



2027



SOUTHWESTERN
MICHIGAN COLLEGE

EMPLOYEE BENEFIT GUIDE

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CONTACT INFORMATION

Resource/Provider

Benefit	Contact Source	Number
Medical & Pharmacy Administrator Priority Health (<i>Out of State: Cigna Open Access Plus</i>)	https://www.priorityhealth.com 	800.942.0954 
Medical & Pharmacy Administrator Blue Cross Blue Shield of MI	https://www.bcbsm.com 	877.752.1233 
Dental ADN	https://www.adndental.com 	248.901.3711 
Accident, Cancer, Critical Care AFLAC	https://www.aflac.com/ 	800-992-3522 
Life/AD&D and LTD The Standard	https://standard.com 	888.937.4783 
Supplemental Life The Standard	https://standard.com 	888.937.4783 
Short Term Disability The Standard	https://standard.com 	888.937.4783 
Health Savings Account (HSA) 1 st Source Bank	https://www.1stsource.com 	269.782.5121 
Vision EyeMed	https://www.eyemed.com 	866.800.8457 
Employee Assistance Program (EAP) AllOne Health	https://www.allonehealth.com 	800.451.1834 

If you have questions about plan benefits, claims, or other information covered in this packet, or if you need a form or assistance filling out a form, please contact:

(269) 782-1365

Benefits Department / HR contact

HR@swmich.edu



INTRODUCTION

The mission of Southwestern Michigan College is to serve our community by providing affordable, local access to high-quality postsecondary career preparation and college education—including the total college-life experience. Each and every one of our employees provides essential services to ensure we achieve our mission. The College recognizes the important contributions made by our employees and works toward providing a comprehensive benefit plan to help support what you do every day.

This Employee Benefits Guide explains the benefits given by the College. It also highlights additional programs and services available to assist you with being an informed healthcare consumer and taking charge of your well-being.



BENEFITS ELIGIBILITY

NEW EMPLOYEE ENROLLMENT: As a newly-hired, eligible employee of Southwestern Michigan College, you are eligible for benefits on the first of the month after your date of hire or if you experience a qualifying life event.

EXISTING EMPLOYEE ENROLLMENT: Annual Open Enrollment for the 2027 benefit year for existing employees is November 2nd through November 16th for coverage beginning on January 1st. During open enrollment, you may make changes to your current benefits.

QUALIFYING EVENT: Changes to benefits outside of your initial eligibility or open enrollment period, you may only do so within 31 days of an IRS recognized life change event, as defined below:

- Employee's legal marital status changes (marriage, divorce, separation or death of a spouse)
- A change in the number of dependents (birth, adoption or death)
- Employment changes for the employee, spouse or dependents, which affect benefit eligibility status
- A dependent becoming eligible or ineligible for coverage due to age, obtaining other group coverage or any similar circumstance.

The employee must notify Human Resources within 31 days of a life change event.

Dependent children are ineligible for medical coverage as of age 26. It is essential to notify Human Resources of ineligibility within a timely manner to ensure your dependent's right to COBRA Continuation. End of coverage in the event of divorce or reaching the age of 26 is the last day of the month in which the qualifying event occurred.

Please contact Human Resources with any questions regarding your elections. (hr@swmich.edu)



MEDICAL ADMINISTRATOR: Priority Health & Blue Cross Blue Shield MI

There are four Medical Plan Options: a Premier plan and an HDHP with an HSA plan with each provider. This offers you the ability to choose the medical plan that is best for you. Both plans allow you to see providers outside of your network (**Cigna Open Access Plus for Priority, BCBS networks of other states for BCBS claims outside of Michigan**); however, you will always pay less by choosing in-network providers. Out-of-network services are subject to higher deductibles, coinsurance, and balance billing.

CALENDAR YEAR DEDUCTIBLE: This is a specified dollar amount that the employee must pay for certain covered services per calendar year. Once the deductible has been satisfied (individual or family), then the applicable coinsurance applies. Coinsurance is your share of the cost of a healthcare service.

