



2024

BENEFITS GUIDE

For Full Time Local 1503 (DC 37) Employees

This publication contains important information about your employee benefit program.

Please read thoroughly.

**THE
MET**

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The MET Open Enrollment

Annual Open Enrollment

- November 1 to November 15
- Benefits effective January 1, 2024

Absent a Qualifying Life Event

This is Your Only Opportunity to:

- Change existing benefits, including
 - Add or remove dependents
 - Increase or decrease supplemental life benefit
- Elect new benefits
- Re-establish benefits, including
 - FSA deferral amount(s)
 - Proof of other coverage (to receive waiver credit)



Your Medical Options

The Met pays the full cost of regular health insurance benefits for all eligible employees and their eligible dependents up to the cost of the HIP HMO Plan. Plans that cost more than the HIP HMO Plan require employee contributions. Contributions are made on a pre-tax basis. On the first of the month following an employee's three (3) year anniversary date, The Met's contribution to the employee's premium will change to the level of the GHI-CBP/EBCBS Plan. You can enroll in single coverage or family coverage. Eligibility begins the First Day of the month following 60 days of employment.

Choice of NYC Health Plans

	Aetna EPO		Emblem Health PPO GHI/EBCBS		Emblem Health HMO HIP Prime		MetroPlus Gold HMO	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Medical Deductible								
Individual	\$0	N/A	\$0	\$200	\$0	N/A	\$0	N/A
Family	\$0	N/A	\$0	\$500	\$0	N/A	\$0	N/A
Coinsurance	No charge	N/A	No charge	No charge	No charge	N/A	No charge	N/A
Out-of-Pocket Maximum								
Individual	\$1,500	N/A	\$4,550/\$2,600	N/A	\$0	N/A	\$0	N/A
Family	\$3,000	N/A	\$9,100/\$5,200	N/A	\$0	N/A	\$0	N/A
Plan Details								
Inpatient Hospital	\$300 copay	N/A	\$300 copay	Covered (Refer to DC37.net)	\$100 per continuous stay	Not covered	No charge	Not covered
Office Visits (PCP/Specialist)	\$15/\$20 copay	N/A	\$15/\$30 copay	No charge	\$0	Not covered	No charge	Not covered
Emergency Room	\$75 copay	N/A	\$150 copay	\$150 copay	\$150	N/A	\$150 copay	\$150 copay

* OOP Max has ind/fam limit for GHI medical/EBCBS hospital.

For actual plan design information, please visit <http://www.dc37.net/benefits/health/healthplans>.

Medical Contributions

	Fewer than 3 Years Bi-Weekly Deduction		More than 3 Years Bi-Weekly Deduction	
	Individual	Family	Individual	Family
Aetna EPO	\$212.23	\$881.65	\$175.91	\$711.21
GHI/EBCBS	\$36.32	\$170.44	\$0.00	\$0.00
HIP Prime HMO	\$0.00	\$0.00	\$0.00	\$0.00
MetroPlus Gold	\$0.00	\$0.00	\$0.00	\$0.00

Medical plan rates are determined by the City of New York. The attached rates were recently forwarded to the Museum from the City and apply to the 2024 benefit elections. These rates are subject to change from time to time during the course of the year. You will be notified of any changes and modifications as soon as practicable.

Cultural Institutions Health & Security Plan Trust

You can find information on eligibility and enrollment for your dental, vision prescription, and other benefits through the Health & Security Plan Trust. For more information, call **212.815.1234**.



For further information, consult the DC 37 Cultural Institutions Health and Security Plan Trust Benefit Booklet, available by visiting <http://www.dc37.net/benefits/health.html> or by contacting your union representative.

Healthcare FSA and Dependent Care FSA

Overview

Flexible Spending Accounts (FSAs) are voluntary accounts that allow you to set aside pre-tax money or certain health and dependent care expenses. These are two separate accounts for two separate purposes. The money in one account cannot be used to satisfy expenses in the other account. You can choose to participate in none, one, or both of these accounts depending on what works best for you. This amount you select during open enrollment is broken up evenly and deducted over the course of the pay periods in 2024. FSA funds are typically “use it or lose it”. For the Healthcare FSA, the amount you elect is available in your account up front and you may be allowed to roll over a limited amount into the next calendar year up to the max allowed by the IRS (\$610).

Healthcare FSA

- Contribute up to \$3,050 per year* on a pre-tax basis for eligible healthcare expenses

Dependent Care FSA

- Contribute up to \$5,000 per year* on a pre-tax basis for eligible dependent care expenses (such as daycare)
- Eligible Dependents for the Dependent Care FSA include:
 - Your dependent child(ren) under age 13 who lives with you for more than half the year and for whom you can claim an exemption
 - A child under age 13 for whom you have custody if you are divorced or legally separated
 - Your spouse who is physically or mentally incapable of self-care
 - A dependent of any age, such as an elderly parent or other adult dependent, who meets all of the following criteria:
 - Is physically or mentally incapable of caring for himself or herself
 - Receives over half of his or her support from you
 - Lives with you for more than half the year
 - Is your sibling, step-sibling, or any of their descendants; a parent or step-parent or any of their ancestors; an aunt, uncle, niece, or nephew; children or parents-in-law; or an unrelated individual who shares your residence as a member of the household

* More information about each of these benefits and any updates can be found on the Human Resources—Benefits Intranet.

Life Insurance

The Met provides all eligible employees with basic life coverage at no cost to you. These benefits provide valuable peace of mind and critical financial protection for your family. Life insurance benefits are provided through Unum Insurance.

