CITY COLLEGES OF CHICAGO

2027 BENEFITS GUIDE

Part-Time Employee

IEA-NEA CCCLOC Faculty

Job Family 355, 365, & 366

CITY COLLEGES®
OF CHICAGO

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Eligibility

As a part-time employee of City Colleges of Chicago (CCC), you may be eligible to participate in the CCC Benefits Programs outlined in this guide. You are eligible to enroll your dependents in your medical plan. **Please refer to your current contract for more details regarding eligibility.**

If you want your legal dependent(s) to participate in any of the CCC Benefits listed above, the dependents must meet the criteria for eligible dependents, and you must **attest on the online enrollment portal that your dents meet the requirements for eligibility.** If you are a new hire, you have 31 days from your first day of employment or if you experience a qualifying event during the calendar year, you have 31 days from the day a qualifying event occurs to submit your updated dependent coverage information. Otherwise, you will not be able to enroll your dependents in any of the CCC Benefits Programs until the next Open Enrollment period.

Eligible Dependents include:

- Legal Spouse, Civil Union Spouse, or Domestic Partner
- Eligible Child(ren) until age 26 (or until age 30 for military dependents)
- Natural Children
- Stepchildren, child from Civil Union Partnership, or child from Domestic Partner
- Legally Adopted Children
- Children under Employee's Legal Guardianship, Adjudicated child
- Physically or mentally handicapped children (regardless of age), who have been added prior to age 26
- Disabled Veteran Child up to but not including age 30

If you have a family status change before your next opportunity to enroll, you can enroll eligible dependents in the CCC health plans (medical, dental, and vision) within 31 days of the family status change. Below is the list of events that qualify as a change in family status:

- Marriage
- Birth of a child
- Adoption of a child
- Covered employee becoming entitled to Medicare
- Divorce or legal separation of a covered employee
- Death of a covered employee, spouse, or dependent
- Loss of status as a dependent child under plan rules (child turns age 26)
- Spouse or dependent loses health coverage
- Reduction of work hours for a covered employee (Example: Moving from full time to part time)

CCC Medical Benefits Programs

Medical Plans

The purpose of City Colleges of Chicago's medical plans through Blue Cross Blue Shield (BCBS) is to provide plan participants affordable protection from catastrophic out-of-pocket medical expenses.

BlueAdvantage HMO

The BlueAdvantage HMO Plan offers you medical care from one of the largest HMO networks in Illinois. You are required to select a contracting medical group and primary care physician (PCP) to provide your care and must obtain a referral from your PCP to see a specialist. You can select a different PCP for each family member or change your PCP within the same medical group at any time. You will need a referral from your PCP to see a specialist.

It is important to note that if you receive care from another source without prior authorization from the HMO, your services will not be covered.

When a medical emergency occurs, call your PCP. Your medical group is available 24 hours a day, seven days a week to accept phone calls. If you are unable to call your PCP, go directly to the nearest hospital emergency room and notify your PCP as soon as possible. If you are admitted, someone must call your PCP immediately upon admission. Emergency care benefits are limited to the initial emergency treatment. To receive additional benefits, your PCP must provide or coordinate follow-up care.

To see if your current doctor is part of the BlueAdvantage HMO Plan network (Provider Finder®), or change to a new PCP in a different medical group, simply call (800) 892-2803 or visit www.bcbsil.com.

PPO Plan

The PPO Plan gives you freedom of choice and greater flexibility than the HMO Plan. You are not required to choose a primary care physician and do not need a referral to see a specialist. PPO members have access to care anywhere they live, work or travel, across the country and around the world.

When you use network providers, your benefits are paid at a higher level and your out-of-pocket expenses are lower due to the provider discounts negotiated by BlueCross and BlueShield. The plan requires payment of deductibles and coinsurance until you satisfy the out-of-pocket maximum each calendar year. To find a doctor in the network, use the Provider Finder® at www.bcbsil.com.

You must call the Medical Services Advisory (MSA) at BCBS at least one business day prior to a non-emergency hospital admission and within two business days of an emergency or maternity hospital admission. Otherwise, you will be charged an additional $500 copay. The MSA is a unit of health care professionals who work closely with the Plan to coordinate your benefits to determine the most appropriate and cost-effective way to meet your healthcare needs.

