Benefits Guide:

IBEW Employees 2027

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NEW YORK STATE OF OPPORTUNITY. | NY Power Authority

Welcome to NYPA

For Questions regarding benefits, contact the Benefits Team visit MyHR+ or call at 914-287-3114

We are pleased to offer a comprehensive suite of benefits to promote health and financial security for you and your family. This booklet provides you with a summary of your benefits. Please review it carefully so you can choose the coverage that is right for you and your family. For additional information, visit nypa.gov/benefits

This guide is only intended as a summary of the benefit plans. If there is a difference between this summary and the documents, contracts, or policies, the plan documents, contracts or policies will govern in every instance. The authority reserves the right to change or terminate any benefits, programs, or pieces of programs at any time.

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Benefits Webpage

The NYPA benefits webpage, Employee Benefits has an icon for IBEW employees. While this New Hire Guide contains a summary of benefits, you can access details on all NYPA's benefits there. You'll find information on various topics such as health & wellness, life at NYPA, planning for the future, forms, communications & regulations, and Open Enrollment information. A schedule of benefit events and benefit vendor contact information is also available. *(You must have access to PowerNet)*

Eligibility

As a full-time employee, you're eligible to enroll in a range of benefits to customize to your individual and family needs.

Your coverage is effective on your first day of employment. You have thirty (30) days from your hire date to enroll in your benefits. Once a year during Open Enrollment period you will have the opportunity to change certain benefit elections.

Domestic Partner Benefits

Medical, dental, optional vision, cancer protection plan, accident expense plan, life insurance, accidental death & dismemberment, and group legal benefits may be extended to a domestic partner and dependents of the partner.

Eligibility Criteria: You must share a committed relationship with each other, you have been in a relationship for at least one year, reside in the same household, document financial interdependency for at least one year, and complete an affidavit.

Domestic Partner Benefits Imputed Income Tax

When you cover a domestic partner under company sponsored benefits, the IRS requires that the value of those benefits be treated as taxable income unless your domestic partner qualifies as your tax dependent. This added taxable amount is called imputed income.

The domestic imputed income tax will be recalculated by payroll using best practices outlined identified by IRS tax guidelines. Because it increases your taxable wages, your tax withholding may go up. Please consult with a tax advisor if you have questions.

Default Benefits

If you do not make benefit elections within 30 days of your hire date, you will automatically receive default benefits, which will remain in effect until December 31 of the calendar year, unless you experience a qualifying life event. Default coverage includes the following benefits, as employee/individual credits only.

- Medical Coverage – NYPA Plan
- Vision – Core Plan
- Dental Plan- Delta Dental
- Short-Term Disability
- Hearing Aids Reimbursement
- Life Insurance – 1x Base Salary
- Long-Term Disability – 50% of salary covered to a maximum benefit of $3,000/month

If you receive default benefits, you are not eligible to join an HMO, choose the Cancer Plan or the Accident Expense Plan, contribute to a Flexible Spending Account(s), or waive medical coverage until the next open enrollment period or if you incur a qualifying event.

Qualifying Life Event

Outside of the open enrollment period, you may only make changes to your benefits under limited circumstances known as “qualifying life events”. The Internal Revenue Service (IRS) requires that changes must be reported/requested within 30 days of the qualifying life event.

Qualifying life events include changes circumstances that change you or your covered dependents’ benefit eligibility, including:

- Marriage
- Divorce
- Birth or adoption of a child
- Change in employment status of your spouse/domestic partner or dependent child(ren)
- Moving out of an HMO Network area
- A dependent child reaching the maximum age of coverage

A change in status form must be submitted with documentation of the change. This can be requested on MyHR+.

When adding new dependents, you must also provide appropriate dependent verification documents. Acceptable documents are marriage certificates, birth certificates, adoption certificates, divorces, recent redacted IRS tax return, etc.)

Flex Credits

Are automatically allotted to full-time and provisional employees to offset the cost of benefits. The amount you receive in your paycheck is based on your eligibility for individual or family coverage. On your pay statement, the flex credit will be credited to you as earnings, which will help offset the cost of benefits deductions.

