GUIDE TO YOUR BENEFITS 2021

January 1–December 31, 2021
ELIGIBILITY

YOU MUST ENROLL FOR BENEFITS COVERAGE WITHIN YOUR FIRST 30 DAYS OF EMPLOYMENT.

You are eligible to participate in Seattle University benefits if you are a staff employee who is regularly scheduled to work 20 hours or more per week, or if you are a faculty member with 17.5 work units in an academic-year appointment. Your coverage becomes effective on the first day of the month following or coinciding with your date of eligibility.

Eligible dependents include:
- Your legal spouse or a Legally Domiciled Adult (LDA), and
- Your children (biological, adopted, foster children, stepchildren or children for whom you have guardianship, children of LDA when your LDA is also covered), regardless of their marital or student status up until the end of the month in which they turn 26.

All new faculty and staff must complete enrollment into benefits within 30 days of employment. If you would like to waive coverage through the University, you are required to process your waiver on the University’s benefit enrollment site. If you take no action, you will automatically be enrolled in the Aetna HSA, dental and vision plans with Employee Only coverage.

MAKING CHANGES DURING THE YEAR

You may not change your benefits until the next open enrollment period held in the fall unless you have a life “qualifying event.” These events include, but are not limited to:
- Your marriage
- Birth, adoption or gaining legal custody of a child
- Divorce or legal separation
- Loss of coverage under another group insurance plan
- Loss or gain of your spouse’s or LDA’s eligibility under his or her employer’s benefit plan
- The death of your spouse, LDA or a child

If you experience a life qualifying event, you must notify Human Resources to change your coverage within 30 days of the event; or 60 days if adding newborns or newly adopted children, or you, your spouse/LDA, or eligible dependent child loses coverage under Medicaid or a State Children’s Health Insurance Program (S-CHIP) or becomes eligible for state-provided assistance.
ANNUAL OPEN ENROLLMENT
Annual open enrollment is your opportunity to evaluate your benefit options and to make changes for the upcoming year. Open enrollment for 2021 benefits is October 12—October 23, 2020.

Your Steps:
1. Refresh your understanding of benefit choices by reading this guide.
2. Sign in to https://benefits.plansource.com to see your current benefits and 2021 costs. This is also where you make your 2021 changes.
3. Your username is your full SU email. Your password has been reset to your date of birth in the format: YYYYMMDD. You will then be prompted to change your password.
4. Complete your enrollment by October 23.

If you don’t make a change during Open Enrollment, your current benefit elections—except for flexible spending accounts (FSA)—will automatically carry forward into 2021.

2021 CHANGES
- Your pharmacy benefit will be administered by CVS Caremark in 2021 if you choose to enroll in one of the Aetna medical plans. You should not notice significant changes as prescription coverage and formulary will remain the same as in 2020. You will receive a new Aetna medical card, and a separate CVS Caremark pharmacy card prior to January.
- You will have the option to elect voluntary life insurance coverage for you and your dependents without submitting Evidence of Insurability (EOI) for coverage up to the guaranteed issue amount. You can also verify and update your beneficiary elections when electing additional life insurance.
- The maximum amount that may be contributed to a Navia Health Care Spending Account will increase to $2,750 in 2021.
ENROLLING IN BENEFITS

Your 2021 benefit choices can be made online through the benefit enrollment system, PlanSource at: https://benefits.plansource.com. Your username is your full SU email address. Your password will be reset during Open Enrollment to your date of birth in the format: YYYYMMDD.

You can contact PlanSource customer service at (866) 930-0464 if you need support creating your account or electing your benefits.

MEDICAL AND PRESCRIPTION DRUGS

The University offers you a choice of medical plans, including a Preferred Provider Organization (PPO) Plan and a Health Savings Account (HSA) Plan through Aetna. A third plan option is an HMO administered by Kaiser Permanente. Although the plans generally cover the same medical services, they are different in three important ways: what providers and facilities you have access to, how much money you spend when you receive services and how much you pay in payroll deductions. Which plan is best for you will depend on your and your family’s health care needs.