Personal Care Payments

In accordance with your Collective Bargaining Agreement, you may be eligible to receive Personal Care Payments which reduce the cost of medical coverage provided by CCC. To be eligible to receive such personal care payment, the employee must be (a) paying for coverage under a group health insurance plan offered by the Board and (b) teaching three (3) or more instructional hours per week (in the case of a part-time faculty member) in the previous academic year and completing a work assignment (in the case of a part-time librarian). Personal Care Payments are provided in the amount of $300.00 per month ($150.00 per pay period) and are available to a maximum of one hundred and fifty (150) employees (from the part-time librarian and part-time faculty member bargaining units combined). The Personal Care Payment shall increase by fifteen dollars ($15) each year for the life of the four-year collective bargaining agreement.

If you are eligible for this benefit and there is a slot available, you will be automatically enrolled for this benefit when open enrollment closes. Dropping enrollment in a PC plan during open enrollment will stop the Personal Care Payment beginning the first of the year and you will not be able to re-enroll until the next open period. Eligibility is reviewed yearly and you will be notified if eligibility is no longer met.

Employees who are receiving personal care payments or the equivalent pursuant to any other collective bargaining agreement or other arrangement with City Colleges of Chicago will not be eligible for the benefit described in this paragraph.

Payments for the three-month summer period, when faculty or librarians are not working will be credited in the first paycheck of the succeeding fall term, if the faculty or librarians receive work assignments for the fall term.

When enrolling in HR Self Service, please note the following abbreviated descriptions next to the plan names:

DB - Direct Bill plan (no PC credit) that is paid via personal check to City Colleges of Chicago. All payments should be mailed to City Colleges of Chicago, ATTN: BENEFITS DIVISION, 3901 S. State Street, Chicago, IL 60609.

DBPC - Direct Bill Personal Care plan that is paid via personal check to City Colleges of Chicago. All payments should be mailed to City Colleges of Chicago, ATTN: BENEFITS DIVISION, 3901 S. State Street, Chicago, IL 60609.

Medical Benefits

Medical Benefit Highlights	PPO Plan Blue Choice Tier I	PPO Plan In-Network Tier II	PPO Plan Out-of-Network Tier III
Annual Deductible			
Individual	$400	$500	$1,000
Family	$800	$900	$3,000
Annual Out-of-Pocket Limit			
Individual	$2,000 (including deductible)	$2,500 (including deductible)	$3,000 (including deductible)
Family	$3,800 (including deductible)	$4,000 (including deductible)	$9,000 (including deductible)
Lifetime Maximum Benefit (per person)	Unlimited	Unlimited	Unlimited
Preventive Care Services (No co-payment, deductible or co-insurance)	100%	100%	100%
Physician Services			
Office Visit – Primary Care Physician	90% (after $5 copay)	80% (after $10 copay)	70%
Office Visit – Specialist Physician	90% (after $15 copay)	80% (after $20 copay)	70%
Hospital Services*			
Inpatient or Outpatient	90% (after $100 copay)	80% (after $100 copay)	70% (after $100 copay)
Emergency Room Visit	80% (after $175 copay)	80% (after $175 copay)	80% (after $175 copay)
*PPO members must contact the Medical Services Advisory (MSA) at least 1 business day prior to a non-emergency hospital admission and within 2 business days of an emergency or maternity hospital admission; otherwise, an additional $500 copay applies. **There is no copay for outpatient preventive endoscopic surgical procedures such as colonoscopies.			
Mental Health Services			
Inpatient	90%	80%	70%
Outpatient	90% (after $5 copay)	80% (after $10 copay)	70%
Chemical Dependency Services			
Inpatient	90%	80%	70%
Outpatient	90%	80%	70%
Other Covered Services (e.g., physical therapy, home health care)	90%	80%	70%
Prescription Drugs Retail (30 day supply)			
Generic Copay	$10	$10	Reimbursed at 75% of network rate minus $10 copay
Brand Formulary Copay	$20	$20	Reimbursed at 75% of network rate minus $20 copay
Brand Non-Formulary Copay	$40*	$40*	Reimbursed at 75% of network rate minus $40 copay
Mail-Order (90 day supply)			
Generic Copay	$20	$20	Reimbursed at 75% of network rate minus $20 copay
Brand Formulary Copay	$40	$40	Reimbursed at 75% of network rate minus $40 copay
Brand Non-Formulary Copay	$80*	$80*	Reimbursed at 75% of network rate minus $80 copay
*If you choose a non-formulary drug when a generic is available, you pay the cost difference between them in addition to the copay.			

