CHAPMAN UNIVERSITY

2025 BENEFITS GUIDE

HEALTH BENEFITS

LIFE AND FAMILY

FINANCE AND SAVINGS

WELLNESS BENEFITS

CONTENTS

YOUR BENEFITS

Your benefits are an important part of your overall compensation. Chapman University is pleased to offer a comprehensive selection of quality benefits to protect your health, your family and your way of life.

Be a Responsible Health Care Consumer

While Chapman University is committed to sharing the cost of health care for our employees, you can help keep costs down by being a responsible health care consumer. It's about maintaining a healthy lifestyle, choosing in-network providers when appropriate, evaluating your health care choices when care is needed and using available resources wisely. You can make a difference!

About This Guide

This guide contains links to useful websites, tools and resources. Use your mouse or touchpad to click on the buttons along the top and bottom of the page to move around the guide.

BENEFITS-AT-A-GLANCE

BENEFITS	COVERAGE OPTIONS
Medical & Prescription	• Kaiser HMO (Southern CA only) • Cigna Select HMO – Inland Empire: Heritage Provider Network – Los Angeles County: Memorial Care, Heritage Provider Network and Providence St. Joseph Health Center – Orange County: Providence St. Joseph Hoag Health – San Diego County: Scripps • Cigna Full HMO (CA only) • Cigna Open Access Plus HDHP + HSA • Cigna PPO
Health Savings Account (HSA)	• Available to Cigna HDHP + HSA medical plan members
Dental	• Delta Dental DeltaCare USA • Delta Dental PPO
Vision	• VSP Basic • VSP Premier
Flexible Spending Accounts (FSAs)	• Health Care FSA • Limited-Purpose Health Care FSA for HSA participants • Dependent Care FSA
Life/AD&D	• Basic coverage for employee only • Supplemental coverage for employee plus family
Disability	• Long-term disability
Unum Voluntary Benefits	• Accident insurance, critical illness insurance and whole life insurance with a long-term care option
Employee Assistance Program (EAP)	• Counseling and work-life services through Health Advocate / The Standard
Voluntary Legal Plan	• Prepaid legal services through MetLife Legal Plans
Bright Horizons Care Advantage	• Back-up childcare and adult/eldercare; find babysitters, nannies, senior care resources and more
Spot Pet Insurance	• Coverage for your pet's veterinary care
Auto & Home Insurance	• Special rates and generous discounts on auto and home insurance through California Casualty
Valuable Extras	• ThrivePass Wellness Program • Life Services Toolkit • Healthy Rewards • Travel Assistance • ScholarShare 529 Program • Retirement Plans

EDUCATIONAL VIDEOS

Learn more about the following topics by visiting our Benefits Education Video Library:

- Benefits Terminology
- Qualifying Life Events
- Open Enrollment
- Comparing Medical Plan Types
- Choosing Your Provider
- Preventive Care
- Telehealth
- Where to Go for Care
- Benefits of Seeing a PCP Regularly
- Mental Health
- Prescription Drug Coverage
- GoodRx
- How to Read an EOB
- Health Savings Account (HSA)
- HSA Qualified Health Care Expenses
- Flexible Spending Account (FSA)
- HSA vs FSA
- Employee Assistance Program (EAP)
- Life Insurance
- Accident Insurance
- Critical Illness Insurance

ELIGIBILITY & ENROLLMENT

Eligible Employees

- Full-time Faculty and regular status employees who are regularly scheduled to work 30 or more hours per week may participate in all benefit programs offered by Chapman University.
- Full-time Faculty and regular status employees who are regularly scheduled to work 20 - 29 hours per week may participate in the Employee Assistance Program and Bright Horizons.

Eligible Family Members

Your eligible family members include:

- Legal spouse or registered domestic partner (RDP)
- Children under age 26, regardless of student or marital status
- Children age 26 or older who are disabled, unmarried and financially dependent on you may continue on your health coverage. You must provide certification of the child's disability annually.

Proof of Eligibility

To provide employees and their families with affordable, quality health coverage, Chapman University requires documentation demonstrating all covered dependents meet the eligibility criteria.

In addition, as part of the Affordable Care Act (health care reform), Chapman University is required to report health plan information to the Internal Revenue Service (IRS) each year. In order for Chapman University to satisfy this reporting requirement, you must provide a valid Social Security number for yourself and all covered dependent(s) when you enroll.