**HMO PLAN**

Administered by Kaiser Permanente

The Kaiser HMO Plan is a Health Maintenance Organization (HMO) plan. This plan has no deductible and requires a copayment for certain services. To receive care, you must use a Kaiser provider or facility for services to be covered. You have to be referred by your primary care physician to see many specialists in network.
PPO PLAN
Administered by Aetna and CVS Caremark
The PPO Plan has a deductible of $500 per individual and a maximum of $1,000 for a family. Once you have met your deductible, you then pay a percentage of the expenses, called coinsurance. If your coinsurance and deductible reach an amount called the out-of-pocket maximum, the plan will pay 100% of your eligible expenses for the rest of the plan year, excluding copays and premiums. With the PPO Plan you pay a higher premium in exchange for the lower deductible and out-of-pocket maximum. If you receive care from an in-network provider (Aetna Choice POS II - Open Access network), you will receive the highest level of benefit coverage available.

HEALTH SAVINGS ACCOUNT (HSA) PLAN
Administered by Aetna, CVS Caremark and Fidelity
The HSA Plan has a deductible of $2,000 for Employee Only coverage and $4,000 when you cover one or more family members. Once you have met your deductible, you then pay a percentage of the expenses, called coinsurance. If your coinsurance and deductible reach an amount called the out-of-pocket maximum, the plan will pay 100% of your eligible expenses for the rest of the plan year, excluding copays and premiums. With the HSA Plan you pay a lower premium in exchange for the higher deductible and out-of-pocket maximum. If you receive care from an in-network provider (Aetna Choice POS II - Open Access network), you will receive the highest level of benefit coverage available. To help you pay out-of-pocket costs, the University will contribute to a tax-advantaged Health Savings Account (HSA), administered through Fidelity.

How the HSA Works
An HSA is a tax-advantaged medical savings account available to individuals that enroll in a qualified high deductible plan such as the University’s HSA Plan. Seattle University will post pay period contributions to Fidelity once you activate a special HSA account. You can choose to add your own paycheck deferrals to the same account. You may use HSA dollars (including earnings) to pay for eligible medical expenses or you can save them as a long-term strategy to pay for medical expenses in retirement (for example).

Seattle University’s 2021 monthly contribution to your HSA is based on the level of coverage you choose:
- Employee Only: $83.33 per month
- Employee Plus One or More Dependents: $166.67 per month

Who’s Eligible?
You’re eligible to select the HSA plan if you meet the following criteria:
- You’re not enrolled in Medicare.
- You can’t be claimed as a dependent on someone else’s tax return.
- You are not enrolled in other medical coverage (i.e., dual covered under your spouse’s plan) unless it is considered a qualified high deductible health plan.
- Your spouse is not enrolled in a Health Care Flexible Spending Account.

Your HSA Contribution Maximum
In addition to the monthly contributions the University makes on your behalf, you may also make paycheck contributions to your account, up to the IRS limit. The following University and Employee contribution limits apply if you enroll on January 1, 2021:

<table>
<thead>
<tr>
<th>Medical Coverage</th>
<th>Total Maximum Contribution</th>
<th>University Contribution</th>
<th>Maximum Employee Contribution*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Only</td>
<td>$3,600</td>
<td>$1,000</td>
<td>$2,600</td>
</tr>
<tr>
<td>Employee Plus One or More Dependents</td>
<td>$7,200</td>
<td>$2,000</td>
<td>$5,200</td>
</tr>
</tbody>
</table>

*If you are 55 or older, you may add a “catch-up” contribution of $1,000.
Eligible Expenses
You can use your HSA for qualified health care expenses related to yourself or any tax dependent. A list of these expenses is available on the IRS website at www.irs.gov. In general, most expenses related to medical, dental and vision care count as a qualified expense.

Why Enroll in an HSA
An HSA helps you set aside tax-advantaged dollars to meet future health care needs.

- You decide when to use the money in your savings account. You even keep the account when you leave the University.
- The University contributes dollars to the HSA.
- Your payroll premium contribution is lower.
- It rolls over. Unlike a Health Care FSA, any unused dollars roll over each year and will be available when you need them to pay for eligible health expenses.

HSA TRIPLE TAX BENEFITS:
- You will not pay federal income or social security tax, and in most cases state income tax, on HSA contributions.
- Your HSA balance earns tax-free investment returns.
- You can withdraw tax-free money to pay for qualified health care expenses before or after retirement.

