

HCCC Benefits for Adjunct Employees

At HCCC, we value and appreciate all of our employees. We acknowledge the importance of providing a comprehensive benefits package. Below is a brief glance of the HCCC benefits, perks, and discounts offered.

NJ Alternative Benefit Plan (ABP) Retirement

- ABP is a tax-sheltered, defined contribution retirement program for higher education faculty and certain administrators.
- Choice between seven carriers; TIAA, AIG, AXA(Equitable), VOYA, Metlife, MassMutual & Prudential
- Mandatory 5% contribution with an 8% Employer match.
- Member becomes vested after one year of employment.

Voluntary 403b or 457b Plan Options

- Option to contribute more than the Mandatory 5% contribution rate.
- Choice of six carriers
- Option to choose percentage of dollar amount towards contribution.

Employee Assistance Program

- Free mental health services, employee webinar trainings & helpful resource
- Support Line: (833) 848-1764 or visit: eap.ndbh.com
- **Company code:** HCCC **Password:** Guest

Additional Benefits & Employee Perks

Adjunct Tuition Waiver Employee/Dependent

- Adjunct faculty who are *currently employed* for nine (fall/spring) semesters or more and their immediate family (spouse and legal dependents) may be granted *100% tuition waiver* for any credit course, as well as selected continuing education courses offered by the College.
- Adjunct faculty who are *currently employed* for four to eight semesters may be granted *50% tuition reduction*.

Employee Perks

- Free and discounted Faculty & Staff Parking
- Employee Discount Marketplace through *WorkingAdvantage*
- Auto & Home Insurance Employee discounts
 - *Liberty Mutual* and/or *NJM*

*State Health Benefits Coverage for Part – Time (ADJ) Employees

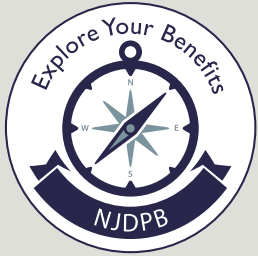
Visit NJDPB <https://www.state.nj.us/treasury/pensions/hb-active-sehbp.shtml>

Enrollment is directly processed through the state; Not through Employer.

If you have any questions, please do not hesitate to reach out to the Office of Human Resources

70 Sip Ave, Jersey City, NJ 07306 O: 201-360-4070 Email: HR@hccc.edu

HR Benefits Manager, Carmen McGuire O: 201-360-4072 Email: cmcguire@hccc.edu



Health Benefits Coverage for Part-Time Employees

Information for:
All Funds

INTRODUCTION

P.L. 2003, c. 172 (Chapter 172), provides certain part-time employees of the State of New Jersey and part-time faculty members at a New Jersey State college, State university, or certain county or community colleges, eligibility for enrollment in the State Health Benefits Program (SHBP) or the School Employees' Health Benefits Program (SEHBP), provided that the part-time employee is a member of a State-administered retirement system.

The part-time employee may enroll in any SHBP/SEHBP plan that is provided by the employer (except for NJ DIRECT HD1500 and Aetna Value HD1500) and, if provided by the employer, the Employee Prescription Drug Plan. If an eligible employee elects to enroll and purchase coverage, the employee must pay the full cost of the coverage.

The plan benefits, as well as the rules and procedures of the plans, are the same for part-time enrollees as they are for all other enrollees except for those areas listed to follow. If a specific topic is not outlined in this publication, please refer to the the New Jersey Division of Pensions & Benefits (NJDPB) website at: www.nj.gov/treasury/pensions

ELIGIBILITY AND ENROLLMENT

Eligibility

Eligibility for coverage is determined by the NJDPB. Enrollments, terminations, changes to contracts, etc., must be processed through your employer first, then by the NJDPB. If you have any questions concerning eligibility, you should see your employer or call the NJDPB Office of Client Services at (609) 292-7524.

