

This is a summary of the benefits offered by the Indiana Historical Society (IHS) as of January 1, 2024. It does not supersede or alter the specific terms and conditions contained in other documents, such as insurance contracts or retirement plan documents, which cover these same benefits. IHS reserves the right to change benefits.

HEALTH INSURANCE

Effective on the first of the month following hire, full-time employees and their qualified dependents are eligible to participate in the IHS cafeteria group health insurance plan.

Medical Plan Summaries



In Network (PPO)	Plan Benefits
Deductible (Single / Family)	\$3,200 / \$6,400
Embedded Deductible	Yes. See notes below.
Member Coinsurance	0%
Out of Pocket Max (Single / Family)	\$4,000 / \$8,000
HSA Eligible	Yes. IHS will make a \$600/yr contribution into your Health Savings Account!
Primary Care & Specialist Visits	CIGNA
Preventive Care	No Cost Share
Primary Care Office Visit	Deductible then \$30
Teledoc	Approximately \$55 per visit
Specialist Office Visit	Deductible then \$50
Other Health Services	CIGNA
Urgent Care	Deductible then \$75
Emergency Room	Deductible then \$250
Inpatient / Outpatient	Deductible then 0%
Prescription Drugs	Southern Scripts (PBM)
Preventive Rx Formulary (HomeMed Pharmacy)	You have access to a complete formulary of FREE Preventive Medications!
Tier 1 (Generic)	Deductible then \$10 copay
Tier 2 (Brand/ Formulary)	Deductible then \$35 copay
Tier 3 (Brand/ NonFormulary)	Deductible then \$75 copay
Tier 4 (Specialty)	Deductible then 25% to a \$350 max
Mail Order	Deductible then 2.5X copay

Embedded Deductible: Your plan has an embedded deductible. Each individual family member has his/her own individual deductible. Full family not to exceed the family deductible amount.
 Coinsurance: % listed reflects the members % of cost sharing after the deductible is met.
 Members will pay the negotiated discounted price for office visits and prescriptions until the deductible is met. After the deductible is met, the member will have a copay for Rx until total cost meets the out of pocket maximum listed.

VISION INSURANCE

Effective on the first of the month following hire, full-time employees and their qualified dependents are eligible to participate in the IHS Vision plan.

Vision Plan Summary



Benefits	In-Network	Out-of-Network
Eye Exam	\$10 Copay	Up to \$39
Provider Network	VSP	

Lenses	In-Network	Out-of-Network
Single	\$25 Copay	Up to \$23
Lined Bifocal	\$25 Copay	Up to \$37
Lined Trifocal	\$25 Copay	Up to \$49
Lenticular	\$25 Copay	Up to \$64
Contacts (Voluntary) (in lieu of eyeglass lenses and/or frames)	\$130 Allowance + 20%	Up to \$100
Contacts (Medically Necessary) (in lieu of eyeglass lenses and/or frames)	100% after copay	Up to \$210

Frames	In-Network	Out-of-Network
Frames Allowance	\$130 Allowance + 20%	Up to \$46

Frequency	
Exams	Every 12 months
Lenses	Every 12 months
Frames	Every 24 months

DENTAL INSURANCE

Effective on the first of the month following hire, full-time employees and their qualified dependents are eligible to participate in the IHS dental plan.

Dental Plan Summary



Network: Dental Guard Preferred	In-Network
Deductible (Single/Family)	\$50 / \$150 Preventive Care Waived
Annual Max	\$1,000
Maximum Rollover	If a member incurs less than \$500 in dental claims, they will have up to \$350 (if an in-network provider is used) rollover over to their annual maximum for next year.
Diagnostic and Prevention Care Services	In-Network / Out-of-Network
Exams (once every 6 months)	100% / 100%
Cleanings (once every 6 months)	100% / 100%
X-rays (full mouth series once every 60 months)	100% / 100%
Fluoride (to age 14, once every 6 months)	100% / 100%
Basic Care Services	In-Network / Out-of-Network
Fillings	90% / 80%
Endodontics / Periodontics	90% / 80%
Sealants (to age 16, once every 36 months)	90% / 80%
Oral Surgery	90% / 80%
Major Care Services	In-Network / Out-of-Network
Bridges & Dentures	60% / 50%
Implants	60% / 50%
Single Crowns	60% / 50%
Complex Extractions	60% / 50%
Inlays, Onlays & Veneers	60% / 50%
Repair & Maintenance of Crowns, Bridges and Dentures	60% / 50%
Orthodontia Services	In-Network / Out-of-Network
< 19 yrs	50% to \$1,000 Lifetime maximum

Out of Network payment: Payment based on the 90th percentile of the Usual & Customary price in your geographic market. Importance of going in-network for dental care: While there appears to be no difference in cost when using an in-network provider vs. an out-of-network provider, the cost savings might be significant. If you go to an out-of-network provider, you be be balanced billed if the provider charges you for a service that is greater than the 90th percentile of what's usual and customary. To find an in-network provider go to www.guardiananytime.com.

