

2025



Benefits Guide - Core



FOCUSING ON YOUR HEALTH

LEARN
MORE
INSIDE



Contents

| | | |
|----|--------------------------------------|-------------------------------------|
| 1 | <u>Important Notes</u> | |
| 3 | <u>Health Savings Accounts</u> | |
| 5 | <u>Dental & Vision Insurance</u> | |
| 7 | <u>LTD Insurance</u> | |
| 9 | <u>Important Contacts</u> | |
| 11 | <u>Benefit Notices</u> | |
| | | <u>Health Insurance</u> 2 |
| | | <u>Flexible Spending Accounts</u> 4 |
| | | <u>Life / AD&D Insurance</u> 6 |
| | | <u>Other Employee Benefits</u> 8 |
| | | <u>Enrollment</u> 10 |

Important Notes

Health Insurance

Health Savings Accounts

Flexible Spending Accounts

Dental & Vision Insurance

Life / AD&D Insurance

LTD Insurance

Other Employee Benefits

Important Contacts

Enrollment

Benefit Notices

Annual Enrollment for 2025 is here, and we want to update you on the benefit programs offered to eligible faculty and staff.

Please take a close look at all the information in this guide. For a more detailed benefit description, please visit the My Lesley Benefits and Page file on [Workday](#)

Annual Enrollment is the period when we introduce new benefits and/or changes to existing plans for the upcoming year. In addition, employees may enroll in coverage, terminate coverage or change their elections under certain benefit programs.



Important Notes about Annual Enrollment

- Annual Enrollment Period is **Monday, November 11, through Friday, November 22, 2024**. All benefit changes made during this period will become effective January 1, 2025.
- If you are not making any changes to your medical coverage for 2025, it will automatically continue. You only need to amend your elections through [Workday](#) if you would like to change plans and/or tiers.
- **Employees participating in the health and/or dependent care FSA must re-elect within [Workday](#) each year as elections do not continue into the new plan year.**

Please see the Enrollment section on Page 23 for detailed information on how to enroll in benefits or change your enrollment.

Important Notes

Health Insurance

Health Savings Accounts

Flexible Spending Accounts

Dental & Vision Insurance

Life / AD&D Insurance

LTD Insurance

Other Employee Benefits

Important Contacts

Enrollment

Benefit Notices

Harvard Pilgrim Health Care

How to Find a Doctor:

- Visit harvardpilgrim.org.
- Click "**Find a Provider.**"
- If you have created a Harvard Pilgrim member account, click "**Login to search.**" After logging in, you will be taken to your plan's directory.
- If you don't have a Harvard Pilgrim member account, click "**Select a plan.**" Choose a plan on the page or locate your plan on your ID card or plan documents and type the plan in the search bar.

Within each plan directory, you can search by provider type (primary care providers, specialists, behavioral health providers, hospitals and other care providers) or by specialty.

Need assistance? Call us.

Not yet a member? Call (800) 848-9995.

Already a member? Call Member Services at (888) 333-4742. For TTY service, call (800) 637-8257.

Telehealth provided by Doctor On Demand

Access virtual health care in minutes 24/7

- Connect with a U.S. board-certified provider via your smartphone, tablet or computer in less than 15 minutes.
- Doctor On Demand licensed providers can support you with concerns such as anxiety, depression, grief, family issues, trauma or PTSD. Choose from a variety of therapists with different backgrounds and specialties and build a relationship with the provider who best meets your needs. Doctor On Demand providers can also order your prescription at your local pharmacy when medically necessary.

Set up your account at doctorondemand.com/harvard-pilgrim

Set Up Your Account Today:

harvardpilgrim.org/create

Wellness Reimbursement – up to \$300

Get reimbursed for fees you pay towards wellness activities

What qualifies for reimbursement?

- Membership fees to gyms or fitness facilities
- Virtual fitness class subscriptions
- Studios or facilities that offer membership or tuition
- Select nutrition programs
- Select mindfulness meditation programs
- Cardiovascular and strength training equipment
- Seasonal town, club or school athletic fees

Studios and facilities that qualify for reimbursement include:

- | | | |
|----------------|-------------------------|--|
| • Dance | • Pilates | • CrossFit |
| • Gymnastics | • Zumba | • Strength training |
| • Swimming | • Aerobic/group classes | • Tennis |
| • Martial arts | • Spinning classes | • Indoor rock climbing |
| • Yoga | • Kickboxing | • Personal training <i>(taught by a certified instructor)</i> |

How do I get reimbursed?

It's simple. Pay up to four months of your membership, subscription fees, or after purchase of qualified cardiovascular or strength training equipment. After four months of Harvard Pilgrim membership, you can complete the Reimbursement Form online or by mail.

Go to harvardpilgrim.org/reimbursement

Either click on the link to submit your request online or complete the paper form and mail to the address on the form, along with a copy of your receipts.

For complete guidelines, go to harvardpilgrim.org/reimbursement or call member services at (888) 333-4742



Important Notes

Health Insurance

Health Savings Accounts

Flexible Spending Accounts

Dental & Vision Insurance

Life / AD&D Insurance

LTD Insurance

Other Employee Benefits

Important Contacts

Enrollment

Benefit Notices

Your health and wellbeing are priorities at Lesley. We offer Harvard Pilgrim Health Plans to ensure you and your eligible dependents have access to quality health care.

In January of 2019, Lesley joined edHealth, a consortium of regional colleges and universities who got together to identify ways to slow the rising cost of medical insurance. For 2025, you will continue to have the choice of four health plan options administered through Harvard Pilgrim Health Care.

You do not have to do anything to maintain your current medical coverage. If you wish to change plans for 2025, you must do so during open enrollment.

The HMO service area is MA, NH, RI, ME and VT. Any employees residing outside these states are recommended to elect a PPO plan that has a national network through United Healthcare.

Lesley offers the following health plans (see the plan comparison charts on [Page 7-8](#) or benefit summaries for more details):



- **Best Buy HSA HMO:** This plan has the lowest monthly premium and is subject to an annual deductible of \$1,650 for Employee coverage and \$3,300 for Employee plus One or Family coverage. Everything except preventive care is subject to the deductible on this plan. After the deductible has been met, members pay 35% coinsurance (or copayments for prescriptions) up to the annual out-of-pocket maximum. You also have the ability to make pre-tax contributions to your Health Savings Account on top of the amount that Lesley contributes. Preventive care is covered in-full.
- **HMO:** This Health Maintenance Organization (HMO) plan requires the use of in-network providers. It covers only urgent and emergency care for services received from non-network providers. There are no deductibles for medical services. Preventive care is covered in-full.
- **Access America Best Buy HSA PPO:** This plan operates the same as the Best Buy HSA HMO plan outlined above but includes a more expansive network as well as an out of network benefit. Preventive care is covered in full, and Lesley University will contribute into a Health Savings Account for enrollees in this plan.
- **Access America PPO:** This Preferred Provider Organization (PPO) plan gives you the option of using either in-network or out-of-network benefits. Employee costs are lower when using in-network or "preferred" providers. You do not have to select a primary care physician or obtain a referral. Preventive care is covered in-full.

Get Started Today

Choosing the right coverage is complicated. Make it easy with **Decision Doc**—full coverage, digital guidance.