To be eligible for coverage under the provisions of Chapter 172, an employee must be:

- A member of a State-administered retirement system (the Public Employees' Retirement System (PERS), Teachers' Pension and Annuity Fund (TPAF), the Alternate Benefit Program (ABP), or the Defined Contributions Retirement Program (DCRP)); and
- A part-time employee of the State of New Jersey, a State college or university, the Palisades Interstate Park Commission, the New Jersey Building Authority, the State Library, or the New Jersey Commerce and Economic Growth Commission; or
- A part-time faculty member — including part-time lecturer or adjunct faculty member — employed by a State college, State university, or a county or community college that participates in the SHBP or SEHBP.

Eligible Dependents

Your eligible dependents are:

- Your spouse, civil union partner, or same-sex domestic partner;* and
- Your children (including stepchildren, legally adopted children, foster children, and legal wards) under the age of 26.

Enrollment

When you become eligible for enrollment in a retirement system, your employer will provide you with the *Health Benefits Enrollment and/or Change Form*. You must complete the application, providing all of the information requested, and submit it to your employer.

Part-time employees may select both a medical plan and Employee Prescription Drug Plan coverage (if provided by the employer), or medical plan coverage only by waiving prescription drug coverage. Part-time employees cannot enroll in only the Employee Prescription Drug Plan.

Note: Part-time employees of employers who offer prescription drug coverage through the health plan in which the subscriber is enrolled are not able to waive prescription coverage.

Once you are enrolled in health benefits, you will be

*For more information see the *Civil Unions and Domestic Partnerships Fact Sheet*.

Health Benefits Coverage for Part-Time Employees

billed monthly for the cost of your selected coverage. Rate charts showing the cost of coverage are available from your employer or on our website.

If you do not enroll all eligible members of your family within 60 days of the time you or they first become eligible for coverage, you must wait until the next Open Enrollment period. See the "Changes in Coverage" section.

Effective Dates of Coverage

There is a waiting period of two months following your eligibility date before your health benefits coverage begins, provided you submit a *Health Benefits Enrollment and/or Change Form*. For example, if you become eligible for enrollment in a State-administered retirement system on October 1 and apply for coverage under Chapter 172, your SHBP/SEHBP coverage will be effective December 1.

For some part-time employees, enrollment in a State-administered retirement system may be concurrent with their date of hire; other part-time employees may not be eligible for enrollment until their 13th month of continuous employment. See your human resources representative to determine your enrollment eligibility date.

Note: If you were enrolled in health benefits as a part-time employee with your previous employer, and your coverage is still in effect on the day you begin work with your current employer (coverage under the federal Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA) excluded), your coverage begins immediately so you have no break in coverage.

Your eligible dependents' coverage is effective the same date as your coverage is effective.

CHANGES IN COVERAGE

Coverage changes involving the addition of dependents are retroactive to the date of the event (marriage, civil union, domestic partnership, birth, adoption, etc.) provided that the application is filed within 60 days of the event. Deletion of dependents is ef-

fective on a timely or prospective basis, depending upon receipt of the application by the Health Benefits Bureau. Covered children are automatically terminated as of the end of the year they attain age 26.

LEAVE OF ABSENCE

If you take an approved leave of absence, your SHBP/SEHBP coverage will remain in effect provided that you continue to pay your billed monthly premiums.

WORKERS' COMPENSATION

If you have a Workers' Compensation award pending, or have received an award of periodic benefits under Workers' Compensation or the Second Injury Fund, you and your dependents are entitled to have continued coverage at the same level as when you were an active employee. You must continue to pay your billed monthly premiums.

RETIREE COVERAGE

Upon retirement, part-time State employees and part-time faculty members enrolled in the SHBP/SEHBP under the provisions of Chapter 172 are permitted to enroll in the Retired Group of the SHBP/SEHBP provided that they continue to pay the full cost of their retiree coverage. Prescription drug coverage for retirees is provided through the Retiree Prescription Drug Plan.

Retirees can find the NJDPB's requirement regarding enrollment in Medicare Part A and Part B coverage outlined in the *Summary Program Description*, which is available on our website.