LIFE INSURANCE AND LONG-TERM DISABILITY

On the first of the month following three months of full-time employment, IHS provides full time employees with a group term life insurance (GTL) policy and a long-term disability (LTD) policy with Guardian.

Life Plan Summary



Employer Paid Term Life

Benefits	Employer Paid Term Life
Life Benefit	250% of salary to a maximum of \$325,000
Accidental Death & Dismemberment (AD&D)	100% of life benefit
Waiver of Premium	If disabled, insurance will continue to age 65 or no longer disabled
Accelerated Life	75% of death benefit
Age Reduction	Age 70 50%

Disability Plan Summary



Employer Paid Long Term Disability

Benefits	Long Term Disability
Definition of Disability	For the waiting period and the first 24 months, you are unable to perform with reasonable continuity the material duties of your own occupation and / or suffer a loss of at least 20% of your predicability earnings when working in your own occupation. After that, being unable to perform the material duties of any occupation that you are able to perform, due to education, training, or experience.
When Benefits Begin	180th day of accident or illness
Duration (length of benefit)	Until Social Security or Normal Retirement Age
Partial Disability Included?	Yes. You may return to work part time and still be considered disable.
Pre-existing Conditions	3 months prior / 12 months after
Monthly Income Replacement	60% of monthly salary
Maximum Benefit	Up to \$6,000

The IHS also provides an in-house short-term disability policy based on length of service.

RETIREMENT PLAN 401(a) - IHS Contributions

Any employee or paid intern working at least 1000 hours per year is eligible for the Money Purchase plan with AUL (OneAmerica) the first of the month following two years of service working 1000 hours each year. Employees are 100% vested at the start of participation. Participants choose how contributions will be invested. This plan is a 401(a) defined contribution plan, and IHS pays all contributions equaling 8% of individual's gross earnings.

TRADITIONAL 403(b) AND ROTH 403(b) - Employee Contributions

All employees and IHS paid interns are eligible to participate in a Traditional 403(b) or Roth 403(b) with AUL (OneAmerica). Traditional 403(b), employees choose the amount of gross earnings (before taxes) to put into the account monthly. Income tax is paid only on the remaining amount of pay while the funds in the Traditional 403(b) earn returns. Roth 403(b), employees choose the amount of gross earnings (after taxes) to put into the account monthly. While these are after tax contributions now, they will be tax-exempt at the time they are withdrawn from the Roth 403(b), based on current tax laws. A loan provision is available on the amounts contributed to the Traditional 403(b).

EMPLOYEE ASSISTANCE PROGRAM

On the date of hire, all IHS employees and immediate family members are eligible to use the St. Vincent Employee Assistance Program (EAP). The EAP offers identification/evaluation of problems, referral to other resources and follow-up, short-term counseling, 24-hour crisis phone line, and educational workshops/seminars. The EAP is completely confidential and free of charge to employees and their families. If a referral to another resource is recommended, the health insurance coverage and financial situation of the employee will be taken into account.

VOLUNTARY INSURANCE PLANS

Full time employees may enroll in additional, supplemental insurance plans including Voluntary Lump Sum Disability, Voluntary Term Life Insurance and Level term life insurance. Employees are responsible for paying the premiums for additional voluntary insurance plans.

Voluntary Lump Sum Disability



Benefits	Lump Sum Disability
Benefit Amount	Should you become totally disabled, the plan will make a cash payment in increments of \$10,000, \$20,000, or \$30,000 to assist with any expenses that otherwise may not be covered by insurance. The plan payment is in addition to your employer paid monthly Long Term Disability benefit.
When Benefits Begin	180th day of disability
Pre-existing Conditions	3 months prior / 12 months after
Continuation of Coverage	Continuation of coverage during FMLA, Leave of Absence, Active Military, and Temporary Layoff
Age Reduction	Age 65: 70%; Age 70: 45%; Age 75: 30%; Age 80: 25%
Limitation	Drug & Alcohol Abuse: 20% of benefit Mental Illness: 20% of benefit Special Conditions: 20% of benefit

Benefits		Additional Voluntary Term Life
Coverage Amounts	Self	\$10,000 - \$325,000
	Spouse	\$5,000 - \$100,000 (no more than 50% of Self)
	Child	\$5,000 - \$10,000 (no more than 50% of Self)
Guarantee Issue (GI only offered at time of initial enrollment)	Self	\$100,000 Self
	Spouse	\$25,000 Spouse
Accelerated Benefit		If you are terminally ill, 75% of benefit
Waiver of Premium		Yes, if totally disabled while on the plan. Limited to < age 65
Conversion		Included
Age Reduction	Age 70	50%
Evidence of Insurability		You can increase coverage an additional \$50,000 each open enrollment, up to the GI.
Will Prep Services		Available

