductible (waived for Preventive Services)	PPO Dentists: \$0 Premier: \$50 per individual / \$150 family	\$50 per individual / \$150 family
Calendar Year Benefit Maximum	\$2,500 per individual	\$2,500 per individual
Class I-Diagnostic & Preventive Services (e.g., x-rays, cleanings, exams)	Covered in full; deductible waived (2 per calendar year)	Covered in full; deductible waived (2 per calendar year)
Class II-Basic & Restorative Services (e.g., fillings, extractions, root canals)	20%	20%
Class III-Major Services (e.g., dentures, crowns, bridges)	50%	50%
Class IV-Orthodontia (adults and children)	0%	0%
Orthodontia Lifetime Maximum	\$3,000 per individual	\$3,000 per individual

*For out-of-network services, members pay applicable coinsurance plus any amount that exceeds the maximum allowable charge.

Need extensive dental work? Have your dentist submit a treatment plan to Delta Dental for pre-authorization. Delta Dental will say how much of the bill they will cover and how much you will have to pay.



Find a Participating Dentist

The dental plan allows you to visit any dentist of your choice, but it pays higher benefits when you visit in-network providers. If you visit an out-of-network provider, you will not benefit from discounted rates and may be billed for services above the Delta Dental Maximum Allowable Charge or (MAC).

To find an in-network provider near you, visit deltadentalwa.com and use the "Find a Dentist" tool.



HEALTH BENEFITS TERMS & DEFINITIONS • HEALTH & WELLNESS • CHOOSING THE RIGHT CARE • MEDICAL • PLAN COMPARISON • HOW THE HSA WORKS • VISION • DENTAL • COST FOR COVERAGE

Cost for Coverage

The semi-monthly payroll deductions for medical, dental, and vision are based on your salary tier and are shown in the tables below.

Medical/Rx & Vision

Cigna PPO ^{1,2}			
Enrollment Tier	Under \$75,000	\$75,000 - \$150,000	Over \$150,000
Employee Only	\$34.67	\$43.32	\$51.99
Employee + Spouse/DP	\$186.27	\$204.32	\$222.39
Employee + Child(ren)	\$138.23	\$153.30	\$168.39
Employee + Family	\$290.13	\$314.62	\$339.11

Cigna HDHP ^{1,2}			
Enrollment Tier	Under \$75,000	\$75,000 - \$150,000	Over \$150,000
Employee Only	\$0.00	\$0.00	\$0.00
Employee + Spouse/DP	\$109.76	\$116.56	\$123.35
Employee + Child(ren)	\$75.11	\$79.76	\$84.41
Employee + Family	\$185.15	\$196.61	\$208.08

¹If Domestic Partners do not qualify as dependents under Section 152 of the Internal Revenue Code, employees pay their insurance premiums with after-tax dollars and the fair market value of any employer contributions made on behalf of your Domestic Partner will be treated as imputed income to the employee.

²Semi-monthly rates for Hourly Employees: Under \$75,000: below \$36.06, \$75,000 - \$150,000: \$36.06 - \$72.11, and over \$150,000: more than \$72.11.



Cost for Coverage (continued)

Dental

Enrollment Tier	Delta Dental*
Employee Only	\$0.00
Employee + Spouse/DP	\$8.26
Employee + Child(ren)	\$13.29
Employee + Family	\$21.55

*If Domestic Partners do not qualify as dependents under Section 152 of the Internal Revenue Code, employees pay their insurance premiums with after-tax dollars and the fair market value of any employer contributions made on behalf of your Domestic Partner will be treated as imputed income to the employee.



OTHER BENEFITS

FLEXIBLE SPENDING ACCOUNTS • LIFE & AD&D • DISABILITY • 401(K) • ADDITIONAL BENEFITS • TIME OFF • LEAVE OF ABSENCE

Flexible Spending Accounts (FSAs)

Flexible Spending Accounts (FSAs), administered by Navia Benefit Solutions, offer a smart way to stretch benefit dollars by setting aside pre-tax funds to pay for eligible healthcare and dependent care expenses. Each year, employees must elect the annual amount to contribute to each account. Contributions will be deducted pre-tax from your paycheck which helps reduce taxable income.