How to Enroll

Go to Working@Chapman and click the Employee Self Service link.

When Coverage Begins

Benefits become effective on the first day of the month following the date of regular status employment. Supplemental life elections that require Evidence of Insurability become effective on the date of approval by the insurance carrier date.

Making Election Changes

The choices you make during enrollment will stay in place through December 31, 2025 (assuming you continue to meet eligibility requirements). Your elections cannot be changed until the next Open Enrollment (usually held in November each year) unless you have a qualifying event as defined by the IRS, such as marriage, divorce, birth/adoption of a child or gain/loss of other coverage.

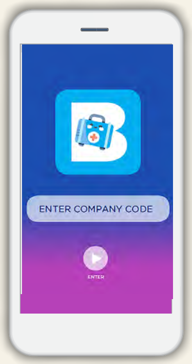
BENEFITS APP

Access your benefits information anytime, anywhere, with the Benefit Spot mobile app.

To get started:

1. Download **Benefit Spot** on the Apple App Store or Google Play
2. Enter company code: **Chapman**

NOTE: The company code is case-sensitive.



BENEFIT COSTS (Monthly)

Chapman University is committed to providing you with quality benefits at affordable costs.

- **University-paid benefits:** Chapman pays 100% of the premium costs for basic vision coverage, basic life/AD&D, long-term disability, Healthy Rewards, travel assistance and the Employee Assistance Program (EAP).
- **Cost-shared benefits (pre-tax*):** Chapman pays the majority of your medical, dental and premier vision premium costs.
- **Employee-paid benefits:** You pay 100% of the costs for FSAs (pre-tax*), supplemental life/AD&D, auto and home insurance, and the legal plan (after-tax**).

MEDICAL					
Coverage Tier	**Kaiser HMO (Southern CA only)**	**Cigna Select HMO (Inland Empire, Los Angeles, Orange and San Diego County only)**	**Cigna Full HMO (CA only)**	**Cigna Open Access Plus HDHP + HSA**	**Cigna PPO**
Employee Only	$7.00	$7.00	$51.00	$105.00	$400.00
Employee + 1	$110.00	$110.00	$480.00	$460.00	$1,200.00
Employee + 2 or More	$220.00	$220.00	$680.00	$660.00	$1,700.00

	DENTAL		VISION	
Coverage Tier	**Delta Dental DeltaCare USA**	**Delta Dental PPO**	**VSP Basic**	**VSP Premier**
Employee Only	$7.24	$28.28	$0.00	$4.00
Employee + 1	$18.00	$62.70	$0.00	$6.30
Employee + 2 or More	$24.62	$89.84	$0.00	$9.56

Registered Domestic Partner Rates: Be aware that there are tax consequences of covering a registered domestic partner on your health coverage benefits.

* Pre-tax means that the deduction is made before taxes are withheld from your paycheck. This process reduces your taxable earnings, resulting in a tax break.

** After-tax means that the deduction is made after taxes are withheld from your paycheck, and therefore, does not reduce taxable income.

SUPPLEMENTAL LIFE	
Employee & Spouse/DP	
Age	Rate per $1,000
Under 25	$0.05
25 - 29	$0.06
30 – 34	$0.08
35 – 39	$0.09
40 – 44	$0.09
45 – 49	$0.14
50 – 54	$0.22
55 – 59	$0.42
60 – 64	$0.64
65 – 69	$1.23
70+	$2.01
Child(ren)	
$0.20 per $1,000 (covers all your eligible children)	

SUPPLEMENTAL AD&D

Employee Only:
$0.027 per $1,000

Employee + Family:
$0.046 per $1,000

VOLUNTARY LEGAL PLAN

$16.50 per month

MEDICAL PLANS

Chapman University offers you a choice of FIVE different medical plans. Review our Selecting Your Medical Plan flyer to help you decide which plan is best for you. The following table provides a high-level overview of the most commonly used medical benefits.