Family Protection Plan



Benefits		Family Protection Plan
Coverage Amounts	Self	\$10,000 - \$150,000
Guarantee Issue (GI only offered at time of initial enrollment)	Self / Spouse	\$50,000 Self / \$25,000 Spouse
Family Coverage		Coverage not required on EE to receive coverage on SP or CH.
Benefit Age Reduction		Your benefit amount will not reduce and your premium will not increase until age 121!
Portable		Included. Benefit leaves with you upon termination or retirement.
Terminal Illness Acceleration of Benefits		30% lump sum amount if diagnosed with a terminal illness.
Quality of Life Rider (Long Term Care)		Able to receive up to 75% of benefit amount with loss of at least 2 Activities of Daily Living (ADLs). <i>Not available if older than 66 at initial enrollment.</i>
Exclusions		Coverage has no war or terrorism exclusion.

LEGAL SHIELD AND IDENTITY THEFT

All employees have access to prepaid legal and identity theft protection services through LegalShield. Legal Services coverage is offered for common personal legal matters with direct access to a dedicated provider law firm. Identity theft protection coverage provides identity theft protection and online privacy management consultation, full service restoration, monitoring, and real-time alerts. More information regarding plans, pricing and enrollment can be completed here: <https://shieldbenefits.com/inhistorysociety/overview>

AFLAC

All employees have access to supplemental insurance plans provided by Aflac. To explore plan options and meet with an Aflac agent, visit <https://www.aflacrollment.com/IndianaHistoricalSociety/cds364053427>

PET INSURANCE

All employees have access to reimbursable pet insurance policies provided by Nationwide. To enroll or explore plan options please visit [PetsNationwide.com](https://www.petsnationwide.com) and search by company name “Indiana Historical Society.”

Bi-Monthly Premium Contributions

Medical (Bi-Monthly Premium)	Employee	IHS
Employee Only	\$0.00	\$476.82
Employee Spouse	\$170.24	\$874.03
Employee + Child(ren)	\$77.50	\$656.82
Employee + Family	\$220.30	\$990.85
Dental (Bi-Monthly Premium)	Employee	IHS
Employee Only	\$0.00	\$22.16
Employee Spouse	\$0.00	\$42.30
Employee + Child(ren)	\$0.00	\$52.99
Family	\$0.00	\$72.95
Vision (Monthly Premium)	Employee	IHS
Employee Only	\$4.75	\$0.00
Employee Spouse	\$8.05	\$0.00
Employee + Child(ren)	\$8.21	\$0.00
Family	\$12.99	\$0.00
Disability		
Short & Long Term Disability	This benefit is paid for you by IHS.	
Lump Sum Disability	Voluntary. Rate based on age & coverage elected.	
Life		
Group Term Life	This benefit is paid for you by IHS.	
Voluntary Life	Voluntary. Rate based on age & coverage elected.	
Family Protection Plan		
Family Protection Plan and Quality of Life Benefit	Voluntary. Rate based on age & coverage elected.	
Worksite Benefits		
Legal Shield, Identity Shield, AFLAC	Please see HR for benefits and pricing	

PAID TIME OFF - PTO days will be deposited for full time employees on January 1st each year based on your years of service.

Years of Service	PTO Annual Deposit	Maximum Rollover	Maximum Balance
0-4 Years	25 Days / 200 Hours	5 Days / 40 Hours	30 days / 240 Hours
5-10 Years	30 Days /240 Hours	10 Days / 80 Hours	40 days / 320 Hours
10 + Years	35 Days /280 Hours	15 Days / 120 Hours	50 days / 400 Hours

OTHER BENEFITS

Holidays

7 paid, IHS defined holidays and 5 paid, floating holidays.

Parking

IHS employees may park in the IHS parking lot or may be required to use offsite parking during high demand periods. If required to park offsite, costs will be covered and/or reimbursed by the IHS.

Free IHS membership

All employees receive all benefits associated with an IHS Individual Membership

Discounts in the History Market

All IHS employees receive a 25% discount on items purchased in the History Market, along with additional discount days exclusively for staff during holidays.

Fitness Room, locker, and shower facilities

Available 24/7, unless access must be restricted due to rental events, all IHS employees may use the fitness room, lockers, and shower facilities that are available on the canal level of the IHS building.

Café on the Stardust Terrace

All IHS employees are eligible for a 10% discount on purchases from the Café on the Stardust Terrace, the restaurant on the canal level of the IHS building.

Staff and Volunteer lounge

Kitchen facilities with microwave and refrigerator are available, as are soda and snack machines.

***For more information on IHS benefits, contact
Senior Director, Human Resources, at (317) 234-7640***