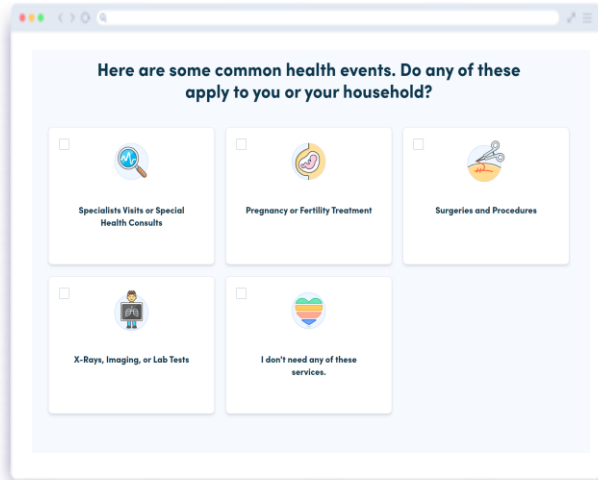
Access Decision Doc here:

myhyke.com/lesley

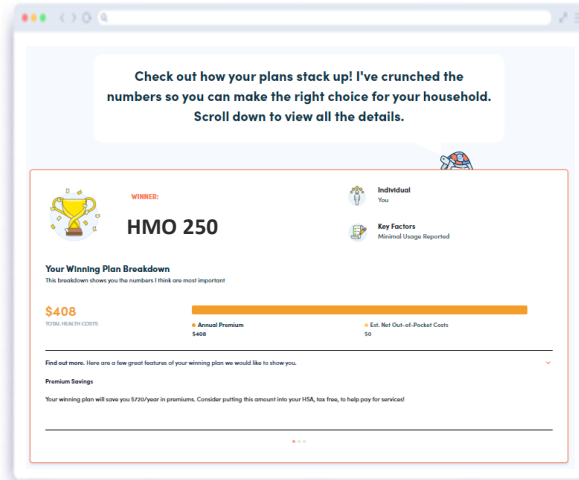


How it works

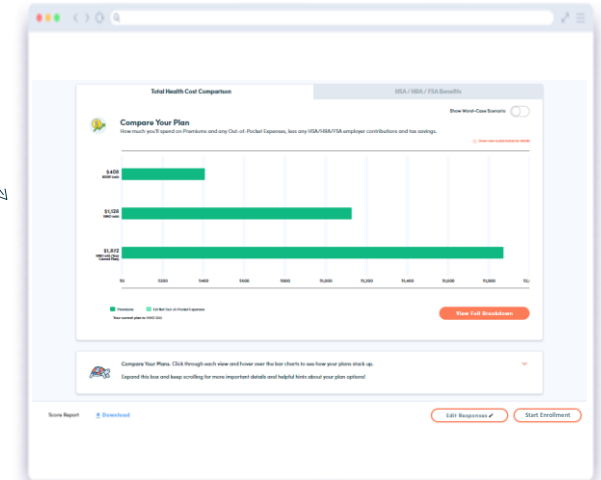
1 Share your medical and pharmacy needs in ~5 minutes



2 Receive personalized guidance on optimal plan



3 Enroll & save!



Plan Comparison Chart

Important Notes

Health Insurance

Health Savings Accounts

Flexible Spending Accounts

Dental & Vision Insurance

Life / AD&D Insurance

LTD Insurance

Other Employee Benefits

Important Contacts

Enrollment

Benefit Notices

| | HMO | Access America Best Buy HSA PPO | |
|---|---|---|----------------------------------|
| | | In-Network | Out-of-Network |
| Calendar Year Deductible | | | |
| Employee | N/A | \$1,650 | \$3,300 |
| Employee plus One | N/A | \$3,300 | \$6,600 |
| Family | N/A | \$3,300 | \$6,600 |
| Out-of-Pocket Maximum (Medical & Rx) | | | |
| Employee | \$2,500 | \$3,300 | \$6,400 |
| Employee plus One | \$5,000 | \$6,600 | \$12,800 |
| Family | \$5,000 | \$6,600 | \$12,800 |
| Doctor's Office Visits | | | |
| Primary Care Physician (PCP) | \$25 | Covered in full after deductible | 20% coinsurance after deductible |
| Specialist | \$25 | | |
| Preventive Care | Covered in full | Covered in full | 20% coinsurance |
| X-rays, Lab Work, Etc. | Covered in full | Covered in full after deductible | 20% coinsurance after deductible |
| Hi-Tech Imaging (MRI, PET/CT Scan) | \$75 per procedure <i>(max of 2 copays per year)</i> | Covered in full after deductible | 20% coinsurance after deductible |
| Telemedicine | \$25 | Covered in full after deductible | 20% coinsurance after deductible |
| Urgent Care | \$25 | Covered in full after deductible | 20% coinsurance after deductible |
| Emergency Room | \$150 per visit <i>(waived if admitted)</i> | Covered in full after deductible is met | |
| Outpatient Surgery | \$150 per visit | Covered in full after deductible | 20% coinsurance after deductible |
| Inpatient Hospital Care | \$250 per admission | Covered in full after deductible | 20% coinsurance after deductible |
| Prescriptions | Retail (30-day supply) Generic: \$15 Preferred Brand: \$30 Non-Preferred Brand: \$50 Mail Order (90-day supply) Generic: \$30 Preferred Brand: \$60 Non-Preferred Brand: \$100 | Retail (30-day supply)*+ Generic: \$15 Preferred Brand: \$30 Non-Preferred Brand: \$50 Mail Order (90-day supply)*+ Generic: \$30 Preferred Brand: \$60 Non-Preferred Brand: \$100 | Not covered |

**Copays apply after deductible has been met
+ preventive Rx not subject to the deductible*



Plan Comparison Chart

Important Notes

Health Insurance

Health Savings Accounts

Flexible Spending Accounts

Dental & Vision Insurance

Life / AD&D Insurance

LTD Insurance

Other Employee Benefits

Important Contacts

Enrollment

Benefit Notices

| | Best Buy HSA HMO | Access America PPO | |
|--|---|---|----------------------------------|
| | | In-Network | Out-of-Network |
| Calendar Year Deductible | | | |
| Employee | \$1,650 | N/A | \$750 |
| Employee plus One | \$3,300 | N/A | \$1,500 |
| Family | \$3,300 | N/A | \$1,500 |
| Out-of-Pocket Maximum (Medical & Rx) | | | |
| Employee | \$4,500 | \$2,500 | \$2,500 |
| Employee plus One | \$9,000 | \$5,000 | \$5,000 |
| Family | \$9,000 | \$5,000 | \$5,000 |
| Doctor's Office Visits | | | |
| Primary Care Physician (PCP) | 35% coinsurance after deductible | \$25 | 20% coinsurance after deductible |
| Specialist | | \$25 | |
| Preventive Care | Covered in full | Covered in full | 20% coinsurance after deductible |
| X-rays, Lab Work, Etc. | 35% coinsurance after deductible | Covered in full | 20% coinsurance after deductible |
| Hi-Tech Imaging (MRI, PET/CT Scan) | 35% coinsurance after deductible | \$75 per procedure <i>(max of 2 copays per year)</i> | 20% coinsurance after deductible |
| Telemedicine | 35% coinsurance after deductible | \$25 | 20% coinsurance after deductible |
| Urgent Care | 35% coinsurance after deductible | \$25 | 20% coinsurance after deductible |
| Emergency Room | 35% coinsurance after deductible | \$150 per visit <i>(waived if admitted)</i> | |
| Outpatient Surgery | 35% coinsurance after deductible | \$150 per visit | 20% coinsurance after deductible |
| Inpatient Hospital Care | 35% coinsurance after deductible | \$250 per admission | 20% coinsurance after deductible |
| Prescriptions | Retail (30-day supply)* Generic: \$15 Preferred Brand: \$30 Non-Preferred Brand: \$50 Mail Order (90-day supply)* Generic: \$30 Preferred Brand: \$60 Non-Preferred Brand: \$100 | Retail (30-day supply) Generic: \$15 Preferred Brand: \$30 Non-Preferred Brand: \$50 Mail Order (90-day supply) Generic: \$30 Preferred Brand: \$60 Non-Preferred Brand: \$100 | Not covered |
| <i>*Copays apply after deductible has been met</i> | | | |



