

2008 BENEFITS AT MARQUETTE UNIVERSITY | A Great Place to Work



OUR COMMITMENT TO YOU | a plan designed for your needs

To remain a stellar example of Catholic, Jesuit higher education, Marquette needs to offer a benefit package that will attract and maintain a qualified, talented work force committed to the values of the university. This package must be internally equitable, comprehensive in scope and sensitive to the health and welfare of employees and their family members, as well as competitive and as affordable as possible within the financial means of the university.

The Marquette University Benefits plan is designed to meet the diverse needs of our faculty and staff by providing competitive and comprehensive benefits options that allow you to choose the plan that best meets your individual and family needs.

We encourage you to review all your options before making your benefit elections. Only you can determine which benefits are the best fit for you and your family. We want you to understand all your options and make informed decisions.

Benefit Basics

Once you elect your Marquette University benefit options, your elections remain in effect for the plan year (January 1 through December 31). You may only change coverage due to a qualified "life event" (see page 3) and must do so within 30 days of the event. Marquette University encourages you to review all your benefits and make your selections wisely.

Eligibility

You are eligible for the benefits described here if you are a regular full-time or part-time employee working at Marquette University at least 20 hours per week/minimum 1,000 hours per calendar year.

- Medical
- Dental
- Basic Life Insurance
- Optional Life Insurance
- Flexible Spending Accounts
- Long Term Disability (full-time only)
- Employee Assistance Program (EAP)

Dependent Eligibility

You may obtain coverage for your eligible dependents under the medical and dental plans. Eligible members include:

- Your legal spouse
- Each unmarried child until the child reaches his or her 19th birthday
- A covered dependent child who is attending high school or an accredited institution of higher education as a full-time student will continue to be eligible until the end of the month in which the child turns 25 or graduates, whichever is earlier
- A dependent child must legally qualify to be claimed as a tax exemption on the employee's or spouse's federal income tax return
- Any unmarried, disabled children of any age who are incapable of supporting themselves due to a mental or physical disability that began while they met the definition of a dependent child

YOUR BENEFITS | who pays what?

Life Events

Qualifying life events which would allow you to change your coverage (within 30 days) include:

- Change in status which may include: marital, number of dependents, employment, change in residence that impacts medical plan eligibility, dependent satisfies or ceases to satisfy eligibility requirements
- HIPAA special enrollment rights
- FMLA special requirements
- Changes due to a judgment, decree or court order
- Entitlement to Medicare or Medicaid

Your Benefits and Your Costs

Marquette University provides a variety of benefits to help protect your health, income and well-being. The university provides some benefits at no cost to you; other benefit costs are split between the university and you; and still other, voluntary benefits are paid entirely by the employee. This affords you the flexibility to choose the benefits that best meet your needs and your lifestyle.

BENEFIT	WHO PAYS?	PRE-TAX BENEFIT
Medical	Marquette University & You	Pre-Tax
Dental	Marquette University & You	Pre-Tax
Basic Life and Accidental Death & Dismemberment Insurance	Marquette University	N/A
Optional Life Insurance	You	After-Tax
Short-Term Disability (STD)	Marquette University	After-Tax
Long-Term Disability (LTD)	Marquette University & You	Pre-Tax and After-Tax
Flexible Spending Accounts (FSA)	You	Pre-Tax
Marquette University 403(b) Plan	Marquette University & You	Tax deferred
Additional Benefits	Marquette University & You	After-Tax

YOUR BENEFITS | core benefit solutions that work for you

Benefits for Eligible Employees

Marquette University offers the following benefits to all eligible employees. Upon meeting eligibility requirements, these benefits are provided at no cost.