	Healthcare FSA	Dependent Care FSA
Eligibility	Eligible employees who are enrolled in the Cigna PPO or who waive medical coverage	All eligible employees
Annual Contribution Limit	\$3,200	\$5,000 (\$2,500 if married and filing separately)
Eligible Expenses*	Healthcare plan deductibles, copays, coinsurance, and prescriptions, including dental and vision hardware and expenses	Daycare for children age 12 and under, disabled children, and dependent adults
Availability of Funds	The full annual amount elected is available on your plan effective date	You can be reimbursed up to the amount available in the account
Payment or Reimbursement Options	Debit card or reimbursement	Reimbursement
Rollover Options	Unused funds do not rollover	Unused funds do not rollover
Deadline for Services	Services must be incurred by 2/15/2025	Services must be incurred by 2/15/2025
Deadline for Submission for Reimbursement	Reimbursement must be submitted by 3/31/2025	Reimbursement must be submitted by 3/31/2025

*Refer to IRS Publication 502 and 503 for a complete list of eligible expenses.



OTHER BENEFITS

FLEXIBLE SPENDING ACCOUNTS • LIFE & AD&D • DISABILITY • 401(K) • ADDITIONAL BENEFITS • TIME OFF • LEAVE OF ABSENCE

Life & AD&D Insurance

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

The Allen Institute provides Basic Life and AD&D insurance equal to two times your annual salary to a maximum of \$500,000 at no cost. The life insurance benefit is paid to your designated beneficiary in the event of death. The AD&D benefit is paid in the event of a loss of life or limb due to an accident.

Optional Life Insurance

Employees may purchase additional life insurance for themselves and their dependents at discounted rates.

Benefit Features	Optional Life Insurance		
	Employee	Spouse/ Domestic Partner	Dependent Child(ren)
Benefit Amount	Up to 5x base annual salary	Amount between \$5,000 and \$250,000, in \$5,000 increments	\$10,000
Maximum	\$500,000	50% of employee amount	\$10,000 (cannot exceed 50% of the employee amount)
Guaranteed Issue Amount*	\$250,000	\$50,000	
Benefit Duration	Benefits begin to reduce at age 70 and cease upon retirement	Benefits begin to reduce at age 70	Up to age 26

*Guaranteed Issue means you will not have to provide evidence of "good health" for coverage up to the specified amounts. However, if you do not enroll when initially eligible as a new hire, you will be required to provide evidence of "good health" for any amount elected.

Optional Life Insurance - Monthly Cost

Employee		Spouse/Domestic Partner	
Age	\$ amount/\$1,000 of coverage	Age	\$ amount/\$1,000 of coverage
Under age 25	\$0.057	Under age 25	\$0.052
25-29	\$0.057	25-29	\$0.062
30-34	\$0.058	30-34	\$0.084
35-39	\$0.078	35-39	\$0.094
40-44	\$0.107	40-44	\$0.105
45-49	\$0.171	45-49	\$0.157
50-54	\$0.262	50-54	\$0.240
55-59	\$0.432	55-59	\$0.449
60-64	\$0.653	60-64	\$0.688
65-69	\$1.135	65-69	\$1.324
70-74	\$2.023	70-74	\$1.324
75 and over	\$4.074	75 and over	\$1.324
Child(ren)			\$0.216



OTHER BENEFITS

FLEXIBLE SPENDING ACCOUNTS • LIFE & AD&D • DISABILITY • 401(K) • ADDITIONAL BENEFITS • TIME OFF • LEAVE OF ABSENCE

Disability Coverage

The loss of income due to illness or disability can cause serious financial hardship. Disability coverage, through Unum, provides partial income replacement to assist you financially.

Short-Term Disability (STD)

Company paid Short-Term Disability coverage provides a portion of income replacement if you are unable to work due to a non-occupational illness or injury. STD is offset (reduced) by any WA Paid Family & Medical Leave (PFML) for which you are eligible. PFML pays first, then STD pays.

Short-Term Disability (STD)	
Percent of Earnings	60% of base weekly salary
Weekly Maximum	Up to \$2,500/week
Waiting Period	Hospitalization/Accident: No waiting period Illness: 7 days
Maximum Duration	Up to 13 weeks from date of disability

Long-Term Disability (LTD)

Long-Term Disability pays you a portion of your earnings if you cannot work for an extended period of time due to a disabling illness or injury. The Allen Institute covers the full cost of the LTD benefit for all eligible employees. If you receive a claim payment under the benefit, it is considered taxable income.

Long-Term Disability (LTD)	
Percent of Earnings	60% of base monthly earnings
Monthly Maximum	Up to \$15,000/month
Waiting Period	90 days of continuous disability
Maximum Duration	Per schedule or to Social Security Normal Retirement Age, whichever is longer



OTHER BENEFITS

FLEXIBLE SPENDING ACCOUNTS • LIFE & AD&D • DISABILITY • 401(K) • ADDITIONAL BENEFITS • TIME OFF • LEAVE OF ABSENCE

401(k) Retirement Plan

Being retirement ready is an important part of financial wellness. The Allen Institute 401(k) Plan, administered by Fidelity, offers a variety of investment options with a generous employer match of employee 401(k) contributions.