CALENDAR YEAR OUT-OF-POCKET MAXIMUM: This is the amount of covered expenses – including deductible, co-payments, and coinsurance, that the employee can pay out of their own pocket over the course of the year. Once the out-of-pocket maximum has been satisfied in a calendar year, further network services will be payable through Priority Health at 100% for the remainder of the plan year, subject to any other terms, limitations, and exclusions.

Monthly Premium Contributions for these plans are:

Plan Type	PPO		HDHP	
Vendor	PRIORITY HEALTH	BLUE CROSS BLUE SHIELD MI	PRIORITY HEALTH	BLUE CROSS BLUE SHIELD MI
Plan Name	PRIORITY 500 PHS01	ENHANCED 1000 173	PRIORITY HSA 3000 PHS02	VALUE HSA 3000 186/187
Medical In Network				
Individual Deductible	\$500	\$1,000	\$3,000	\$3,000
Family Deductible	\$1,000	\$2,000	\$6,000 (\$3,500)	\$6,000
Coinsurance (Insurance Pays)	90%	100%	100%	100%
Individual Out of Pocket Max	\$3,000	\$3,000	\$6,350	\$6,350
Family Out of Pocket Max	\$6,000	\$6,000	\$9,200 per member in a family plan \$12,700 per family	\$6,550 per member in a family plan \$12,700 per family
Pharmacy				
Generic	\$10 copay	\$10 copay	\$10 copay after deductible	\$10 copay after deductible
Preferred Brand/Specialty	\$40 copay	80% (\$80 max)	80% after deductible (\$80 max)	\$40 copay after deductible
Non-Preferred Brand/Specialty	\$40 copay	80% (\$100 max)	80% after deductible (\$100 max)	\$80 copay after deductible
Monthly Premium Contributions				
Single	\$169.00	\$191.00	\$142.00	\$160.00
2-Person	\$381.00	\$430.00	\$307.00	\$344.00
Family	\$472.00	\$538.00	\$382.00	\$438.00

Premium contributions are payroll deducted on a bi-weekly basis. In the months with a third pay date, contributions will not be withheld.

The College contributes \$1,000 to individual, \$1,500 to two person, and \$2,000 to family HSA accounts to be used toward eligible medical expenses. This applies to the HDHP.

Spousal Exclusion: a spouse is ineligible for the SMC health plan if the spouse has coverage available from another employer whether employed on a part-time or full-time basis.

Opt-Out Option: the College will compensate full-time employees \$250 a quarter if they elect to opt-out of the College's health insurance plan.