As medical costs continue to rise, it’s important to make health care saving a part of your long-term plans. If you’d like to take a more detailed look at how an HSA works, watch this 15-minute video: www.brainshark.com/fidelityemg/DiscoverHSA.
### Annual Deductible

<table>
<thead>
<tr>
<th></th>
<th>AETNA PPO Plan</th>
<th>AETNA HSA Plan</th>
<th>KAISER HSA Plan</th>
<th>KAISER HMO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
<td>$500</td>
<td>$2,000</td>
<td>$4,000</td>
<td>None</td>
</tr>
<tr>
<td>Family</td>
<td>$1,000</td>
<td>$4,000</td>
<td>$8,000</td>
<td>None</td>
</tr>
</tbody>
</table>

### Out-of-Pocket Maximums (includes deductible and copays)

<table>
<thead>
<tr>
<th></th>
<th>AETNA PPO Plan</th>
<th>AETNA HSA Plan</th>
<th>KAISER HSA Plan</th>
<th>KAISER HMO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
<td>$3,350</td>
<td>$4,000</td>
<td>N/A</td>
<td>$2,000</td>
</tr>
<tr>
<td>Family</td>
<td>$6,700</td>
<td>$8,000</td>
<td>N/A</td>
<td>$4,000</td>
</tr>
</tbody>
</table>

### Preventive Care

<table>
<thead>
<tr>
<th>Service</th>
<th>AETNA PPO Plan</th>
<th>AETNA HSA Plan</th>
<th>KAISER HSA Plan</th>
<th>KAISER HMO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Well-Baby Exams</td>
<td>100%</td>
<td>60% after deductible</td>
<td>100%</td>
<td>50% after deductible</td>
</tr>
<tr>
<td>Adult Physical Exam</td>
<td>100%</td>
<td>60% after deductible</td>
<td>100%</td>
<td>50% after deductible</td>
</tr>
<tr>
<td>Well-Women Exams/Screenings</td>
<td>100%</td>
<td>60% after deductible</td>
<td>100%</td>
<td>50% after deductible</td>
</tr>
<tr>
<td>Immunizations</td>
<td>100%</td>
<td>60% after deductible</td>
<td>100%</td>
<td>50% after deductible</td>
</tr>
</tbody>
</table>

### Professional Services

<table>
<thead>
<tr>
<th>Service</th>
<th>AETNA PPO Plan</th>
<th>AETNA HSA Plan</th>
<th>KAISER HSA Plan</th>
<th>KAISER HMO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doctor Office Visit</td>
<td>$25 then 100%</td>
<td>60% after deductible</td>
<td>90% after deductible</td>
<td>50% after deductible</td>
</tr>
<tr>
<td>Urgent Care</td>
<td>$25 then 100%</td>
<td>60% after deductible</td>
<td>90% after deductible</td>
<td>50% after deductible</td>
</tr>
<tr>
<td>Diagnostic Lab/X-ray</td>
<td>80% after deductible</td>
<td>60% after deductible</td>
<td>90% after deductible</td>
<td>50% after deductible</td>
</tr>
<tr>
<td>Inpatient Hospital Services</td>
<td>80% after deductible</td>
<td>60% after deductible</td>
<td>90% after deductible</td>
<td>50% after deductible</td>
</tr>
<tr>
<td>Outpatient Hospital Services</td>
<td>80% after deductible</td>
<td>60% after deductible</td>
<td>90% after deductible</td>
<td>50% after deductible</td>
</tr>
<tr>
<td>Emergency Room</td>
<td>$100 copay, then deductible/coinsurance</td>
<td>90% after deductible</td>
<td>$100 copay for Kaiser or non-Kaiser facility</td>
<td></td>
</tr>
<tr>
<td>Ambulance</td>
<td>80% after deductible</td>
<td></td>
<td>80% after deductible</td>
<td></td>
</tr>
</tbody>
</table>

### Prescription Drugs (retail)

<table>
<thead>
<tr>
<th>Type</th>
<th>AETNA PPO Plan</th>
<th>AETNA HSA Plan</th>
<th>KAISER HSA Plan</th>
<th>KAISER HMO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generic</td>
<td>$10</td>
<td>$10, then 60%</td>
<td>90% after deductible</td>
<td>50% after deductible</td>
</tr>
<tr>
<td>Preferred Brand</td>
<td>$30</td>
<td>$30, then 60%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-Preferred Brand</td>
<td>$60</td>
<td>$60, then 60%</td>
<td></td>
<td>N/A</td>
</tr>
</tbody>
</table>