Medical Benefits	
Medical Benefit Highlights	**HMO BlueAdvantage Plan**
Annual Deductible	
Individual	None
Family	None
Annual Out-of-Pocket Limit	
Individual	$1,500
Family	$3,000
Lifetime Maximum Benefit (per person)	Unlimited
Preventive Care Services (No co-payment, deductible or co-insurance)	100%
Physician Services	
Office Visit – Primary Care Physician	100% (after $25 copay)
Office Visit – Specialist Physician	100% (after $35 copay)
Hospital Services*	
Inpatient or Outpatient	100% (after $300 copay)**
Emergency Room Visit	100% (after $200 copay)
Mental Health Services	
Inpatient	100% (after $300 copay)
Outpatient	100% (after $25 copay)
Chemical Dependency Services	
Inpatient	100% (after $300 copay)
Outpatient	100% (after $25 copay)
Other Covered Services (e.g., physical therapy, home health care)	100% (after $25 copay/visit)
Prescription Drugs Retail (30 day supply)	
Generic Copay	$20
Brand Formulary Copay	$30
Brand Non-Formulary Copay	$45*
Mail-Order (90 day supply)	
Generic Copay	$40
Brand Formulary Copay	$60
Brand Non-Formulary Copay	$90*

*If you choose a non-formulary drug when a generic is available, you pay the cost difference between them in addition to the copay.

Dental Plan

The purpose of City Colleges of Chicago's dental plan is to provide affordable protection from large out-of-pocket dental expenses and encourage preventive care. CCC pays approximately 85% of your monthly premium for dental plan coverage. You may go to the dentist of your choice or to a provider in the BCBS Blue Care dental network. To see if your current dentist is in the BlueCross BlueShield Blue Care Dental network or to find a network dentist, search the Provider Locator at **www.bcbsil.com**, or call (855) 557-5488. You may choose different dental providers for each family member.

Program Basics	Contracting Provider*	Non-Contracting Provider*
Benefit Period Maximum	$1,500 per calendar year	
Deductible Applies to all covered dental services, except for Oral Exams, Cleanings, and X-Rays	$10 per person per calendar year	
Dependent Coverage	Up to age 26	

Services	Contracting Provider*	Non-Contracting Provider*
Diagnostic & Preventive Services Dental exams Cleanings (2 visits per calendar year) X-rays	100% of Maximum Allowance No Deductible	100% of Usual and Customary No Deductible
Miscellaneous Services Fluoride treatment Space maintainers Sealants for children up to age 19 Emergency Care (Relief of pain)	100% of Maximum Allowance No Deductible	100% of Usual and Customary No Deductible
Restorative Services Routine fillings (amalgams and resins) Pin retention Simple extractions	80% of Maximum Allowance After Deductible	80% of Usual and Customary After Deductible
General Services Intravenous sedation General anesthesia Reline/rebase of dentures Repair of bridges and dentures	80% of Maximum Allowance After Deductible	80% of Usual and Customary After Deductible
Endodontic Services Root canals Pulp caps Apicoectomy/apexification	80% of Maximum Allowance After Deductible	80% of Usual and Customary After Deductible
Periodontic Services Scaling and root planing Gingivectomy/gingivoplasty Osseous surgery	80% of Maximum Allowance After Deductible	80% of Usual and Customary After Deductible
Oral Surgery Services Surgical extractions, including complete bony impactions Alveoloplasty Vestibuloplasty	80% of Maximum Allowance After Deductible	80% of Usual and Customary After Deductible
Crowns, Veneers, Inlays/Onlays Services Dental implants Crowns, including stainless steel inlays/onlays Repairs and replacement of Veneers after 60 months Prefabricated posts and cores Repair and recementation of crown, inlays/onlays	80% of Maximum Allowance After Deductible	80% of Usual and Customary After Deductible
Prosthodontic Services Bridges, dentures Addition of tooth or clasp	80% of Maximum Allowance After Deductible	80% of Usual and Customary After Deductible
Orthodontics Coverage for adults and for eligible dependent children to age 26	50% Orthodontia – Separate Lifetime Maximum of $2,000 for Adults and Children	50% Orthodontia – Separate Lifetime Maximum of $2,000 for Adults and Children

*Schedule of Maximum Allowances: Contracting providers have agreed to accept the Schedule of Maximum Allowances as payment in full for covered services. Non-contracting providers do not accept the Schedule of Maximum Allowances as payment in full. For services received from a non-contracting provider, member will be liable for the difference between the dentist's charge and covered benefits.

