

2011

Summary of Benefits

at Mayo Clinic in Arizona

Medical						
Description of Plans	Mayo Universal		Mayo Choice		Mayo Horizon	
	Health plan coverage for specified medical services and prescription drugs. Cost sharing is reflected in employee contributions through premiums, deductibles, coinsurance and/or copayments.					
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Co-Insurance	10% for most care	30% for most care	20% for most care	40% for most care	10% for most care	40% for most care
Cost Sharing Amounts						
a. Annual Deductible <i>Note: Annual deductible must be met before plan benefits will begin. Under Mayo Universal and Mayo Choice, copayments do not apply toward deductible and deductible does not apply toward Out-of-Pocket Maximum.</i>	None	\$250 per person; \$500 per family	\$250 per person; \$500 per family	\$575 per person; \$1,150 per family	Employee: \$1,250 EE+Spouse: \$2,500 EE+Child(ren): \$2,500 Family: \$3,400	
b. Annual Out-of-Pocket Maximum <i>Note: Includes separate annual limits. Some costs do not apply to these limits. Copayments do not apply toward Out-of-Pocket Maximum.</i>	\$1,100 per person; \$2,200 per family	\$2,200 per person; \$4,400 per family	\$2,200 per person; \$4,400 per family	\$2,750 per person; \$5,500 per family	Employee: \$1,800 EE+Child(ren): \$3,600 EE+Spouse: \$3,600 Family: \$4,800	Employee: \$5,000 EE+Child(ren): \$6,250 EE+Spouse: \$6,250 Family: \$7,500
c. Mayo provided Health Savings Account	None	None	None	None	Employee: \$900 Employee + Child(ren): \$1800 Employee + Spouse: \$1800 Family: \$2500	
Physician Visits						
a. Primary care	a. \$0	a. 30%	a. \$0	a. 40%	a. 10%	a. 40%
b. Specialty care	b. \$25	b. 30%	b. \$25	b. 40%	b. 10%	b. 40%
c. Urgent care	c. \$40	c. 30%	c. \$40	c. 40%	c. 10%	c. 40%
d. Emergency room	d. \$50	d. 30%	d. \$50	d. 40%	d. 10%	d. 40%
Preventive Care Services						
<i>Based on age and frequency determined by the plan.</i>	\$0	Not covered	\$0	Not covered	\$0	Not covered

Medical Premiums for 2011	Mayo Universal		Mayo Choice		Mayo Horizon	
	Monthly	Per Pay Period	Monthly	Per Pay Period	Monthly	Per Pay Period
Full-Time Employee Premiums (0.75 -1.0 FTE)						
Employee	\$77	\$38.50	\$28	\$14	\$11	\$5.50
Employee + Child(ren)*	\$147	\$73.50	\$53	\$26.50	\$21	\$10.50
Employee + Spouse*	\$163	\$81.50	\$59	\$29.50	\$23	\$11.50
Family*	\$249	\$124.50	\$90	\$45	\$35	\$17.50
Part-Time Employee Premiums (0.50 -0.74 FTE)						
Employee	\$116	\$58	\$42	\$21	\$16	\$8
Employee + Child(ren)*	\$221	\$110.50	\$79	\$39.50	\$31	\$15.50
Employee + Spouse*	\$244	\$122	\$88	\$44.00	\$34	\$17
Family*	\$373	\$186.50	\$135	\$67.50	\$52	\$26

Note: The premium is taken out of the first two pay periods per month, so the amount shown per pay period is taken out of your pay check 24 times per year.

* Same-gender domestic partners and their children are also eligible for coverage.

Dental Plan Options (choose one)			
	Delta Dental		Mayo Reimbursement Account
How the Plans Works	This plan gives you maximum flexibility, network savings and a commitment to service. Basic services are covered at 80%. The calendar year maximum benefit is \$1,000 per person.		Annually, Mayo makes a contribution of \$1,100 to your account. You can submit claims for you and your family for eligible dental, vision and hearing aid expenses. Not available to participants in Mayo Horizon.
Choice of Providers	When you choose a dentist that participates in the Delta Dental PPO network, you receive quality care and the highest cost savings on services received. Delta Dental Premier network also provides high quality care and network savings, which can lower your out-of-pocket costs.		You have the choice of any provider.
Orthodontic Coverage	\$1,500 per person		Mayo makes a one time, lifetime maximum contribution of \$1,500 per employee and eligible dependent.
Dental Plans Premium	Delta Dental		Mayo Reimbursement Account
	Monthly	Per Pay Period	
Full-Time Employee Premiums (0.75 -1.0 FTE)			
Employee	\$9.00	\$4.50	None
Employee + 1	\$18.00	\$9.00	None
Family	\$26.00	\$13.00	None
Part-Time Employee Premiums (0.50 -0.74 FTE)			
Employee	\$9.00	\$4.50	None
Employee + 1	\$27.00	\$13.50	None
Family	\$39.00	\$19.50	None