Important Notes

Health Insurance

Health Savings Accounts

Flexible Spending Accounts

Dental & Vision Insurance

Life / AD&D Insurance

LTD Insurance

Other Employee Benefits

Important Contacts

Enrollment

Benefit Notices

Health Insurance Premiums¹

| | HMO | Access America Best Buy HSA PPO | Best Buy HSA HMO | Access America PPO | |
|------------------------|----------|---------------------------------|------------------|---------------------|---------------------|
| | | | | Rate A ² | Rate B ² |
| Bimonthly Rates | | | | | |
| Employee | \$129.23 | \$123.77 | \$56.73 | \$138.19 | \$164.51 |
| Employee plus One | \$282.63 | \$268.58 | \$129.15 | \$302.54 | \$356.99 |
| Family | \$461.34 | \$441.85 | \$223.83 | \$493.34 | \$577.80 |
| Monthly Rates | | | | | |
| Employee | \$258.45 | \$247.54 | \$113.47 | \$276.38 | \$329.03 |
| Employee plus One | \$565.26 | \$537.16 | \$258.30 | \$605.09 | \$713.98 |
| Family | \$922.68 | \$883.71 | \$447.67 | \$986.68 | \$1,155.60 |

¹ These rates apply to employees working 28 hours or more per week. Rates for part-time employees can be found on the My Lesley Benefits and Page tile on [Workday](#)

² Rate A applies to employees who reside outside of the Harvard Pilgrim area of service and do not have the option of electing one of the HMO Plans. Rate B applies to employees who reside within the Harvard Pilgrim area of service and choose PPO coverage while being eligible for one of the HMO Plans. The HMO service area is MA, NH, RI, ME and VT.



Important
Notes

Health
Insurance

Health
Savings
Accounts

Flexible
Spending
Accounts

Dental &
Vision
Insurance

Life / AD&D
Insurance

LTD
Insurance

Other
Employee
Benefits

Important
Contacts

Enrollment

Benefit
Notices

MANAGE YOUR PRESCRIPTIONS *EASILY* ONLINE AND ON THE GO.

- Empirx Health Prescription & Claims history
- Mail-order service & refills
- Drug pricing
- Pharmacy search filter
- Benefits information
- ID card
- And so much more



An account must be created on the portal website before the app can be utilized.

Registration is easy.
Please visit myempirxhealth.com

Each spouse and/or dependent over the age of 18 must create their own account on the portal and provide access to other family members in order for their Protected Health Information (PHI) to be shared.

Important
Notes

Health
Insurance

Health
Savings
Accounts

Flexible
Spending
Accounts

Dental &
Vision
Insurance

Life / AD&D
Insurance

LTD
Insurance

Other
Employee
Benefits

Important
Contacts

Enrollment

Benefit
Notices

PRESCRIPTIONMART

Custom care, done right.

MAIL ORDER PHARMACY

HOW TO GET STARTED

Taking advantage of your mail order benefit may enable you to receive up to a 90-day supply of your maintenance medication(s). Just ask your physician to write for a 90-day supply, plus additional refills (to be filled at Prescription Mart).

Online: Log onto myempirxhealth.com where you will be prompted to create a Prescription Mart Mail Order account. If you choose to create one later, you can click on the banner at the top of each page to create an account.

E-prescribe or Fax: Have your doctor e-prescribe to Prescription Mart or fax your prescription to 1-409-866-1317. Faxed prescriptions may only be sent by a doctor's office and must include patient information and diagnosis for timely processing.

Mail: Mail your 90-day prescription and completed Patient Profile and Medication Order Form with payment to PO Box 12607, Beaumont, TX 77726.

GETTING A REFILL IS EASY

Online: Log onto myempirxhealth.com, then go to the Prescription tab to order refills.

Mail: Print an order form from our website and mail to PO Box 12607, Beaumont, TX 77726.

Phone: Call us at 1-800-713-1230 with your prescription number and payment information.

CONTACT US

Toll-free Phone:

1-800-713-1230

Fax:

1-409-866-1317

Customer Service:

Mon-Fri: 7a-6p CST

Sat: 8a-1p CST

(Closed major holidays)

Website:

prescriptionmartpharmacy.com

Mailing Address:

Prescription Mart

PO Box 12607

Beaumont, TX 77726

Find our Notice of Privacy Practices at prescriptionmartpharmacy.com

Translation Services are available for limited English proficiency patients upon request.

Prescription Readers are available for visually impaired patients upon request.

EMPIRX HEALTH
Customer-First Pharmacy Care.



Administered by Abacus Health Solutions in partnership with edHEALTH and your school health insurance provider.

Important Notes

Health Insurance

Health Savings Accounts

Flexible Spending Accounts

Dental & Vision Insurance

Life / AD&D Insurance

LTD Insurance

Other Employee Benefits

Important Contacts

Enrollment

Benefit Notices

Why participate in the Diabetes Care Rewards Program

We'll help you improve your health and reduce your risk of heart disease and stroke.

Plus you'll get \$0 copays on covered diabetes medications and supplies using your existing pharmacy benefit.

How to get your \$0 copays

800.643.8028
edHEALTH.GoodHealthGateway.com



Register at edHEALTH.GoodHealthGateway.com to start your 90-day Introductory Period. Or call us at 800.643.8028 Monday through Thursday 8:30 am - 6:00 pm and Friday 8:30 am - 5:00 pm ET.

During your Introductory Period, you can get \$0 copays using your existing pharmacy benefit through your College/University health insurance provider.



Call us at 800.643.8028 to:

- Review the program requirements.
- Schedule a telephone appointment with our Diabetes Educator.



Complete the call with our Diabetes Educator to develop your personal **Diabetes Health Action Plan**[®] Care Guide.

And confirm you will share your action plan with the doctor that helps you manage your diabetes.



Send us a Provider Confirmation Form or other acceptable documentation showing you completed the medical exams and lab tests listed below. Upload your documents through the website, send by mail, or fax to 877.378.4480.

Any of the exams/labs completed in the past year will count toward the requirement.

- Annual foot exam
- Annual eye exam
- Annual laboratory work-up of your fasting blood lipid levels
- Annual laboratory work-up of your urine/protein levels
- Laboratory work-up of your Hemoglobin A1c levels every 6 months



Continue to get your \$0 copays beyond your Introductory Period as long as you keep your diabetes care activities up to date.

Important Notes

Health Insurance

Health Savings Accounts

Flexible Spending Accounts

Dental & Vision Insurance

Life / AD&D Insurance

LTD Insurance

Other Employee Benefits

Important Contacts

Enrollment

Benefit Notices

The Health Savings Account (HSA) is a special, tax-advantaged savings account available only to participants in the Best Buy HSA HMO or the Access America Best Buy HSA PPO. You can use your HSA to offset out-of-pocket health care costs during the plan year, or save it for the future.

An HSA is similar in some ways to a Flexible Spending Account (FSA) and in others to a 403(b) plan, but with some important differences. Here are the key features:

- **A triple tax advantage.** Like 403(b) contributions, HSA money is tax-free when it enters the account and as it grows through investment earnings. But unlike a 403(b) balance, HSAs offer a third tax advantage: money remains tax free when it is withdrawn — as long as you use it to pay eligible health care expenses
- **Immediate ownership.** All contributions to your HSA, including contributions from Lesley University, are immediately yours to keep.
- **No risk of forfeiture.** Any unused amount at the end of a plan year rolls over to the next year. Unlike FSAs, there is no “use it or lose it” rule.
- **Portability.** If you change plans, retire or leave the University for any reason, you keep your account balance.
- **Investment options.** Once you reach a certain balance in your HSA, you can choose from the account's options for investing your balance. Interest and investment earnings are also tax-free.
- **Easy withdrawals.** Your HSA is your own personal account. Unlike an FSA, you do not have to file a claim for reimbursement.
- **Mutually exclusive.** You can not be enrolled in an HSA and an FSA during the same plan year.