Vision Plan

The purpose of City Colleges of Chicago's vision plan is to provide affordable protection from large out-of-pocket vision expenses and encourage preventive care. CCC pays approximately 85% of your monthly premium for vision plan coverage. The Blue Cross Blue Shield Vision Plan, administered through the EyeMed Network Vision Plan, offers you flexibility in choosing your vision provider. You may choose between a BCBS provider or an out-of-network provider. Benefits are better if you select a BCBS in-network provider. The plan benefits include examinations and lenses every 12 months and frames every 24 months. There is an individual $10 copayment each calendar year for all covered services.

Benefit	Description	Copay
	Your Coverage with a BCBS Vision Doctor	
Exams	• Focuses on your eyes and overall wellness • Every 12 months • Exam with dilation as necessary • Retinal Imaging	 $10 Up to $39
	Prescription Glasses	
Frame	• $120 allowance for any available frame at provider location • 20% off balance over $120 • Every 24 months	$0
Lenses	• Single vision, bifocal, trifocal, and lenticular lenses • Standard progressive lens • Every 12 months	$0
Lens Options	• Ultraviolet coating • Tint (solid and gradient) lenses • Scratch resistant coating • Polycarbonate lenses - adults • Polycarbonate lenses – kids under 19 • Polarized lenses • Every 12 months	$15 $0 $15 $40 $0 20% off retail
Contacts (in lieu of spectacle lenses)	• Conventional • Disposable • Medically Necessary	$0 copay, $300 allowance, 15% off balance $0 copay, $300 allowance, +balance over $300 $0 copay, paid-in-full
Additional Coverage	• Diabetic Eyecare Plus Program	
Extra Savings and Discounts	Glasses and Sunglasses • 40% off complete pair of prescription eyeglasses, 20% off non-prescription sunglasses, and 15% off conventional contact lenses once funded benefit has been used. Laser Vision Correction • Average 15% off the regular price or 5% off the promotional price.	

Your Coverage with Other Providers

Visit member.eyemedvisioncare.com/bcbsil or call 1.855.362.5539 for detail if you plan to see a provider other than a BCBS doctor.

Exam – Up to $35
Frame – Up to $40
Single Vision Lenses – Up to $30
Lined Bifocal Lenses – Up to $40

Lined Trifocal Lenses – Up to $50
Progressive Lenses – Up to $40
Contacts– Up to $105
Tints – Up to $8

BCBS guarantees coverage from BCBS doctors only. Coverage information is subject to change. In the event of a conflict between this information and your organization's contract with BCBS, the terms of the contract will prevail.

2027 Rates - IEA-NEA CCCLOC Faculty

	EE Semi - Monthly Contribution	Total Cost Monthly Contribution
BCBS PPO BLUE CHOICE		
Employee Only	$803.59	$1,607.18
Employee + Spouse	$1465.30	$2,930.60
Employee + Child(ren)	$1,298.75	$2,597.49
Family	$2,004.13	$4,008.26
BCBS Blue Advantage HMO		
Employee Only	$436.47	$872.94
Employee + Spouse	$1,030.51	$2,061,01
Employee + Child(ren)	$989.11	$1,978.22
Family	$1,527.87	$3,55.73
Dental DNO		
Employee Only	$28.69	$57.39
Employee + Spouse	$55.44	$110.88
Employee + Child(ren)	$53.22	$106.43
Family	$82.32	$164.63
Vision		
Employee Only	$4.56	$9.13
Employee + Spouse	$9.13	$18.25
Employee + Child(ren)	$9.77	$19.53
Family	$15.61	$31.21

Employee Assistance Program (EAP)

City Colleges of Chicago offers a free Employee Assistance Program (EAP) to employees and their families. EAP services include consultation and support for everyday challenges of life that may affect your health, family life, or desire to excel at work. Below is a summary of the services available:

Employee Assistance

- Toll-free telephone assessments and consultations
- Work and Life Services – Childcare and Eldercare, Financial, Legal and Identity Theft Prevention and Recovery
- Valuable Member Website

Consultation and Support

- 3 or 5 telephonic or web-video consultations per incident, per person, with a licensed clinician. EAP Services Available 24/7 through website or toll-free line.