Health and Wellness	
Benefit	Description of Benefit
Prescription Drug Plan	Employees will receive pharmacy benefits if enrolled in a Mayo Medical Plan.
Wellness Program	Mayo Clinic offers a health promotion program called LiveWell to promote healthy lifestyles by providing health and wellness activities to Mayo Clinic employees, retirees and dependents. Visit our website at www.LiveWellatMayo.com

Flexible Spending Account (FSAs)		
Benefit	Contribution By	Description of Benefit
Health Care FSA	Employee contributes each biweekly payroll	Permits reserve of pretax income (up to \$5,000 maximum annual contribution) to pay for eligible medical and/or dental expenses incurred but not covered by other insurance or reimbursement plans. Not available to participants in Mayo Horizon.
Dependent Care FSA	Employee contributes each biweekly payroll	Permits reserve of pretax income (up to \$5,000 maximum annual contribution) to pay for eligible child or other dependent care expenses.

Mayo Provided Time Off

Benefit	Description of Benefit				
Paid Time Off	<ul style="list-style-type: none">• A self-managed program of paid time off (PTO) that combines traditional holidays, vacation, and sick time into one account• Accrued bi-weekly at a rate based on length of service, employment status (exempt or non-exempt) and the percent of a full-time work schedule• May accrue up to 1½ times your current annual PTO accrual level• Employees may sell back PTO according to the guidelines of the program• Employees are permitted reasonable time off with pay for funerals and jury duty as noted in the employee policy manual				
			Years of Service	PTO Days (Annual)	PTO Per Pay Period
		Non-Exempt Accrual		23	7.08
			2	28	8.62
			10	33	10.15
			15	35	10.77
			20+	38	11.69
		Exempt Accrual		28	8.62
			2	33	10.15
			10	35	10.77
15+	38		11.69		
Short-Term Disability	<ul style="list-style-type: none">• Non-Exempt – After 40 hours, 120 hours at full pay plus 400 hours at one-half pay/year during first 5 years of service• Exempt and non-exempt employees with greater than 5 years of service after 40 hours; 520 hours full pay/anniversary year.				
Long-Term Disability	Protects 65 percent of salary after 520 hours of related illness and/or injury.				

Financial and Retirement

Benefit	Contribution By	Description of Benefit
Salary Program	Mayo	Mayo Clinic administers a competitive salary program with periodic increases given satisfactory employee and organizational performance.
Mayo Pension Plan	Mayo	A defined benefit plan with the purpose of providing income following retirement from a career of service with Mayo Clinic. The benefit payable at termination or retirement is based on a formula using years of service and final average pay. It is offset by a Social Security covered compensation factor. Vesting occurs at age 28 with three or more years of benefit service or with five years of vesting service from age 18 with some benefit service.
Optional 403(b) Plan or 401(k) Plan	Employee contribution No employer match	<p>Allows employee to contribute pretax or post-tax Roth dollars to an investment plan administered by Fidelity Investments. You may generally defer up to 50% of salary annually or \$16,500 annually, whichever is less (IRS 2011 limit of \$22,000 if 50 years of age or older).</p> <p>All benefit eligible new hires and newly benefit eligible employees will be automatically enrolled in the plan at a 4% pretax deferral rate. Professional asset management is available for a fee provided by Financial Engines, LLC.</p>

Survivor's Benefits and Optional Insurance

Mayo Provided Insurance

Benefit	Description of Benefit
Employer paid Term Life Insurance	Benefit equal to three times annual salary (annual salary rounded up to nearest thousand dollars).
Employer paid Accidental Death & Dismemberment Insurance (AD&D)	Benefit equal to one times annual salary (rounded up to nearest thousand dollars) if accidental death, or prorated amount to dismembered employee.

