

# Welcome to NYPA

## Employee Benefits Guide

**Effective: Jan. 1, 2020**

**UWUA**

## Our Mission

Power the economic growth and competitiveness of New York State by providing customers with low cost, clean, reliable power and the innovative energy infrastructure and services they value.

## Total Rewards

*At NYPA, you will have the chance to make a difference. Your work will help tackle climate change and bring clean, affordable energy to people across New York. You will be recognized and rewarded for your work with fair compensation and a comprehensive benefits package for you and your family. You will have opportunities to learn, stretch and grow both on and off the job. Joining NYPA, you will become part of a community that genuinely cares about our work and each other.*

## Eligibility

As a full-time employee, you're eligible to enroll in a range of benefits to customize to your individual and family needs.

Your coverage will become effective your first day of employment. You will have thirty days from your hire date to enroll in your benefits. Once a year during an open enrollment period you will have the opportunity to change certain benefit elections.

If you choose to opt out of healthcare coverage you will receive a stipend of \$57.70 per paycheck.

## Medical Coverage

NYPA offers several medical plans or the option to waive medical coverage.

- The **NYPA** preferred provider organization (**PPO**) **Plan** provides major medical care, hospitalization and prescription drug coverage. If you use a network provider, you are only responsible for the copay. If you use a non-network provider, you will be responsible for paying the annual deductible and coinsurance, as well as any charges over the reasonable and customary limit.
- The **Choice Plan** provides major medical care, hospitalization and prescription drug coverage. If you use a participating provider, you are only responsible for the copay. Out-of-network benefits are not available under this plan.

The following grid gives you an at-a-glance comparison of the plans offered.

# Benefits



**NY Power Authority**

| Medical Plans                   | United Healthcare (UHC) PPO Plan |                   | UHC Choice Plan |
|---------------------------------|----------------------------------|-------------------|-----------------|
| Bi-weekly cost – Employee only: | \$53.84                          |                   | \$32.69         |
| Bi-weekly cost – Family:        | \$134.61                         |                   | \$34.61         |
| Types of Services               | In-Network                       | Out-of-Network    | In-Network      |
| Primary Care                    | \$30 copay                       | 20% co-insurance* | \$20 copay      |
| Specialist                      | \$30 copay                       | 20% co-insurance* | \$35 copay      |
| Urgent Care                     | \$30 copay                       | 20% co-insurance* | \$35 copay      |
| Virtual Visits                  | \$0 copay                        | N/A               | \$0 copay       |
| Hospitalization                 | \$0 copay                        | \$0 copay         | \$0 copay       |
| ER Visits                       | \$0 copay                        | \$0 copay         | \$100 copay**   |
| Preventive Care                 | \$0 copay                        | 20% co-insurance* | \$0 copay       |
| Chiropractic                    | \$30 copay                       | 20% co-insurance* | \$35 copay      |
| Retail Rx                       |                                  |                   |                 |
| Tier 1                          | \$9 copay                        | \$9 copay         | \$10 copay      |
| Tier 2                          | \$27 copay                       | \$27 copay        | \$20 copay      |
| Tier 3                          | \$45 copay                       | \$45 copay        | \$35 copay      |
| Mail Order RX                   |                                  |                   |                 |
| Tier 1                          | \$22.50 copay                    | N/A               | \$20 copay      |
| Tier 2                          | \$67.50 copay                    | N/A               | \$40 copay      |
| Tier 3                          | \$112.50 copay                   | N/A               | \$70 copay      |
| Deductible                      |                                  |                   |                 |
| Single                          | \$0                              | \$700             | \$0             |
| Family                          | \$0                              | \$2,100           | \$0             |
| Out-of-pocket Limit             |                                  |                   |                 |
| Single                          | \$7,150                          | \$900             | \$2,500         |
| Family                          | \$14,300                         | \$2,400           | \$5,000         |

\*After deductible

\*\*Waived if admitted

## Dental Plan

The Delta Dental Plan covers charges for services related to care of the teeth, gums and mouth. Diagnostic and preventive care services are paid at 100%. Other dental expenses, including orthodontics, are covered as referenced in the chart below. You are responsible for the coinsurance for these services after meeting the deductible. Selecting a provider that participates in the Delta Dental network reduces your out-of-pocket expense. Should you use a non-network provider, payment to the dentist is based on the negotiated rate and you are responsible for any amount over that rate.

| Delta Dental Plan            |                                       |
|------------------------------|---------------------------------------|
| In & out-of-network coverage |                                       |
| Bi-weekly cost:              | Employee only: \$0 / Family: \$0      |
| Diagnostic & Preventative    | 100% no deductible                    |
| Restorative Care             | 80% after deductible                  |
| Reconstructive Care          | 50% after deductible                  |
| Annual Deductible            | \$25 Individual / \$50 Family         |
| Maximum                      | \$2,000 per person each calendar year |
| Orthodontic Maximum          | \$3,000 per person lifetime           |

For questions regarding benefits, contact HR Services at [HR.Services@nypa.gov](mailto:HR.Services@nypa.gov) or 914-287-3114.

