

# BENEFITS BOOKLET

## PROCEDURE 500.02 FULL TIME LIMITED EMPLOYEES

Effective January 1, 2024 – December 31, 2024



You have 30 days from your hire date to enroll in the Health Benefits and Supplemental Benefits

# CONTACT INFORMATION

## HUMAN RESOURCES & PROFESSIONAL DEVELOPMENT DIVISION

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**THE EMPLOYMENT, EMPLOYEE RELATIONS, BENEFITS AND COMPENSATION DEPARTMENTS ARE  
LOCATED IN THE SUNNICREST HOUSE**

**PROFESSIONAL DEVELOPMENT DEPARTMENT IS LOCATED IN THE FERNIHURST HOUSE**

**OFFICE HOURS ARE MONDAY – FRIDAY 9:00 AM – 5:00 PM**

**APPOINTMENTS ARE REQUIRED**

# Human Resources Organizational Chart



# ELIGIBILITY AND PAYROLL

## EMPLOYEE BENEFITS ELIGIBILITY

### POLICY 500

Applies to full-time regular and/or part-time regular employees as defined in Policy 503.05- Employment Categories and Classifications. Statutory benefits apply to all employees.

## FULL-TIME LIMITED EMPLOYEE

### PROCEDURE 503.05

A full-time limited employee works an average of at least 30 service hours per week or 130 service hours per month and is expected to be employed for 12 months or less with no expectation of recurring employment.

## PAYROLL DEDUCTIONS

### PROCEDURE 503.03

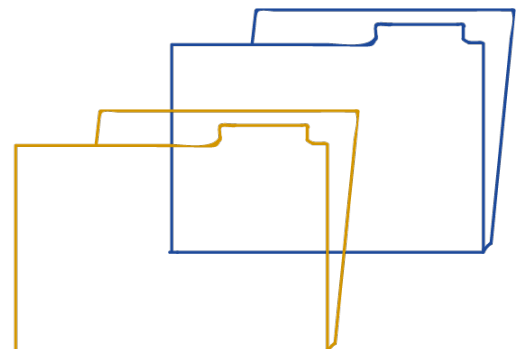
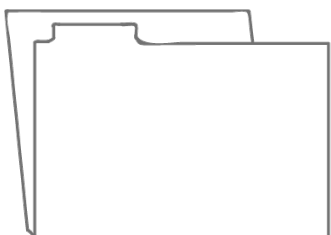
Payroll deductions for the NC State Teacher's and State Employees' Retirement and group life insurance through Unum are always deducted from the first paycheck, regardless of start date. Deductions for employee elected benefits are generally deducted the following month, giving the employee time to make their new hire enrollment selections. The premium deductions for Medical are paid a month prior to the coverage effective date, so in some instances a double deduction is required from the paycheck. This double deduction must be paid-in-full to ensure no lapse in coverage.

## INITIAL ENROLLMENT

The Benefits Team in Human Resources will reach out to all new hires within their week of hire with an email for enrollment in all benefits.

## ANNUAL OPEN ENROLLMENT

Most changes can only be made during Annual Open Enrollment (OE) or due to a Qualifying Life Event (QLE). All changes must be made within 30 days of the Event. Please contact the Benefits Team in Human Resources for questions regarding Qualifying Life Events.



# MEDICAL

SCAN FOR MEMBER PORTAL ↗



## STATE HEALTH PLAN – BLUE CROSS BLUE SHIELD OF NC

(866) 740-3881

<https://www.shpnc.org/employee-benefits/high-deductible-health-plan>

Full Time Limited Employees working at least 30 hours per week may participate in the State Health Plan's High Deductible Health Plan (HDHP) with Blue Cross Blue Shield of North Carolina. The cost of this coverage is intended to be affordable, and a portion of the premium is paid for by Asheville-Buncombe Technical Community College. Once you are eligible for this plan you will have 30 days to elect coverage.

Click on the links below for more information!