Eligibility

Regular employees working 20 or more hours per week are eligible to participate in the 401(k) plan on the first day of employment. Employees may designate beneficiaries and allocate their asset distribution at any time.

Contributions

Employees are automatically enrolled at 3% of their salary if no action is taken. Each year, employee contributions will increase 1% up to a maximum of 10%. The percentage amount and escalation effective date may be changed any time. Please allow 1-2 payroll cycles for processing.

You may contribute up to 75% of your compensation up to the IRS maximum of \$23,000 for pre-tax contributions. If you are age 50 or over, you can make "catch-up" contributions up to \$7,500. You can make additional post-tax contributions up to the current maximum of \$76,500.

The Allen Institute will match employee contributions at \$0.50 on every dollar for a maximum annual contribution of \$15,000 in 2024. Both Allen Institute and employee contributions must not exceed the annual IRS maximum.

Helpful Tips on Saving for Retirement



- Start saving as soon as possible to grow your retirement account.
- Begin with small contributions, if necessary, and increase contributions over time.
- Take advantage of the auto-escalation feature and increase your contributions automatically.
- Make setting aside money for retirement a habit.
- Understand investment returns may fluctuate.
- Let it sit. Avoid penalties by leaving funds in your 401(k) or an IRA until retirement.
- Use the online tools and resources to make smart investment decisions.



OTHER BENEFITS

FLEXIBLE SPENDING ACCOUNTS • LIFE & AD&D • DISABILITY • 401(K) • ADDITIONAL BENEFITS • TIME OFF • LEAVE OF ABSENCE

401(k) Retirement Plan (Continued)

Maximize the Company Match

When you contribute to your 401(k), you get free money from the Allen Institute.

To get the maximum company match of \$11,250, you will need to contribute \$23,000 of your salary to your 401(k) account. If you are or will turn 50 in the 2024 calendar year, you can receive an additional \$3,750 in employer match by contributing the maximum \$23,000 plus the catch up contribution of \$7,500.

For all other amounts under the IRS maximum, simply divide the amount you plan to contribute in half to see what the Allen Institute's matching contribution will be. For example, if you save \$10,500, the Allen Institute will contribute \$5,250*.

	Contribution Limits*	
	Age < 50	Age ≥ 50
Defined Contribution Plan	Age < 50	Age ≥ 50
Maximum Employee Contributions	\$23,000	\$23,000
Catch Up	\$0	\$7,500
Maximum Company Match	\$11,500	\$15,250
After-tax**	\$34,500	\$30,750
Annual 415(c) Contribution Limit	\$69,000	\$76,500

*Assumes pre-taxed and Roth 401(k) contributions have been maximized.

Vesting

Your contributions are 100% vested, or owned, by you when you make them. You become partially vested in the employer match with each year of employment and are fully vested after three years of service.

Post-Tax Option

Allen Institute offers the option to contribute to a pre-tax 401(k) or an after-tax (Roth) 401(k). The key difference between the two options is the tax treatment. Unlike a traditional pre-tax 401(k), the money you put into a Roth 401(k) is taxed when it's deposited. Since Roth 401(k) contributions are made on an after-tax basis, the money you withdraw is not taxed.

This may be a good option for you if you expect to be in a higher tax bracket when you retire, if you want to be able to withdraw retirement without being taxed, and you plan to hold the account for at least five years before taking distributions to avoid big penalties.



OTHER BENEFITS

FLEXIBLE SPENDING ACCOUNTS • LIFE & AD&D • DISABILITY • 401(K) • ADDITIONAL BENEFITS • TIME OFF • LEAVE OF ABSENCE

Additional Benefits

Tuition Reimbursement

At the Allen Institute, we support further education and provide financial support to employees who work 20 hours or more per week. Tuition reimbursement is available up to \$7,500 per calendar year for employees who have completed 6 months of service. Classes must be taken for undergraduate or graduate level credit at an accredited college or university.

To receive reimbursement:

- The request must be approved prior to registration.
- You must be employed by the Allen Institute for the duration of the course and at the time when transcripts and receipts are submitted for reimbursement.
- Additional conditions may apply. Please see the Tuition Reimbursement Program page on Allen Connect > Administration > HR > Guidelines and FAQ's > Tuition Reimbursement Program.

Professional Development Allowance

With manager approval, the Allen Institute may cover the cost for job-related professional memberships conferences attended, and certificate programs. Contact your manager for additional details.