- **Kaiser HMO (Southern CA only)**
- **Cigna Select HMO**
  - Inland Empire: Heritage Provider Network
  - Los Angeles County: Memorial Care, Heritage Provider Network and Providence St. Joseph Health Center
  - Orange County: Providence St. Joseph Hoag Health
  - San Diego County: Scripps
- **Cigna Full HMO (CA only)**
- **Cigna Open Access Plus HDHP + HSA**
- **Cigna PPO**

KEY MEDICAL BENEFITS	KAISER HMO (Southern CA only)	CIGNA SELECT NETWORK HMO (Inland Empire, Los Angeles, Orange and San Diego County only)	CIGNA FULL NETWORK HMO (CA only)	CIGNA OPEN ACCESS PLUS HDHP + HSA		CIGNA PPO	
	In-Network Only	In-Network Only	In-Network Only	In-Network	Out-of-Network	In-Network	Out-of-Network
Primary Care Physician (PCP) Selection Required	Yes	Yes	Yes	No		No	
Chapman's Annual Health Savings Account (HSA) Contribution	N/A	N/A	N/A	$750/Employee Only $1,500/Employee + Family		N/A	
Annual Deductible	None	None	None	$1,650/Individual[1] $3,300/Individual in Family[1] $3,300/Family[1]	$1,650/Individual[1] $3,300/Individual in Family[1] $3,300/Family[1]	$1,000/Individual[2] $2,000/Family[2]	$2,000/Individual[2] $4,000/Family[2]
Net Annual Deductible (Deductible minus Chapman's HSA contribution)	N/A	N/A	N/A	$900/Individual[1] $1,800/Individual in Family[1] $1,800/Family[1]		N/A	

1. If you enroll one or more family members, each member only needs to meet the "individual in family" deductible before the plan will begin paying benefits for any one individual. Once the "family" deductible has been met, all family members will be considered as having met their deductible for the remainder of the year.
2. If you enroll one or more family members, each member only needs to meet the "individual" deductible before the plan will begin paying benefits for any one individual. Once the "family" deductible has been met, all family members will be considered as having met their deductible for the remainder of the year.

Medical Plans (continued)

KEY MEDICAL BENEFITS	KAISER HMO (Southern CA only)	CIGNA SELECT NETWORK HMO (Inland Empire, Los Angeles, Orange and San Diego County only)	CIGNA FULL NETWORK HMO (CA only)	CIGNA OPEN ACCESS PLUS HDHP + HSA		CIGNA PPO	
	In-Network Only	In-Network Only	In-Network Only	In-Network	Out-of-Network	In-Network	Out-of-Network
Annual Out-of-Pocket Maximum	$1,500/Individual[3] $3,000/Family[3]	$1,000/Individual[3] $2,000/Family[3]	$2,000/Individual[3] $4,000/Family[3]	$3,100/Individual[4] $3,300/Individual in Family[4] $6,200/Family[4]	$5,200/Individual[4] $5,300/Individual in Family[4] $10,400/Family[4]	$4,000/Individual[3] $8,000/Family[3]	$8,000/Individual[3] $16,000/Family[3]
Office Visit (Physician & Specialist)	$15 copay	$15 copay	$20 copay	10%*	30%*	$15 copay	40%*
Routine Preventive Care Services	No charge	No charge	No charge	No charge	30%*	No charge	40%*
Outpatient Diagnostic Lab & X-ray	No charge	No charge	No charge	10%*	30%*	20%*	40%*
Outpatient Advanced Imaging (MRI, MRA, CAT Scan, PET Scan, etc.)	No charge	$100 copay	$100 copay	10%*	30%*	20%*	40%*
Emergency Room (Copay waived if admitted)	$100 copay	$100 copay	$150 copay	10%*		$150 copay*	
Urgent Care Facility (Copay waived if admitted, excluding Kaiser)	$15 copay	$20 copay	$20 copay	10%*		$20 copay*	
Inpatient Hospital Admission	$100 copay	$100 copay	$200 copay	10%*	30%*	20%*	40%*

*** Deductible must be met before the Plan begins to pay.**

Coinsurance percentages and copay amounts shown in the above plan descriptions represent the amount that the member is responsible for paying.

3. If you enroll one or more family members, each member only needs to meet the "individual" out-of-pocket maximum before the plan starts to pay 100% of eligible expenses for any one individual. Once the "family" out-of-pocket maximum has been met, all family members will be considered as having met their out-of-pocket maximum for the remainder of the year.
4. If you enroll one or more family members, each member only needs to meet the "individual in family" out-of-pocket maximum before the plan starts to pay 100% of eligible expenses for any one individual. Once the "family" out-of-pocket maximum has been met, all family members will be considered as having met their out-of-pocket maximum for the remainder of the year.