### Prescription Drugs (mail-order)

<table>
<thead>
<tr>
<th>Type</th>
<th>AETNA PPO Plan</th>
<th>AETNA HSA Plan</th>
<th>KAISER HSA Plan</th>
<th>KAISER HMO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generic</td>
<td>$20</td>
<td>Not Covered</td>
<td>90% after deductible</td>
<td>50% after deductible</td>
</tr>
<tr>
<td>Preferred Brand</td>
<td>$60</td>
<td>$60</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-Preferred Brand</td>
<td>$120</td>
<td></td>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>

*This summary is provided for general information only; please refer to the Summary of Benefits and Coverage available at: http://www.seattleu.edu/hr/benefits.*
VISION

Underwritten by Vision Service Plan (VSP)
Core vision includes an eye exam, lenses or contacts once every 12 months and frames once every 24 months. When you choose to enroll in the enhanced vision plan, your benefit includes a higher annual allowance for frames and contacts. VSP always provides you additional savings opportunities, including discounts on additional glasses and sunglasses, lens options and discounts on laser vision correction. You will receive the highest level of benefit by using an in-network provider. Vision plan highlights are presented below (in-network benefits are shown).

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Core Coverage</th>
<th>Enhanced Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exam</td>
<td>$20 copay</td>
<td>$20 copay</td>
</tr>
<tr>
<td>Lenses</td>
<td>Plan pays 100% for single vision, bifocal, lined trifocal; also includes polycarbonate lenses for children</td>
<td>Plan pays 100% for single vision, bifocal, lined trifocal; also includes polycarbonate lenses for children</td>
</tr>
<tr>
<td>Frames</td>
<td>$130 allowance every 24 months, plus 20% off any out-of-pocket costs</td>
<td>$250 allowance every 12 months, plus 20% off any out-of-pocket costs</td>
</tr>
<tr>
<td>Contact Lenses</td>
<td>Not to exceed $60 copay</td>
<td>Not to exceed $60 copay</td>
</tr>
<tr>
<td>Contacts</td>
<td>$130 annual allowance</td>
<td>$250 annual allowance</td>
</tr>
</tbody>
</table>

Kaiser members can choose from the vision plans above, PLUS your HMO coverage includes an annual eye exam every 12 months (subject to office visit copay).

DENTAL

Underwritten by Delta Dental of WA
Your dental plan is a preferred provider organization (PPO) plan, underwritten by Delta Dental of WA. Under this plan you are free to go to any licensed dentist you choose — but if you go to a dentist who is a member of Delta Dental’s network, you will reduce your out-of-pocket costs. The highlights of your dental plan are presented below.

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Preferred Provider</th>
<th>Non-Preferred Provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Maximum Benefit</td>
<td>$1,500 individual</td>
<td></td>
</tr>
<tr>
<td>Calendar Year Deductible</td>
<td>$50 individual/$150 family</td>
<td></td>
</tr>
<tr>
<td>Preventive Services</td>
<td>Plan pays 100%; deductible waived</td>
<td>Plan pays 80%; deductible waived</td>
</tr>
<tr>
<td>Basic Services</td>
<td>Plan pays 80%</td>
<td>Plan pays 70%</td>
</tr>
<tr>
<td>Major Services</td>
<td>Plan pays 50%</td>
<td>Plan pays 40%</td>
</tr>
<tr>
<td>Orthodontia (children only)</td>
<td>Plan pays 50%, up to a maximum lifetime benefit of $1,500</td>
<td></td>
</tr>
</tbody>
</table>
FLEXIBLE SPENDING ACCOUNTS

Administered by Navia Benefit Solutions
Flexible Spending Accounts (FSAs) allow you to set aside pre-tax dollars to pay for eligible expenses each year. This means your contributions will be deducted from your paycheck before your pay is taxed. You will not pay federal income or social security tax, and in most cases state income tax, on flexible spending account contributions. The University offers you two FSAs:

HEALTH CARE SPENDING ACCOUNT
Allows you to pay eligible health care expenses for yourself and your eligible dependents with tax-free dollars. Eligible expenses may include deductibles, copays, out-of-pocket vision or dental expenses, and prescribed over-the-counter medications. The maximum eligible amount to contribute to your Health Care FSA is $2,750.

Reimbursable claims may be incurred during January 1 through December 31 each year. You may submit claims for yourself and your eligible dependents until March 31, 2022 for claims incurred in 2021. $500 maximum in unclaimed contributions are automatically rolled over after the end of the year.