Summer Student Loans

Reduce student loan debt! Because the Allen Institute is a 501(3)c non-profit, your work at the Allen may qualify you to participate in public student loan forgiveness (PSLF) which could save you money on your student loans. Summer is a technology platform that you can use to check your eligibility for loan forgiveness, faster loan payoff, or lower monthly payments. This benefit is available for all Allen Institute employees and family members, family members will be [here](#) and enter the access code "Allen". provided with their own custom solutions to their student loan debt. Get started by registering



OTHER BENEFITS

FLEXIBLE SPENDING ACCOUNTS • LIFE & AD&D • DISABILITY • 401(K) • ADDITIONAL BENEFITS • TIME OFF • LEAVE OF ABSENCE

Additional Benefits (Continued)

Critical Illness Insurance

Are you protected if you experience a critical illness? As an eligible employee, you can buy Unum Critical Illness insurance to help pay for expenses related to the diagnosis of a critical illness such as a heart attack, coma, kidney failure, or cancer. Critical Illness insurance pays in addition to your medical plan and benefits are payable regardless of any other insurance plans.

The benefit amount is determined by the type of illness and is paid in a lump sum amount. No health questions are required, but a pre-existing condition clause may apply. Employees are responsible for the cost of this benefit. You may elect coverage for you and your family in the below described increments.

- **Employee:** \$15,000 or \$30,000
- **Spouse:** 100% of employee amount
- **Child(ren):** Automatically covers your children at 50% of employee's benefit at no cost

Critical Illness Insurance - Monthly Cost			
Employee & Child(ren)		Spouse/Domestic Partner	
Age	\$ amount/ \$1,000 of coverage	Age	\$ amount/ \$1,000 of coverage
Under age 25	\$0.12	Under age 25	\$0.12
25-29	\$0.18	25-29	\$0.18
30-34	\$0.25	30-34	\$0.25
35-39	\$0.36	35-39	\$0.36
40-44	\$0.52	40-44	\$0.52
45-49	\$0.76	45-49	\$0.76
50-54	\$1.11	50-54	\$1.11
55-59	\$1.59	55-59	\$1.59
60-64	\$2.32	60-64	\$2.32
65-69	\$3.41	65-69	\$3.41
70-74	\$5.12	70-74	\$5.12
75-79	\$7.08	75-79	\$7.08
80-84	\$9.32	80-84	\$9.32
85+	\$13.69	85+	\$13.69

What is a Pre-Existing Condition Clause?

If there is a health issue you have been treated for prior to the start date of your new policy, that condition may limit the coverage under the new plan.



OTHER BENEFITS

FLEXIBLE SPENDING ACCOUNTS • LIFE & AD&D • DISABILITY • 401(K) • ADDITIONAL BENEFITS • TIME OFF • LEAVE OF ABSENCE

Time Off

The Allen Institute encourages employees to take time away from work and offers a variety of time off benefits. Employees new to the Allen Institute will receive a combined total of 5 weeks of time off in their first year (including holidays and winter break).

Full-Time Employees Time Off

Years of Service: 0-2 years

Time Off*	Benefit
Vacation	10 days
Personal Days**	5 days
Holidays	9 days
Winter Break	4 or 5 days
Total	29 days per year

Paid Vacation***

Years of Service	Accrual per Paid Hour	Annual Days Accrued (40 hours/week)	Maximum Annual Carryover Days
0 - 2	.0385	10	17.5
2 - 4	.0462	12	21
4 - 9	.0654	17	29.75
10+ years	.0770	20	35

*The Allen Institute also provides paid Bereavement and Jury Duty days.

**If you are in your 1st year and hired after 6/30, you are not afforded all Personal Days.

***Please reach out to benefits@alleninstitute.org for accelerated vacation schedule.

Personal Days

Personal Days Based on Hours Scheduled	40 hours/week (1 FTE)	32 hours/week (.8 FTE)	20 hours/week (.5 FTE)
First calendar year if hired by 6/30	5 days (40 hours)	2 days (16 hours)	2 days (16 hours)
First calendar year if hired between 7/1 and 10/31	2 days (16 hours)	1 day (8 hours)	1 day (8 hours)
Second and subsequent calendar years	5 days (40 hours)	2 days (16 hours)	2 days (16 hours)

Paid Sick Time

Sick Time Based on FTE	Accrual per Paid Hour	Annual Accrual (40 hours/week)	Maximum Annual Carryover
40 hours/1.0 FTE	.034615	9 days (72 hours)	480 hours
32 hours/0.8 FTE	.034615	7.2 days (57.6 hours)	480 hours
20 hours/0.5 FTE	.034615	4.5 days (36 hours)	480 hours