  Website: guidanceresources.com
  Company Web ID: **DISRES**
  Toll-free Line: **1-800-311-4327**

- Research-based well-being assessment
- Assessments for depression and alcohol/substance abuse
- Articles and tools for health and wellness
- Work-life resource and referral directory, online tools (interactive tools for taxes, personal finance, retirement, etc.)
- Articles and tips on a wide range of behavioral and emotional health issues, including anger management, grief and loss, and family and relationships
- “Member Matters” – monthly e-newsletter
- Ask Our Expert
- Interactive e-learning versions of many of our popular training programs

To learn more about the Employee Assistance Program offered through ComPsych, please refer to the EAP section of the Benefits Department Website.

CCC Voluntary Employee-Paid Benefit Programs

Flexible Spending Accounts (Employee-paid)

The Health and Dependent Care Flexible Spending Account Plans (FSA) help you save money on your out-of-pocket family health and childcare expenses (up to age 12). FSA accounts are exempt from federal income taxes, state income taxes and Medicare taxes. When you use the money in your FSA accounts, you avoid paying taxes on those dollars. As a result, youcan have significant tax savings by using the FSA accounts.

The IRS requires that any unused year-end account balances must be forfeited. However, FSA expenses incurred during the 2-1/2 month “grace period” following the plan year can be reimbursed from your previous year’s FSA balances. The deadline for submitting 2026 claims will be March 31, 2027. Claims for the 2026 plan year must be incurred by March 15, 2027, and submitted by March 31, 2027.

Determine your annual Health and Dependent Care FSA account contributions by calculating your expected expenses. The maximum contributions you can elect is $3,500.00 (projected) for the Health FSA and $7,500.00 for the Dependent Care FSA. Your contribution amounts will be divided by the number of pay periods in the plan year and will be deducted on a pre-tax basis in equal amounts each pay period.

TASC Debit Card: You can use a debit card for all of your eligible health care expenses. The TASC Debit Card makes it easy for you to utilize the pretax funds in your FSA account. Make sure you keep a record of your purchases in the event that TASC needs additional information about a purchase.

For more information about the FSA Plan or for a listing of eligible expenses and worksheets to help you calculate your contribution amounts, visit: www.TASConline.com or contact TASC toll free at (800) 422-4661.

Transit Benefits (Employee-paid)

Metra Card Program

The Northern Illinois Transit Authority (NITA) METRA Prepaid MasterCard allows employees to use pre-tax dollars for commuting expenses for transportation on the METRA, CTA, Pace, South Shore Railroad, certain Amtrak routes and Chicago Water Taxi. Visit the NITA website for more details. The IRS maximum amount is currently $350.00/month (projected) for 2027.

All transit payroll deductions are pre-taxed, and the amount elected will be deducted from the first payroll check of each month. Your NITA Transit Benefit Prepaid MasterCard will be delivered to your home, and your monthly pre-tax deduction amount will be loaded onto your card each month. You must activate your card online or by phone with the NITA prior to use.

CTA Ventra Card Program

All payroll deductions are pre-taxed. The amount elected will be deducted from the first payroll check of each month. Amounts will be forwarded to Ventra and will be available for use on the 1st day of the following month. There are two enrollment options for the program:

- **Pay-Per-Use** – Choose from the following amounts: $30, $45, $60, or $80
- **30 Day Pass** – Get unlimited rides for 30 days for $75

Your Ventra transit card has a balance that you maintain in an online account in the Ventra system. Fare transactions are deducted from your account each time the card is used on all CTA fare machines. If you lose your card, your account balance remains secure. Alert Ventra if your card is lost or stolen and order another card. For additional transit information and current fare rates, visit the Ventra website at www.ventrachicago.com.

The maximum amount allowed by the IRS for pre-tax commuting expenses is $350.00 (projected) per month. If you are participating in multiple transit programs, your combined deductions cannot exceed the $350.00 (projected) monthly contribution. For additional information and current fare rates visit NITA at https://nita.illinois.gov/, CTA at www.transitchicago.com or Metra at www.metrarail.com.

Parking Deduction Program (Employee-paid)

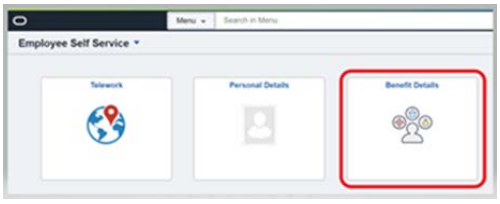
As part of the pre-tax parking program, you can deduct parking fees as part of your qualified work-related transportation expenses from your paycheck before tax, which lowers your taxable income. Depending on your tax bracket, this could save you up to 40% on your commuting costs by using pre-tax dollars—a significant tax advantage. You can enroll at any time, and deductions begin the following month.

