

Welcome to the George Washington University Benefits Program

The University offers Residents a comprehensive benefit plan that allows you to choose the benefits that best meet your needs and personal situation.

As a **New Member** of the Colonial Community, you may be eligible for benefits as described in this guide. Attend your New Hire Orientation and review this guide carefully so you know which benefits are available to you. In most cases, you may enroll in the benefits of your choice within 30 days of your date of hire.

Be sure to choose carefully!

**Note: In order to reduce our paper usage many of the pages included in this guide are double sided.*

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Eligibility

Dependents

If you are eligible for participation in the Plan, your Dependents are also eligible for coverage.

Only dependents defined by the plans as “eligible” may be covered. Eligible dependents are:

- Your spouse, common law spouse, or domestic partner (same sex) (Marriage certificate, declaration of domestic partnership or common law marriage will be required for enrollment.)
- Your unmarried children (or those of your domestic partner who are your tax dependents) up to age 19 (or age 26 if a full time student at an accredited University.) Full time student verification must be supplied upon enrollment and/or as requested.
- Your unmarried disabled child (or domestic partner’s who are tax dependents) of any age, provided that the child:
 - Is dependent on you for support due to mental or physical disability; and
 - Was disabled before reaching age 26

Proof of disability must be provided upon request (usually not more than once a year.)

Eligible children include your unmarried biological children, stepchildren, legally adopted children (upon placement in your home), foster children, and children for whom you have legal guardianship. Documentation will be required before your children can be enrolled in (or in order for them to remain covered by) the plan (such as birth or adoption certificates, court orders, etc.)

Domestic Partners and their children may be enrolled as long as you can provide a signed declaration of domestic partnership and three forms of verification. The declaration is available on the Benefits intranet site or you can contact the Benefits Help line for more information.

Benefits At A Glance

Benefits	Effective Date of Coverage	Due Date of Enrollment Form	If no enrollment is made during the Initial Enrollment Period
Medical & Prescription	Date of Hire	30 days from Date of Hire	No coverage. May not be changed until the next Open Enrollment unless you have a qualified life event. i.e. Marriage, birth of a child
Dental	1 st of month coinciding with or next following date of hire	30 days from Date of Hire	No coverage. May not be changed until the next Open Enrollment unless you have a qualified life event. i.e. Marriage, birth of a child
Basic Life/AD&D	1 st of month coinciding with or next following date of hire	Automatic Enrollment Complete Beneficiary Enrollment form (due: date of Orientation)	N/A

Benefits	Effective Date of Coverage	Due Date of Enrollment Form	If no enrollment is made during the Initial Enrollment Period
Flexible Spending Accounts	1 st of month coinciding with or next following date of hire	30 days from your Date of Hire	No coverage. May not be changed until the next Open Enrollment unless you have a qualified life event. i.e. Marriage, birth of a child
Supplemental Life	1 st of month coinciding with or next following date of hire	30 days from your Date of Hire	No coverage. May not be changed until the next Open Enrollment unless you have a specific qualified life event. i.e. gain or loss of a dependent. Evidence of insurability may be required.
Voluntary Short Term Disability	1 st of month coinciding with or next following date of hire	Anytime	No coverage. Evidence of insurability will be required if you choose to enroll outside of the initial enrollment window.
Basic Long Term Disability	1 st of month following 1 year of service	Automatic enrollment	1 year waiting period may be waived if you had long term disability coverage with your previous employer.
Long Term Disability Buy - Up	1st of month following 1 year of service	30 days from your Date of Hire	No coverage. May not be changed until the next Open Enrollment. Evidence of insurability will be required.
GW Retirement Plan	1 st of month following 2 years of service or when enrollment forms are completed.	Anytime after the completion of 2 years of service.	You will not be a participant until enrollment forms have been completed. Participation is NOT retroactive.
Supplemental Retirement Plan	Date of hire	Anytime	You will not be a participant until enrollment forms are completed. Participation is NOT retroactive.
Tuition Remission	1 st semester following completion of probationary period	Applications must be submitted by the first day of the month following the semester start date.	No benefit. You may submit applications for future semesters.
Legal Plan	1 st of month coinciding with or next following date of hire	Must complete online enrollment within 30 days of hire date	No coverage. May not be changed until the next Open Enrollment.