If your selections cost more than your available credits, you will pay the difference through payroll deductions.

Medical Coverage

NYPA offers several medical plans or the option to waive medical coverage.

United Healthcare

- The NYPA Plan, a Preferred Provider Organization (PPO) plan, provides major medical care, hospitalization and prescription drug coverage. If you use a network provider, you are only responsible for the copay. If you use an out-of-network provider, you will be responsible for paying the annual deductible and coinsurance, as well as any charges over the reasonable and customary limit.

HMO's

- In some geographic locations, Health Maintenance Organizations (HMOs) are also available. HMOs cover your medical expenses when you use a health care provider affiliated with the HMO that you choose. Out-of-network benefits may be available but vary by individual HMO.

Waiving Coverage

If you choose to opt out of healthcare coverage you will receive a stipend of **$57.70** per paycheck.

Coverage Cost

Annual Flex Credits	
Individual Coverage	Family Coverage
$700	$1,400

Plan Overview

Medical Plans	United Healthcare (UHC) PPO Plan		CDPHP HMO Albany, B-G & Clark, STL, plus Dutchess & Orange Counties	Independent Health HMO Flex Fit Active Buffalo/Niagara	Independent Health HMO Flex Fit Family Buffalo/Niagara
Medical Plans	**United Healthcare (UHC) PPO Plan**		**CDPHP HMO (Generally Albany, BG, Clark, STL locations, plus Dutchess & Or**	**Independent Health HMO Flex Fit Active (Buffalo, Niagara)**	**Independent Health HMO Flex Fit Family (Buffalo, Niagara)**
Bi-Weekly Cost Employee Only	**$53.84**		**$219.55**	**$134.33**	**$134.33**
Bi-Weekly Cost Family	**$146.15**		**$488.49**	**$375.62**	**$375.62**
Type of Services	**In-Network**	**Out-of-Network**	**In-Network**	**In-Network**	**In-Network**
Preventive Care copay	$0	$0	$0	$0	$0
Virtual Visit copay	$15	N/A	$20	$10 adult / $25 child (General Medicine)	$15 adult /$0 child (General Medicine)
Primary Care copay	$35	20% coinsurance*	$20	$10 adult / $25 child	$15 adult /$0 child
Specialist copay	$35	20% coinsurance*	$20	$25	$25
Chiropractic copay	$35	20% coinsurance*	$20	$25	$25
Urgent Care copay	$35	$35	$30	$35	$35
Emergency Room Visit Copay	$150	$150	$50	$150	$150
Hospitalization copay	$0	$0	$0	$0	$0
Retail Prescriptions					
Tier 1 / Tier 2 / Tier 3	$10/$30/$50	$10/$30/$50	$10/$25/$40	$4/$15/$30	$4/$15/$30
Mail Order Prescriptions					
Tier 1 / Tier 2 / Tier 3	$25/$75/$125	N/A	$20/$50/$80	$10/$37.50/$75	$10/$37.50/$75
Deductible					
Single	$0	$700	$0	$0 **Out of Network: Single $10,000 and Family $20,000(20% coinsurance)**	
Family	$0	$2,100	$0		
Out-of-pocket Limit					
Single	$7,150	$900	$9,200	$6,350	
Family	$14,300	$2,400	$18,400	$12,700	

*For information about limitations and exceptions, see the plan or policy document at welcometouhc.com

Dental Plan

The Delta Dental Plan covers charges for services related to the care of the teeth, gums and mouth. Diagnostic and preventive care services are paid 100%. Other dental expenses, including orthodontics, are covered as referenced in the chart below. You are responsible for the coinsurance of these services after meeting the deductible. Selecting a provider that participates in the Delta Dental network reduces your out-of pocket expense. Should you use an out-of-network provider, payment to the dentist is based on the negotiated rate and you are responsible for any amount over that rate.