You can participate in the Pre-Tax Parking Deduction Program, where you can elect a monthly contribution of up to $350, in line with IRS limits, based on your anticipated expenses. The deduction will be taken from your paycheck bi-weekly each month and split between the first and second pay periods. To enroll in this benefit, please follow the steps below in HR Self-Service:

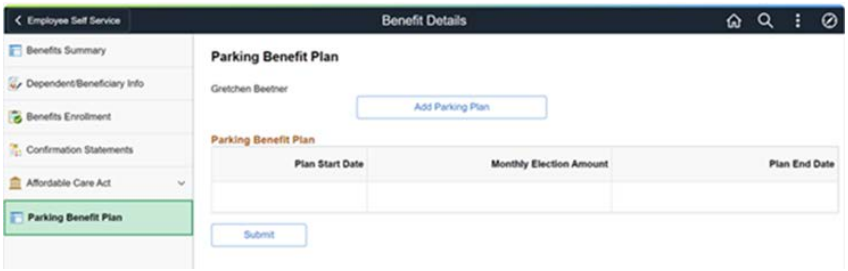
Enrolling in the Pre-Tax Parking Program

1. Login to HR Self-Service.

2. Go to Employee Self-Service and click the Benefit Details tile.



3. In the Benefit Details section, select Parking Benefit Plan.



4. Click the Add Parking Plan button to get to the election page.

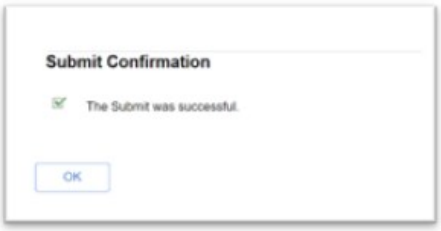


5. *Enter the Plan Start Date:* The start date should always be the 1st of the following month.

   Enter the Monthly Election amount: Election is a minimum of $10 per month and a maximum of $340. The deduction will come out twice a month from your paycheck.

   Enter a Plan End Date (not required): Only enter this if you know the end date. Otherwise, leave it blank.

6. Click the Submit button when finished.



7. Click OK to see your saved election.

8. Your initial enrollment is complete. If you wish to change the amount of your election, follow the steps above and the new election will supersede the original request.

   The vendor administering the parking program will be Total Administrative Services Corporation (TASC). TASC also provides our other flexible spending accounts, and this benefit will utilize the same FSA card if you already have a card. If you do not already have an FSA card and start to participate in this program, you will be issued a new card. You will be able to submit a manual reimbursement through the TASC website until your card is received.

   To use your TASC card, simply swipe the card to pay for an eligible work-related expense, such as a parking ramp fee, and the funds are directly withdrawn from your available account balance.

CCC Voluntary Employee-Paid Benefit Programs

403(b) and 457(b) Retirement Savings Plans (Employee-paid Contributions)

CCC offers voluntary 403(b) and 457(b) retirement plans which are valuable tax-advantaged retirement savings plans. The salary deferrals you elect to contribute to the Plan are made before income tax withholding is calculated. Your contributions are allowed to grow tax-deferred until the money is withdrawn from the Plan. Once withdrawn, your contributions are taxable to you upon receipt.

TSA Consulting Group (TSACG), is the plan administrator for City Colleges of Chicago for Voluntary Retirement Savings Plans. Please submit all requests and forms through the website. For information and to submit requests and forms, go to: TSA Consulting Group.

First, scroll down to view and select which investment provider you want your money invested in from the list. Next, contact the provider and open an account. Once the account is open, go back to the link above to submit a Salary Reduction Authorization to TSA Consulting Group, the plan administrator. You will receive a confirmation email of your request for your records.

You have the option to increase, decrease, discontinue, or resume your salary deferral contributions to the Plan at any time. Investment provider changes may be made at any time. Rollovers, loans, and distribution requests for all vendors should be made on the TSACG website. Click on forms, select the form for your transaction, complete and upload the document for pre-authorization and immediate feedback. If you have questions, you may contact TSA Customer Service at (888) 796-3786.

Refer to the Retirement Savings Plans section of the Benefits Department Website for investment options.