Employee Paid Optional Insurance

Benefit	Employee Cost	Description of Benefit
Voluntary Group Universal Life Insurance	\$0.06 to \$4.14 per \$1,000 of coverage per month	Additional voluntary coverage equivalent to one or two times annual salary (rounded up to nearest thousand dollars). Includes long-term cash accumulation option and opportunity to continue after termination or retirement.
Family Life Insurance	Varies according to spouse's age	Provides voluntary coverage for spouse and/or eligible children/stepchildren. Coverage on spouse is 1x or 2x employee's annual salary (not to exceed employee's own Universal Life coverage amount); \$10,000 for each eligible child. Reductions occur after spouse reaches age 65. This plan is available only to participants in Voluntary Group Universal Life Insurance.
Voluntary Accidental Death & Dismemberment (AD&D) Insurance	\$0.20 per \$10,000 coverage/month	Provides voluntary supplemental AD&D coverage of \$10,000 to \$225,000.

Excess Personal Liability	\$22 or \$32 per month	Through Hirman Insurors, provides protection of \$3 million or \$5 million in umbrella insurance coverage, beyond requisite personal homeowner/renter and automobile insurance limits.
Long-Term Care Insurance	Rates based on age at date of issue	Assistance with daily living expenses through CNA Insurance Companies. Available to spouse or same-gender domestic partner, parents, grandparents, in-laws and Mayo retirees.
Identity Theft Insurance	\$69 per year	\$25,000 in expense reimbursement after a \$500 deductible. The plan offers a comprehensive advocacy service throughout the resolution process. All members of household are covered under a single contract.

Employee Services – Work Life Balance

Benefit	Contribution By	Description of Benefit
Employee Assistance Program (EAP)	Mayo	Employee-only coverage. Confidential, prepaid services for individual, family, marital, stress and job-related concerns; chemical dependency assessment. 24-hour crisis line. Program is offered through Aetna EAP Services.
Adoption Reimbursement	Mayo	Covers up to \$10,000 of eligible legal and agency expenses. Covers \$500 for adoption of a stepchild
Mayo Dependent Scholarship Program	Mayo	A scholarship may be awarded to eligible biological/legally adopted children and eligible stepchildren whose Mayo-employee parent also satisfies eligibility requirements.
Employee Services and Activities Program	Employee	Free and discounted events and services, including child-care facility discounts, movie passes, special attractions, events, credit unions, and group banking. Mayo Clinic in Arizona partners with www.employeeenetwork.com in offering employee discounts.
Child Care Referral Service	Mayo	Referrals and information for child-care services and discounts.
Sick Child and Back up Care Programs	Mayo and Employee	Designed to allow staff members to report to work as scheduled when children are ill or regular care is unavailable.
On-Site Child Care/ Development Center	Mayo and Employee	The Mayo Clinic Employee Childcare Center is located on the Phoenix Campus. They are open from 6:15am to 7:45pm Monday through Friday and offer services for infants through preschool.
Elder Care Program	Mayo and Employee	Elder Care program offers in-home providers. Designed to allow employees to report to work as scheduled when unexpected elder care issues arise (e.g., normal care options fall through or need is short-term due to recovery from an illness). Mayo subsidizes costs for the elder care program.
Fitness Centers	Employee	Mayo Clinic in Arizona partners with local fitness centers to offer discounted membership.

Professional Growth and Development

Benefit	Contribution By	Description of Benefit
Management and Employee Education	Mayo	Mayo Clinic supports continual learning and professional development of staff. A variety of in-house programs are offered in business skills, career and self-development, cultural awareness, communication, computer applications, continuous improvement, management skills, and team building, among others.
Tuition Assistance	Mayo	Mayo's Professional Development Assistance Program supports employees' pursuit of education that will enhance their careers and contributions to Mayo Clinic. Reimburses up to \$2,500 per year for undergraduate credits and \$3,500 per year for graduate credits.

All conditions of employment include, but are not limited to, hours, benefits and salary that are subject to change by Mayo Clinic at any time. The information herein is abridged for illustrative purposes only. The content of this brochure should not be construed as complete or binding. Benefits are subject to change. The Summary Plan Description is the definitive source of information. Some benefits are prorated or have different eligibility for part-time employees.

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