Eligibility	Employee, spouse or domestic partner, and eligible dependent children to age 26	
Deductibles (waived for Diagnostic and Preventive Services)	$50 per person / $100 per family each calendar year	
Maximums	$2,000 per person each calendar year	
Benefits and Covered Services	**Network Amount**	**Non-Network Amount**
Diagnostic & Preventive Services Exams, cleanings, x-rays, sealants and fluoride	100%	100%
Basic Services, Endodontics, Periodontics Fillings, simple tooth extractions, posterior composite restorations and injectable antibiotics	80%	80%
Oral Surgery Extraction and other oral surgery procedures, incl. pre- and post-operative care	$35 copay Benefit is excluded from annual dental maximum	$35 copay Benefit is excluded from annual dental maximum
Major Services, Prosthodontics, Implants Crowns, inlays, onlays, cast restorations, bridges, dentures and implants	50%	50%
Orthodontic Benefits Adult and dependent children	75%	75%
Orthodontic Maximums	$3,000 lifetime	$3,000 lifetime

Vision Coverage

You have a choice of two options:

Core Vision Plan

The Core Vision Plan is available to employees only (not dependents) and is paid for by NYPA. Under this option, you are reimbursed for up to $100 during a 12-month period for prescription eyeglasses, or prescription contact lenses. Eye examination or active employees are limited to seventy-five dollars ($75) per visit every year.

To submit for reimbursement, click on the link. *(You must have access to PowerNet)*

Davis Vision Plan (Optional)

Davis Vision Active, regular and probationary full-time employees, are eligible to select this benefit, either single or family coverage. If you are not currently enrolled, visit Davis Vision's member website at davisvision.com or call 1.877.923.2847 and enter client code 2374 to locate providers or for additional information.

Benefit	Frequency Once every -	In-network Copay	In-network Coverage	
Eye Examination	January 1	$0	Covered in full. *Includes dilation when professionally indicated.*	
Spectacle Lenses*	January 1	$0	Clear plastic lenses in any single vision, bifocal, trifocal or lenticular prescription. Covered in full. (See below for additional lens options and coatings.)	
Frame*	January 1	$0	**Covered in Full Frames: OR Frame Allowance:** **OR Visionworks Frame Allowance:**	Any Fashion, Designer or Premier level frame from Davis Vision's Collection/2 (retail value, up to $195). $150 toward any frame from provider plus 20% off any balance. [/1] No copay required. $200 allowance plus 20% off any balance toward any frame from a Visionworks family of store locations. No copay required.
Contact Lens Evaluation, Fitting & Follow Up Care	January 1	$0	**Davis Vision Collection Contacts:** **Non-Collection Standard Contacts:** **Non Collection Specialty Contacts**/3:	Covered in full. 15% discount/1 15% discount/1
Contact Lenses*	January 1	$0	**Covered in Full Contacts**: Planned Replacement Disposable **OR Contact Lens Allowance:** **OR Visually Required Contacts:**	From Davis Vision's Collection/2, up to: Two boxes/multi-packs** Four boxes/multi-packs** $180 allowance toward any contacts from provider's supply plus 15% off balance/1 No copay required. Covered up to $250 with prior approval. ***Number of contact lens boxes may vary based on manufacturer's packaging*

*Members and dependents are entitled to one pair of eyeglasses AND one dispense of contact lenses in the same benefit period. They do NOT allow two pairs of eyeglasses or two dispenses of contact lenses

Hearing Aids

NYPA provides reimbursement for hearing aids, up to a maximum of $1,500 every three years through a health reimbursement account. This is available at no cost to employees. You may elect to enroll in this benefit or choose not to participate, during your New Hire election or Open Enrollment.

Employee Life Insurance

You will automatically receive core life insurance (at no cost to you) equal to 150% of your base annual wage. Life insurance coverage more than $50,000 is considered taxable income and will appear on your W-2.

Short-Term Disability

The Short-Term Disability (STD) Plan provides continuing income for up to thirteen weeks when you are unable to work due to short-term illness or injury. The weekly STD benefit payment will equal 50% of your basic weekly wage. The maximum weekly benefit is $750.