2027 City Colleges of Chicago (CCC)
403(b) & 457(b) Plans Comparison

403(b) and 457(b) Retirement Plans Same Plan Features	403(b) Plan and 457 Plan
Eligibility	All full and part-time employees are eligible except student employees and work-study employees.
Contributions	You can contribute a specific dollar amount or up to 75% of your salary each pay period through bi-weekly pre-tax salary deferrals. You can contribute to both plans concurrently or to either plan individually in any order.
Basic Annual Contribution Limit	$25,500 (projected) per plan and $51,000 (projected) for both plans combined. (The IRS determines the limit each calendar year).
Age 50 Additional Annual Contribution Limit Ages 60-63 Special Catch-Up	$8,500 (projected) per plan and $17,000 (projected) for both plans combined for employees who are over 50 years old or attain the age of 50 by December 31, 2027. (The IRS determines the limit each calendar year). $11,500 (projected) per plan (The IRS determines the limit each calendar year). .
Total Annual Basic and Age 50 Contribution Limits	$32,500 per plan (The IRS determines the limit each calendar year).
Total Annual Basic and Age 60-63 Special Catch-Up Contribution Limits	$35,750 per plan (The IRS determines the limit each calendar year).
Contribution Changes	As a new participant, you can enroll in the Plan at any time. Your contributions will begin the first payroll after an account has been established with a CCC investment provider. If you are a current participant, you can increase, decrease, resume, or discontinue your contributions at anytime.
Investment Provider Changes	You can change your investment provider at any time. You can also transfer your account balance to another investment provider or change the allocation of your contributions among the investment options offered by your investment provider.

403(b) and 457(b) Retirement Plans Different Plan Features	403(b) Plan	457(b) Plan
Service-Based Catch-up Contributions	Employees with at least 15 years of consecutive service with City Colleges can contribute up to $3,000 per year to a lifetime maximum of $15,000. (Prior year contributionsmay limit this amount.) Employees can make this contribution and the age 50 additional contribution in the same year.	Employees within 3 years of Normal Retirement Age 65 can contribute up to 2 times the basic annual contribution limit, or up to IRS limits for 2026. (Prior year contributions may limit this amount.) Employees can make the greater of this contribution or the age 50 additional contribution, but cannot do both in the sameyear.
Investment Providers	You can invest your contributions with one of 7 investment providers shown on the next page.	You can invest your contributions with one of 4 investment providers shown on the next page.

403(b) Investment Providers

Provider	Plan	New Participants	Current Participants
Corebridge Financial (Formerly VALIC)	#01195	valic.com | Customer Service (800) 448-2542 Hector Anaya (312) 898-7699	valic.com | Customer Service (800) 448-2542 Hector Anaya (312)898-7699
Fidelity	#50075	fidelity.com/atwork | Click on "resources" tab for forms Customer Service (800) 343-0860	fidelity.com/atwork | Click on "resources" tab for forms Customer Service (800) 343-0860
Great American	#OTC094	Customer Service (800) 556-0098	Customer Service (800) 556-0098
Voya Financial	#VT5590	Voya.com | Customer Service (800) 873-9150	voya.com Customer Service (800) 873-9150 Jim Molster (630) 245-4047 Michael Roberson (630) 245-4047
MetLife Resources	#1002017	Dan Krout Office: (708) 203- 6430	Dan Krout Office: (708) 203-6430
The Legend Group		Customer Service (800) 242-1421 x5714 Don Wade, CFP (630) 620-6100 x5714 donaldwade@legendequities.com	Customer Service (800) 242-1421 x5714 Don Wade, CFP (630) 620-6100 x5714 donaldwade@legendequities.com
TIAA-CREF	#365797	tiaa-cref.org | Click on "Products and Services" Customer Service (800) 842-2888 or (800) 842-2273 Press 2 for new participants	tiaa-cref.org | Click on "Products and Services" Customer Service (800) 842-2888 or (800) 842-2273 Press 1 for current participants