Basic Life Insurance (automatically enrolled)

- 1 x your annual salary

Business Travel Accident Insurance

- Provides 24-hour worldwide business travel protection
- Payable benefit determined by annual base earnings and type of loss

Short-Term Disability Insurance

- Covers 75% or 100% of weekly base salary
- Benefit begins immediately for exempt employees
- Benefit begins after 60 days for nonexempt employees
- Available after one year of service

Employee Assistance Program (EAP)

- 24-hour resource for counseling and support services for you and your immediate family on a range of topics, including emotional distress, substance abuse and work issues

Customizing Your Plan

You have the opportunity to build a benefits plan that meets your needs and the needs of your family. Marquette University is committed to providing a range of benefits from which you can choose. You are responsible for a percentage of, or the total cost, of these benefits.

- Medical Coverage
- 403(b) Retirement Plan
- Long-term Disability
- Additional Benefits
- Dental Coverage
- Optional Life Insurance
- Flexible Spending Accounts (FSA)

MEDICAL BENEFITS | cost effective peace of mind

The cost of quality health coverage has increased significantly over the past few years. At the same time, we need health care that protects our physical and mental health as much as health care that protects our financial well-being. Marquette University believes it is important to offer both choice and quality plans, thus providing the following options:

	EPO BASIC	EPO SELECT	PPO BASIC	PPO SELECT
	In Network Only	In Network Only	In / Out of Network	In / Out of Network
Network	IBS Navigator	IBS Navigator	HealthEOS	HealthEOS
Your Deductible			In / Out	In / Out
Single	None	None	\$700 / \$1,400	\$300 / \$600
Family	None	None	\$1,400 / \$2,800	\$600 / \$1,200
Your Coinsurance Percentage			In / Out	In / Out
Single	None	None	20% / 40%	20% / 40%
Family	None	None	20% / 40%	20% / 40%
Your Coinsurance			In / Out	In / Out
Single	None	None	\$1,000 / \$4,000	\$500 / \$2,000
Family	None	None	\$2,000 / \$8,000	\$1,000 / \$4,000
Your Out-of-Pocket Maximum			In / Out	In / Out
Single	None	None	\$1,700 / \$5,400	\$800 / \$2,600
Family	None	None	\$3,400 / \$10,800	\$1,600 / \$5,200
Office Visit Copay				
Primary Care	\$50	\$25	\$50	\$25
Specialist	\$80	\$40	\$80	\$40
Emergency Room Copay (Limb & life threatening)	\$200 copay	\$100 copay	\$200 copay, then 20% / 40%	\$100 copay, then 20% / 40%
Well-Child Care (immunizations, check-ups)	Plan pays 100%	Plan pays 100%	100% / Deductible & Coinsurance	100% / Deductible & Coinsurance
Preventive Care (wellness schedule applies)	Plan pays 100%	Plan pays 100%	100% / Deductible & Coinsurance	100% / Deductible & Coinsurance
Hospital Inpatient (room & board)	\$500 copay	\$250 copay	In / Out Deductible then 20% / 40%	In / Out Deductible then 20% / 40%
Prescription Drug Mail Order Pharmacy	30 day supply 90 day supply	30 day supply 90 day supply	30 day supply 90 day supply	30 day supply 90 day supply
Your Deductible				
Single	\$100	\$50	\$100	\$50
Family	\$200	\$100	\$200	\$100
Your Coinsurance				
Generic	20%	20%	20%	20%
Formulary Brand	30%	30%	30%	30%
Nonformulary Brand	40%	40%	40%	40%
Your Out of pocket maximum				
Single	\$2,000	\$1,000	\$2,000*	\$1,000*
Family	\$4,000	\$2,000	\$4,000*	\$2,000*

*Prescription out-of-pocket maximum is separate from the medical plan out of pocket maximum.

MEDICAL BENEFITS | continued

Important Notes: In the chart on page 5, the EPO options utilize a direct contract with Aurora Medical Group. If you elect one of the EPO options, you must use the EPO providers that participate in the IBS Navigator Network to receive coverage. You may only receive benefits through a non-network provider under the EPO options if you receive written authorization from Aurora Medical Management. If you or your covered dependents are enrolled in the EPO and are traveling outside the network service area and have a life or limb threatening medical emergency, the plan will cover your treatment at the in-network level provided the care is for a true medical emergency as defined by the plan.