Medical Plans (continued)

KEY MEDICAL BENEFITS	KAISER HMO (Southern CA only)	CIGNA SELECT NETWORK HMO (Inland Empire, Los Angeles, Orange and San Diego County only)	CIGNA FULL NETWORK HMO (CA only)	CIGNA OPEN ACCESS PLUS HDHP + HSA		CIGNA PPO	
	In-Network Only	In-Network Only	In-Network Only	In-Network	Out-of-Network	In-Network	Out-of-Network
Outpatient Surgery	$15 copay	No charge	No charge	10%*	30%*	20%*	40%*
Chiropractic Care	$15 copay (30 visits per year)	$15 copay (PCP referral required)	$20 copay (PCP referral required)	10%*	30%*	$15 copay	40%*
Mental Health & Substance Abuse							
• Inpatient	$100 copay	$100 copay	$200 copay	10%*	30%*	20%*	40%*
• Outpatient Visit	$15 copay	$15 copay	$20 copay	10%*	30%*	$15 copay	40%*
Outpatient Rehab Visit	$15 copay	$15 copay	$20 copay	10%*	30%*	$15 copay	40%*
PRESCRIPTION DRUGS (30-day supply at retail pharmacy)							
Generic	$10 copay	$10 copay	$10 copay	$10 copay*	30%*	$10 copay	Not covered
Preferred Brand-Name	$25 copay	$20 copay	$20 copay	$30 copay*	30%*	$20 copay	Not covered
Non-preferred Brand-Name	$25 copay (subject to approval)	$35 copay	$35 copay	$50 copay*	30%*	$35 copay	Not covered
Specialty	20% to a $150 maximum copay	$100 copay	$100 copay	$100 copay*	30%*	$100 copay	Not covered
Mail Order Service	2x Retail copay (100-day supply)	2x Retail copay (90-day supply)	2x Retail copay (90-day supply)	2x Retail copay* (90-day supply)	N/A	2x Retail copay (90-day supply)	N/A

*** Deductible must be met before the Plan begins to pay.**

Coinsurance percentages and copay amounts shown in the above plan descriptions represent the amount that the member is responsible for paying.

DENTAL PLANS

Chapman University offers you a choice between two different dental plans through Delta Dental.

DeltaCare USA HMO Plan

Under the DeltaCare USA HMO plan, you choose a primary dental provider to manage your care. If you are a new member, Delta will automatically assign a provider to you and your enrolled family members based on your zip code. You can change your dentist by contacting Delta Member Services. With this plan, there are no charges for most preventive services, no claim forms and no deductibles. Reduced, pre-set charges (copays) apply to services.

PPO Plan

With the PPO plan, you have the freedom to use the provider of your choice, with greater cost savings in-network. PPO providers have agreed to charge members reduced, contracted fees and will file all claims for you. You may also go out-of-network and use Delta Dental Premier dentists or non-Delta dentists but you will have higher out-of-pocket costs.

KEY DENTAL BENEFITS	DELTACARE USA HMO	PPO	
	In-Network Only	In-Network[1]	Out-of-Network[1]
Annual Deductible	None	$50/Individual - $150/Family	
Office Visit Copay	$5 for observation only	None	
Annual Maximum Benefit	N/A	$2,000 per Individual	
Diagnostic & Preventive Procedures • Exams, cleanings, X-rays, fluoride	No charge for most preventive services	Plan pays 100%	Plan pays 100%
Basic Procedures • Fillings, extractions, sealants, periodontics, root canals, oral surgery	You pay copays ranging from $0 - $220, depending on service received	Plan pays 90%*	Plan pays 80%*
Major Procedures • Crowns, inlays, onlays, cast restorations, bridges, dentures, implants (PPO plan only)		Plan pays 60%*	Plan pays 50%*
Orthodontia • Comprehensive treatment	$1,900 (adult) $1,700 copay (under age 19)	**Children only:** Plan pays 50%* up to a lifetime maximum of $1,000 per child	

*** Deductible must be met before the Plan begins to pay.**

1. Reimbursement is based on PPO contracted fees for PPO dentists; Delta Dental Premier contracted fees for Premier dentists and the program allowance for non-Delta Dental dentists.

The table above provides a high-level overview of the most commonly used dental benefits. Keep in mind that certain exclusions and limitations may apply.

