JULY 1, 2024 - JUNE 30, 2025 INSURANCE RATES

MEDICAL & PRESCRIPTION: Meritain Health (An Aetna Company) & OptumRx

Annual Salary ↓	Employee	Employee + Child(ren)	Employee + Spouse	Employee + Spouse + Child(ren)		
Employee Per Pay Premium - Bi-weekly 26 Pay Cycle						
< \$30,000	\$28.93	\$76.88	\$108.15	\$144.24		
\$30,000 - \$34,999	\$31.69	\$84.20	\$118.46	\$157.98		
\$35,000 - \$39,999	\$35.13	\$93.36	\$131.33	\$175.15		
\$40,000 - \$44,999	\$39.26	\$104.34	\$146.78	\$195.76		
\$45,000 - \$49,999	\$43.40	\$115.32	\$162.23	\$216.37		
\$50,000 - \$59,999	\$51.66	\$137.28	\$193.13	\$257.57		
\$60,000 - \$69,999	\$59.93	\$159.25	\$224.04	\$298.79		
\$70,000 - \$89,999	\$68.19	\$181.22	\$254.94	\$340.00		
\$90,000 - \$109,999	\$72.32	\$192.20	\$270.39	\$360.60		
>= \$110,000	\$76.46	\$203.18	\$285.84	\$381.21		
Employee Per Pay Premium - Semi-monthly 24 Pay Cycle						
< \$30,000	\$31.34	\$83.29	\$117.17	\$156.26		
\$30,000 - \$34,999	\$34.33	\$91.22	\$128.33	\$171.14		
\$35,000 - \$39,999	\$38.06	\$101.13	\$142.28	\$189.75		
\$40,000 - \$44,999	\$42.53	\$113.03	\$159.01	\$212.07		
\$45,000 - \$49,999	\$47.01	\$124.93	\$175.75	\$234.40		
\$50,000 - \$59,999	\$55.97	\$148.72	\$209.23	\$279.04		
\$60,000 - \$69,999	\$64.92	\$172.52	\$242.71	\$323.69		
\$70,000 - \$89,999	\$73.87	\$196.32	\$276.18	\$368.33		
\$90,000 - \$109,999	\$78.35	\$208.22	\$292.92	\$390.65		
>= \$110,000	\$82.83	\$220.11	\$309.66	\$412.98		
Employee Per Pay Premium - Non-12 month 17 Pays						
< \$30,000	\$44.25	\$117.58	\$165.41	\$220.60		
\$30,000 - \$34,999	\$48.46	\$128.78	\$181.17	\$241.61		
\$35,000 - \$39,999	\$53.73	\$142.78	\$200.86	\$267.88		
\$40,000 - \$44,999	\$60.05	\$159.57	\$224.49	\$299.39		
\$45,000 - \$49,999	\$66.37	\$176.37	\$248.12	\$330.91		
\$50,000 - \$59,999	\$79.01	\$209.96	\$295.38	\$393.93		
\$60,000 - \$69,999	\$91.65	\$243.56	\$342.64	\$456.97		
\$70,000 - \$89,999	\$104.29	\$277.15	\$389.90	\$520.00		
\$90,000 - \$109,999	\$110.61	\$293.95	\$413.53	\$551.51		
>= \$110,000	\$116.94	\$310.75	\$437.16	\$583.03		

Employee Per Pay Premium		Employee (EE)	EE + Spouse or EE + Child	EE + Spouse + Child(ren) or EE + Children	
DENTAL United Concordia (Concordia Select) Low Option	Bi-weekly 26 pays	\$9.54	\$19.34	\$31.95	
	Semi-monthly 24 pays	\$10.33	\$20.95	\$34.61	
	Non-12 month 17 pays	\$14.59	\$29.57	\$48.87	
DENTAL United Concordia (Concordia Choice) High Option	Bi-weekly 26 pays	\$10.49	\$22.02	\$41.03	
	Semi-monthly 24 pays	\$11.36	\$23.86	\$44.45	
	Non-12 month 17 pays	\$16.04	\$33.68	\$62.75	
VISION Vision Benefits of America	Bi-weekly 26 pays	\$1.41	\$3.29	\$4.78	
	Semi-monthly 24 pays	\$1.53	\$3.56	\$5.18	
	Non-12 month 17 pays	\$2.16	\$5.03	\$7.31	

Dickinson

Please be advised of the following July 1, 2024, changes:

- Medical and Prescription The college absorbed this year's small increase to the overall cost of our self-funded plan allowing employee health care premiums to remain the same. In vitro fertilization, gender affirming care services, and travel and lodging for medical services, as applicable, were added to the medical plan design.
 - Additionally, the college is developing a policy to provide financial assistance (up to \$3,000) with adoption expenses. In Pennsylvania, this is considered a taxable benefit.
- Flexible Spending Account The college transitioned from HealthSmart to Ameriflex for the
 administration of our flexible spending account program. Ameriflex will issue new declining
 balance cards to all participants. Full-time employee contribution limit for Health Care FSA
 increased to \$3,200 for 2024 (previous year limit was \$3,050).

REMINDERS:

Flexible Spending Accounts administered by Ameriflex. This benefit allows participants to set aside pretax income to cover anticipated health or dependent care expenses that are not covered by insurance.

HEALTH CARE EXPENSE ACCOUNT**	Due to IRS regulations, the maximum amount allowed is \$3,200 to help cover out-of-pocket health care expenses. Examples of covered expenses include copayments, deductibles, coinsurance, or services not covered under a medical, prescription drug, dental, or vision plan. Note: IRS publication 502 governs items that are reimbursable under a health care expense account.
DEPENDENT CARE EXPENSE ACCOUNT**	A \$5,000 family maximum or up to the total salary of the lowest paid spouse (whichever is less) covers work related dependent care expenses. Note: IRS publication 503 governs items that are reimbursable under a dependent care expense account.

^{**} To avoid forfeiture, all claims must be expensed and paid in full by September 15, 2025.

Retirement

An excellent way to save for retirement and reduce current tax liability is to contribute part of your salary to an employer-sponsored retirement plan. At Dickinson, employees can contribute pre-tax dollars, effective from their date of employment, to plans administered by TIAA and/or Fidelity.

- Defined Contribution Plan Eligibility occurs following the completion of one year of full-time service with the College. After the one-year waiting period, Dickinson College contributes an amount equal to 8% of your base salary. Dickinson has an employer match where employees must contribute at least .5% of their own salary to receive an additional .5% Dickinson match.
- Tax Deferred Annuity Plan calendar year limits for employee contributions via payroll deduction increased from \$22,500 to \$23,00 for calendar year 2024.
 - Employees aged 50 and older may contribute an additional \$7,500, through a catch-up provision, making the total elective deferral maximum \$30,500. These additional contributions are available to any eligible employee based solely on age, regardless of past contributions or length of service.