Contributions

For anyone enrolled in the Best Buy HSA HMO or the Access America Best Buy HSA PPO in 2025, the University will make a contribution of \$650 (Employee) and \$1,300 (Employee Plus One and Family) to your Health Savings Account.

In addition, you can make optional contributions to an HSA. The maximum annual pre-tax amount you and Lesley University combined can contribute to your account is determined by the IRS, as follows:

| Coverage Level | IRS Combined Maximum for 2025 | Lesley Contribution | Amount You Can Contribute* |
|-----------------------------|-------------------------------|-------------------------------|----------------------------------|
| Employee Only | \$4,300 | \$650 (Lesley contribution) | \$3,650 (max you can contribute) |
| Employee Plus One or Family | \$8,550 | \$1,300 (Lesley contribution) | \$7,350 (max you can contribute) |

* If you are age 55 or older, you can make an additional catch-up contribution of up to \$1,000 per year.

Note: If you are hired during the plan year, contributions from the University are prorated.



Important Notes

Health Insurance

Health Savings Accounts

Flexible Spending Accounts

Dental & Vision Insurance

Life / AD&D Insurance

LTD Insurance

Other Employee Benefits

Important Contacts

Enrollment

Benefit Notices

Important Rules

Certain rules apply if you want to participate in an HSA:

- You may not have any other health coverage (e.g., coverage from a parent or spouse) while you are making contributions to an HSA (or while the University is making contributions on your behalf).
- You cannot have an active health care FSA.

Eligible Expenses

The IRS determines what expenses qualify for reimbursement from an HSA. Eligible expenses include:

- Deductibles and coinsurance / copays after deductible
- Prescribed medications
- Mental health specialist visits and prescriptions
- Chiropractor, acupuncture, X-rays
- Dental cleaning, sealants, fluoride treatments, extractions, orthodontia
- Eye exams, contact lenses, eyeglasses, eye surgery

See these IRS Publications for information about eligible HSA expenses:

- 502 – <http://www.irs.gov/pub/irs-pdf/p502.pdf>
- 969 – <http://www.irs.gov/pub/irs-pdf/p969.pdf>

Hassle-Free Withdrawals

When you enroll in the HSA, you will receive a debit card from HSA Bank, which will allow you to use your HSA funds at health care providers and vendors that accept debit cards.

You may also have HSA Bank directly pay a provider or request reimbursement for expenses you paid out of pocket through the HSA Bank online system.



Important Notes

Health Insurance

Health Savings Accounts

Flexible Spending Accounts

Dental & Vision Insurance

Life / AD&D Insurance

LTD Insurance

Other Employee Benefits

Important Contacts

Enrollment

Benefit Notices

Remember to re-enroll in Flexible Spending Accounts (FSA) each year to ensure coverage

There are two types of FSAs available to eligible employees:

- Health Care Flexible Spending Accounts
- Dependent Care Flexible Spending Accounts

FSAs are a great way to save because they let you set aside pre-tax dollars out of your pay — up to **\$5,000** annually for dependent care expenses and **\$3,300** annually for unreimbursed health care expenses.

An employee can elect an annual amount to set aside on a pre-tax basis. Deductions are taken out of each paycheck.

- If you are enrolled in the Health Care FSA for 2024, you must incur all eligible expenses prior to December 31, 2024, and submit reimbursement for these expenses by March 31, 2025. You may also roll over any unused funds, up to \$610, to the 2025 benefit plan year.
- **If you enroll in the Health Care FSA for 2025:** You will be able to roll over up to \$660 of your unused Health Care FSA balance for use at any time in the 2026 plan year. Rollover funds are in addition to the \$3,300 annual contribution limit and can be used any time during the plan year.
- If you are enrolled in the Health Care FSA for 2025, you can not participate in the Health Savings Account described on **Pages 7 & 8.**

Note: Anyone electing the Best Buy HSA HMO or the Access America Best Buy HSA PPO in 2025 will want to use all Health Care FSA funds during the 2024 plan year in order to be eligible to make and receive HSA contributions in 2025. You do not need to be enrolled in Lesley's health plans to enroll in the FSA.

Participation in FSAs requires a new enrollment form each plan year because your current benefit election does not automatically carry over into the next plan year. **You need to actively re-enroll into the FSA each year.** The new plan year will run from January 1, 2025, through December 31, 2025.

Be sure to estimate your expenses carefully because you will forfeit any unused funds if the expenses are not incurred during the coverage period and exceed the \$660 allowable rollover amount.

For additional information, please visit the Human Resources web site or visit www.hsabank.com.

Eligible employees will have to actively enroll in FSA through Workday. If you would like to make any changes to HSA contributions, that can be done through Workday. [Click here](#) or visit <https://www.myworkday.com/lesley/login.html>



Important Notes

Health Insurance

Health Savings Accounts

Flexible Spending Accounts

Dental & Vision Insurance

Life / AD&D Insurance

LTD Insurance

Other Employee Benefits

Important Contacts

Enrollment

Benefit Notices

Rolling Over Funds

How It Works:

- On 12/31/2024, employee has \$1,000 remaining in an FSA account.
- Employee has from 1/1/2025 to 3/31/2025 to submit any FSA eligible claims incurred from 1/1/2024 to 12/31/2024 against the \$1,000 remaining balance.
- On 4/15/2025, any balance up to \$610 still remaining in the 2024 FSA will be rolled over into the 2025 FSA. If the remaining balance is over \$610, only \$610 will roll over, and all other remaining 2024 FSA funds will be forfeited.



FSA Savings Example: \$40,000 annual salary | 28% tax bracket | \$2,000 annual health care expense

| Without a Flexible Spending Account: | |
|--------------------------------------|-----------|
| Annual wages: | \$40,000 |
| Taxes (28% of \$40,000): | -\$11,200 |
| Net (after taxes): | \$28,800 |
| Health Care expense: | -\$2,000 |
| Net after Health Care expense: | \$26,800 |

| With a Flexible Spending Account: | |
|-----------------------------------|-----------|
| Annual wages: | \$40,000 |
| Pre-tax Health Care expense: | -\$2,000 |
| Net after Health Care deduction: | \$38,000 |
| Taxes (28% of \$38,000): | -\$10,640 |
| Net after taxes: | \$27,360 |

\$560 more in take-home pay due to reduced taxes! And this example only accounts for Federal Income Tax savings. There is an additional 7.65% that comes from FICA plus any applicable State Income Tax savings.

- Important Notes
- Health Insurance
- Health Savings Accounts
- Flexible Spending Accounts
- Dental & Vision Insurance
- Life / AD&D Insurance
- LTD Insurance
- Other Employee Benefits
- Important Contacts
- Enrollment
- Benefit Notices

Dental Insurance

Delta Dental gives you plenty of reasons to smile.

Everyone deserves a healthy smile. That's why dental insurance through Delta Dental is available to all eligible employees and their eligible dependents. Two plans are available, Delta PPO Plus Premier and Delta Care.

- **The Delta PPO Plus Premier Plan** consists of a robust national provider network that covers preventive and diagnostic care, basic services and major restorative services. The full Delta Premier network is available to members of the PPO Plus Plan. However, you have the opportunity to lower your costs by utilizing a dental provider that is part of the Delta Dental PPO network. This plan covers preventive and diagnostic services at 100% with no deductible. Otherwise, services are covered at 80% (minor restorative) or 50% (major restorative) after a \$50 deductible (per member) up to an annual benefit maximum of **\$1,500 per member**. Orthodontia is not covered under this plan.
- **The Delta Care Plan** covers these same services, except offers a smaller provider network. In-network services are covered at a much higher level compared to out-of-network services. You and your covered family members are required to select and designate a Primary Care Dentist with Delta Dental before you can receive services. The plan then has a \$100 deductible for out-of-network care only. Otherwise, services are covered in accordance with a predetermined fee schedule (available on the Lesley HR web site) up to an annual benefit maximum of \$1,000 (per member). This plan does cover orthodontia.

