GROUP HEALTH INSURANCE

Coverage begins on the first day of the first full month of employment. Enrollment must take place within 30 days of start date or five (5) days from date of receiving information.

Employee Coverage Includes: $10,000 Term Life Insurance, Medical, Dental, Vision and Long Term Disability which covers 60% of gross earnings capped at $7,500.00/month

Dependent Coverage Includes: Medical, Dental and Vision. Dependent coverage is paid 100% by EMPLOYEE.

Health Insurance Options

<table>
<thead>
<tr>
<th>Benefit Description</th>
<th>State of Nevada Consumer Driven PPO High Deductible Health Plan (CD PPO HDHP)</th>
<th>Northern Nevada HMO Hometown Health Plan (HHP)</th>
<th>Southern Nevada HMO Health Plan of Nevada (HPN)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Deductible (In-Network)</td>
<td>$1,900 Individual / $3,800 Family ($2,500 Individual Family Member Deductible)</td>
<td>No Deductible</td>
<td>No Deductible</td>
</tr>
<tr>
<td>Co-Insurance (In-Network)</td>
<td>25% paid by participant after deductible</td>
<td>No Co-Insurance</td>
<td>No Co-Insurance</td>
</tr>
<tr>
<td>Primary Care Physician</td>
<td>25% paid by participant after deductible</td>
<td>$25 co-pay</td>
<td>$15 co-pay</td>
</tr>
<tr>
<td>Specialty Physician</td>
<td>25% paid by participant after deductible</td>
<td>$45 co-pay</td>
<td>$15 co-pay</td>
</tr>
<tr>
<td>Urgent Care</td>
<td>25% paid by participant after deductible</td>
<td>$50 co-pay</td>
<td>$15 co-pay</td>
</tr>
<tr>
<td>Emergency Care</td>
<td>25% paid by participant after deductible (waived if admitted to the hospital)</td>
<td>$300 co-pay (waived if admitted to the hospital)</td>
<td>$75 co-pay</td>
</tr>
<tr>
<td>Hospital Inpatient</td>
<td>25% paid by participant after deductible</td>
<td>$1,500 co-pay per admit</td>
<td>$200 co-pay per admit</td>
</tr>
<tr>
<td>Health Savings Account / Health Reimbursement Arrangement</td>
<td>Employee Only: $700 + $697* = $1,397 Dependent: $200 + $215* = $415 for each dependent (up to 3 dependents) Contributions made by PEBP</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Out of Pocket Maximum</td>
<td>$3,900 Individual / $7,800 Family</td>
<td>$6,200 Individual / $12,400 Family</td>
<td>$6,800 person</td>
</tr>
</tbody>
</table>

The monthly employee insurance premium rates are for the Plan Year 2014 (07-01-13 through 6-30-14)

<table>
<thead>
<tr>
<th>Benefit Description</th>
<th>State of Nevada Consumer Driven PPO High Deductible Health Plan (CD PPO HDHP)</th>
<th>Statewide HMO Hometown Health and Health Plan of Nevada</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Only</td>
<td>$44.93</td>
<td>$114.75</td>
</tr>
<tr>
<td>Employee + Spouse / Domestic Partner</td>
<td>$266.96</td>
<td>$320.99</td>
</tr>
<tr>
<td>Employee + Child(ren)</td>
<td>$96.31</td>
<td>$246.59</td>
</tr>
<tr>
<td>Employee + Family</td>
<td>$258.34</td>
<td>$503.83</td>
</tr>
</tbody>
</table>
RETIREMENT PLANS

MANDATORY RETIREMENT PLAN
Postdoctoral employees who are hired on a contract of at least 50% are provided with a mandatory defined contribution 403(b) retirement plan commencing on their date of hire.

Under the terms of the Retirement Plan employees must contribute 6.2% of their gross salary to the Plan. The employer also makes a matching 6.2% contribution. Both the employee and the employer contributions are invested into a 403(b) account. The employee selects the funding vehicles for investment of their retirement contributions from the fund sponsor TIAA CREF. The plan provides for immediate vesting. Additional information is available from the Benefits office at 784-6082 or at http://www.bcn-nshe.org/hr/benefits/retirement/medical/

TUITION
Postdoctoral fellows and their qualifying family members will be considered in-state residents for tuition purposes. There is no fee waiver available. For additional information call UNR Human Resources at 784-6082.

STATE INCOME TAX
No state income tax in Nevada.

WORKERS’ COMPENSATION
Covers employees in the event of work-related injuries. It is important to know the procedures to follow to make sure claims are processed appropriately.

RECREATION FACILITIES
The Lombardi Center offers an annual or semester membership. For an additional charge you may also include family members. For information about the Lombardi Center contact 784-4041 or visit their website at: http://www.unr.edu/lombardi/

SUPPLEMENTAL INSURANCE PLANS
Personal accident, critical illness, supplemental term life, auto/homeowners/renters, short-term disability, long term care, and a legal plan are available through payroll deduction. Additional information is available at: http://www.bcn-nshe.org/hr/benefits/voluntary/

VOLUNTARY RETIREMENT PLANS
As an employee of the Nevada System of Higher Education (NSHE) and the State of Nevada, you are eligible to participate in two Voluntary Retirement Plans that are explained below. Each plan has a basic annual contribution limit. In addition, if you are age 50 or older, you are eligible to contribute an additional amount. The voluntary retirement plans provide for employee contributions on a pre-tax basis. There are no employer matching contributions.

NSHE TAX SHELTERED ANNUITY and/or ROTH 403(b) PLAN
The Tax Sheltered Annuity and Roth 403(b) Plans allow you to set aside additional savings for your retirement. A complete description of the program and a list of authorized providers are available from the Benefits office or at: http://www.bcn-nshe.org/hr/benefits/retirement/403b/

STATE OF NEVADA DEFERRED COMPENSATION 457 PLAN
The Deferred Compensation 457 Plan allows you to set aside compensation under the program which, while invested under the program, is exempt from federal income taxes on your contributions and interest, dividends and capital gains. Additional information is available from the Benefits office or at: http://www.bcn-nshe.org/hr/benefits/retirement/457/

ADDITIONAL BENEFITS

For further information regarding the following benefits, contact BCN Benefits at 784-6082 or http://www.unr.edu/vpaf/hr/benefits; unless otherwise indicated.

SECTION 125 PLAN
This is an employer-sponsored benefit plan which allows employees to pay health insurance and some supplemental insurance premiums with pre-tax dollars. Also includes medical flexible spending account (FSA) and dependent care flexible spending account (FSA) with pre-tax dollars.

ANNUAL LEAVE
Accrued at the rate of 1 ¼ working days per month for full time continuous service or the equivalent of 15 days per year. Any unused annual leave may be carried forward from year to year. There is no payment for unused annual leave upon termination of employment.

SICK LEAVE
Will begin with 15 days upon hire. After 12 months from the hire date, will accrue at the rate of 1 ¼ working days per month, and will be added to any remaining balance of unused sick leave. The maximum amount of sick leave that can be accrued is 15 days. Any unused sick leave may be carried forward from year to year. There is no payment for unused sick leave upon termination of employment. Sick leave may not exceed 15 work days at the last day of each month

Benefits Office
70 Artemesia Way, MS-0240
Reno, Nevada 89557-1240
Phone: (775) 784-6082
Fax: (775) 784-4221
http://www.unr.edu/hr/benefits/

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