### HDHP Enrollment Guide

[Click to view the High Deductible Health Plan Enrollment Guide.](#)

### HDHP Benefits Booklet

[Detailed benefit information.](#)

### Preventive Services

[Information on preventive services covered at 100%.](#)

### Uniform Summary of Coverage

[Provides a summary of coverage.](#)

The State Health Plan's Clear Pricing Project (CPP) helps members control health care costs and protects the Plan's financial future. [Learn how you can save money in 2024 by visiting a CPP provider!](#)

## ENROLLMENT

Employees must self-enroll in the medical plan of their choice at <https://abtech.hrintouch.com/>. You will obtain your username and password in your initial FTL Benefits Enrollment email.

## MONTHLY PREMIUMS

If you choose to enroll in this plan, you will be billed monthly for your premiums by the State Health Plan's direct billing administrator, iTEDIUM. This is a pre-paid plan; therefore, you will be billed a month in advance. For instance, you will receive a bill in December for January coverage. You will be responsible for paying your bill in a timely manner, and failure to do so will lead to termination of coverage.

[View a sample of the bill you may receive ↗](#)

# HDHP RATE SHEET

## High Deductible Health Plan

NON-MEDICARE PRIMARY FOR SUBSCRIBER AND DEPENDENT(S) MONTHLY PREMIUM RATES JANUARY 1, 2024 - DECEMBER 31, 2024			
COVERAGE TYPE	SUBSCRIBER MONTHLY PREMIUM	DEPENDENT MONTHLY PREMIUM	TOTAL SUBSCRIBER MONTHLY PREMIUM
Subscriber Only	\$96.00	\$0.00	\$96.00
Subscriber + Child(ren)	\$96.00	\$188.00	\$284.00
Subscriber + Spouse	\$96.00	\$417.00	\$513.00
Subscriber + Family	\$96.00	\$521.00	\$617.00

# PHARMACY

## CVS CAREMARK PHARMACY RESOURCE CENTER

The Pharmacy Benefit Manager for this plan is CVS Caremark. **This does NOT mean members have to go to a CVS pharmacy location for their prescriptions. CVS Caremark has a broad pharmacy network, which can be found using the tools below.**

(888) 321-3124

<https://www.shpnc.org/employee-benefits/high-deductible-health-plan>

### Drug Cost Lookup & Pharmacy Locator Tool for HDHP

Use this tool to find drug costs and locate an in-network Pharmacy.

### Preventive Medication List

Preventive medications bypass deductible.

### Formulary

HDHP Formulary (Drug List)

# PROFESSIONAL LIABILITY INSURANCE

Coverage of up to \$1,000,000 is provided to all faculty, staff, Board members, and volunteers for wrongful acts and defense of any civil suit alleging a wrongful act. This insurance does not provide coverage for criminal acts. Insurance coverage is subject to all the terms and conditions contained in the insurance policy.



# STATUTORY BENEFITS

## WORKERS COMPENSATION

All employees are covered by the NC Workers' Compensation Act as defined by N.C. Gen. Stat. §§ 97-2(1), 97-2(3), 97-93.

All workplace incidents must be reported immediately, even if you do not believe medical treatment will be sought – this ensures that there are no delays or complications should care be necessary. Please make sure you see an approved provider and do not give them your personal health insurance information – just let them know it happened at work. [Visit the Employee Safety – Worker's Compensation SharePoint](#) for more information such as finding the [Employee Incident Process & Approved Medical Facilities](#) form and the [Incident Reporting Packet](#).

## SOCIAL SECURITY/ MEDICARE

Employees are required to pay the established percentage of earnings for Social Security/Medicare. The College pays the established employer percentage.

## UNEMPLOYMENT COMPENSATION INSURANCE

The College participates in the Unemployment Compensation Insurance Programs through the State of North Carolina. Benefits are based on earnings prior to unemployment and the reason for leaving the College.

# LEAVE PLANS

## [Policies and Procedures 507](#)

### **FAMILY AND MEDICAL LEAVE - NOTE: THIS LEAVE REQUIRES YOU TO NOTIFY HR**

Pursuant to the Family and Medical Leave Act of 1993 (FMLA) and as amended by the National Defense Authorization Act of 2008, Pub. L. 110-181, and the Department of Labor's regulations any eligible employee may be granted up to a total of 12 weeks of unpaid job-protected family and medical leave.