Employees participating in the dental insurance program are responsible for paying the premium shown in the table to the right. **Premium payment amounts did not change for 2025.**

Dental Premiums

| Coverage | Delta PPO Plus Premier | | DeltaCare | |
|-----------------|------------------------|-----------------|---------------|-----------------|
| | Monthly Rates | Bimonthly Rates | Monthly Rates | Bimonthly Rates |
| Employee | \$40.89 | \$20.45 | \$22.42 | \$11.21 |
| Family | \$123.52 | \$61.76 | \$71.70 | \$35.85 |

Vision Insurance

Better vision is just a blink away when you take part in either of the two voluntary vision insurance programs from EyeMed.

The **High Option** covers materials-only with a \$25 copay on lenses every 12 months, \$140 allowance on frames every 24 months and a \$155 allowance on contacts every 12 months (in lieu of glasses).

The **Medium Option** covers exams and materials with a \$10 copay for exams every 12 months, \$25 copay on lenses every 12 months, \$120 allowance on frames every 24 months and a \$135 allowance on contacts every 12 months (in lieu of glasses).

Employees participating in the vision insurance program are responsible for paying the premium shown below: **Premium payment amounts did not change for 2025.**

Vision Premiums

| Coverage | Medium Eye + Materials | | High Materials Only | |
|---------------------|------------------------|-----------------|---------------------|-----------------|
| | Monthly Rates | Bimonthly Rates | Monthly Rates | Bimonthly Rates |
| Employee | \$5.68 | \$2.84 | \$6.56 | \$3.28 |
| Employee + 1 | \$10.80 | \$5.40 | \$12.44 | \$6.22 |
| Family | \$15.84 | \$7.92 | \$18.24 | \$9.12 |



- Important Notes
- Health Insurance
- Health Savings Accounts
- Flexible Spending Accounts
- Dental & Vision Insurance
- Life / AD&D Insurance
- LTD Insurance
- Other Employee Benefits
- Important Contacts
- Enrollment
- Benefit Notices

Life and AD&D Insurance should be an important part of your financial planning to help protect you and your family when it's needed most.

While no one likes to think about it, planning for your family's financial security in the event of your death, sickness or serious injury is one of the greatest gifts you can give to your loved ones. The University is pleased to continue to offer Basic Life/AD&D and Disability Insurance at **no cost to you**. These programs are offered through New York Life.

- **Employee Basic Life Insurance:** Lesley provides a benefit of one times the employee's salary to a maximum benefit of \$250,000, subject to an age-reduction schedule that begins at age 65. Lesley pays 100% of the premium for eligible participants. In addition, the University offers employees the option of purchasing additional Voluntary Life Insurance for you and your dependents subject to medical underwriting if over the guaranteed issue amount.
- **Employee Supplemental Life Insurance:** increments of \$10,000 to the lesser of 5 x annual earnings or \$500,000. Guarantee Issue is 3 x annual earnings or \$200,000. Premiums are based on the employee's age.
- **Spousal Life Insurance:** increments of \$10,000 to the lesser of 50% of employee amount or \$250,000. Guarantee Issue is \$30,000. Premiums are based on the employee's age.
- **Dependent Life Insurance:** Coverage for Birth to 6 Months is \$500; 6mos to age 26 is a flat \$10,000. Guarantee Issue is \$10,000.

Evidence of Insurability will be required if you are a late entrant.

Supplemental Life Insurance Premium Rates*

| Employee/Spouse Age Categories | Employee/Spouse Age Categories |
|--------------------------------|--------------------------------|
| Younger than 25 | \$0.05 |
| 25-29 | \$0.06 |
| 30-34 | \$0.08 |
| 35-39 | \$0.09 |
| 40-44 | \$0.10 |
| 45-49 | \$0.15 |
| 50-54 | \$0.23 |
| 55-59 | \$0.43 |
| 60-64 | \$0.64 |
| 65-69 | \$1.14 |
| 70+ | \$1.85 |
| Dependent Life Insurance | Monthly Rates |
| \$10,000 coverage option | \$1.80 |

*Per \$1,000 unit for employee / spouse.

- **Supplemental Employee / Dependent AD&D Insurance:** Follows Supplemental Life schedule of benefits.
 - Employee Rate: \$0.025/\$1,000 of Coverage
 - Spouse Rate: \$0.025/\$1,000 of Coverage
 - Child Rate: \$0.025/\$1,000 of Coverage

Beneficiary Designation

You should review your beneficiary designations annually. Please visit [Workday](#) to elect your beneficiaries.



Important Notes

Health Insurance

Health Savings Accounts

Flexible Spending Accounts

Dental & Vision Insurance

Life / AD&D Insurance

LTD Insurance

Other Employee Benefits

Important Contacts

Enrollment

Benefit Notices

Long-Term Disability Insurance (LTD)

No one plans on becoming disabled. But if the unexpected happens, you are covered; Lesley pays 100% of the premium for this benefit.

Disability Insurance provides important protection should you become disabled and unable to work. The Monthly Income Benefit is equal to 60% of the employee's monthly base wage, not to exceed a benefit of \$9,000 per month. Benefits under this program may begin after a waiting period of 90 days.

Eligibility and enrollment in this plan is automatic and begins the first of the month following your date of hire. Long-Term Disability Insurance is provided through New York Life.



Voluntary Benefits

Administered through Unum and easily payroll deducted, the benefits can help offset the costs from accidents, injuries and more.

Important Notes

Health Insurance

Health Savings Accounts

Flexible Spending Accounts

Dental & Vision Insurance

Life / AD&D Insurance

LTD Insurance

Other Employee Benefits

Important Contacts

Enrollment

Benefit Notices

Group Accident Insurance

Accident Insurance provides a set benefit amount based on the type of injury you have and the type of treatment you need. It covers accidents that occur on and off the job. And it includes a range of incidents, from common injuries to more serious events.

Why is this coverage so valuable?

It can help you with out-of-pocket costs that your medical plan doesn't cover, like co-pays and deductibles. You'll have base coverage without medical underwriting. The cost is conveniently deducted from your paycheck. You can keep your coverage if you change jobs or retire. You'll be billed directly.

| Employee | EE + Spouse | EE + Child(ren) | Family |
|----------|-------------|-----------------|---------|
| \$14.10 | \$24.85 | \$29.83 | \$40.58 |

What's included?

Be Well Benefit

Every year, each family member who has Accident coverage can also receive \$50 for getting a covered Be Well screening test, such as:

- Annual exams by a physician include sports physicals, well-child visits, dental and vision exams
- Screenings for cancer, including pap smear, colonoscopy
- Cardiovascular function screenings
- Screenings for cholesterol and diabetes
- Imaging studies, including chest X-ray, mammography
- Immunizations including HPV, MMR, tetanus, influenza

Rates are based on age and coverage amount. Refer to workday for more details.

| | |
|---------------------------|---|
| Critical Illnesses | Heart attack, stroke, major organ failure, End-stage kidney failure, sudden cardiac arrest, and more. |
| Cancer Conditions | Invasive Cancer, non-invasive cancer (25%), skin cancer (\$500) |

Group Hospital Insurance

Group Hospital Insurance can pay benefits that help you with the costs of a covered hospital visit.

How does it work?

Group Hospital Insurance helps covered employees and their families cope with the financial impacts of a hospitalization. You can receive benefits when you're admitted to the hospital for a covered accident, illness or childbirth.

| | | |
|----------------------------|---|---------|
| Hospital Admission | Payable for a maximum of 1 day per year | \$1,000 |
| Hospital Daily Stay | Payable per day up to 365 days | \$150 |

Why is this coverage so valuable?