Long-Term Disability

Long-term disability coverage provides income to protect you and your family if you are disabled and cannot work after three consecutive months of absence from work. At no cost to you, you'll receive 50% of covered salary with a maximum monthly amount of $3,000. Cost-of-living increases, survivor benefits, education benefits, and rehabilitation incentives are built into the coverage options.

Flexible Spending Accounts

Flexible Spending Accounts (FSA's) allow you to put aside pre-tax earnings to pay for out-of-pocket healthcare and/or dependent care expenses. NYPA's FSA accounts are administered by United Healthcare. The maximum amount you can contribute each year is determined by the Internal Revenue Service (IRS) You must elect to contribute to an FSA account each year at Open Enrollment or within 30 days of a qualifying life event.

Note: Unused FSA Funds are subject to use-it or lose-it rules; although you may roll over unused 2027 balances not exceeding $700 to 2028.

Health Care FSA

For 2027, the maximum contribution is $3,500, with a minimum contribution of $100 required. The amount is subject to change for 2027, per IRS Guidelines. Some things the Health Care FSA can be used for:

- Medical, prescription, or dental copays
- Vision exams, glasses, and contact lenses
- Some over the counter products and menstrual care products for you and eligible family members
- For 2027, the maximum rollover is $700.
- The Authority shall match $0.50 for each $1.00 of an employee's contribution to the Health Care Flexible Spending Account (FSA), subject to a maximum of $500.00 in Authority matching funds per employee per year. FSA accounts must otherwise abide by Internal Revenue Code and limitations including, but not limited to, contribution limits, forfeiture of funds and nondiscrimination testing.
- To receive the max contribution from The Authority ($500), the employee must contribute $3,000 to their Health Care FSA.

Dependent Care FSA

Use this account for eligible dependents' childcare (up to age 12) or elder care expenses. For 2027, the maximum contribution is $5,000, with a minimum contribution of $260 required.

- The dependent care account is ***not*** *used for health care expenses* for dependent children.
- You may change your annual election if there is a change in the childcare provider or cost of coverage or you experience a qualifying life event. Changes must be reported within 30 days of the event, are effective as of the date of the event, and cannot be adjusted retroactively.
- Any unused dependent care funds will be forfeited at the end of the plan year. You have until March 31 of the following year to request reimbursement for eligible expenses in the prior year.

FSAs are governed by federal tax law. The IRS defines who qualifies as a dependent for purposes of reimbursing medical or dependent care expenses.

Under IRS regulations, FSA medical and/or dependent care expenses are not eligible for reimbursement for a domestic partner unless the domestic partner qualifies as the employee's tax dependent (this also applies to domestic partner's child(ren)).

Cancer Plan

The Aflac Cancer Plan helps with unexpected expenses if cancer occurs and can help maintain your lifestyle. Benefits are paid directly to you, regardless of any other insurance, copays, etc. The cost of this plan is based on the coverage you choose.

Accident Expense Plan

The Aflac Accident Expense Plan helps with unexpected expenses if an accident occurs. Benefits include costs associated with accident emergency treatment, accident follow-up treatment, initial accident hospitalization, accident hospital confinement, accidental death and dismemberment, physical therapy,

blood and plasma, and ambulance. Levels of reimbursement for each benefit vary. The cost of this plan is based on the coverage you choose.

Mandatory Retirement Program

NYSLRS

NYSLRS The New York State and Local Retirement System (NYSLRS) is a defined benefit plan which provides a fixed monthly income at retirement with annual cost-of-living adjustments. New hires are generally in Tier 6 under NYSLRS. Click here for a summary.

Voluntary Retirement Program

Deferred Compensation Plan (457 Plan)

The Deferred Compensation Plan is a retirement savings program governed by Section 457(b) of the Internal Revenue Code. The plan has the same annual limits and other similarities to the 401(k) Plan, but some important differences, such as no employer match. You may contribute from 1% up to 100% of your eligible salary on a pre-tax basis and/or Roth (after-tax) basis. Maximum contributions are based on IRS regulations.