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## Vision Coverage

**Core Vision Plan** is available to employees only (not dependents) and is paid by NYPA. Under this option, you are reimbursed up to \$100 for a routine eye exam once every year.

## Hearing Aids

Hearing aid reimbursement is available to employees. You're eligible to receive reimbursement up to \$1500 for one hearing aid every three years at no cost to you.

## Employee Life Insurance

You will receive 1.5 times your basic annual wage raised to the next multiple of \$500 at no cost to you. Life insurance coverage in excess of \$50,000 is considered taxable income and will appear on your W-2.

## Business Travel Life Insurance

You also have protection in case of your death due to an accident occurring while traveling on business. Your regular commute to and from work is not covered. This policy has a lump sum payment of \$250,000 to your designated surviving beneficiary.

## Short-Term Disability

You receive benefits after the 8<sup>th</sup> consecutive calendar day of absence. At no cost to you, you'll receive 50% of basic weekly wages up to \$225 weekly maximum.

## Long-Term Disability

Long-term disability coverage provides income to protect you and your family if you are disabled and cannot work after three consecutive months of absence from work. At no cost to you, you'll receive 50% of covered salary with a maximum monthly amount of \$3,000. Cost-of-living increases, survivor benefits, education benefits, and rehabilitation incentives are built into the coverage options.

## Flexible Spending Accounts

You can contribute pre-tax dollars to Flexible Spending Accounts (FSAs), which allow you to use pre-tax dollars to pay for eligible out-of-pocket health and dependent day care expenses, up to annual IRS limits. You will receive a debit card to use for both types of FSA expenses. FSA summary follows:

### **Health Care FSA**

- Pre-tax annual election \$130 to \$2,700
- Reimbursement available for qualified medical co-pays, deductibles, out-of-pocket expenses, prescriptions
- Roll over up to \$500 to the following year

### **Dependent Care FSA**

- Pre-tax annual election \$650 to \$5,000
- Reimbursement for qualified child-care/elder care expenses
- Expenses for dependent children age 13 and over are not eligible

## Cancer Protection Plan

The Cancer Protection Plan helps with unexpected expenses if cancer occurs and can help maintain your lifestyle. Benefits are paid directly to you, regardless of any other insurance, copays, etc.

## Accident Expense Plan

This plan helps with unexpected expenses if an accident occurs. Benefits include costs associated with accident emergency treatment, accident follow-up treatment, initial accident hospitalization, accident hospital confinement, accidental death and dismemberment, physical therapy, blood and plasma, and ambulance. Levels of reimbursement for each benefit vary.

## DEFAULT BENEFITS

If you do not make benefit elections within 30 days of your hire date, you will automatically receive default benefits, which will remain in place through Dec. 31 of the year you're hired, unless you experience a qualified life event during the year. The default coverage includes only the following benefits (employee coverage/individual credits only):

Medical Coverage – NYPA Choice Plan  
Vision – Core Plan

Life Insurance – \$50,000 (Core Plan)  
Long-Term Disability - 50% of covered salary (Core Plan)

## DOMESTIC PARTNER BENEFITS

Medical, Dental, Cancer Protection Plan and Accident Expense Plan, benefits may be extended to a domestic partner and dependents of the domestic partner. (Eligibility criteria: you must share a committed relationship with each other, have been in the relationship for at least one year, reside in the same household, document financial interdependency for one year and complete an affidavit.)