VISION PLANS

Chapman University offers you a choice between two different vision plans through VSP.

Vision services can be provided by any VSP participating provider or from a provider of your choice; however, you receive the highest level of benefits and save on out-of-pocket costs when you use VSP Signature providers. VSP has one of the largest networks of private practicing optometrists, ophthalmologists and opticians. Additionally, VSP's network includes retail chain affiliate provider Costco Optical.

KEY VISION BENEFITS	BASIC PLAN		PREMIER PLAN	
	In-Network	Out-of-Network Reimbursement	In-Network	Out-of-Network Reimbursement
Vision Exam	$25 copay		$15 copay	
	One exam every 12 months		**One exam every 12 months**	
Lenses	Covered in full	Up to $50 - $125, depending on lenses	Covered in full	Up to $50 - $125, depending on lenses
	One pair every 24 months		**One pair every 12 months**	
Frame	• **$150 - $170** allowance, depending on frame • **$80** allowance at Costco • 20% off amount over the allowance	Up to $70	• **$175 - $195** allowance depending on frame • **$95** allowance at Costco • 20% off amount over the allowance	Up to $70
	One set every 24 months		**One set every 24 months**	
Contact Lenses Contacts are in lieu of lenses & frames benefit	• Up to $60 copay for contact lens exam • **$150** allowance for contacts	Up to $105 for contacts and contact lens exam	• Up to $60 copay for contact lens exam • **$175** allowance for contacts	Up to $105 for contacts and contact lens exam
	Once every 24 months		**Once every 12 months** If you choose contacts instead of eyeglasses, you will be eligible for a frame 12 months from the date the contacts were obtained.	
Laser Vision Correction (LASIK)	15% off the regular price, or 5% off the promotional price	Not covered	15% off the regular price, or 5% off the promotional price	Not covered

Hearing Aids through TruHearing — TruHearing offers VSP members free membership and deep discounts on some of the most popular digital hearing aids on the market. Visit truhearing.com/vsp/ to learn more.

The table above provides a high-level overview of the most commonly used vision benefits. Keep in mind that certain exclusions and limitations may apply.

CHAPMAN UNIVERSITY

FLEXIBLE SPENDING ACCOUNTS (FSA)

Chapman provides you with an opportunity to participate in the health care and/or dependent care flexible spending accounts (FSAs) administered through WEX.

An FSA is a tax-favored program that lets you set aside money for eligible health care and/or dependent day care expenses. IRS rules allow you to contribute to your account(s) through payroll deductions on a pre-tax basis. The end result is that you decrease your taxable income and increase your take-home pay. Use the FSA calculator to estimate your expenses and calculate your savings. Here's how the FSAs work:

❶ You estimate how much you think your health care and/or dependent care expenses might be for the 2025 calendar year (or portion thereof, depending on your effective date of coverage). Then you decide how much you want to put into your account(s), subject to the plan limit.

❷ Your contributions will be deducted from your paycheck in equal installments throughout the year and deposited into your account(s).

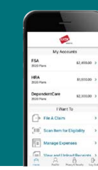
❸ As you incur eligible expenses throughout the year, fill out an FSA claim form and attach proper documentation and fax, email or mail it to Discover Benefits. Your claim will be processed and you will be reimbursed from your account.

FSA Debit Card: For health care expenses, you may also use your WEX FSA Debit Card to pay at the point of sale. You will not be paying out of pocket, so there's no need to fill out a claim form and wait for reimbursement.

The "Use It Or Lose It Rule"

If you have unused funds in your account at the end of the year, the IRS requires that you claim them—or they will be forfeited.

GET THE APP! Use the Benefits by WEB mobile app to manage your FSA from your smartphone. Check your account balance, file a claim, upload a photo of your receipt, view account activity, plus much more!



Health Care FSA

You may contribute up to the IRS maximum in pre-tax dollars to cover a variety of eligible health care expenses that are not reimbursed by any other source and are not claimed on your income tax return. You may be reimbursed for expenses incurred by you, your spouse and your children up to age 26. **The entire amount you set aside will be available to use on your coverage effective date.** View the searchable list of eligible health care expenses to see what kinds of expenses are eligible.

NOTE: If you enroll in the PPO + HSA medical plan and elect the health savings account (HSA), you may only participate in the **limited-purpose health care FSA**. This type of FSA allows you to be reimbursed for eligible dental, orthodontia and vision expenses while preserving your HSA funds for eligible medical expenses.