Note: The provisions of Chapter 172 do not qualify an employee for State-paid or employer-paid post-retirement health care benefits under the SHBP or SEHBP. Chapter 172 retirees are responsible for paying the full cost of Retired Group SHBP/SEHBP coverage.

COBRA COVERAGE

Upon termination (other than for retirement) of SHBP/SEHBP coverage provided under Chapter 172, continued coverage in the SHBP/SEHBP and the Employee Prescription Drug Plan is available under federal COBRA legislation. See our website for more information.

PURCHASE OF INDIVIDUAL INSURANCE COVERAGE

Part-time State employees and part-time faculty members eligible to enroll under the provisions of Chapter 172 are not eligible for other health coverage plans available under the provisions of the New Jersey Individual Health Coverage (IHC) Program.

If you are covered under the IHC and eligible for coverage under Chapter 172, you must contact the carrier regarding cancellation of your IHC benefits. You may re-enroll in the IHC during the IHC's Open Enrollment period in October (for a January effective date). If your health benefits terminate, you are immediately eligible for coverage in the individual market.

Additional information about the IHC can be obtained from the New Jersey Individual Health Coverage Board at the Department of Banking and Insurance by calling 1-800-838-0935 or at: <http://dobi.nj.gov/>

PLAN DESCRIPTIONS

For a summary of medical plans and benefits provided under the SHBP/SEHBP, visit our website.

This fact sheet has been produced and distributed by:

New Jersey Division of Pensions & Benefits
P.O. Box 295, Trenton, NJ 08625-0295

(609) 292-7524

For the hearing impaired: TRS 711 (609) 292-6683
www.nj.gov/treasury/pensions



Chapter 172 Part-Time Local Education Monthly Active Group Monthly Rates Effective 1/1/2022 to 12/31/2022

For employers who offer prescription drugs through the
medical plan in which the subscriber is enrolled

PLAN/COVERAGE DESCRIPTION	MONTHLY RATES
NJ DIRECT10 #050 — PPO Plan with \$10 Primary Care Copayment	
Single	\$1,061.71
Member & Spouse/Partner	\$2,123.44
Family	\$3,036.52
Parent & Child	\$1,974.80
NJ DIRECT15 #150 — PPO Plan with \$15 Primary Care Copayment	
Single	\$1,015.03
Member & Spouse/Partner	\$2,030.06
Family	\$2,903.00
Parent & Child	\$1,887.97
New Jersey Educators Health Plan #098 — PPO Plan with \$10 Primary Care Copayment /\$15 Specialist Care Copayment	
Single	\$944.94
Member & Spouse/Partner	\$1,889.89
Family	\$2,702.54
Parent & Child	\$1,757.59

For copayments and deductibles, please refer to the *Plan Design Charts* on our website at: www.nj.gov/treasury/pensions

EMPLOYEE ASSISTANCE PROGRAM – EAP

When life's a little much, reach out and get in touch.

Let's be real: life can be tough. When your responsibilities start to feel overwhelming and showing up each day with a smile on your face seems difficult, it's important to reach out for help. You can lean on your free and confidential Employee Assistance Program (EAP) for support.

We've got your back.

A free benefit from your workplace, the EAP can help you or anyone in your household:

- Be more present and productive at work
- Receive support when you don't feel like yourself
- Get help with responsibilities that are distracting or stressful
- Grow personal and career skills
- Be a caring, loving friend or family member
- Receive care after a traumatic event or diagnosis
- Make healthy lifestyle choices
- Improve and inspire daily life

We're here for you, always.

Life happens, regardless of the day or time. That's why we make ourselves available 24/7, even on holidays. So whenever you need to reach out, we're here for you.



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- ✓ **Adult and child care resources**
- ✓ **Personal and professional training**
- ✓ **Digital behavioral health tools**

Reduce Stress - Handle Change - Improve Relationships
Manage Finances - Live Healthy - Focus at Work

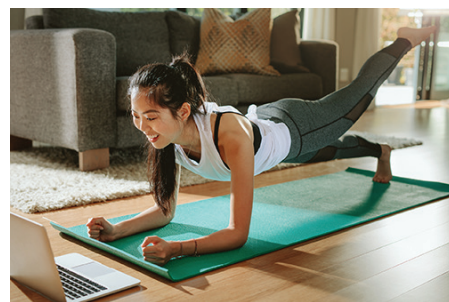
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Getting Started is Easy.

