

## Fringe Benefits Brief

## HOLIDAYS AND LEAVE:

ANNUAL LEAVE:
\$1.25 days (9.38 hr) monthly accrual. Bonus earnings after 10 years. Yearly maximum carryover: 45 days. (9 month faculty do not accrue annual leave)
\$1.25 days (9.38 hr) monthly accrual. Includes up to ten (10) days annually for family leave. Yearly maximum carryover: 180 days.
HOLIDAYS:
\$13 per year as observed by the University.
\$3 consecutive work days of leave with pay for immediate family.
\$15 days for annual training (plus 30 days for a declared emergency) with pay.
COURT LEAVE:
\$100 corr subpoenaed witness granted leave with pay.

**GROUP INSURANCE:** 

**HEALTH:** Optional. Savings or Standard plan. lifetime maximum- none. Savings monthly employee cost: family \$113.00; employee/spouse \$77.40; employee/child \$20.48; employee only \$9.70. Standard monthly employee cost: family \$306.56; employee/spouse \$253.36; employee/child \$143.86; employee only \$97.68. If health coverage is refused by the enrollee or all eligible dependents are not enrolled when first eligible, health coverage for the enrollee and/or dependent(s) can be applied for only during open enrollment period in October or if a Special Eligibility Situation. Benefits for Basic Life and Basic Long Term Disability are forfeited unless enrollee elects health coverage. A tobacco surcharge will be applied to tobacco users. Employee pays: \$40.00 for single coverage; or \$60.00 for non-single coverage.

**DENTAL:** Optional. Employee only – no charge. Other monthly current costs are: employee/spouse \$7.64; employee/child \$13.72; full family \$21.34. 100% of allowable charges for diagnostic and preventive; 80% of allowable charges for basic services; 50% of allowable charges for orthodontics (lifetime maximum \$1,000 for each covered child age 18 and under). A \$25 annual deductible for basic services. If dental coverage is refused by the enrollee or all eligible dependents are not enrolled when first eligible, dental coverage for the enrollee and/or dependent(s) can be applied for only during an announced open enrollment period every two years. If enrolled in State Dental Plan, Dental Plus is available at same level of coverage. Employee pays: family \$82.10; employee/spouse \$54.80; employee/child \$63.20; employee only \$27.12. Orthodontia not offered by Dental Plus.

LIFE: \$3,000 Basic Life: Automatic enrollment at no cost to employee if enrolled in State Health Plan. \$10,000 - \$500,000 Optional Term Life: Optional. Employee pays premium. Employee eligible for 3x base salary without medical evidence. Eligible for up to \$500,000 with medical evidence.

**Dependent Life for eligible spouse:** \$10,000-\$20,000 or increments up to 50% of employee's Optional Term Life coverage or \$100,000, whichever is less, with medical evidence. Optional. Employee pays premium.

Dependent Life for eligible child/children: \$15,000. Optional. Employee pays premium.

**BASIC LONG TERM DISABILITY:** Automatic enrollment at no cost to employee if enrolled in State Health Plan. 62.5% of salary up to \$800/month.

**SUPPLEMENTAL LONG TERM DISABILITY**: Optional. Employee pays premium. 65% of salary up to \$8,000/month (minimum benefit per month \$100). Choice of 90 or 180 day waiting period.

**VISION**: Optional. Employee pays premium. Family \$25.16; employee/spouse \$16.00; employee/child \$17.16; employee only \$8.00. Plan covers comprehensive eye examinations, frames, lenses and lens options, and contact lens services and materials.



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**MONEYPLUS FLEXIBLE BENEFITS PLAN**: Optional. Employee pays minimal cost of administrative fee. Offers four features: the Pretax Group Insurance Premium Feature, the Dependent Care Spending Account, the Health Savings Account, and the Medical Spending Account.

CANCER AND INTENSIVE CARE: Optional. Employee pays premium.

**RETIREMENT OPTIONS**: Membership in either the South Carolina Retirement System (SCRS) or the Optional Retirement Program (ORP) is mandatory. Staff and faculty may choose between the following two plans:

**SC RETIREMENT SYSTEM (SCRS)**: Defined Benefit Plan. Vested after 8 years of earned service. Disability retirement may be applied for with at least 5 years service credit. Death benefit equals 1 year annual salary following 1 year of employment. Employee contribution = tax-deferred 9% of gross salary.

**OPTIONAL RETIREMENT PROGRAM (ORP)**: Defined Contribution Plan. Vested immediately. Four plans: TIAACREF, VALIC, METLIFE, and MassMutual. Death benefit equals 1 year annual salary following 1 year of employment. Plan features vary (brochures available). Employee contribution = tax-deferred 9% of gross salary. Employer contributes 5% to the investment provider for allocation to your account.

SC DEFERRED COMPENSATION PROGRAM: 457 and 401(k) and Roth options.

**OTHER PAYROLL DEDUCTIONS**: Private tax sheltered annuities, credit unions and savings accounts. Direct deposit of payroll check is a condition of employment.

WEB SITES: LANDER INTERNET WEB SITE: www.lander.edu/hr

STATE INTERNET WEB SITE: www.peba.sc.gov

This is a brief synopsis of benefit programs. Details are available in certificates, booklets and policy manual or by calling the Office of Human Resources at (864) 388-8310.

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