PPO options utilize a broader network provided through HealthEOS. For those enrolled in a PPO option, the plan pays a greater percentage of your covered expenses after the deductible than if you use a non-network provider.

The Lab Card Program (PPO option only): You will be able to take advantage of the Lab Card Program benefits, offered through Quest Diagnostics, as part of your PPO medical plan. The Lab Card program helps you save money on outpatient testing.

- This is an optional, voluntary benefit enhancement that provides you with FREE outpatient laboratory testing when you use your Lab Card. You pay NO deductible and NO coinsurance when you ask for the Lab Card benefit.
- Show your Lab Card/Fiserv ID card (with Lab Card logo) to the receptionist and to the person collecting the specimens. If you have any questions about the program, please call Lab Card Clinical Client Services at 1-800-646-7788 or visit www.labcard.com to review their services.
- New PPO participants will receive a new Fiserv Health ID card.

Care Management Programs: When the university's Health Care Task Force analyzed the historical costs of coverage to consider how to contain costs while providing both the options and levels of coverage employees desire, it became clear that a lot of health care dollars are spent on individuals with chronic conditions. Therefore, the university has contracted with two vendors to assist participants in managing heart disease, depression, diabetes, chronic obstructive lung disease, asthma and hypertension.

- EPO Members with these conditions will be contacted by Aurora Medical Management
- PPO Members with these conditions will be contacted by Fiserv Health

Care management programs help people better understand their conditions and learn how to manage them based on approved clinical treatment guidelines. The programs also help individuals become more active partners with their health care providers. **These programs are completely confidential and voluntary.**

Utilization Review Program: Utilization review programs, also known as pre-certification programs, require notification prior to being admitted to a hospital. In an emergency situation, timely and reasonable contact to the appropriate vendor(s) is required. A \$500 penalty will be deducted from your benefit if you fail to call.

- EPO participants need to contact Aurora Medical Management at 1-800-251-0838.
- PPO participants need to contact Fiserv Health at 1-800-808-4424.

THErapy SERVICES, PRESCRIPTION DRUG PROGRAM AND MyJOB INFORMATION

Physical, Speech and Occupational Therapy Benefits: Effective January 1, 2008 the following therapy classes will require prior authorization:

- All outpatient therapy (cardiac, pulmonary rehabilitation and speech therapy)
- All children 16 and under – evaluation only for Physical Therapy, Occupational and Speech Therapy (until authorized for treatment)
- Except as noted above, physical and occupational therapy beyond 18 visits will require authorization

Prescription Drug Program

Medco is the Prescription Benefit Manager (PBM) for Marquette University's medical plans. Prescriptions must be filled at either a participating pharmacy or through Medco by Mail. The pharmacy program also includes important provisions to help us keep the costs of our plan affordable.

1. If a brand name prescription is purchased and a generic equivalent is available, the plan will pay 80% of the generic drug cost. The covered person will be responsible to pay the difference in costs between the brand and generic prescription. The difference in cost **does not** go toward your prescription deductible or annual out of pocket maximum.
2. Reduce your trips to the pharmacy; use **Medco by Mail**. Medco by Mail is a mail order option available to members. You may receive up to a 90 day supply by using Medco by Mail services. Applicable deductible and coinsurance will apply.
3. A feature of your prescription drug plan known as a coverage review (or "prior authorization") is necessary to determine how your prescription drug plan may cover certain medications. Some medications or quantities of medication are not covered unless you receive approval through a coverage review (prior authorization). This review uses plan rules based on FDA-approved prescribing and safety information, clinical guidelines, and uses that are considered reasonable, safe, and effective. There are other medications that may be covered, but with limits (for example, only for a certain amount or for certain uses) unless you receive approval through a review. During this review, Medco asks your doctor for more information than what is on the prescription before the medication may be covered under your plan. The coverage review process (prior authorization) will be required for these three main prescription drug categories:
 - Migraine agents (e.g., Imitrex)
 - Central nervous system stimulants and amphetamines (e.g., Ritalin)
 - Hypnotic / sleep agents (e.g., Ambien)