DON’T WAIT FOR REIMBURSEMENT
Rather than completing a claim form and waiting for reimbursement for your out-of-pocket eligible expenses, you can elect a Navia Benefits Debit Card and pay your provider directly for qualified health care expenses.

DEPENDENT CARE SPENDING ACCOUNT
Enables you to pay for work-related dependent care expenses with tax-free dollars. Eligible expenses may include daycare centers, in-home child care and before/after school care. You can set aside $5,000 ($2,500 if married and filing separately).

Who’s Eligible?
You’re eligible to enroll in a Health Care FSA as long as you or your spouse aren’t actively contributing to a Health Savings Account (HSA). If you’re enrolled in an HSA, you can still take advantage of the tax benefits of a Dependent Care Spending Account.

How an FSA Works
If you elect to participate in an FSA, you must do the following:
- Each year, during Open Enrollment, you will need to enroll and determine the amount you want to contribute per paycheck.
- You may contribute up to $2,750 per plan year to the Health Care FSA.
- You can also contribute up to $5,000 per plan year to the Dependent Care FSA ($2,500 if married and filing separately).
- Contributions to your FSA are deducted from your paycheck in equal amounts throughout the year before taxes are taken out, which means more money in your wallet.

To learn more about reimbursable expenses, visit the Navia Benefit Solutions website: www.naviabenefits.com > Click on ‘I’m a participant.’
LIFE AND DISABILITY

Underwritten by Cigna

Benefits eligible faculty and staff are generally covered by the basic life and basic accidental death and dismemberment (AD&D) insurance plans. The University pays the full cost of these plans, which are insured through Cigna. You may also purchase additional coverage for yourself and coverage for your dependents.

BASIC LIFE/AD&D INSURANCE

The University provides you coverage equivalent of your annual rate of pay to a maximum of $50,000 (for a total of $100,000 basic life and AD&D coverage). Life insurance protects your family from financial hardship in the event of your death. AD&D pays a benefit when death is due to an accident or when you experience a certain loss of functionality.

BE PROTECTED.

There are some good reasons to think about Optional Life Insurance as part of your financial planning:

- 50% of American households would feel the financial impact from the loss of their primary wage earner in a year or less, over 40% would feel the impact within 6 months.
- Unintentional injuries are the fifth leading cause of death in the U.S.

For more information on how much life insurance you need, visit Cigna’s online calculator at www.cigna.com/lifecalculator.

OPTIONAL LIFE INSURANCE

Additional Coverage for You. You may purchase additional life insurance from one to four times your annual pay to a maximum of $500,000. You pay the cost of this coverage through after-tax payroll deductions. If you choose more than $200,000 of coverage (including the basic benefit), you will be required to provide evidence of good health before Cigna’s coverage will become effective. You will also have to provide evidence of good health if you do not enroll in the optional life insurance plan within 30 days of the date you become eligible for coverage, or if you later decide to increase your coverage amount.

Coverage for Your Family. In addition to buying extra life insurance coverage for yourself, you may purchase life insurance for your spouse (or LDA) and children. You may only purchase coverage for your family members if you purchase coverage for yourself under the optional life insurance plan. You will pay the full cost of your family members’ coverage through after-tax payroll deductions.

- Spouse (or LDA): You may purchase optional life insurance to a maximum benefit of $100,000.
  Evidence of good health will be required for amounts in excess of $20,000.
- Child(ren): You may purchase child life insurance in $5,000 increments to a maximum benefit of $10,000.

Rates are determined based on your age and the amount of insurance requested.

OPTIONAL AD&D

Additional AD&D insurance, beyond the basic amount provided by the University, is also available at your expense. You may elect between $100,000 and $500,000 of optional coverage for either yourself or you and your family. You do not need to provide evidence of insurability if you are electing or increasing optional AD&D during open enrollment.

Beneficiary Designation

As part of online enrollment, you will be prompted to provide beneficiary information on your important life and AD&D benefits.
Long-term Disability
The long-term disability plan provides you monthly income protection after 180 days of being unable to work due to a disabling condition. The University pays the cost of this coverage, and enrollment is automatic on the first of the month following or coinciding with your first anniversary as a benefits-eligible employee. The plan pays 60% of your monthly earnings up to a maximum benefit of $9,000 and may continue until your social security retirement age.