### **MILITARY LEAVE - NOTE: THIS LEAVE REQUIRES YOU TO NOTIFY HR**

Military leave shall be granted to employees of the State for periods of service in the uniformed services in accordance with G.S. 127A-116 and the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA). Military leave shall also be given for state military duty to members of the State Defense Militia as outlined in Rule .0820 and the Civil Air Patrol as outlined in Rule .0806.

### **COMPENSATORY LEAVE (COT) - NOTE: THIS LEAVE REQUIRES SUPERVISOR APPROVAL**

Non-exempt employees will receive compensatory leave in lieu of overtime pay. Compensatory leave will be earned at the rate of one and one-half hours for every hour worked over 40 in a workweek and/or if an employee is required to work a College Holiday. Compensatory leave will be earned at the rate of two hours for every hour worked on a Federal Holiday and/or if an employee is required to work when the College is closed during inclement weather.

### **CHILD INVOLVEMENT LEAVE**

The College will grant four hours of unpaid leave per calendar year to any employee who is a parent, guardian or person standing in loco parentis of a school-aged child so that the employee may attend or otherwise be involved at that child's school.

### **COMMUNITY SERVICE LEAVE**

Up to 24 hours of paid community service leave will be offered to full-time regular and full-time limited employees per fiscal year for participation in a Community Service Organization activity. Unused time will be forfeited at the end of the fiscal year (June 30). Please see Procedure 507: Community Service Leave for more information.

### **PERSONAL OBSERVANCE LEAVE**

Full-time regular and full-time limited employees will receive 16 hours (two days) of Personal Observance Leave each calendar year and may be used for any two days of personal significance. Regardless of the employee's religious or cultural background, any day that the employee identifies as significant for cultural, religious, or personal reasons qualifies as Personal Observance Leave. Unused time will be forfeited at the end of the calendar year. Please see Procedure 507: Personal Observance Leave for more information.



# ADDITIONAL BENEFITS

## STATE EMPLOYEES CREDIT UNION

Membership in the State Employees' Credit Union is open to all full-time and part-time employees. Services include banking, savings, and loans. More information may be obtained by visiting one of the local offices or by visiting their website: [www.ncsecu.org](http://www.ncsecu.org)

## WELLNESS COMMITTEE

The Employee Wellness Committee provides no cost or a minimal fee program to all faculty and staff with the purpose of supporting the mental, emotional, and physical well-being of the College family. Planned events and activities provide sessions on educational topics, physical activities, and the use of College facilities to include the gym, weight room, staff yoga, staff martial arts, and more. Be sure to keep an eye on your work email for announcements of these Wellness benefits!

[https://abtechedu.sharepoint.com/sites/GRP\\_A-BTechWellness](https://abtechedu.sharepoint.com/sites/GRP_A-BTechWellness)

## HEALTH CLINIC-ON CAMPUS CARE

\$10 for Employees. Email [HealthClinic@abtech.edu](mailto:HealthClinic@abtech.edu) with any questions you may have and to schedule an appointment.

## EMPLOYEE ASSISTANCE NETWORK

The College has pre-paid the cost of (5) five diagnostic, referral, and/or counseling sessions per separate eligible instance for employees and anyone living under their roof. This is a confidential service that provides professional and/or personal assistance in a myriad of areas. EAN offers appointments in person at their offices, virtually by a secure video platform or by phone. Call or email an Intake Coordinator to decide on the location and type of appointment that works best for you.

(828) 252-5725 | (800) 454-1477

[www.eannc.com](http://www.eannc.com) | [ean@eannc.com](mailto:ean@eannc.com)

## EMPLOYEE EMERGENCY PROGRAM

When an emergency occurs, it can cause a tremendous financial burden for an employee and emergency funds provide financial assistance to employees who are experiencing a crisis.

- The A-B Tech Employee Emergency Program provides a financial gift to meet approved employee needs, based on the availability of funds in this account and based on employee EEP Eligibility
- Funds are typically awarded in the form of a check that is paid directly to the vendor, not the employee.

**For further information and to obtain a request form: Contact HR by emailing [BenefitsHR@abtech.edu](mailto:BenefitsHR@abtech.edu) with "EEP Request" in the subject line.**



# **ABTech**

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## **Community College**

*Last Update: September 2023*