**In most cases your coverage will end on the last day of the month in which you terminate your employment with the University or when you end your coverage in a later enrollment period or through a qualified life event.*

Changing Your Elections

The elections you make are for the entire calendar year and generally cannot be changed between Open Enrollment periods. However, if you have a qualified life event as defined by the IRS, you will be able to make benefit changes that are consistent with your life event. To request a life event change, be contact the Benefits Help Line at 202.994.9620 or send an email to benefits@gwu.edu.

Qualified Life Events include:

- Marriage or Divorce
- Birth or Adoption of a child
- Death of your spouse or dependent child
- A dependent becoming ineligible for coverage
- Your spouse gaining or losing coverage at his/her job

Important Notes for Changing Elections:

- Changes due to birth or adoption take effect on the date of the event.
- All other changes (such as marriage, loss of coverage, etc) will take effect on the first of the month following the event.

Please note you have 30 days from the date of the event to request and provide the documentation for a qualified life event change.

Paying for Your Coverage

Cost Sharing

For certain benefits, Residents contribute a portion of the cost. It has always been our intent, however, to provide a high-quality benefits program that offers flexibility and, above all, offers meaningful choices.

In today's climate, keeping health care cost increases to a reasonable level is an ongoing challenge for all institutions.

What Steps Can You Take to Save?

- **Don't use the Emergency Room (ER) as a doctor's office.**
Trips to the emergency room are expensive! If you aren't experiencing a true medical emergency, schedule an appointment with your doctor and ease the waiting time in the ER for patients who really need it.
- **Visit network providers to receive care.**
Whether it's within the medical or dental plans, network providers agree to treat GW participants at a pre-negotiated discount rate, saving money for you and GW.
- **Establish a relationship with a Primary Care Physician.**
By developing a relationship with one doctor who is responsible for coordinating your care, you are more likely to be on top of your health and to schedule the testing you need, when you need it. Ask your plan and/or doctor for the preventive care schedule that you should be following for your age and gender.
- **Contribute to a Flexible Spending Account (FSA).**
Decrease your taxes while saving on out-of-pocket health care and dependent care expenses.

- **Invest in the 401(a) and 403(b) plans.**
Take advantage of the extra dollars that GW gives you for simply participating in these retirement savings vehicles.
- **Take advantage of our tax-saving commuter benefits.**
They can be used for public transportation and parking.
- **Use the mail order program to purchase your prescription medications.**
Whenever possible, choose the brand equivalent generic to save money on your prescriptions. Always ask your doctor if a generic drug exists for your needs.
- **Review your Explanation of Benefits (EOB).**
After incurring medical or dental expenses, you will receive an EOB from the insurance carrier. Please review it carefully and report any discrepancies or errors to your plan right away.
- **Most importantly, keep yourself healthy!**
Schedule regular physical exams, eat right and get plenty of exercise. Get acquainted with the wellness benefits and programs that your medical plan and GW offer.

Making Your Choices

Reviewing Your Medical Options

GW cares about your health and the health of your family. That's why we offer three separate medical plans – a Preferred Provider Organization (PPO), a Point of Service (POS) and a Health Maintenance Organization (HMO) plan.

PPO Plan through CareFirst Blue Cross Blue Shield

The PPO is a network-based, managed-care plan that gives you the flexibility to select a physician of your choice. Referrals are not required. Regular physician office visits as well as specialist visits are covered at 100% once the \$25 copayment is made. Most other services are covered at 80% once you pay the yearly deductible, when using in-network providers/hospitals. The Plan also offers an out-of-network option, which allows you to choose a physician/provider/hospital outside the network and receive 70% coverage for most services, once the yearly deductible is met.