- Basic Life insurance benefit equals 1.5× annual earnings to a maximum benefit of \$300,000

You have the opportunity to purchase Life insurance for yourself, your spouse, and your children. Employees who do not apply for Supplemental Life insurance when initially eligible will require Evidence of Insurability.

An employee who is currently enrolled in the Supplemental Life coverage can elect up to the guarantee issue amount of \$150,000 without Evidence of Insurability (EOI). Any employee not currently enrolled would require EOI for any amount of coverage elected.

Supplemental Life Insurance

Benefit pays the lesser between 5× annual earnings or \$750,000.

Supplemental Employee Life Rates

Age	Rate (per \$1,000)
00-24	\$0.042
25-29	\$0.050
30-34	\$0.067
35-39	\$0.076
40-44	\$0.084
45-49	\$0.126
50-54	\$0.193
55-59	\$0.361
60-64	\$0.554
65-69	\$1.270
70-99	\$2.050

If a spouse is currently enrolled in coverage, they can elect up to \$25,000 without EOI. There is no EOI needed for child coverage.

Spouse and Child Life Insurance

Spouse Benefit is the lesser amount between 50% of your amount of insurance or up to \$250,000.

Spouse Life Rates

Age	Rate (per \$1,000)
00-24	\$0.042
25-29	\$0.050
30-34	\$0.067
35-39	\$0.076
40-44	\$0.084
45-49	\$0.126
50-54	\$0.193
55-59	\$0.361
60-64	\$0.554
65-69	\$1.270
70-99	\$2.050

- Child benefit pays the lesser between 50% of your amount of insurance or \$10,000.
- Child Rate is \$0.080 (per \$1,000).

General Benefits Information

Retirement Saving Plans

Participants age 49 or younger on December 31 are eligible to contribute up to the 2024 IRS annual contribution limit of \$23,000.

Participants age 50 or older on December 31 are eligible to contribute up to the 2024 IRS annual contribution limit of \$30,500.

Plan name	Eligibility	Enrollment	Employee Contribution	Employer Match
Retirement Plan for Covered Union Employees (aka "Pension Plan")	At 1 year of service	Required to contribute	3% of pay	Varies annually
403(b) Voluntary Plan	Immediate at hire	Voluntary to contribute	Up to 75% of pay	N/A
403(b) Union Match Plan	At 2 years of service	May change contribution throughout year	2%-25% of pay	50% of the first 2% contributed; additional 0.25% for each additional percent contributed to a max of 3% match

The Employer Match funds are invested immediately upon eligibility.

Any changes to your retirement plan can be made directly through Fidelity Investments, our plan recordkeeper www.netbenefits.com/metmuseum.

Fidelity

To make an appointment: getguidance.fidelity.com or call **800.642.7131**

Pension Plan

- You are required to contribute to this plan and cannot change or stop your contribution amount at any time.
- You are required to begin contributions to this plan on the first of July nearest to your 1 year of service.
- The Met makes contributions, in addition to Members' contributions, to maintain the Plan on a sound actuarial basis and to meet funding standards prescribed by law.
- For more information on the pension plan or to obtain an estimate of your benefits, please contact the MMA Retirement Service Center, CBIZ, at **866.672.9597**. Representatives are available weekdays from 9 am–5 pm (except major holidays).

General Benefits Information continued

Parking and Transit

- **Commuter Parking:** Contribute up to the allowable maximum (\$315 per month) on a pre-tax basis for work-related parking
- **Mass Transit:** Contribute up to the allowable maximum (\$315 per month) on a pre-tax basis for work-related mass transit

You can elect and change your commuter benefit elections at any time throughout the year. Changes done prior to the 15th of the month are effective the 1st of the following month.

How to Elect or Change Your Parking/Transit Elections

Step 1: Go to www.ebpabenefits.com

Step 2: Click on "Member Access"

Step 3: Type "The Met" and click on "Search"

Step 4: Click "10705—The Metropolitan Museum of Art"

Step 5: Click here: "Online Parking and Transit Form/ Application (Online Parking—MMA)"

Step 6: Read this page and click "I Accept" and then Click "Submit"

Step 7: Check either "New Enrollment" or "Change in Election" depending on whether it's your initial enrollment or if you are making a change to your current election

Step 8: When finished, reviewed your information, check "I Accept" and click on "Submit"; you will receive a confirmation email for your records

For more information about the resources available to support the mental health and wellbeing for employees, please visit the [Mental Health Resources page on the Benefits Intranet](#).



Enrollment Essentials

What You Need to Do

This is your only opportunity to:

- Change existing benefits, including
 - Add or remove dependents
 - Increase or decrease supplemental life benefit
- Elect new benefits
- Re-establish benefits, including
 - FSA deferral amount(s)
 - Proof of other coverage (to receive waiver credit)

If You Do Nothing

- If you do not take action by November 15:
 - You will be enrolled in the plan(s) you have today at 2024 costs
 - If you waive the Met's medical coverage, and do not supply proof of other coverage, you will not receive the Waiver Credit
 - You will not participate in FSAs (prior year's elections do not roll over)

Remember, benefits take effect January 1, 2024, and remain through the end of the year unless you experience a qualified change in status.



Benefits take effect January 1, 2024, and remain in effect through December 31, 2024 unless you experience a qualified life event.

The Met Benefits Team

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This benefit guide is only intended to highlight some of the major benefit provisions of the company plan and should not be relied upon as a complete detailed representation of the plan. Please refer to the plan's summary plan descriptions for further detail. Should this guide differ from the summary plan descriptions, the summary plan descriptions prevail.