

FINLANDIA UNIVERSITY

BENEFITS AT A GLANCE 2022

For more detail login to our Employee Resource Guide on our website

HOLIDAYS

10

Paid Holidays
+ 4 days Holiday Hiatus

Paid Time Off

Based on years of service

Short and Long Term Disability

RETIREMENT PLAN

Eligible 1st full time employment day of hire.

Plan default employee contribution is 3% unless modified by first pay period. Additional provisions, exclusions, and limitations may apply.

Additional employee contribution is encouraged up to the federal maximum.

MEDICAL, DENTAL & VISION

4 Medical Plans

MESSA Essentials, Choices, ABC Plan 1& 2
\$5,000 life insurance policy including with each plan. HSA eligibility with ABC plans

AFLAC Supplemental Insurance

Delta Dental Plan

VSP Vision Plan

MISC.

Athletic Game Entrance free or discounted

Flexible schedule (supervisor approval required)

Free Tuition

FT employee, spouse & dependents eligible after 6 mo. of service

PT employee, spouse & dependents eligible after 1 year of service

Free tuition at FinnU & 400+ other schools (CIC-TEP)

Up to 8 semesters at CIC-TEP

Bachelors and/or Master's degree

LIFE INSURANCE

Basic Term life insurance is employer paid (\$5,000).

STD insurance is employer paid up to 70% of your annual earnings.

LTD insurance is employer paid up to 66.6% of your annual earnings. Maximum monthly benefit of \$7,000.

Voluntary Life insurance is employee paid (\$10,000 increments – employee, \$5,000 increments – spouse). Child life insurance is also available.

Gymmembership at Paavo Nurmi Center

Public Student Loan Forgiveness

SnowDays

Our employees are our most valuable asset. That's why at Finlandia University we are committed to a comprehensive benefit program that helps our employees stay healthy, feel secure & maintain a positive work-life balance.

Below is a snapshot that provides you with the **employee cost per pay period** for each benefit we offer.



MESSA HEALTH INSURANCE W/ \$5,000 LIFE INSURANCE POLICY				
COVERAGE	ABC 1	ABC 2	CHOICES	ESSENTIALS
EMPLOYEE	\$98	\$83	\$110	\$77
2 PERSON	\$220	\$188	\$247	\$173
FAMILY	\$273	\$234	\$357	\$215

VSP EYE INSURANCE	
COVERAGE	PREMIUM
EMPLOYEE	\$4.32
EMPLOYEE + SPOUSE	\$7.27
EMPLOYEE + CHILDREN	\$7.42
FAMILY	\$11.96

DELTA DENTAL INSURANCE	
COVERAGE	PREMIUM
EMPLOYEE	\$12.55
2 PERSON	\$24.44
FAMILY	\$49.88



MUTUAL OF OMAHA LIFE INSURANCE		
PLAN	COVERAGE	INFORMATION
LIFE INSURANCE	\$15,000	Employer Paid
AD&D	\$15,000	Employer Paid
VOLUNTARY LIFE INSURANCE	\$10,000 increments (employee) \$5,000 increments (spouse)	Employee Paid

The information in this benefits at a glance is presented for illustrative purposes only. The information contained in this summary was taken from various summary plan descriptions and benefit information. While every effort was taken to accurately report your benefits, discrepancies or errors are always possible. In case of discrepancy between the benefits at a glance and the actual plan documents, the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability & Accountability Act of 1996. If you have questions about this summary, please contact Human Resources.