Dependent Day Care FSA

You may contribute up to the IRS maximum of $5,000 in pre-tax dollars to cover eligible dependent day care expenses for your children under age 13, as well as adults who are physically or mentally incapable of caring for themselves and are your tax dependents. If you are married and filing separate tax returns, your maximum contribution is $2,500; if your spouse also participates in a dependent care FSA, your combined contribution for both accounts is $5,000. **Unlike the health care FSA, funds are available as they are deducted from your paycheck.** View the searchable list of dependent day care expenses to see what kinds of expenses are eligible.

CHAPMAN UNIVERSITY

LIFE AND AD&D

Life insurance provides your named beneficiary(ies) with a financial benefit in the event you pass away. **Accidental death and dismemberment (AD&D) insurance** provides specified benefits for a covered accidental bodily injury that directly causes dismemberment.

BASIC LIFE/AD&D (University-Paid)	
Employee	Two (2) times your annual base salary up to a maximum of $800,000.*
SUPPLEMENTAL LIFE (Employee-Paid)	
Employee	$10,000 increments up to $500,000, not to exceed five (5) times your annual salary.* (Guarantee Issue Limit: $200,000)**
Spouse/ RDP	$5,000 increments up to $200,000, not to exceed 50% of employee amount. (Guarantee Issue Limit: $50,000)**
Child(ren)	$2,500 increments up to $10,000 (live birth up to age 26)
SUPPLEMENTAL AD&D (Employee-Paid)	
Employee	$10,000 increments up to a maximum of $1,250,000 (not to exceed 10 times your annual salary)*
Employee + Family	Spouse/RDP: Coverage is 60% of the amount you choose for yourself (50% if you have eligible children). Child(ren): Coverage is 15% of the amount you choose for yourself (10% if you have a Spouse/RDP). The maximum benefit per child is $50,000.

Premium Rates – The supplemental life and supplemental AD&D premium rates can be found on page 5.

*Benefit amounts are subject to age reduction.

**During your initial eligibility period only, you are guaranteed supplemental life coverage up to the Guarantee Issue Limit amounts without having to submit Evidence of Insurability (proof of good health). If your supplemental life election exceeds the Guarantee Issue Limit, please see an HR Total Rewards Representative to assist you in completing the Evidence of Insurability Form.

DISABILITY

Disability insurance provides benefits that replace part of your lost income when you become unable to work due to a covered injury or illness. You are provided with long-term disability (LTD) coverage at **NO COST** to you.

LONG-TERM DISABILITY	
Monthly Benefit	60% of your monthly covered earnings, up to a maximum of $16,000. Benefit payments are subject to reduction by deductible sources of income such as state disability benefits payments, Social Security and Workers' Compensation. The premium for this benefit is taxable as imputed income on your paycheck to enable benefits to be received as non-taxable income.
When Benefits Begin	On 91st day of disability.
Maximum Benefit Duration	Benefits will be paid up to a maximum of 24 months. If you are disabled more than 24 months, you will continue to receive benefits if you are unable to engage in any occupation as outlined in the policy.

UNUM VOLUNTARY BENEFITS

You have an opportunity to enroll in voluntary benefits through Unum during your new hire eligibility period or during annual Open Enrollment. Benefit options include:

- Accident Insurance
- Critical Illness Insurance
- Whole Life Insurance with a Long-Term Care Option

LIFE AND FAMILY

Employee Assistance Program

You, your dependents (including children under age 26) and all household members are provided with the Employee Assistance Program (EAP) through Health Advocate with the Standard at **NO COST** to you. The EAP offers confidential support, guidance and resources that can help you resolve personal issues and meet life's challenges. You may access the EAP 24 hours a day, 365 days a year by phone, online, live chat, email and text. The program includes **up to three free face-to-face confidential counseling sessions each year, per issue, per person.**

The EAP can help you with the following, plus much more!

- Depression, grief, loss and emotional well-being
- Family, marital and other relationship issues
- Life improvement and goal-setting
- Addictions such as alcohol and drug misuse
- Financial and legal concerns
- Identity theft and fraud resolution

To access the EAP, call **888-293-6948** or visit healthadvocate.com/standard3.