HMO Plan through CIGNA

If you elect to participate in the HMO, you are required to choose a Primary Care Physician (PCP) to manage your health care needs. When you have a health concern, you must contact your PCP first. If your PCP believes that you need to visit a specialist or have diagnostic tests, he/she will refer you to another provider in the HMO network. You do not have a deductible to meet, and most services are covered at 100% after a flat co-payment rather than a percentage of the cost (coinsurance).

POS Plan through CIGNA

Under the POS Plan, you choose a physician who participates in the network as your Primary Care Physician (PCP). For in-network benefits, visit your PCP first whenever you need care. If necessary, he/she will provide a referral to a network specialist or other provider. Your coinsurance is generally 10%; however, office visits require a flat copayment rather than a percentage of the cost (coinsurance).

With the POS Plan, you *also* have the option of accessing out-of-network care. You will pay 30% of the cost of most covered services. The POS Plan offers a comprehensive plan of benefits at a lower Resident cost.

Medical Plans Comparison

	BCBS PPO		CIGNA HMO		CIGNA POS	
	Your Cost In-Network	Your Cost Out-of-Network	Your Cost In-Network	Your Cost Out-of-Network	Your Cost In-Network	Your Cost Out-of-Network
Calendar Year Deductible	\$750 per person/ 2 per family	\$750 per person/ 2 per family	No deductible	You pay all costs	\$300 per person/2 per family	\$750 per person/ 2 per family
Annual Out-of-Pocket Maximum Expense	\$3,000 per person/\$6,000 per family	\$3,000 per person/\$6,000 per family	Not applicable	Not applicable	\$2,500 per person/\$5,000 per family	\$5,000 per person/\$10,000 per family
Office Visit	Plan pays 100% of covered expenses for wellness visits; \$25 copay for office and specialist visits	Plan pays 70% of covered expenses after yearly deductible	\$15 copay PCP/\$25 Specialist	You pay all costs	\$20 copay PCP/\$30 Specialist	Plan pays 70% of covered expenses after deductible
Inpatient Hospitalization	Plan pays 80% of covered expenses after a \$200 per admission copay. Deductible also applies	Plan pays 70% of covered expenses after a \$200 per admission copay. Deductible also applies	\$200 per admission co-ay, then plan pays 100%	You pay all costs	Plan pays 90% after a \$150 per day copay (maximum of 5 copays per admission). Deductible also applies	Plan pays 70% of covered expenses after deductible
Mental Health(MH) & Substance Abuse (SA) Inpatient	Plan pays 80% of covered expenses after a \$200 per admission copay. Deductible also applies	MH: After deductible and \$200 per admission copay, 70% of covered expenses (max of 30 days per calendar year) SA: After deductible, 70% of covered expenses to a max of \$250 per day (max of 30 days or \$5,000 per calendar year)	\$200 per admission co-ay then plan pays 100%	You pay all costs	Plan pays 90% after a \$150 per day copay (maximum of 5 co-pays per admission). Deductible also applies	After deductible, plan pays 50% of covered expenses. Maximum of 45 days per calendar year for Mental Health and 30 days for Substance Abuse
Mental Health (MH) & Substance	\$25 copay per visit	After deductible 70% of covered	\$25 copay per visit	You pay all costs	\$30 copay per visit	After deductible, 70%

Abuse (SA) Outpatient		expenses				of covered expenses
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Waiving Medical Coverage

If you have coverage under another medical plan, you may elect to opt-out of the GW medical plan. You must sign a waiver form to do so.

The Disease Management Program

As part of your medical coverage, participants with asthma, chronic bronchitis/emphysema, diabetes and heart disease have access to our Disease Management Program. This program is designed to provide extra support and resources for those suffering from these chronic illnesses. Your involvement in these specific disease management programs depends on the medical coverage that you elect. Additionally, expectant mothers have access to programs that assist them throughout their pregnancy, and increase the likelihood that their babies will be healthy. Refer to your plan’s website (www.cigna.com or www.carefirst.com) for more information.

Employee Assistance Plan (EAP)

The program is available to all Residents and their dependents. There is no cost to Residents and their dependents for this benefit, and it is not necessary to be enrolled in a University-offered medical plan to take advantage of the services provided by the EAP.

