

# Pine Street Inn's Comprehensive Benefit Offerings

All active full-time or part-time employees regularly scheduled to work 24 hours or more per week are eligible to participate in Pine Street Inn's benefit offerings

For more information, please contact:

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## Health Insurance Co-Pays:

Office Visit: \$15 per visit  
Emergency Room: \$75 per visit  
Hospitalization: 100% coverage  
Vision: \$15 co-pay. 1 visit per year. Up to 35% discount at select providers.  
\$150/yr fitness club reimbursement  
Prescriptions: \$10/\$20/\$35 depending on tier  
Chiropractic: \$15 (up to 12 visits per calendar year)  
Mental Health: \$15 co-pay. 24 visits per calendar year  
    Inpatient: 100% coverage @ participating facility, 60 days per calendar year  
    Outpatient: \$15 co-pay, 24 visits per calendar year  
Substance Abuse:  
    Inpatient: 100% coverage  
    Outpatient: \$15 per visit. Tufts pays up to \$500 per year



## Health Insurance Co-Pays:

Office Visit: \$10 per visit  
Emergency Room: \$50 per visit  
Hospitalization: 100% coverage  
Ambulatory Surgery: Covered in full  
Prescriptions: \$10/\$20/\$30 depending on tier  
Chiropractic: Not applicable  
Vision: 1 visit per year. Up to 40% discount thru Cambridge Eye & Harvard Vanguard  
Mental Health: \$10 co-pay. Counseling: 8 visits per year w/o authorization  
    Inpatient: 100% coverage at participating providers  
    Outpatient: \$10 co-pay



## Dental Coverage:

**Preventative Procedures:** 100% coverage

Cleanings, x-rays, fluoride, sealants, etc

**Basic Procedures:** 100% with \$25 deductible/yr

Fillings, root removal, denture repairs, etc.

**Major Procedures:** 80% with \$25 deductible/yr

Dentures, crowns, etc.

**Orthodontics:** No deductible

Exam, appliances

Lifetime max of \$1,000

**Benefit Maximum:** *Calendar Year: \$1,000*

### Other Benefits:

Living Healthy Vision

Living Healthy Naturally

Weight Watchers

Blue Care Line

Living Healthy Babies



## Vision Coverage & Frequency of Service:

Vision Exam - One visit every 12 months; Lenses once every 12 months & Frames once every 24 months;

Vision Exam:

In-Network: 100% after a \$10 co-payment

Out-of-Network: Up to \$46

Single Vision Lenses:

In-Network: \$10 co-payment

Out-of-Network: Up to \$42

Frames:

In-Network: \$120 allowance, 20% off balance over \$120 -Out-of-Network: Up to \$66

Contact Lenses:

In-Network: \$135 allowance, 15% off balance of over \$135

Out-of-Network: Up to \$78

Lasik & PRK: 15% off retail price

## DISABILITY INSURANCE

Pine Street Inn pays the premium for STD & LTD. It is at no cost to the employee.

Disability Insurances are provided by Cigna Insurance.

### Short-Term Disability Plan (STD)

**Benefit:** 60% of weekly salary

**Benefit Maximum:** \$1,000 per week

**Benefit Begins:** 15th day after accident, 15th day after sickness

**Benefit Duration:** 11 weeks

### Long-Term Disability Plan (LTD)

**Benefit:** 60% of basic monthly earnings

**Benefit Maximum:** \$7,500 per month

**Benefits Payable After:** 90 days of total or partial disability

**Benefit Duration:** To Social Security normal retirement age

**Partial Disability Benefit:** Included if disabled or if only able to work part-time and will earn less than 80% of income

**Own Occupation Protection:** 24 months

## 403(b) RETIREMENT PLAN

Employees may begin contributing to the plan at any time. Contributions can be as little as \$10 per pay period up to \$15,500 per year. To begin contributing, please contact Wachovia at 800-377-9188 or Gregg Andonian, Bay State Fiduciary Advisors, at 866-411-4015.

Pine Street Inn will make a contribution to the plan on your behalf after you have employed for one year as of 12/31. This is based on 1.2% of eligible wages & increases by 1.2% each year to the cap of 6%.



## FLEXIBLE SPENDING ACCOUNTS

A **Medical Care Spending Account** is an employer-sponsored benefit that allows you to pay for certain non-covered medical expenses such as co-pays for prescriptions and doctors office visits with your pre-tax dollars up to \$1,500 per year.

The **Dependent Care Spending Account** covers up to \$5,000 per year for childcare expenses incurred that allow you (and your spouse, if you are married) to work.

## EMPLOYEE ASSISTANCE PROGRAM

**Provided by CIGNA Behavioral Health  
Pine Street Inn pays the premium for this  
benefit. It is at no cost to the employee.**

**Benefit Overview:** There are times in our lives when we need a little help. Whatever the issue, our Employee Assistance Program is available 24 hours a day, 7 days a week, with support, guidance, and resources.

**EAP provides resources such as:**

- Online access - [www.cignabehavioral.com](http://www.cignabehavioral.com)
- Telephone consultations at 888-371-1125
- Three face-to-face visits per issue, per year
- A Free 30-minute legal consultation
- Healthy Rewards Discounts
- Secure Travel-Worldwide Assistance

**All services are:**

\*Free \*Confidential \*Available to your dependents and all members of your household



## LIFE INSURANCE

**Pine Street Inn pays the premium for the basic life insurance policy and AD&D.**

**CIGNA Basic Life Insurance**

**Benefit Amount:** Flat \$25,000

**Accidental Death & Dismemberment:** Included (\$25,000)

**Reduction Schedule:**

At age 75, benefits will reduce by 50% of the original amounts. Benefit will terminate when the insured person retires.

**CIGNA Supplemental Life Insurance**

(Employee pays rate based on policy amount & age)

**Benefit Amount:** Employees are eligible for coverage in increments of \$10,000 up to a maximum of 7 times your basic annual earnings or \$500,000. Guaranteed issue amount is the lesser of 4 times basic annual earnings or \$100,000.

**Maximum Benefit:** 7 times basic annual earnings to an overall maximum of \$500,000.

**Reduction Schedule:**

Benefits will reduce by:

\*35% @ age 65 \*25% @ age 70 \*15% @ age 75

**Spouse Coverage:** Available in increments of \$10,000 to a maximum of \$100,000. Guaranteed issue is \$30,000.

**Child(ren) Coverage:**

14 days to 6 months old: \$250

6 months to age 19 (25 if full-time student): \$10,000

Guarantee issue amount is \$10,000