Holidays and Winter Break

- New Year's Day
- Labor Day
- Martin Luther King Jr.'s Birthday
- Memorial Day
- Juneteenth
- Thanksgiving
- The day after Thanksgiving
- Independence Day
- Christmas Day
- Winter Break: Weekdays between December 25 and January 1



OTHER BENEFITS

FLEXIBLE SPENDING ACCOUNTS • LIFE & AD&D • DISABILITY • 401(K) • ADDITIONAL BENEFITS • TIME OFF • LEAVE OF ABSENCE

Leave of Absence

The Allen Institute offers benefits to support you when you need to take an extended period of time away from work. In addition to state and federal leave of absence programs, you may be eligible for additional programs that provide a portion of your income when you are away from work.

FMLA

FMLA provides benefits and job protection for 12 weeks of leave due to qualifying reason. To qualify, you need to have worked 1,250 hours for Allen Institute in the previous year. Keep in mind that this is an unpaid leave of absence, and it runs concurrently with other leaves of absence.

Disability

When you're ill or injured and unable to work, you may be eligible for disability benefits:

- Short-term disability provides 13 weeks of paid leave at 60% of pre-disability income up to \$2,500 per week. Benefits begin on the eighth day of disability due to illness or on the first day of disability if hospitalized.
- Long-term disability provides income replacement after STD has been exhausted, 90 days from the date of disability.

FMLA as well as any other State Statutory plans will run concurrently with your disability benefits.

Parental Leave

Employees may be eligible for 12-18 weeks of paid disability and/or baby bonding time for the birth, adoption, or foster placement of a child under their state leave program, where applicable, and/or the Allen Institute Parental Leave program.

Full-time regular Allen Institute employees who have been employed with the Allen Institute for more than one year are also eligible to receive supplemental paid leave up to 100% of their pay when adding a new child to their family.*

*Employees must be approved for Short-Term Disability and/or their state leave program, where applicable, to access this benefit.



Applying for a Leave of Absence



Contact Allen Institute HR to apply for a leave of absence at least 30 days before your leave date, if possible.

Your Benefit Contacts

Coverage	Contact	Policy Number / Access Code	Phone	Website/Email	iOS Apps
Medical	Cigna	3343806	(800) CIGNA24	my.cigna.com	
Nurseline	Cigna	3343806	(800) 564-9286 or (800) CIGNA24	N/A	
Telemedicine	Cigna (MDLIVE)	3343806	(888) 726-3171	mdliveforcigna.com	
Health Savings Account (HSA)	Navia Benefit Solutions	AIB	(800) 669-3539	customerservice@naviabenefits.com	
Dental	Delta Dental of Washington	09370	(800) 554-1907	deltadentalwa.com	
Vision	Cigna	3343806	(800) CIGNA24	cigna.vsp.com	
Employee Assistance Program (EAP)*	SupportLinc	alleninstitute	(888) 881-5462	supportlinc.com	
Flexible Spending Account (FSA)	Navia Benefit Solutions	AIB	(800) 669-3539	naviabenefits.com/participants customerservice@naviabenefits.com Claims: claims@naviabenefits.com	
Wellness Reimbursement Program	Navia Benefit Solutions	AIB	(800) 669-3539	customerservice@naviabenefits.com	
Life and AD&D*	Unum	Life: 944067 AD&D: 944066	(866) 868-6737	https://portal.unum.com/	
Disability and Leave*	Unum	STD: 944113 LTD: 944069	(866) 868-6737	unum.com	
Critical Illness*	Unum	944068	(866) 868-6737	unum.com	
401(k) Retirement Plan	Fidelity	49000	(800) 835-5097	401k.com	
Benefit Advocacy	Benefit Resource Center	N/A	(866) 468-7272	brcwest@usi.com	
PSLF Application Assistance	Summer	N/A	N/A	app.meetsummer.org/onboard/alleninstitute (messaging and virtual consultations available here)	
Questions	Allen Institute Benefits Team	N/A	N/A	benefits@alleninstitute.org Allen Connect > HR > Who to Call	

*Available 1/1/2024

This communication highlights some of your Allen Institute benefit plans. Your actual rights and benefits are governed by the official plan documents. If any discrepancy exists between this communication and the official plan documents, the plan documents will prevail. Allen Institute reserves the right to change any benefit plan without notice. Benefits are not a guarantee of employment. ©2024 Communication Partners, Inc. www.commpart.com