MEDICAL ADMINISTRATOR: PRIORITY HEALTH, BLUE CROSS BLUE SHIELD

OUT OF MI NETWORK: CIGNA OPEN ACCESS PLUS, BCBS STATE CARRIERS

Plan Type Vendor Plan Name	PPO		HDHP	
	PRIORITY HEALTH	BLUE CROSS BLUE SHIELD MI	PRIORITY HEALTH	BLUE CROSS BLUE SHIELD MI
	PRIORITY 500 PHSO1	ENHANCED 1000 173	PRIORITY HSA 3000 PHSO2	VALUE HSA 3000 186/187
	In-Network	In-Network	In-Network	In-Network
Individual Deductible	\$500	\$1,000	\$3,000	\$3,000
Family Deductible	\$1,000	\$2,000	\$6,000 (\$3,500)	\$6,000
Embedded or Agg deductible?	Embedded	Embedded	Embedded	Aggregate
Coinsurance (Insurance Pays)	90%	100%	100%	100%
Individual Coinsurance Max	\$1,000	N/A	N/A	N/A
Family Coinsurance Max	\$2,000	N/A	N/A	N/A
Individual Out of Pocket Max	\$3,000	\$3,000	\$6,350	\$6,350
Family Out of Pocket Max	\$6,000	\$6,000	\$9200 per member in a family plan \$12700 per family	\$6350 per member in a family plan \$12700 per family
Preventative Care	100% covered	100% covered	100% covered	100% covered
Primary Care Physician Office	\$20 copay	\$20 copay	100% after deductible	100% after deductible
Specialist Office Visit	\$20 copay	\$20 copay	100% after deductible	100% after deductible
Urgent Care Visit	90% coinsurance	100% covered after \$20 copay	100% after deductible	100% after deductible
Emergency Room	\$50 copay	\$50 copay	100% after deductible	100% after deductible
Chiropractic	90% coinsurance, limited to 30 visits PMPY	100% covered, limited to 24 visits PMPY	100% after deductible, limited to 30 visits PMPY	100% after deductible, limited to 12 visits PMPY
PT/OT/Speech combined	90% coinsurance, limited to 60 combined visits PMPY	100% after deductible, limited to 60 combined visits PMPY	100% after deductible, limited to 30 visits PMPY	100% after deductible, limited to 30 combined visits PMPY
Generic	\$10 copay	\$10 copay	\$10 copay after deductible	\$10 copay after deductible
Preferred Brand	\$40 copay	80% covered (\$80 max)	80% after deductible (\$80 max)	\$40 copay after deductible
Non-Preferred Brand	\$40 copay	80% covered (\$100 max)	80% after deductible (\$100 max)	\$80 copay after deductible
Preferred Specialty	\$40 copay	80% covered (\$80 max)	80% after deductible (\$80 max)	\$40 copay after deductible
Non-Preferred Specialty	\$40 copay	80% covered (\$100 max)	80% after deductible (\$100 max)	\$80 copay after deductible
Mandatory Mail	N	N	N	N
Mail Order Prescriptions (90 Days)	2x	2x	2x	2x

*The Priority Health HDHP is an embedded deductible plan, meaning individuals enrolled as part of a two person or family plan need only meet the amount shown in parentheses.

HEALTH SAVINGS ACCOUNT (HSA)

A health savings account (HSA) is a tax-exempt trust or custodial account the College has set up to reimburse eligible medical expenses.

What are the benefits of an HSA?

- You can claim a tax deduction for contributions you or someone other than your employer makes to your HSA even if you do not itemize your deductions on Form 1040.
 - Contributions to your HSA may be excluded from your gross income.
 - The contributions remain in your account until you use them.
 - The interest or other earnings on the assets in the account are tax-free.
 - Distributions are tax-free if you pay for qualified expenses. Qualified expenses are payments that would generally go toward the medical and dental deductibles.
- An HSA stays with you if you change employers or leave the work force.

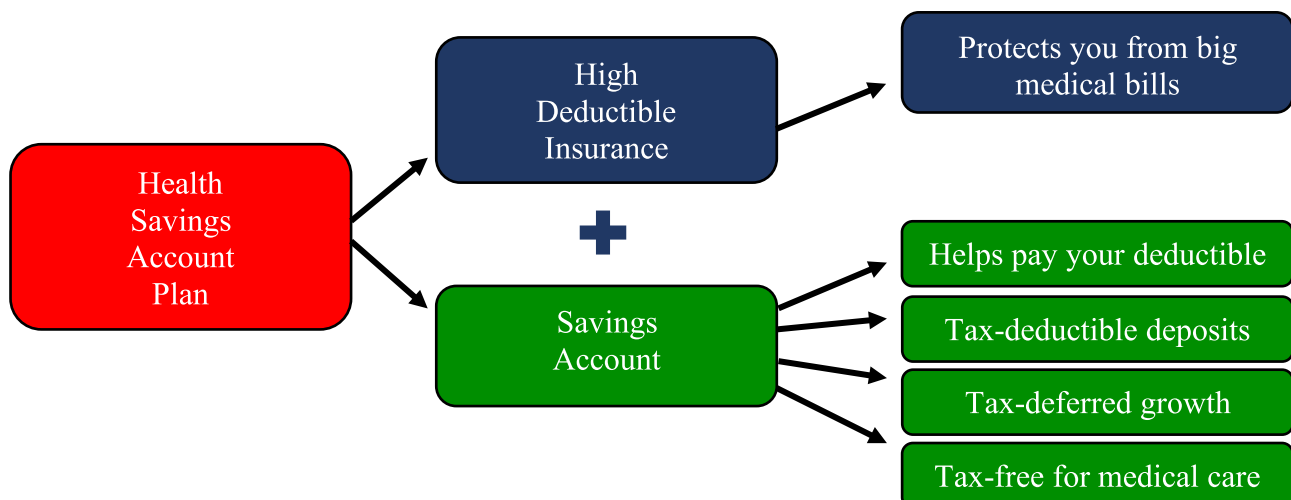
Qualifying for an HSA: To qualify for an HSA, you must meet the following requirements:

- You must be covered under a High Deductible Health Plan (HDHP)
- You have no other health coverage except what is permitted under *Other Health Coverage*. You (and your spouse, if you have family coverage) generally cannot have any other health coverage that is not a HDHP. However, you can still be an eligible individual even if your spouse has non-HDHP coverage provided you are not covered by that plan.
- You are not enrolled in Medicare.
- You cannot be claimed as a dependent on someone else's 2027 tax return.

A Health Savings Account is a smart and convenient way to offset current health expenses via the HDHP and plan for the future. In 2027, you and your employer combined may contribute up to \$4,500 annually for single contribution and \$9,000 annually for family contribution (individuals age 55 and older have the option to make catch up contributions of up to \$1,000).

Southwestern Michigan College will invest \$1,000 / year for you as a Single subscriber, \$1,500 / year for you as a Two Person subscriber, and \$2,000 / year for you as a Family subscriber.

You will **not** be taxed on the total balance of your HSA over time. These contributions **do** roll over year after year and allow one to build a sizeable reserve for future medical expenses.



DENTAL PLAN

Our new dental carrier is ADN/DenteMax. Regular dental checkups are important to your overall health and can reveal early indications of serious conditions. An annual oral exam can help keep your teeth and gums healthy throughout your life.

This dental plan allows you to see any dentist; however, you will maximize your benefits by visiting a dentist in either ADN or DenteMax's networks. The DenteMax name may be more familiar to dentists in our area.

Dependents are now also eligible until age 26.

The information below highlights some of the plan features. Please refer to the Benefit Plan Certificate for complete details.



PLAN FEATURES	DENTAL PPO	
Calendar Year Deductible	\$50 INDIVIDUAL / \$150 FAMILY	
Annual Maximum	\$1,000	
Orthodontic Services	50% (\$750 LIFETIME MAX UP TO AGE 19)	
SERVICES	IN-NETWORK PROVIDER	OUT-OF-NETWORK PROVIDER*
Preventive Services	100% OF MAX ALLOWANCE	100% OF PAY TO CHARGE
Minor Services	80% OF MAX ALLOWANCE	80% OF PAY TO CHARGE
Major Services	50% OF MAX ALLOWANCE	50% OF PAY TO CHARGE

Your Monthly Payroll Contributions for this plan are:

Employee Only: \$8

Employee + 1: \$12

Employee + Family: \$20

PLEASE NOTE: In-network dentists have agreed to accept discounted payments for services but out-of-network dentists can bill you for charges above what may be usual & customary

VISION PLAN

EyeMed is our vision provider. Routine eye exams are recommended once every 12 months and can lead to early detection of vision problems and other diseases such as diabetes, high blood pressure and multiple sclerosis.

This vision plan allows you to see any vision provider; however, you will maximize your benefits by visiting an eye care provider in EyeMed's network.

Dependents are eligible until age 25 if they are full time students.

The information below highlights some of the plan features; please refer to the Benefit Plan Certificate for full coverage information.

This plan is offered by the college at no cost to you.