Voluntary Legal Plan

You have the option of enrolling in the voluntary legal plan at a low monthly premium of $16.50. The plan gives you and your family members access to legal assistance for matters concerning estate planning, real estate, family law, consumer protection and more. For more information, visit info.legalplans.com/Home (access code: **7090001**).

Auto & Home Insurance

You have an opportunity to purchase auto and home insurance through California Casualty at discounted rates. To learn more and receive a quote, call **866-680-5142**, Monday through Friday, 6 a.m. to 6 p.m. and Saturday, 8 a.m. to 12 p.m. PT.

LIFE AND FAMILY (cont.)

Bright Horizons Care Advantage

The Bright Horizons Care Advantage program is available to you whenever you experience a breakdown in your normal child or adult care arrangement, such as when your regular caregiver is unavailable or your child's school unexpectedly closes. The program includes:

- Up to 10 days of backup child and elder care services per calendar year.
- Center-based care is $15 per child or $25 per family per day. In-home care is $6 per hour.
- Access to a comprehensive database of background-checked babysitters, nannies, senior care resources and more.
- Registration fee discounts or waivers and preferred enrollment access to Bright Horizons centers.

Enhanced Family Support is also available with Primary Child Care Solutions, Academic Support, Tutoring and Enrichment Programs.

To register, go to clients.brighthorizons.com/chapman (username: **Pantherpride**, password: **care4you**) or call **877-BH-CARES** (242-2737). You can also download the app to your phone (search for "Bright Horizons" or "Back-Up Care" on your phone's app store).

Spot Pet Insurance

Pet insurance is a financial safety net from high vet bills in case any accidents, injuries or illnesses were to occur to your pets. Spot's coverage allows you to visit any vet and helps protect your pet (and your wallet) by reimbursing up to 90% on covered conditions.

You can create the plan that best meets your needs and budget with accident-only coverage, illness coverage and/or wellness coverage. You can also customize your deductible, annual limit and reimbursement amount.

Rates are based on coverage, pet age, breed and location. Chapman University employees receive an exclusive 10% discount off the first pet and 20% off each additional pet they enroll. You can get a quote any time at spotpet.link/chapman.

WELLNESS BENEFITS

ThrivePass Wellness Program

ThrivePass is an innovative platform focused on well-being, benefits and rewards. We've partnered with ThrivePass to offer wellness benefits, which includes a Wellness Savings Account (WSA). We will deposit money into your WSA to spend on discounted wellness activities, services and products on the ThrivePass platform. You can also apply to be reimbursed for wellness purchases made outside of the ThrivePass marketplace through their reimbursement feature. Vendor partners include (but are not limited to) Corepower Yoga, 24-Hour Fitness and Lifetime Athletic.

You will receive a registration email from ThrivePass with instructions. If you do not receive an email or if you have questions, reach out to benefits@chapman.edu.

Life Services Toolkit

The Health Advocate Life Services Toolkit through The Standard offers online tools and resources to help you with life's important decisions now and in the future. You can use the toolkit when you and/or your beneficiary need support with estate planning assistance, financial planning, health and wellness, identity theft protection or funeral arrangements. To access the program, visit standard.com/mytoolkit (username: **support**) or call the assistance line at **800-378-574**2.

Healthy Rewards

Cigna's Healthy Rewards program offers discounts up to 40% off on a range of health and wellness-related services and products such as fitness club memberships, weight loss programs, tobacco cessation, pharmacy and vitamins. To access Healthy Rewards, log into your account at mycigna.com or call **800-258-3312**.

Travel Assistance

The travel assistance program provided by Assist America, through The Standard, is free for you and provides emergency medical and travel services, as well as helpful pre-trip planning assistance, when you are traveling 100 miles or more away from home. To learn more, view the travel assistance brochure.

ScholarShare 529 Program

Many parents and families today worry their child or grandchild will begin their adult lives burdened with crippling school loan debt. But it doesn't have to be that way. Whether your son or daughter is getting ready for pre-school or high school, the time to figure out your options and make a plan is now. Visit scholarshare.com to learn how the ScholarShare College Savings Plan can be a part of your college savings strategy.

Retirement Plans

The University offers two retirement plans to eligible employees. They are the Tax Deferred Annuity (TDA) 403b and the Defined Contribution (DC) 401a Retirement Plans. Both plans provide tax-deferred retirement savings.