Residents and their dependents can access the EAP and CIGNA Behavioral Health’s extensive network of counselors by calling toll free 1.877.622.4327. The service is available 24 hours a day, 365 days a year. Residents may also go on-line to www.cignabehavioral.com and enter the employer ID: **gwu**, for additional helpful resources and information. The EAP is a confidential service.

The EAP counselor can provide professional counseling for marital and family concerns, substance and alcohol abuse, stress, anxiety, depression, and many other issues that commonly occur throughout life. The EAP counselor will assist the Resident and their dependents in devising a plan of action. Issues may be resolved through consultation, support, or information, and referrals for longer term counseling or resolution will also be made if appropriate.

Prescription Drug Coverage

GW provides a retail and mail-order Prescription Drug Program through Caremark. You must be enrolled in a GW medical plan in order to receive prescription drug coverage. The chart below gives an overview of the program and associated costs. Remember – mail order is the less expensive way to purchase your prescriptions since you get a 90-day supply of medication for the cost of 2 months!

	Retail	Mail-Order
Generic Drug Deductible	\$0	\$0
Brand-Name Drug Deductible	\$100 per person per calendar year, combined retail and mail order	
Maximum Supply per Order	30 days	90 days
Generic Drug Copayment	\$5	\$10
Preferred Brand Copayment	\$20	\$40
Non-Preferred Brand Copayment	\$30	\$60
Vacation Exception	Additional 30-day supply one time per year	N/A

Dental Care

GW provides dental coverage through Aetna. We will continue to offer the same High and Low Options, as well as the Dental Maintenance Organization (DMO) option.

Important! All Dental Plan options are provided as “stand-alone” plans. This means you can elect dental coverage, even if you do not have medical insurance through GW.

High Option Dental PPO

The Aetna High Option Dental PPO provides the highest level of coverage and, as a result, has a higher premium. You can select the dentist of your choice but seeing a participating dentist reduces your costs. There are deductibles, coinsurance and/or waiting periods for coverage for many of the services.

Low Option Dental PPO

The Aetna Low Option Dental PPO provides a lower level of coverage and, as a result, has a lower premium. As with the High Option Dental PPO, you can see any dentist that you wish but you will receive a higher level of reimbursement by using a participating dentist. The following chart shows a comparison of benefits and costs for dental coverage.

High and Low Option Dental PPO Comparison

	High Option Dental PPO		Low Option Dental PPO	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Annual Deductible (Per Person)	\$50 (3 per family)	\$50 (3 per family)	\$50 (3 per family)	\$50 (3 per family)
Annual Maximum Coverage (Per Person)	\$1,500	\$1,500	\$1,000	\$1,000
Preventive Care	100%	100%	100%	100%
Basic Care	90%	80%	80%	70%
Major Care	50%	50%	Not covered	Not covered
Orthodontia (children only)	50% (maximum \$1,500)	50% (maximum \$1,500)	Not covered	Not covered

Dental Maintenance Organization (DMO)

If you choose the DMO, you must select a Primary Care Dentist (PCD) in the Aetna DMO network. If your PCD believes that you need to visit a dental specialist, he/she will refer you to a specialist in the DMO network. With the DMO, you do not have a deductible to meet, and there is no annual maximum. Office visits require only a \$5 copayment. **Orthodontic services require a \$2,300 copayment and are available for children and adults.**

Tax Savings through “FlexFund”

GW offers a flexible spending account program called FlexFund. Flexible Spending Accounts (FSAs) allow you to stretch the dollars you use to pay certain out-of-pocket expenses for health care and for dependent care. FSAs give you a tax advantage—you’re not required to pay income or Social Security taxes on FSA contributions because those dollars are earmarked to help you pay for eligible health and dependent care expenses.

Important!

Flexible spending accounts require an annual election. You must re-enroll each year during Open Enrollment.

