

# NJII FULL-TIME EMPLOYEE BENEFITS AT A GLANCE 2024

## Paid Time Off

Vacation: 20 days per year - Accrued at 5.38 hours per pay period

Sick Leave: 12 days per year - Accrued at 3.23 hours per pay period

Personal: 3 days per year - Given upon hire; provided fiscally; cannot be carried over

## Company Paid Holidays

New Year's Day	Martin Luther King Jr. Day	Memorial Day
Juneteenth	Independence Day	Labor Day
Thanksgiving Day	Day after Thanksgiving	Christmas Day

One Floating Holiday- granted fiscally, cannot be carried over

## Bonus Paid Time Off (Not Taken from your Paid Time Off)

Company is closed between Christmas and New Year's\*

## 401(k)

Safe Harbor match of 160% of your elective deferrals, up to 5% of your salary, capped at an employer match of 8%, regardless of whether that contribution is Traditional 401(k) or a Roth 401(k) contribution.

Examples:

Employee Contribution	1%	2%	3%	4%	5%	Any Amount over 5%
Employer Match	1.6%	3.2%	4.8%	6.4%	8%	8%

\*Due to business needs and job responsibilities, certain employees may be required to work during this time; such arrangements are at NJII's discretion.

\*\*Employees must be 21 years of age or older to participate in our 401 (k) plan.

## Health Benefits

### 3 Medical Plan options provided through Horizon (cost per pay period)

Direct Access FO	OMNIA 8	OMNIA 7 HSA
EE Only: \$134.81 EE+Spouse: \$267.26 EE+Child(ren): \$220.40 EE+Family : \$361.17	EE Only: \$99.73 EE+Spouse: \$181.89 EE+Child(ren): \$150.22 EE+Family : \$245.80	EE Only: \$48.70 EE+Spouse: \$90.93 EE+Child(ren): \$74.35 EE+Family : \$122.88

Benefits Calendar Year	Direct Access FO		OMNIA 8		Omnia 7 HSA	
	In Network	Out of Network	Tier 1	Tier 2	Tier 1	Tier 2
<b>Annual Deductible***</b>						
<b>Individual</b>	\$1,000	\$2,500	\$500	\$2,500	\$1,500	\$2,500
<b>Family</b>	\$2,000	\$5,000	\$1,000	\$5,000	\$3,000	\$5,000
<b>Coinsurance</b>	80% after deductible	60% after deductible	80% after deductible	60% after deductible	90% after deductible	70% after deductible
<b>Out-of-pocket Maximum****</b>						
<b>Individual</b>	\$3,500	\$7,500	\$2,500	\$4,500	\$3,000	\$6,000
<b>Family</b>	\$7,000	\$15,000	\$5,000	\$9,000	\$6,000	\$12,000
<b>Office Visits</b>	\$25 PCP copay \$50 SP copay	60% after deductible	\$15 PCP copay \$25 SP copay	\$30 PCP copy \$50 SP copay	\$15 PCP copay, plus 90% after deductible \$25 SP copay plus 90% after deductible	\$30 PCP copay plus 70% after deductible \$50 SP copay plus 70% after deductible
<b>Emergency Room</b>	\$100 copay, then 80% after deductible	\$100 copay, then 80% after deductible	\$100 copay, then 80% after deductible	\$100 copay, then 80% after deductible	\$100 copay, then 90% after deductible	\$100 copay, then 90% after deductible
<b>Hospitalization</b>	80% after deductible	60% after deductible	80% after deductible	60% after deductible	90% after deductible	70% after deductible

\*\*\*The deductible includes all eligible copays and coinsurance amounts and is calculated on an aggregate basis

\*\*\*\*The out-of-pocket maximum included the deductible and all eligible copays and coinsurance amounts

**1 Dental** Plan provided through Principal (cost per pay period)

EE Only: \$8.40

EE+Spouse: \$16.77

EE+Child(ren): \$20.19

EE+Family : \$29.97

**1 Vision** plan provided through Principal (cost per pay period)

EE Only: \$3.48

EE+Spouse: \$6.84

EE+Child(ren): \$6.87

EE+Family : \$11.09

### **Hybrid Work Model**

Two to three days on-site; the rest of your workweek you can work from home

### **Summer Fridays**

Off on select Fridays between end of May through mid-August

### **Company Paid Benefits**

- Individual Group Term Life Insurance, benefit amount of 100% of your salary, rounded to the higher \$1,000 (max \$150k)
- Employee AD&D
- Long-Term Disability with a monthly benefit of 60% of monthly earnings (\$12,000 max)
- Employee Assistance Program
- Access to Morgan Stanley financial advisors

### **Optional**

- FSA
  - Medical- Annual Maximum is \$3200
  - Dependent Care- Annual Maximum is \$5000
- FSA Commuter Benefits
  - Parking- up to \$315 per month
  - Transit- up to \$315 per month
- HSA (for HSA eligible plan only- OMNIA 7 HSA)
  - Individual Annual Maximum- \$4150
  - Family Annual Maximum- \$8300
- Tuition Reimbursement
- Tickets at Work Discount Program
- NJIT Bookstore Discount
- Discounted Daycare at Lightbridge Academy Centers
- HUSK Wellness Program