WorkLife Resources and EAP
The University pays 100% of the cost of services provided by Wellspring Family Services. Wellspring is your community resource and referral service for help with daily life challenges including child and elder care, parenting and legal/financial counseling. Employees and their family members may call Wellspring at 1-800-553-7798 or visit online at www.wellspringeap.org (enter user name: Seattle University).

Through Wellspring’s Employee Assistance Program, trained counselors provide confidential assistance with life’s most pressing challenges including:
- Depression, stress or grief
- Marital and parenting problems
- Alcohol and substance abuse
- Conflicts

Employees and family members are eligible for up to six face-to-face assessment and counseling sessions per issue, per year. Wellspring’s EAP is staffed with licensed clinicians and skilled behavioral health care professionals who will assess your needs and refer you to a local provider if appropriate.

2021 BENEFIT PROGRAM COSTS
Seattle University pays most of the cost of medical plan premiums for benefits eligible faculty and staff and their families. Also, the University pays 100% of the premium for basic life, basic accidental death and dismemberment (AD&D) and long-term disability.

Your premium cost for medical coverage is based on your annual pay rate and your chosen coverage level. Premiums for you, your spouse and dependent children are deducted on a pre-tax basis (except for optional life/AD&D). Pre-tax means the deductions are taken from your gross pay before federal withholding and Social Security taxes are calculated and withheld. If you choose to contribute to a flexible spending account or health savings account, these deductions are also on a pre-tax basis.

Due to IRS regulations, health premiums for your Legally Domiciled Adult (LDA) and for the dependent children of your LDA who are not also your tax dependents are deducted on an after-tax basis. Additionally you will be charged imputed income for the coverage of your LDA and your LDA’s dependents.
RETIREMENT PLAN

Administered by Fidelity Investments

Upon hire, you may contribute a pre-tax portion of your regular pay to a retirement account with Fidelity and invest your money in investment funds with favorable fees and performance. You may also change your paycheck contribution at any time with Fidelity. Your contributions are 100% vested which means that you own the dollars as soon as they are deposited in your account. The IRS limit for calendar year 2021 is:

- $19,500 General limit
- $6,500 Additional “catch-up” contribution amount if you are age 50 or older

After one year of service (or immediately with applicable prior service), the University may contribute a percent of eligible pay to your retirement account. You must be credited with 1,000 work hours in a calendar year to earn the University’s contributions for that same year. You have the same retirement investment options at Fidelity.

TUITION REMISSION FOR FACULTY AND STAFF

After completing three full months of employment, benefits eligible faculty and staff are eligible for 100% tuition remission. The university covers the cost to a maximum of 21 credits per academic year on undergraduate and/or graduate coursework at Seattle University (pro-rated for part-time).

TUITION REMISSION FOR DEPENDENTS

Following 12 months of employment, eligible dependents (spouse and eligible children) receive 50% tuition remission on the first undergraduate degree at Seattle University (pro-rated for part-time).

After three years of eligible service, eligible dependents receive 100% tuition remission on the first undergraduate degree at Seattle University (pro-rated for part-time).

Tuition remission benefit levels may be accelerated with applicable prior service at an accredited college or university.

EXCHANGE PROGRAMS FOR DEPENDENT CHILDREN

After completion of 3 years of continuous service in an eligible position, dependent children of full-time employees are eligible to participate in the following undergraduate exchange programs. Please note that eligibility does not guarantee your child an exchange scholarship.

- FACHEX (25 Jesuit Colleges and Universities across the U.S.)
- TUITION EXCHANGE, INC. (over 600 member institutions across the U.S.)

Additional Benefits

- Vacation and Sick Leave Programs: For Staff: Annual vacation days determined by years of service.
- Paid Holidays: The University observes fourteen paid holidays this year.
- Paid Days Off: The University is closed the week between Christmas Day and New Year’s Day with paid time off during the closure (see policy provisions for applicability).
- Community Service Leave: Up to 3 community service days per fiscal year (pro-rated for part-time).
- Pre-Tax Transportation Plan: Subsidized transit passes. Transit passes and parking permit deductions may be paid with tax-free dollars.
- Campus Store Discounts
- Eisminger Fitness Center Membership: Tennis, racquetball, swimming, weights, cardio, etc. for employees and household members.
- A.A. Lemieux Library Privileges

NOTE:
To see 2021 premium costs for the medical, dental and vision plans, and find contact information, please visit https://benefits.plansource.com