FlexFund allows you to set up two types of accounts: a health care account and/or a dependent care account. You choose the amount(s) – up to the IRS limits – that will be deducted from your paycheck before taxes and deposited in your spending account(s). When you have eligible expenses, you use your flexible spending debit card to pay with tax-free dollars from your account. Participants have until March 15, 2010 to use any unused funds that are withheld in 2009 for the FlexFund Health Care account.

If you enroll in the health care FSA, you will receive an FSA “debit” card to use for paying eligible expenses at a doctor’s office or pharmacy, or you may file a claim for eligible expenses.

Dependent Care Account	Health Care Account
Your 2009 annual maximum contribution may be limited dependent upon the aggregate results of the 2008, IRS required, non-discrimination testing, which will be performed in the first quarter of 2009. However, your contributions may not exceed \$5,000 for the year.	The maximum contribution amount for 2009 is \$5,000.

Life Insurance

GW provides several life insurance options for faculty and staff:

- basic group term life insurance
- accidental death & dismemberment insurance
- supplemental group life insurance
- spouse life insurance
- child life insurance

Basic Group Term Life and Accidental Death & Dismemberment Insurance (AD&D)

You are automatically enrolled in both the Basic Group Term Life and AD&D insurance plans as a benefits-eligible Resident. You are insured for an amount equal to your base annualized salary up to a maximum benefit of \$500,000. If your death is caused by accident, you are insured up to twice your base annualized salary to a maximum benefit of \$1,000,000.

If you die while an active Resident, your estate will also receive a death benefit equivalent to one month’s salary.

Supplemental Group Term Life Insurance

You may elect supplemental group term life insurance coverage through UnumProvident. Coverage is available in salary increments of \$10,000 up to a maximum of \$750,000. Coverage is also available for your spouse/domestic partner and eligible dependent child.

During your initial enrollment period you can enroll up to \$200,000 for your supplemental coverage (\$25,000 for your spouse) without providing evidence of insurability. If you enroll during a subsequent enrollment period of for an amount in excess of the amounts listed above, you will be required to provide evidence of good health.

Disability Insurance

If you become ill or injured and cannot work, GW offers disability insurance for benefits-eligible faculty and staff.

Group Short-Term Disability Insurance (STD)

GW provides short-term disability benefits for eligible full time Residents. The Short-Term Disability benefit covers 60% of your base salary up to a maximum of \$3,000 per week after 30 days of disability, provided that appropriate documentation is filed. Premiums are paid entirely by the Resident. The premium rates vary by age and salary. Pre-existing conditions may apply. This benefit can be cancelled at anytime.

During your initial enrollment period you can enroll without providing evidence of insurability. If you enroll in a subsequent enrollment period, you will be considered a 'late enrollee' and need to provide evidence of insurability.

Group Long-Term Disability Insurance (LTD)

GW provides group long-term disability benefits to all benefits-eligible full-time Residents after one year of service. All or part of this one-year wait will be waived if you can provide evidence of LTD coverage with your previous employer. The plan provides a monthly income to individuals that are unable to work due to an approved disability. Benefits begin after 180 days after the date of disability. If you qualify for benefits, you will receive 60% of your monthly salary (not to exceed \$10,000 per month) until you recover or reach normal retirement age under the Social Security Act (benefits that begin at or after age 65 are limited).

Buy-Up Option for Long-Term Disability Insurance (LTD)

You also have the opportunity to elect the Resident buy-up option of 66 2/3%. The maximum coverage increases to \$12,000. Pre-existing conditions restrictions apply to this added coverage.

Legal Resources Program

The Legal Resources Program is an independently operated pre-paid legal services benefit. A variety of legal services are available to faculty and staff through participating attorneys for a monthly fee of \$19.

Legal Resources Enrollment

To enroll for the Legal Resources Program, you must visit the Legal Resources website at www.legalresourcesplan.com. (Company ID: 0185, password: nhlegal.)

IMPORTANT: When you enroll for this benefit, there is also a one-time only \$20 fee to process your application. You may only cancel this coverage during an Open Enrollment period following 12 months of plan participation.