Maximize your time away from the workplace and start saving today!

VISIT

<https://hccc.savings.workingadvantage.com/>

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Save

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Req. new acct. on Magenta MAX. \$5/mo./line discount up to 2 lines for 20 mos. Activate up to 4K UHD streaming on capable device, or video typically streams at 480p. Unlimited while on our network.

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Netflix: Basic (1 SD screen) for 1 line, Standard (2 HD screens) for 2+ lines. Qualifying service and capable device required. Turning on Scam Block may block calls you want; disable at any time. Sales tax and regulatory fees included in monthly rate plan.

Be sure to mention your employer to receive this offer.



855-570-9947



<https://t-mo.co/2OZTpWb>



t-mobile.com/store-locator

Questions? Contact Account Manager
Francesca Rodriguez
Francesca.Rodriguez70@t-mobile.com



Scan to visit us.

Limited time offer, subj. to change. **T-Mobile Work Perks:** Qualifying credit, new acct. with 12 or less lines, & port- from AT&T, Verizon, or Claro required. Enroll and validate eligible employment w/i 30 days of activ. reverification over 20 mos. may be required. Must be active & in good standing to receive bill credits. Allow 2 bill cycles. Credits may stop if you cancel any lines. May not be combined with some offers/discounts. Limit 1 T-Mobile Work Perks Corp node per acct. **Magenta MAX:** Credit approval, deposit, \$10 SIM card, and, in stores & on customer service calls, \$20 assisted or upgrade support charge may be req., U.S. roaming and on-network data allotments differ: includes 200MB roaming. Unlimited talk & text features for direct communications between 2 people; others (e.g., conference & chat lines, etc.) may cost extra. Unlimited high-speed data US only. In Canada/Mexico, up to 5GB high-speed data then unlimited at up to 256kbps. Not avail. for hotspots & some other data-first devices. Capable device required for some features. Activation required to deliver video streams at speeds that provide up to **Ultra HD video** capability (max 4K); some content providers may not stream their services in UHD. May affect speed of video downloads; does not apply to video uploads. **Netflix:** Receive Netflix Standard (2-screen, up to a \$12.99/mo. value) with 2+ qual'g lines in good standing. Value may be applied to different Netflix streaming plans. Not redeemable or refundable for cash. Cancel Netflix anytime. Netflix Terms apply: www.netflix.com/terms. 1 offer per T-Mobile acct.; may take 1-2 bill cycles. See t-mobile.com/netflix for add'l info. Like all plans, features may change or be discontinued at any time; see T-Mobile Terms and Conditions at t-mobile.com for details. **AutoPay Pricing** for lines 1-8. Without AutoPay, \$5 more/line. May not be reflected on 1st bill. **Int'l Roaming:** Usage may be taxed in some countries. Calls from Simple Global countries, including over Wi-Fi, are \$.25/min. (no charge for Wi-Fi calls to US, Mexico and Canada). Standard speeds approx. 256 Kbps. **Not for extended international use; you must reside in the U.S. and primary usage must occur on our network.** Device must register on our network before international use. Service may be terminated or restricted for excessive roaming. Capable device required; coverage not available in some areas. Some uses may require certain plan or feature; see T-Mobile.com. **Coverage** not available in some areas. **Network Management:** Service may be **slowed, suspended, terminated, or restricted** for misuse, abnormal use, interference with our network or ability to provide quality service to other users, or significant roaming. See **Terms and Conditions (including arbitration provision)** at www.T-Mobile.com for additional information. T-Mobile, the T logo, Magenta & the magenta color are registered trademarks of Deutsche Telekom AG. © 2021 T-Mobile USA, Inc. N215052