SUNY RF BENEFITS UPDATE SUMMARY
November 2022

1.) 2023 OPEN ENROLLMENT PERIOD FOR RESEARCH FOUNDATION EMPLOYEES

The Health, Dental, Vision Care Plans and Flexible Spending Account open enrollment period for 2023 is **November 1 – November 30, 2022.** The October 2022 “Benefits Bulletin” will be mailed to the homes of all eligible RF employees. Please review the “2023 Health Care Plan Comparison and Biweekly Rates” in the benefits bulletin at [http://www.upstate.edu/hr/document/rf_special_bulletin.pdf](http://www.upstate.edu/hr/document/rf_special_bulletin.pdf)

During Open Enrollment you can do the following (no action is required if you are **NOT** making changes to your health, dental, or vision insurance):

- Make changes to your health insurance coverage (i.e. cancel coverage, enroll in coverage) or change plans (i.e. move from PPO to HMO).
- Enroll/re-enroll in Flexible Spending for 2022.

**NO ACTION IS NECESSARY IF YOU DO NOT WANT TO MAKE ANY CHANGES OTHER THAN ENROLLING IN FLEXIBLE SPENDING.**

To make changes for your health, dental and/or vision plans, as well as your life and/or short-term disability you will need log in to your RF Employee Self Service website at [www.rfsuny.org/selfservice](http://www.rfsuny.org/selfservice)
Research Foundation 2023 Bi-weekly Employee Rates are listed below based on option and type of coverage

- Cost sharing for individual coverage: 15% (employee) / 85% (RF)
- Cost sharing for dependent coverage: 30% (employee) / 70% (RF)

<table>
<thead>
<tr>
<th>Health Option</th>
<th>Individual</th>
<th>Employee and Spouse Employee</th>
<th>Employee &amp; Child(ren)</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>Empire Blue Cross PPO</td>
<td>$87.29</td>
<td>$273.88</td>
<td>$222.90</td>
<td>$435.42</td>
</tr>
<tr>
<td>Empire Blue Deductible PPO</td>
<td>$37.08</td>
<td>$173.45</td>
<td>$132.52</td>
<td>$284.95</td>
</tr>
<tr>
<td>MVP</td>
<td>$71.07</td>
<td>$256.81</td>
<td>$201.23</td>
<td>$299.98</td>
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</tbody>
</table>

*The out-of-network deductible, which is the amount you must pay before the plan shares the costs of out-of-network care with you, is $1,000 per individual and $2,500 per family. The out-of-network coinsurance limit, which is a cap on the amount you must pay for covered out-of-network care before the plan begins paying 100 percent of this care for the remainder of the calendar year, is $4,000 per individual and $10,000 per family.

2.) Flex Spending Information—Open Enrollment Period is 11/01/22 - 11/30/22

The Health Care Spending Account lets you set aside up to $3,050 for the 2023 tax year to pay for health care expenses that are not reimbursed by your health insurance or other benefit plan.

The Dependent Care Spending Account allows your family to set aside up to $5,000 in pre-tax salary for eligible child care, elder care, or disabled dependent care expenses that are necessary for you and your spouse, if you are married, to work. Again in 2023 the RF's employer contribution to the Dependent Care (FSA) for plan year 2023 ranges from $300-$800 to be added to an employee's dependent care account based on the employee's annual salary.
Enroll online by using RF Employee Self Service at www.rfsuny.org/selfservice no later than 11/30/22.

Prior to making your annual election in the health care FSA for 2023, for more detailed information please visit www.payflex.com.