- The money is payable directly to you — not to a hospital or care provider. The money can also help you pay the out-of-pocket expenses your medical plan may not cover, such as co-insurance, co-pays and deductibles.
- You get accessible rates when you buy this coverage at work.
- The cost is conveniently deducted from your paycheck.
- The benefits in this plan are compatible with a Health Savings Account (HSA).
- You may take the coverage with you if you leave the company or retire. You'll be billed directly.

| Employee | EE + Spouse | EE + Child(ren) | Family |
|----------|-------------|-----------------|---------|
| \$33.17 | \$64.14 | \$42.87 | \$73.84 |

Group Critical Illness Insurance

If you're diagnosed with an illness that is covered by this insurance, you can receive a lump sum benefit payment. You can use the money however you want.

| | |
|----------------------|--|
| Employee: | Choose \$15,000 or \$30,000 of coverage with no medical underwriting to qualify if you apply during this enrollment. |
| Your Spouse: | Spouses can only get 100% of the employee coverage amount as long as you have purchased coverage for yourself. |
| Your Children | Children from live birth to age 26 are automatically covered at no extra cost. Their coverage amount is 50% of yours. They are covered for all the same illnesses plus these specific childhood conditions: cerebral palsy, cleft lip or palate, cystic fibrosis, Down syndrome, spina bifida, type 1 diabetes, sickle cell anemia and congenital heart disease. The diagnosis must occur after the child's coverage effective date. |

Why is this coverage so valuable?

- The money can help you pay out-of-pocket medical expenses, like deductibles.
- You can use this coverage more than once. Even after you receive a payout for one illness, you're still covered for the remaining conditions and for the reoccurrence of any critical illness with the exception of skin cancer. The reoccurrence benefit can pay 100% of your coverage amount. Diagnoses must be at least 180 days apart or the conditions can't be related to each other.



Important Notes

Health Insurance

Health Savings Accounts

Flexible Spending Accounts

Dental & Vision Insurance

Life / AD&D Insurance

LTD Insurance

Other Employee Benefits

Important Contacts

Enrollment

Benefit Notices

In addition to the core benefit plans, employees can access the following benefit programs at no additional cost.

Employee Assistance Program (EAP)

Lesley University's Employee Assistance Program, administered by New York Life, provides a variety of services, such as:

- **Balancing demands of work and family**
- **Experiencing stress, anxiety, or depression**
- **Dealing with grief and loss**
- **Assistance with child or elder care concerns**

GuidanceResources®

This online resource offers education, tools, and other features on topics such as health and wellness, law and regulations, family and relationships, plus more!

Critical Incident Services

Provides guidance and in-person counseling to help employees effectively deal with crises and assisting them with returning to normalcy more quickly.

Wellbeing Coaching

Virtual sessions with a certified coach to help with burnout, time management, coping with stress and more!

KnovaSolutions

Help to better understand and manage your medical care – at no cost to Lesley University Employees:

- Help to answer questions like:
 - What does my diagnosis mean?
 - Where can I go for the best treatment?
 - Where can I go for the best treatment?
 - How do I get a copy of my medical records?
 - What lifestyle changes will improve my health?

- Contact: 1-800-355-0885 | contactknovasolutions@workpartners.com

Health Club

To encourage you to get fit and stay healthy, Harvard Pilgrim Health Plan members can save on fitness center fees:

- \$150 reimbursement on your fitness center membership once a year.
- When you join a fitness center in Harvard Pilgrim Health Plan network, save 20% on one-year memberships and pay no initiation fee.
- Save 50% when you join a participating New England Curves club.
- Save 10% on a personal training package at Fitness Together and get a free fitness evaluation.
- Pay a small copayment of \$3–\$6 for each visit up to five visits a month at a fitness center in the Harvard Pilgrim Health Plan network.

New York Life Secure Travel

Secure Travel Services- Pre-trip planning including immunization requirements for foreign countries, visa and passport requirements, foreign exchange rates, etc.

Assistance while traveling – Access to 24-hour multilingual interpretation and translation services. Addresses and telephone numbers of nearest American Consulate and Embassy. Referrals to physicians, dentists and medical facilities.

Financial, Legal, and Estate Support

Financial and legal issues touch the life of every individual. Without the appropriate information, these situations can become time-consuming and stressful, affecting job productivity, and peace of mind. Through ComPsych, from New York Life, these programs provide consultative support:

- **Unlimited financial information, including debt management and family budgeting**
- **Easy access to an in-house staff of attorneys exclusively dedicated to phone consultations**



Important Notes

Health Insurance

Health Savings Accounts

Flexible Spending Accounts

Dental & Vision Insurance

Life / AD&D Insurance

LTD / Insurance

Other Employee Benefits

Important Contacts

Enrollment

Benefit Notices

When you have questions, we're here to help!

Contact the providers listed below or Lesley University's Human Resources at hr@lesley.edu.

| When You Have Questions About | Provider | Phone Number or Email Address | Website |
|--|-------------------------------|--|---|
| Dental Insurance | Delta Dental | 1-800-872-0500 (Delta Dental PPO Plus Premier) 1-800-327-6277 (DeltaCare) | www.deltamass.com |
| Flexible Spending/Transit Reimbursement Accounts | HSA Bank | 1-800-357-6246 | www.hsabank.com |
| Health Insurance | Harvard Pilgrim Health Plan | 1-866-623-0184 | www.harvardpilgrim.org |
| Health Savings Account | HSA Bank | 1-800-357-6246 | www.hsabank.com |
| Lesley University Benefits | Human Resources | 1-617-349-8787 hr@lesley.edu | https://www.lesley.edu/faculty-staff/human-resources/benefits |
| Lesley University's Employee Benefits Advocate | Consiliarium Group | 1-844-890-7955 | info@consiliariumgroup.com |
| Life/AD&D/LTD | New York Life | 1-800-362-4462 | www.newyorklife.com |
| Voluntary Benefits | Unum | 1-866-679-3054 | www.unum.com |
| Retirement Plan | TIAA | 1-800-842-2252 | www.tiaa.org/lesley |
| Rx Mail Order | EmpiRx | 1-833-419-3436 | MyEmpiRxHealth.com |
| Vision Insurance | EyeMed | 1-866-939-3633 | www.eyemedvisioncare.com |
| 529 College Savings Plan | ScholarShare 529 Savings Plan | Jennifer Benson, jabenson@tiaa.org , 510-907-2601 | www.ScholarShare.com |



Important Notes

Health Insurance

Health Savings Accounts

Flexible Spending Accounts

Dental & Vision Insurance

Life / AD&D Insurance

LTD Insurance

Other Employee Benefits

Important Contacts

Enrollment

Benefit Notices

Enrollment Period

As a reminder, employees should carefully select benefit plan elections as changes are not permitted after the Annual Enrollment period unless an employee experiences a qualifying event (e.g., marriage, divorce, birth, adoption, etc.)

Select enrollment forms and benefit plan information will be available online on the Human Resources website. Additional benefit material, including provider directories, will be available in Human Resources or the respective provider's website.

You can access a new Summary of Benefits and Coverage (SBC) document on the Human Resources website. This SBC is a disclosure required by the Affordable Care Act, and details how commonly used health services are covered by the medical plan.

All plan enrollments and/or changes to current plan elections must be completed in [Workday](#) by **Friday, November 22, 2024**. Changes made during the Annual Enrollment period will become effective January 1, 2025.

As a reminder, you will need to make an election for the FSA plans, otherwise you will not have coverage in 2025. Please be sure to actively enroll in coverage for the 2025 plan year.

Questions? Please contact Human Resources at: hr@lesley.edu.



Note: Changes made to your 403(b) Retirement Plan deferral can be made at any time during the year by submitting a Salary Deferral Agreement (SDA) to Human Resources. These changes become effective on the pay period after the change is processed, depending on the date the SDA is received.