Use MyJob to Enroll

- All employees should access MyJob to update and/or verify personal information, including beneficiaries, covered dependents and emergency contacts.
- If you are not changing your health or dental coverage, you do not need to update your coverage on MyJob. Your 2008 plan elections will default to your current elections.
- You **MUST** go online to elect a Flexible Spending Account. IRS regulations require an annual FSA election.
- Benefit elections or modifications during the annual enrollment period must be done online through the MyJob website to be effective January 1, 2008.

Go to: <http://myjob.mu.edu>

Information from Human Resources and payroll has been downloaded. Your personal information is password-protected. You need only to verify and/or make changes as necessary. FOLLOW DIRECTIONS CAREFULLY.

EMPLOYEES HIRED DURING THE 2008 CALENDAR YEAR MUST SUBMIT PAPER ENROLLMENT FORMS. ONLINE ENROLLMENT IS ONLY AVAILABLE DURING THE ANNUAL ENROLLMENT PERIOD.

Need additional information? Have a question about one of your benefits? Keep this brochure handy for a quick reference for all your benefit needs. If you still have questions, please contact the Marquette University Human Resources Department at (414) 288-7305.

PLAN	ADMINISTRATOR	WEBSITE	PHONE
Medical Benefits (EPO and PPO coverage) -Coverage questions -Customer service -ID card request -Claim information	Fiserv Health / Wausau Benefits	www.fiservhealthservices.com	1-800-826-9781
Medical Benefits (PPO Pre-certification)	Fiserv Health / Wausau Benefits	www.fiservhealthservices.com	1-800-808-4424
Medical Benefits (EPO Pre-certification)	Aurora Medical Management	www.aurorahealthcare.org	1-800-251-0838
EPO Plans Network	IBS Navigator	www.ibsinc.ws	1-414-273-6595
PPO Plans Network	HealthEOS	www.healtheos.com	1-800-279-9776
Prescription Drug	Medco	www.medco.com	1-800-711-0917
Lab Card Program (PPO Only)	Quest Diagnostics	www.labcard.com	1-800-646-7788
Dental Benefits	Delta Dental	www.deltadentalwi.com	1-800-236-3713
Life and AD&D Insurance	Metlife	www.metlife.com	1-800-708-5647
Short-Term Disability	Marquette University	www.marquette.edu/hr/benefits	1-414-288-7305
Long-Term Disability	Northwestern Mutual Life	www.nml.com	1-414-271-3242
Flexible Spending Accounts	EBC	www.ebcflex.com	1-800-346-2126
403(b) Retirement Plan	TIAA CREF	www.tiaa-cref.org	1-800-842-2776
Employee Assistance Plan (PPO Plans)	Symmetry	www.impactinc.org/symmetry/index.htm	1-800-236-7905
Employee Assistance Plan (EPO Plans)	Aurora Behavioral Health	www.aurorahealthcare.org	1-800-236-3231

About this guide

This guide describes the benefit plans available to you as an employee of Marquette University. The details of these plans are contained in the official Plan documents, including some insurance contracts. This guide is meant only to cover the major points of each plan. It does not contain all of the details that are included in your Summary Plan Description (SPD) (as described by the Employee Retirement Income Security Act).

If there is ever a question about one of these plans, or if there is a conflict between the information in this guide and the formal language of the Plan documents, the formal wording in the Plan documents will govern.

Please note that the benefits described in this guide may be changed at any time and do not represent a contractual obligation on the part of Marquette University.