PLAN FEATURES	IN-NETWORK PROVIDER	OUT-OF-NETWORK PROVIDER*
Eye Exam (1x every 12 months)	\$10 COPAY	\$40 ALLOWANCE
Lenses (1x every 12 months)		
Single	\$15 COPAY	\$30 ALLOWANCE
Bifocal	\$15 COPAY	\$50 ALLOWANCE
Trifocal	\$15 COPAY	\$70 ALLOWANCE
Contact Lenses (1x every 12 months)		
Fitting and Evaluation	100% AFTER MAX COPAY OF \$40	NOT COVERED
Elective (conventional/disposable)	\$130 ALLOWANCE	\$91 ALLOWANCE
Medically Necessary	\$0 COPAY	\$210 ALLOWANCE
Frames (1x every 24 months)	\$130 ALLOWANCE + 20% OF AMOUNTS OVER \$130	\$91 ALLOWANCE

40% off

additional pairs of glasses and a 15% discount on conventional lenses once funded benefit is used – an industry exclusive

Lasik

Lasik or PRK from US Laser Network
15% off retail price or 5% off promotional price

20% off

any item not covered by the plan, including non-prescription sunglasses

Hearing Care

Amplifon Hearing Health Care Network
40% off hearing exams and a low price guarantee on discounted hearing aids



LONG TERM DISABILITY & LIFE INSURANCE

All full time staff and faculty are covered by Southwestern Michigan College's Long Term Disability Plan offered through The Standard Life Insurance Company. Some of the plan's benefits are outlined below. For full coverage details please refer to the benefit plan certificate.



Elimination Period	180 days accumulated over 360 days
Monthly Benefit	60% of monthly income
Maximum Monthly Benefit	\$5,513
Minimum Monthly Benefit	\$100
Definition of Disability	24 months own occupation
Partial Disability Benefit	Lesser of: Employee's predisability income minus other income benefits including Partial Disability Employee's predisability income multiplied by the benefit percentage minus other income benefits except for Partial Disability
Survivorship Benefit	3 times benefit amount

Southwestern Michigan College also provides basic life insurance and accidental death and dismemberment (AD&D) insurance through The Standard at no cost to you. The information below highlights some of the plan features; please refer to the Benefit Plan Certificate for full coverage information.

- **LIFE INSURANCE**: 1.5x your annual earnings, up to \$50,000, rounded to the next higher \$1,000
- **ACCIDENTAL DEATH AND DISMEMBERMENT (AD&D)**: AD&D provides benefits for an accidental bodily injury that directly causes dismemberment. You will receive 50% of your life insurance amount for the loss of one member (hand, foot, eye) and 100% for the loss of two or more members. In the event that death occurs from a covered accident, both the Life and AD&D benefit would be payable.
- **ACCELERATED BENEFIT**: If you have been diagnosed with a terminal illness and life expectancy is 12 months or less, you can receive 75% of the life benefit in advance. You can utilize this money for expenses incurred that are not covered by other insurance for your care. Please note your death benefit would be reduced by the amount taken through the accelerated benefit.

SUPPLEMENTAL OPTIONS

Accident Indemnity Plan

- Coverage for injuries 24 hours per day
- Wellness benefit pays \$60 per year
- Benefits include: emergency treatment, ambulance service, hospitalization, physical therapy, specific injury & follow-up treatment



Cancer Indemnity Plan

- First occurrence benefit pays \$5,000 and increases \$500 per year
- Hospital benefit pays \$200 per day
- Radiation and Chemotherapy benefit pays \$350 - \$600 per week
- Wellness benefit pays \$75 per year, per person

Critical Care

- First occurrence benefit pays \$5,000 and increases \$500 per year
- Reoccurrence benefit pays \$2,500
- Hospital benefit pays \$300 per day

Short Term Disability

- 60% of weekly salary up to \$500
- Coverage begins on the 1st day of disability due to accidental injury; 8th consecutive day of disability due to sickness
- Maximum benefit ~26 weeks
- Note: Extended waiting period; This applies if you do not apply for this coverage within 31 days of becoming eligible. The extended waiting period is 60 days for any qualifying disability during the first 12 months of coverage.



Voluntary Life Insurance

- You have the option to purchase additional life insurance in the amount of \$25,000, \$50,000, \$100,000, or \$125,000.
- The premium you pay for additional life insurance is dependent on your age
- New hires may elect amounts up to the \$125,000 Guaranteed Issue without being subject to medical underwriting



ADDITIONAL BENEFITS

Tuition Remission

Employees and family members (children under the age of 24 at matriculation) are eligible for free tuition for any SMC semester length courses. Family members are defined as a spouse and unmarried sons or daughters, including natural or adopted children of either the employee or the spouse.