457 Investment Providers

Provider	Plan	New Participants	Current Participants
Corebridge Financial (Formerly VALIC)	#01195	valic.com | Customer Service (800) 448-2542 Hector Anaya (312) 898-7699	valic.com | Customer Service (800) 448-2542 Hector Anaya (312) 898-7699
Fidelity	#84758	fidelity.com/atwork | Click on "resources" tab for forms Customer Service (800) 343-0860	fidelity.com/atwork | Click on "resources" tab for forms Customer Service (800) 343-0860
The Legend Group		Customer Service (800) 242-1421 x5714 Don Wade, CFP (630) 620-6100 x5714 donaldwade@legendequities.com	Customer Service (800) 242-1421 x5714 Don Wade, CFP (630) 620-6100 x5714 donaldwade@legendequities.com
TIAA-CREF	#403542	tiaa-cref.org | Click on "Products and Services" Customer Service (800) 842-2888 or (800) 842-2273 Press 2 for new participants	tiaa-cref.org | Click on "Products and Services" Customer Service (800) 842-2888 or (800) 842-2273 Press 1 for current participants
SURS DCP	#626702	SURS.org | Customer Service (800) 275-7877	

Administrative services for the 403(b) and 457(b) Plans are provided by TSA Consulting Group (TSACG). For plan details, read the 403(b) Plan Information and/or 457(b) Plan Information. To help decide which plan might be right for you based on your personal savings goals and objectives, review the side-by-side comparison chart. You can contribute to either plan individually or both plans concurrently.

CCC Mandatory Benefit Program

State University Retirement System of Illinois (SURS) (Mandatory Participation)

The State Universities Retirement System of Illinois (SURS) provides retirement plans, disability, death, and survivor benefits to eligible SURS participants and annuitants.

CCC employees will not pay into Social Security while employed at City Colleges of Chicago. Instead, employees will contribute to the State Universities Retirement System. A mandatory 8% will be deducted from your earnings and sent to SURS for your retirement.

New members of SURS must choose from 3 retirement plans within 6 months of the date SURS receives your employment certification. If you do not make a plan choice within this time frame, you will automatically be permanently enrolled in the Traditional Benefit Plan. Your plan choice is a one-time irrevocable decision that cannot be changed at a later date.

SURS will send you your SURS Enrollment packet soon after your first day of employment.

New SURS participants will also have an additional mandatory 3% deduction to the SURS Deferred Compensation Plan (DCP) for additional retirement savings. If you are not interested in the DCP deduction, you may contact SURS to opt-out and waive the deduction. To get more information, contact SURS at www.surs.org/dcp.

For additional information, you may contact SURS at 800-275-7877 or www.surs.org.

Contact Information

Employee Benefits Contact Information

If you need assistance please contact the District Office of Human Resources, Benefits Division:

Phone	Email	Address
(312) 553-2895	benefits@ccc.edu	3901 South State Street, Chicago, Illinois 60609

Benefits Contact information

Plan	Customer Service Number	Address	Website
Blue Cross BlueShield Blue Advantage HMO	Medical: (800) 892-2803 Rx: (800) 423-1973	BCBS of Illinois PO Box 805107 Chicago, IL 60680	www.bcbsil.com
BlueCross BlueShield PPO Medical	(855) 609-5679	BCBS of Illinois PO Box 805107 Chicago, IL 60680	www.bcbsil.com
CVS Caremark PPO Prescription	(877) 542-0285	CVS Caremark PO Box 94467 Palatine, IL 60094	www.caremark.com
BCBS Blue Care Dental	(855) 557-5488	BCBS Blue Care Claims Processing PO Box 23059 Belleville, IL 62223-0059	www.bcbsil.com
Vision Plan (BCBS)	(855) 362-5539	701 E. 22nd St., Suite 300 Lombard, IL 60148	member.eyemedvisioncare.com/bcbsil
MetLife (Life Insurance and Voluntary Disability)	(800) 438-6388	MetLife Insurance Company 200 Park Avenue New York, New York 10166	www.metlife.com
ComPsych (EAP)	(800) 311-4327 24 hours a day 7 days a week		www.guidanceresources.com Organization Web ID - DISRES
TASC (FSA)	800.422.4661	TASC Online 2302 International Ln Madison, Wi 53704-3140	https://www.tasconline.com
State University Retirement System (SURS)	(800) 275-7877 Toll-Free (217) 378-8800 Direct Dial	SURS 1901 Fox Drive Champaign, IL 61820	www.SURS.org
TSA Retirement Investments	888) 796-3786	TSA Consulting Group P. O. Box 4037 Ft. Walton Beach, FL 32549	https://www.tsacg.com/
Hinge Health	(855) 902-2777	455 Market Street, Suite 700 San Francisco, CA 94105	https://www.hingehealth.com/for-individuals/