Time Away from Work

Vacation and Sick Time

Refer to your Collective Bargaining Agreement for details.

Military Leave

You're eligible for thirty (30) workdays a year for authorized military leave at full NYPA base pay.

Death in the Family

In the event of the death of an immediate family member, you are eligible for three days of paid time away from work.

Holidays

IBEW employees receive a total of 16 days per year. Holiday schedules vary depending on your work location.

Additional Benefits

Tuition Reimbursement

Expenditure on tuition and books for certain courses approved in advance may be eligible for reimbursement after successful completion. **Refer to your Collective Bargaining Agreement for details.**

Employee Assistance Program

A free, confidential assessment and counseling program for employees and family members. The program also includes childcare and elder care resources and referral services. Visit myccaonline.com (Company Code: NYPA) or call 800-833-8707 24/7.

Plum Benefits Discount Program

This cost-free benefit provides you with access to thousands of exclusive discounts on shopping, services, travel, entertainment, and more. Visit Plum Benefits' Website and enter company code ac0224403 for more information.

Payroll Deduction Benefits

- Credit union membership with Utility Employees Credit Union
- New York's 529 College Savings Program (877-697-2837, NY529@nysaves.org)
- State Employees Federated Appeal (SEFA) makes it easy to donate to a variety of charities

Benefits New Hire Checklist

☐Bring original identification for employment verification on your first day.

☐Gather documentation for your dependents and send to the Benefits team on your first day.

☐Enroll in benefits on MyPageNYPA within thirty (30) days of hire date.

☐Review your benefit summary to confirm your choices and verify you've included any eligible dependents you want covered.

☐ Print or save a copy of your Benefits Confirmation Statement

☐If applicable, choose between the New York State and Local Retirement System (NYSLRS) within your first 30 days of hire date.

☐Enroll in the 457 Plans at any time.

☐Designate beneficiaries

☐Life insurance beneficiaries should be done before your first day

☐457 Plan beneficiaries can be designated on the T. Rowe Price website

☐NY State and Local Retirement System beneficiaries must be designated NYSLRS.

☐Receive your new ID cards for medical, pharmacy, dental and vision coverage.

Benefits & Vendor Contact List

The HR Benefits team is here to answer your questions, contact us in MyHR+

Some plan eligibility varies by geography and management/union group.

Health

Plan	Phone Number	Website
CDPHP HMO	800-777-2273	cdphp.com
COBRA – Baker Tilly Vantage	800-422-4661	https://mybenefitdollars.com
CVS Caremark	844-449-0372	caremark.com
Davis Vision	800-999-5431	davisvision.com
Delta Dental	800-932-0783	deltadentalins.com/nypa
EAP - Corporate Counseling Association	800-833-8707	https://app.myccaonline.com/ Co. Code: NYPA
Independent Health HMO	800-501-3439	independenthealth.com
Long Term Disability - The Hartford	800-549-6514	thehartford.com/mybenefits
Paid Family Leave (PFL) – The Hartford	888-301-5615	thehartford.com/employeebenefits Policy#: 709424
Short Term Disability - The Hartford	800-549-6514	thehartford.com/mybenefits
United HealthCare: PPO Plan – Options PPO Network	866-633-2446	https://member.uhc.com/myuhc
United Healthcare Flexible Spending Plan	866-755-2648	https://member.uhc.com/myuhc
United HealthCare – Empire Network	877-769-7447	empireplanproviders.com/provider.htm
UHC Behavioral Health Network	877-769-7447, *3	

Supplemental Insurance & Optional

Plan	Phone Number	Website
AIG-Reuben Warner Associates, Inc.	800-421-3005	aig.com/business
Cancer and Accident Insurance - Aflac	800-992-3522	aflac.com/individuals/default.aspx

Retirement

Plan	Phone Number	Website
New York State & Local Retirement System	866-805-0990	osc.state.ny.us/retire
NYS 529 College Savings Program	877-697-2837	nysaves.org
457 Plan - T. Rowe Price	800-922-9945	rps.troweprice.com

If you experience site connection difficulties, switch to Chrome.

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