Important
NotesHealth
InsuranceHealth
Savings
AccountsFlexible
Spending
AccountsDental &
Vision
InsuranceLife / AD&D
InsuranceLTD
InsuranceOther
Employee
BenefitsImportant
Contacts

Enrollment

Benefit
Notices

Special Enrollment Notice

Lesley University will allow a special enrollment opportunity if you or your eligible dependents either:

- Lose Medicaid or Children's Health Insurance Program (CHIP) coverage because you are no longer eligible, or
- Become eligible for a state's premium assistance program under Medicaid or CHIP

For these enrollment opportunities, you will have 60 days – instead of 30 – from the date of the Medicaid/CHIP eligibility change to request enrollment in the Lesley University group health plan. Note that this new 60-day extension doesn't apply to enrollment opportunities other than those due to the Medicaid/CHIP eligibility change.

Newborns' Act Disclosure

Group health plans and health insurance issuers generally may not, under Federal law, restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following a vaginal delivery, or less than 96 hours following a cesarean section. However, Federal law generally does not prohibit the mother's or newborn's attending provider, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours as applicable). In any case, plans and issuers may not, under Federal law, require that a provider obtain authorization from the plan or the insurance issuer for prescribing a length of stay not in excess of 48 hours (or 96 hours).

WHCRA Notice

Do you know that your plan, as required by the Women's Health and Cancer Rights Act of 1998, provides benefits for mastectomy-related services including all stages of reconstruction and surgery to achieve symmetry between the breasts, prostheses, and complications resulting from a mastectomy, including lymphedema? Contact Human Resources at hr@lesley.edu for more information.

Important
Notes

Health
Insurance

Health
Savings
Accounts

Flexible
Spending
Accounts

Dental &
Vision
Insurance

Life / AD&D
Insurance

LTD
Insurance

Other
Employee
Benefits

Important
Contacts

Enrollment

Benefit
Notices

Creditable Coverage Disclosure Notice – Active Employees

Important notice from Lesley University about creditable prescription drug coverage and Medicare

The purpose of this notice is to advise you that the prescription drug coverage listed below under the Lesley University medical plans is expected to pay out, on average, at least as much as the standard Medicare prescription drug coverage will pay in 2024. This is known as “creditable coverage.”

Why this is Important

If you or your covered dependent(s) are enrolled in any prescription drug coverage during 2022 listed in this notice and are (or become) covered by Medicare, you may decide to enroll in a Medicare prescription drug plan later and not be subject to a late enrollment penalty – as long as you had creditable coverage within 63 days of your Medicare prescription drug plan enrollment. You should keep this notice with your important records.

If you or your family members are not currently covered by Medicare and won't become covered by Medicare in the next 12 months, this notice does not apply to you.

Please read the notice below carefully. It has information about prescription drug coverage with Lesley University and prescription drug coverage available for people with Medicare. It also tells you where to find more information to help you make decisions about your prescription drug coverage.

Notice of creditable coverage

You may have heard about Medicare's prescription drug coverage (called Part D) and wondered how it would affect you. Prescription drug coverage is available to everyone with Medicare through Medicare prescription drug plans. All Medicare prescription drug plans provide at least a standard level of coverage set by Medicare. Some plans also offer more coverage for a higher monthly premium.

Individuals can enroll in a Medicare prescription drug plan when they first become eligible, and each year from October 15 through December 7. Individuals leaving employer/union coverage may be eligible for a Medicare Special Enrollment Period.

If you are covered by Lesley University's prescription drug plans listed below, you'll be interested to know that coverage is, on average, at least as good as standard Medicare prescription drug coverage for 2024. This is called creditable coverage. Coverage under these plans will help you avoid a late Part D enrollment penalty if you are or become eligible for Medicare but decide to enroll in a Medicare prescription drug plan later.

Lesley University plans:

- Harvard Pilgrim HMO
- Harvard Pilgrim Best Buy HSA HMO
- Harvard Pilgrim Access America Best Buy HSA PPO
- Harvard Pilgrim Access America PPO

If you decide to enroll in a Medicare prescription drug plan and you are an active employee or family member of an active employee, you may also continue your employer coverage. In this case, the employer plan will continue to pay primary or secondary as it had before you enrolled in a Medicare prescription drug plan. If you waive or drop Lesley University coverage, Medicare will be your only payer. You can re-enroll in the employer plan at annual enrollment or if you have a qualifying life event recognized by the Lesley University medical plans. *(continued next page)*



Premium Assistance Under Medicaid and the Children’s Health Insurance Program (CHIP)

Important Notes

Health Insurance

Health Savings Accounts

Flexible Spending Accounts

Dental & Vision Insurance

Life / AD&D Insurance

LTD Insurance

Other Employee Benefits

Important Contacts

Enrollment

Benefit Notices

If you or your children are eligible for Medicaid or CHIP and you’re eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren’t eligible for Medicaid or CHIP, you won’t be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit www.healthcare.gov.
 If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial **1-877-KIDS NOW** or www.insurekidsnow.gov to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren’t already enrolled. This is called a “special enrollment” opportunity, and **you must request coverage within 60 days of being determined eligible for premium assistance**. If you have questions about enrolling in your employer plan, contact the Department of Labor at www.askebsa.dol.gov or call **1-866-444-EBSA (3272)**.

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of July 31, 2024. Contact your State for more information on eligibility.

| | |
|---|---|
| ALABAMA – Medicaid | FLORIDA – Medicaid |
| Website: http://myalhipp.com/ Phone: 1-855-692-5447 | Website: https://www.flmedicaidprecovery.com/flmedicaidprecovery.com/hipp/index.html Phone: 1-877-357-3268 |
| ALASKA – Medicaid | GEORGIA – Medicaid |
| The AK Health Insurance Premium Payment Program Website: http://myakhipp.com/ Phone: 1-866-251-4861 Email: CustomerService@MyAKHIPP.com Medicaid Eligibility: https://health.alaska.gov/dpa/Pages/default.aspx | Website: https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp Phone: 678-564-1162, Press 1 GA CHIPRA Website: https://medicaid.georgia.gov/programs/third-party-liability/childrens-health-insurance-program-reauthorization-act-2009-chipra Phone: (678) 564-1162, Press 2 |
| ARKANSAS – Medicaid | INDIANA – Medicaid |
| Website: http://myarhipp.com/ Phone: 1-855-MyARHIPP (855-692-7447) | Health Insurance Premium Payment Program All other Medicaid Website: https://www.in.gov/medicaid/http://www.in.gov/fssa/df/ Family and Social Services Administration Phone: 1-800-403-0864 Member Services Phone: 1-800-457-4584 |
| CALIFORNIA—Medicaid | IOWA – Medicaid & CHIP (Hawki) |
| Health Insurance Premium Payment (HIPP) Program Website: https://dhcs.ca.gov/hipp Phone: 916-445-8322 Fax: 916-440-5676 Email: hipp@dhcs.ca.gov | Medicaid Website: iowa Medicaid Health & Human Services Medicaid Phone: 1-800-338-8366 Hawki Website: Hawki - https://hhs.iowa.gov/programs/welcome-iowa-medicaid/iowa-health-link/hawki Hawki Phone: 1-800-257-8563 HIPP Website: https://hhs.iowa.gov/programs/welcome-iowa-medicaid/fee-service/hipp HIPP Phone: 1-888-346-9562 |