Among the services covered in full for a participating Resident, spouse/domestic partner and eligible dependent children are:

- Real estate purchase and sale
- Uncontested adoption
- Name change
- Consumer disputes
- Criminal misdemeanors
- Misdemeanor traffic violations (with valid driver's license) including first DUI violation
- Landlord/tenant issues
- Credit problems resolution
- Uncontested divorce
- Wills, with certain limitations as to trusts and other complicated documents, but including Advanced Medical Directives
- Identity theft

Attorney fees, not covered in full, are provided at a 25% discount on customary and usual fees for many services.

Retirement Benefits

GW's retirement program offers several ways to save for your future: a 401(a) Base Retirement Plan, a 403(b) Supplemental Retirement Plan and a Matching Retirement Plan.

Free Money Just for Enrolling!

GW contributes to your Base Retirement Plan even if you don't. Maximize your retirement account by deferring salary to get GW's match!

Base Retirement Plan

If you are at least 21 years of age and have completed two years of service at GW, you will be enrolled in the Base Retirement Plan. Under the Plan, GW will contribute to the Plan an amount equal to 4% of your salary. You are not required to contribute anything to receive GW's contribution. You have the option of directing this amount into a number of investment options provided through TIAA-CREF.

Supplemental Retirement Plan

You may immediately elect to contribute a portion of your salary to a Supplemental 403(b) Retirement Plan. Under the Plan, you may make contributions on a pre-tax basis to TIAA-CREF, Fidelity Investments, or Vanguard Group. Your maximum pre-tax contribution is determined by IRS contribution limits.

Matching Retirement Plan

If you are at least 21 years of age and have completed two years of full-time service, you are eligible to enroll in the Matching Retirement Plan. For each 1% you contribute to the Supplemental Retirement Plan, GW contributes an additional amount equal to 1-1/2 times your contribution, up to a maximum GW contribution of 6% of your salary. You may allocate the matching retirement contribution to investment funds offered through TIAA-CREF, Fidelity Investments, or Vanguard.

The following table illustrates the matching program:

GW Base	Resident 403(b) Contribution	GW Match	Total Contribution
4%	0%	0%	4%
4%	1%	1.5%	6.5%
4%	2%	3%	9%
4%	3%	4.5%	11.5%
4%	4%	6%	14%

The University Matching Retirement Contribution may be allocated to TIAA-CREF RA, Vanguard, or Fidelity. If you do not complete a separate application for the matching contributions, the contributions will be made to TIAA-CREF with the same allocations as your base plan contributions.

Tuition Benefits

If you are a Regular Full time or Part time Resident, you are eligible to receive tuition benefits for you and your eligible dependents (please see Eligibility section above.) All benefits apply to tuition only (no fees), for courses offered at the University. Certain programs, such as Executive Graduate Programs, the M.D. degree within the Medical School and Ph.D. programs in Clinical Psychology, are excluded from the tuition benefit program. The Law School's JD Degree Program (Juris Doctor) is considered graduate level tuition benefit. Tuition benefits also apply to some non-credit courses offered through the University.

Staff: Eligible for tuition benefits the first semester following successful completion of the 90-day initial employment period. *Spouses, domestic partners, and dependents are eligible when the Resident becomes eligible.*

Faculty/Medical Resident/Executive Staff/Research Staff: Eligible for tuition benefits the first semester coinciding or following the appointment date. *Spouses, domestic partners, and dependents are eligible when the Resident becomes eligible.*

Research Staff: *spouses, domestic partners and dependents are eligible the first semester following the Resident's successful completion of the 90 day initial employment period.*

Full-Time Resident Semester Allowances: 96% of 6 spring credits, 9 summer credits, and 6 fall credits. Ph.D. programs are excluded from credit limits.

Part-Time Resident Semester Allowances: 96% of 3 spring credits, 3 summer credits, and 3 fall credits. Ph.D. programs are excluded from credit limits; three credits or less are covered at 96%, three or more credits are covered at 48%.