Chapman University Tax Deferred Annuity (TDA) 403b Plan

- The Tax Deferred Annuity Plan consists of employee contributions only.
- You are eligible the first of the month following date of hire.
- Pre-tax and after-tax Roth contributions are available.
- Authorized fund sponsors are TIAA and Fidelity Investments.

Chapman University Defined Contribution (DC) 401a Plan

- You are eligible the first of the month following date of hire.
- The Defined Contribution Plan consists of employer contributions in two layers:
    1. A 3% discretionary employer contribution (no employee contributions are required)
    2. A 1% to 6% discretionary employer matching contribution (employee contribution required)

Vesting of employer contributions is delayed over a four-year period, 25% per anniversary year.

CHAPMAN UNIVERSITY

CONTACT INFORMATION

Benefits Department: benefits@chapman.edu **Online Enrollment Portal:** Working@Chapman

COVERAGE	CARRIER	POLICY #	PHONE # / EMAIL	WEBSITE
Medical	Cigna Kaiser	3336415 102313 (S. CA)	800-244-6224 800-464-4000	mycigna.com kp.org
Health Savings Account (HSA)	Cigna/HSA Bank	3336415	800-244-6224	mycigna.com
Dental	Delta Dental	HMO: 01795 PPO: 7583	HMO: 800-422-4234 PPO: 800-765-6003	deltadentalins.com
Vision	VSP	00113078	800-877-7195	vsp.com
Flexible Spending Accounts (FSA)	WEX	23972	866-451-3399	benefitslogin.wexhealth.com
Life/AD&D and Long-Term Disability	The Standard	-	Life: 800-628-8600 Disability: 800-368-2859	standard.com
Accident & Critical Illness Insurance	Unum	R0615393	800-Ask-UNUM AskUnum@unum.com	N/A
Whole Life Insurance with Long-Term Care Option	Unum	N/A	877-454-3001 callcenter@enrollvb.com	enrollvb.com/chapman
Employee Assistance Program (EAP)	Health Advocate/ The Standard	N/A	888-293-6948	healthadvocate.com/standard3
Voluntary Legal Plan	MetLife Legal Plans	7090001	800-821-6400	legalplans.com
Bright Horizons Care Advantage	Bright Horizons	N/A	877-BH-CARES (242-2737)	clients.brighthorizons.com/chapman Back-Up Username: Pantherpride Back-Up Password: care4you
Pet Insurance	Spot	N/A	800-905-1595	spotpet.link/chapman
Auto & Home Insurance	California Casualty		866-680-5142	N/A
ThrivePass Wellness Program	ThrivePass	N/A	support.thrivepass.com/ support/home	thrivepass.com
Healthy Rewards	Cigna	N/A	800-258-3312	mycigna.com
Travel Assistance	Assist America/ The Standard	N/A	800-872-1414 medservices@assistamerica.com	standard.com/travel
Life Services Toolkit	Health Advocate/ The Standard	N/A	800-378-5742	standard.com/mytoolkit Username: support
ScholarShare 529 Program	TIAA	N/A	Heath Polzer: 949-623-2916 Heath.Polzer@tiaa.org	scholarshare.com

IMPORTANT NOTICES

Please review the 2025 important notices document containing the following annual notices:

- Medicare Part D
- Medicaid and the Children's Health Insurance Program (CHIP)
- Privacy Rights
- Qualified Medical Child Support Order
- Women's Health and Cancer Rights Act (WHCRA)
- Special Open Enrollment Rights
- Proof of Eligibility
- Continuation of Benefits Under COBRA
- Wellness Programs
- Newborns' and Mothers' Health Protection Act Notice

Additional laws and rules concerning your health plans are also located in the Summary Plan Documents for your specific health plan carrier.

DISCLAIMER: This 2025 Benefits Guide is intended to provide an overview only of the benefits offered by Chapman University. It is not an offer of coverage or intended to offer medical advice. It does not contain all plan provisions, limitations and exclusions. Consult your plan documents (Schedule of Benefits, Certificate of Coverage, Group Insurance Certificate, Booklet, Booklet-Certificate, Group Policy) to determine governing contractual provisions relating to your plan. In the event of a conflict between this Benefits Guide and your plan documents, the plan documents will always govern. Chapman University reserves the right to change, amend or terminate any benefit plan, with or without notice.

This Benefits Guide was prepared for you by HUB International
hubinternational.com
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