## RETIREMENT PROGRAMS



| <b>NYSLRS Highlights</b>      |                                                                                                                                                                                                                                                                                                                                                 |
|-------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Plan type</b>              | *A defined benefit plan (DB), also known as a traditional pension plan. Provides a fixed monthly lifetime benefit at retirement based on a preset formula that considers your salary, age and years of service at retirement.<br>*The State/Employer bears investment risk.<br>*Administered by State of New York<br>*Tier 6 Benefit Provisions |
| <b>Eligibility</b>            | All full-time employees                                                                                                                                                                                                                                                                                                                         |
| <b>Employee contributions</b> | NYSLRS – Contribution Rate based on Wages<br>\$45,000 or less: 3%<br>\$45,000.01 to \$55,000: 3.5%<br>\$55,000.01 to \$75,000: 4.5%<br>\$75,000.01 to \$100,000: 5.75%<br>More than \$100,000: 6%                                                                                                                                               |
| <b>Employer contributions</b> | NYPA contributes toward general pension funds, not individual accounts                                                                                                                                                                                                                                                                          |
| <b>Vesting</b>                | *10-year vesting<br>*Age 63 Normal Retirement, Full benefit<br>*Age 55 Early Retirement, Reduced benefit<br>*20 & 30-year milestones                                                                                                                                                                                                            |
| <b>Investment options</b>     | Funds are managed for employees and held in NYS Common Retirement Fund trust.                                                                                                                                                                                                                                                                   |
| <b>Portability</b>            | If you leave before reaching the ten-year vesting period, your contributions are refunded and employer contributions toward general pension funds are forfeited.                                                                                                                                                                                |

### Deferred Compensation Plan (457 Plan)

The Deferred Compensation Plan is a retirement savings program governed by Section 457(b) of the Internal Revenue Code. You may contribute from 1% up to 100% of your eligible salary on a pre-tax basis and/or Roth (after-tax) basis. The 2020 IRS annual maximum contribution limit is \$19,500. Employees age 50 and older may be eligible to make catch-up contributions up to an additional \$6,500.

## TIME AWAY FROM WORK

### Vacation

Refer to your Collective Bargaining Agreement for details.

### Sick Time

Refer to your Collective Bargaining Agreement for details.

### Employee Medical Leave

Employees on an approved consecutive Family Medical Leave Act (FMLA) employee medical leave are eligible to receive 50% salary after exhausting your accrued sick time for up to 12 weeks.

### Military Leave

You are eligible for 30 calendar days a year for authorized military leave.

### Death in Family

In the event of the death of an immediate family member, you are eligible for three days of paid time away from work.

### Holidays

UWUA employees receive a total of 12 days per year. Holiday schedules vary depending on your work location.

## ADDITIONAL BENEFITS

### Employee Assistance Program

A free, confidential assessment and counseling program for employees and family members. The program also includes childcare and elder care resource and referral services.

### Education Assistance

You are eligible for our Education Assistance Program after completing six months of employment. You are responsible for payment of tuition and required fees when registering for courses at eligible institutions. Tuition and eligible fees will be reimbursed only after successful completion of the course(s) at a minimum grade level of "C" or its equivalent or a "P" in a pass/fail course (pass/fail reimbursement is limited to two courses per degree curriculum).

For all courses, NYPA will reimburse 100% for tuition, books, lab and computer fees, and mandatory registration fees up to the annual reimbursement. All benefits are dependent upon the employee maintaining employment for certain commitment periods or be subject to repaying education expenses in full.

| Program       | Annual reimbursement maximum | Commitment period |
|---------------|------------------------------|-------------------|
| Certificate   | \$5,000                      | Six months        |
| Undergraduate | \$10,000                     | One year          |
| Graduate      | \$15,000                     | Two years         |

## ADDITIONAL PROGRAMS AVAILABLE THROUGH PAYROLL DEDUCTION



- Group auto/homeowner's insurance program discount through Liberty Mutual
- Credit union membership
- New York's 529 College Savings Program (877-697-2837, [NY529@nysaves.org](mailto:NY529@nysaves.org))
- Certain charities through State Employees Federated Appeal (SEFA)

*The above is only intended as a brief summary of the benefit plans. If there is a difference between this summary and the documents, contracts or policies, the plan documents, contracts or policies will govern in every instance. The Authority reserves the right to change or terminate any of these benefits, programs or pieces of programs at any time.*

## Benefits New Hire Checklist

- Bring original identification for employment verification on your first day.
  - Gather documentation for your dependents and email to [HR Services](#) on your first day.
  - Enroll in benefits on [MyPageNYPA](#) within 30 days of hire date. **You must be connected to the NYPA network to access this page.**
  - Review your summary to confirm your choices and verify you've included any eligible dependents you want covered.
  - Enroll in the New York State and Local Retirement System (NYSLRS) within 30 days of hire date.
- Enroll in the 457 Plan at any time.
- Designate beneficiaries
  - Life insurance beneficiaries should be done before your first day
  - 457 Plan beneficiaries can be designated on the [T.Rowe Price website](#)
  - NY State and Local Retirement System beneficiaries must be designated by form
- Receive your new ID cards for medical, pharmacy and dental coverage.
- Find contact information for vendors on the Resources section of [nypa.gov/benefits](http://nypa.gov/benefits).