PARTICIPANT COVERAGE FOR FULL-TIME EMPLOYMENT

PARTICIPANT	YEARS OF SERVICE	RATE
Spouse/Domestic Partner	First 5 years of employment	48%
Spouse/Domestic Partner	More than five years of employment	71%
Dependent	<1 year of service	47%
Dependent	1 year of service	57%
Dependent	2 years of service	67%
Dependent	3 years of service	77%
Dependent	4 ≥ years of service	87%

PARTICIPANT COVERAGE FOR PART-TIME EMPLOYMENT

PARTICIPANT	YEARS OF SERVICE	RATE
Spouse/Domestic Partner	First 5 years of employment	24%
Spouse/Domestic Partner	More than five years of employment	35.5%
Dependent	<1 year of service	23.5%
Dependent	1 year of service	25.5%
Dependent	2 years of service	33.5%
Dependent	3 years of service	38.5%
Dependent	4 ≥ years of service	43.5%

Taxable Tuition:

Tuition benefits are taxable when:

- ✓ The spouse, common law marriage spouse, same sex domestic partner, or dependent child receives *graduate* level tuition benefit coverage.
- ✓ The same sex domestic partner or common law marriage spouse receives *undergraduate* tuition benefit coverage.
- ✓ The Resident receives *graduate* level tuition benefit coverage in excess of \$5,250.00 within the calendar year for courses unrelated to their position.

For Residents only: Internal Revenue allows a maximum of \$5,250.00 in tax-free graduate level tuition benefits per calendar year. Any amount issued to the Resident in excess of this annual excludible amount is subject to imputed income taxes, unless the courses are certified as being directly related to the Resident’s position. To declare courses as tax exempt, the Resident must submit course certification documents to the Benefits Administration Department by the following due dates.

- **Fall Semester- No later than September 10**
- **Spring Semester- No later than January 15**
- **Summer Semester- No later than May 26**

Please reference the following documents on the HR website:

Faculty and staff:

<http://www.gwu.edu/~hrs/benefits/tuition/pdfs/Faculty%20and%20Staff%20Certificatio.pdf>

Research Staff:

<http://www.gwu.edu/~hrs/benefits/tuition/pdfs/Research%20Personnel%20Certification.pdf>

When the Resident, spouse, common law marriage spouse, domestic partner, and/or dependent child receive a *taxable* tuition benefit, the value of the benefit is imputed as taxable income. For GW Residents, faculty, and research personnel, imputed income taxes are paid through payroll deductions scheduled during the semester the benefit was issued. Based on the Resident's compensation and allowances designated on federal and state withholding certificates, the imputed income tax rate will vary from 24% - 37% of the benefit value. GW affiliate staff and faculty need to contact the GW Tax Department at (202) 994-2556 for information pertaining to their specific facility and position.

TUITION EXCHANGE PROGRAM, INC.

The George Washington University is a member of The Tuition Exchange, Inc., a national organization that administers multilateral tuition remission scholarships for Residents of member colleges and universities. The University's agreement with the Tuition Exchange Program, Inc. (TE) will permit up to four students each year to enroll in baccalaureate degree programs at participating institutions throughout the country. Eligible regular staff, residents, faculty and research personnel, and GW affiliates may apply to receive TE scholarships for legally dependent children under age twenty-four (24). Scholarships are available for a maximum of four years (eight semesters) of full-time academic study in undergraduate degree programs. Students must be admitted as full-time baccalaureate degree candidates at TE member institutions in order to be eligible for this program. Preliminary scholarship eligibility is determined by an Resident's years of regular service.

Enrollment Checklist

- ✓ Read this guide to familiarize yourself with the benefits GW offers. If you plan on covering your dependents, share the information in this guide with your family.
- ✓ Review the enclosed rate sheets and contribution amounts to help you make your decisions.
- ✓ Review the deadlines to enroll and be sure not to miss out on this opportunity!
- ✓ To enroll for Legal Resources, visit www.legalresourcesplan.com.

Note: *This guide provides a broad overview of your benefit programs and changes. If there is any discrepancy between the information contained in this guide and the actual plan documents, the official documents will govern in all cases.*

For full details about your plans and plan provisions, see the documents online at <http://www.gwu.edu/hr/benefits/>.