All eligible can receive the tuition remission benefit concurrently. For example, Joe has 2 children under the age of 24 who would like to attend SMC at the same time. Joe is an adjunct faculty member who is teaching 10 contact hours. Each of Joe's children will get 10 contact hours, tuition free.

Tuition Reimbursement

College employees can be reimbursed for courses taken outside of Southwestern Michigan College. The program will not award more than \$5,250 in any calendar year and has a personal lifetime maximum of \$15,000 towards undergraduate and graduate degree programs, and \$25,000 towards a doctorate degree program. Certifications are excluded from lifetime maximum reimbursement.

The unabridged version and full policies of the above additional benefits may be found on SMC Wired under the Human Resources tab.

Employee Assistance Program (EAP)



AllOne Health delivers a whole health EAP that combines human-led care, digital access, and continuity of care – closing every gap traditional programs leave open. Where most EAPs rely on delayed referrals and complicated navigation, AllOne Health connects employees to the right support in seconds, with 24/7 live clinicians, same-day or next-day scheduling, and a complete continuum of services: mental health counseling, financial consultation, legal referrals, Work-Life support, and more.

Membership to the Student Activity Center

To assist in enhancing the wellness of Southwestern Michigan College employees, the College also offers free membership to the Student Activity Center for all employees and for the spouses covered on the College's health insurance plan.

ADDITIONAL BENEFITS

Sick/Personal Hours

Full-time employees are granted 10 days of sick leave annually. Unused days can accumulate for up to 100 workdays. For more details, reference the SMC Employee Handbook.

Adjunct Faculty, Part Time Administrative, Employment Pool and Student Employees will accrue 1 hour of sick time for every 30 hours worked. For more details, reference the SMC Employee Handbook.

Vacation

Vacation hours are accrued on the 2nd pay of the month and are based off your original hire date. At the end of the fiscal year, staff members may carry forward no more than the maximum amount of vacation that they accrued in the prior fiscal year.

Full-Time Exempt Staff

- 0-3 Years of Services will accrue 12 hours per month – 18 days per fiscal year
- 3+ Years of Service will accrue 15.34 hours per month – 23 days per fiscal year

Full-Time Non-Exempt Staff

- 0-3 Years of Services will accrue 8.67 hours per month – 13 days per fiscal year
- 3+ Years of Service will accrue 12 hours per month – 18 days per fiscal year

Paid Holidays

- Good Friday
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day (includes Wednesday before and Friday after)
- Winter Break (December 24th through January 1st)



When Independence Day falls on a Saturday or Sunday, the following Monday or preceding Friday shall be observed as a holiday at the discretion of the College President.

RETIREMENT PLANS

Full-time faculty, administrative, or professional staff have the option to choose a retirement plan.

MPSERS: MICHIGAN PUBLIC SCHOOL EMPLOYEE RETIREMENT SYSTEM

- Employee and Employer Contribution
- Monthly Pension (upon reaching the eligibility)
- Defined Contribution Plan Available
- Vesting Period (10 Service Credits); For more information visit Pickmiplan.org
- Annual on-campus meeting with a retirement representative

TIAA: TEACHERS INSURANCE AND ANNUITY ASSOCIATION OF AMERICA

- Employee Contribution is 4%
- Employer Contribution is 14%
- 100% Vested on Day One
- Portable
- On-Campus Meeting with a Certified Financial Planner



**MICHIGAN OFFICE OF
RETIREMENT SERVICES**
Big Plans. Small Steps.



Notes

This guide provides highlights of our benefit options to support your understanding of our plans; and to allow you to make the best benefit decisions for you and your family. This guide is an overview, and is not a complete description of your benefits. For detailed information relating to coverage policies, conditions, or exclusions and limitations, please refer to the carrier Benefit Summaries, Summary Plan Description (SPD) and Benefit Plan Certificates, which suffice as the final determined plan provisions.