Important Notes

Health Insurance

Health Savings Accounts

Flexible Spending Accounts

Dental & Vision Insurance

Life / AD&D Insurance

LTD Insurance

Other Employee Benefits

Important Contacts

Enrollment

Benefit Notices

| | |
|---|---|
| <p align="center">COLORADO – Health First Colorado (Colorado’s Medicaid Program) & Child Health Plan Plus (CHP+)</p> | <p align="center">NEW HAMPSHIRE – Medicaid</p> |
| <p>Health First Colorado Website: https://www.healthfirstcolorado.com/ Health First Colorado Member Contact Center: 1-800-221-3943/ State Relay 711 CHP+: https://hcpf.colorado.gov/child-health-plan-plusCHP+ Customer Service: 1-800-359-1991/ State Relay 711 Health Insurance Buy-In Program (HIBI): https://www.mycohibi.com/ HIBI Customer Service: 1-855-692-6442</p> | <p>Website: https://www.dhhs.nh.gov/programs-services/medicaid/health-insurance-premium-program Phone: 603-271-5218 Toll free number for the HIPP program: 1-800-852-3345, ext 5218 Email: DHHS.ThirdPartyLiabi@dhhs.nh.gov</p> |
| <p align="center">KENTUCKY – Medicaid</p> | <p align="center">NEW JERSEY – Medicaid and CHIP</p> |
| <p>Kentucky Integrated Health Insurance Premium Payment Program (KI-HIPP) Website: https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx Phone: 1-855-459-6328 Email: KIHIPPPROGRAM@ky.gov KCHIP Website: https://kynect.ky.gov Phone: 1-877-524-4718 Kentucky Medicaid Website: https://chfs.ky.gov/agencies/dms</p> | <p>Medicaid Website: http://www.state.nj.us/humanservices/dmahs/clients/medicaid/ Phone: 1-800-356-1561 Medicaid Phone: 609-631-2392 CHIP Website: http://www.njfamilycare.org/index.html CHIP Phone: 1-800-701-0710 (TTY: 771)</p> |
| <p align="center">KANSAS – Medicaid</p> | <p align="center">NEW YORK – Medicaid</p> |
| <p>Website: http://www.kancare.ks.gov/ Phone: 1-800-792-4884 HIPP Phone: 1-800-967-4660</p> | <p>Website: https://www.health.ny.gov/health_care/medicaid/ Phone: 1-800-541-2831</p> |
| <p align="center">LOUISIANA – Medicaid</p> | <p align="center">NORTH CAROLINA – Medicaid</p> |
| <p>Website: www.medicare.la.gov or www.ldh.la.gov/lahipp Phone: 1-888-342-6207 (medicaid hotline) or 1-855-618-5488 (LaHIPP)</p> | <p>Website: https://medicaid.ncdhhs.gov/ Phone: 919-855-4100</p> |
| <p align="center">MAINE – Medicaid</p> | |
| <p>Enrollment Website: https://www.mymaineconnection.gov/benefits/s/?language=en_US Phone: 1-800-442-6003 TTY: Maine relay 711 Private Health Insurance Premium Webpage: https://www.maine.gov/dhhs/ofi/applications-forms Phone: 1-800-977-6740 TTY: Maine relay 711</p> | |
| <p align="center">MASSACHUSETTS – Medicaid and CHIP</p> | <p align="center">NORTH DAKOTA – Medicaid</p> |
| <p>Website: https://www.mass.gov/masshealth/pa Phone: 1-800-862-4840 TTY: 711 Email: masspremassistance@accenture.com</p> | <p>Website: https://www.hhs.nd.gov/healthcare Phone: 1-844-854-4825</p> |
| <p align="center">MINNESOTA – Medicaid</p> | <p align="center">OKLAHOMA – Medicaid and CHIP</p> |
| <p>Website: https://mn.gov/dhs/health-care-coverage/ Phone: 1-800-657-3672</p> | <p>Website: http://www.insureoklahoma.org Phone: 1-888-365-3742</p> |
| <p align="center">MISSOURI – Medicaid</p> | <p align="center">OREGON – Medicaid</p> |
| <p>Website: http://www.dss.mo.gov/mhd/participants/pages/hipp.htm Phone: 573-751-2005</p> | <p>Website: http://healthcare.oregon.gov/Pages/index.aspx Phone: 1-800-699-9075</p> |
| <p align="center">MONTANA – Medicaid</p> | <p align="center">PENNSYLVANIA – Medicaid</p> |
| <p>Website: http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP Phone: 1-800-694-3084 Email: HSHIPPProgram@mt.gov</p> | <p>Website: https://www.pa.gov/en/services/dhs/apply-for-medicare-health-insurance-premium-payment-program-hipp.html Phone: 1-800-692-7462 CHIP Website: https://www.pa.gov/en/agencies/dhs/resources/chip.html CHIP Phone: 1-800-986-KIDS (5437)</p> |
| <p align="center">NEBRASKA – Medicaid</p> | <p align="center">RHODE ISLAND – Medicaid and CHIP</p> |
| <p>Website: http://www.ACCESSNebraska.ne.gov Phone: 1-855-632-7633 Lincoln: 1-402-473-7000 Omaha: 1-402-595-1178</p> | <p>Website: http://www.eohhs.ri.gov/ Phone: 855-697-4347, or 401-462-0311 (Direct RlTe Share Line)</p> |



Important Notes

Health Insurance

Health Savings Accounts

Flexible Spending Accounts

Dental & Vision Insurance

Life / AD&D Insurance

LTD Insurance

Other Employee Benefits

Important Contacts

Enrollment

Benefit Notices

| NEVADA – Medicaid | SOUTH CAROLINA – Medicaid |
|---|---|
| Medicaid Website: https://dhcfp.nv.gov Medicaid Phone: 1-800-992-0900 | Website: https://www.scdhhs.gov Phone: 1-888-549-0820 |
| SOUTH DAKOTA - Medicaid | WASHINGTON – Medicaid |
| Website: http://dss.sd.gov Phone: 1-888-828-0059 | Website: https://www.hca.wa.gov/ Phone: 1-800-562-3022 |
| TEXAS – Medicaid | WEST VIRGINIA – Medicaid |
| Website: Health Insurance Premium Payment (HIPP) Program Texas Health and Human Services Phone: 1-800-440-0493 | Website: http://mywvhipp.com/ https://dhhr.wv.gov/bms/ CHIP Toll-free phone: 1-855-MyWVHIPP (1-855-699-8447) Medicaid Phone: 304-558-1700 |
| UTAH – Medicaid and CHIP | WISCONSIN – Medicaid and CHIP |
| Utah's Premium Partnership for Health Insurance (UPP) Website: https://medicaid.utah.gov/upp/ Email: upp@utah.gov Phone: 1-888-222-2542 Adult Expansion Website: https://medicaid.utah.gov/expansion/ Utah Medicaid Buyout Program Website: https://medicaid.utah.gov/buyout-program/ CHIP Website: https://chip.utah.gov/ | Website: https://www.dhs.wisconsin.gov/badgercareplus/p-10095.htm Phone: 1-800-362-3002 |
| VERMONT– Medicaid | WYOMING – Medicaid |
| Website: Health Insurance Premium Payment (HIPP) Program Department of Vermont Health Access Phone: 1-800-250-8427 | Website: https://health.wyo.gov/healthcarefin/medicaid/programs-and-eligibility Phone: 1-800-251-1269 |
| VIRGINIA – Medicaid and CHIP | |
| Website: https://www.coverva.org/en/famis-select https://www.covera.org/en/hipp Medicaid/CHIP Phone: 1-800-432-5924 | |

To see if any other states have added a premium assistance program since July 31, 2024, or for more information on special enrollment rights, contact either:

U.S. Department of Labor
Employee Benefits Security Administration
www.dol.gov/agencies/ebsa
1-866-444-EBSA (3272)

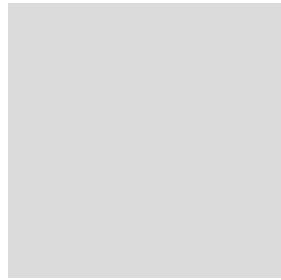
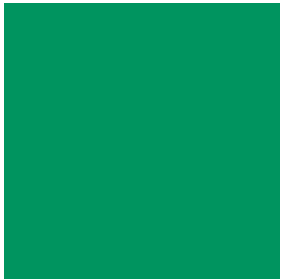
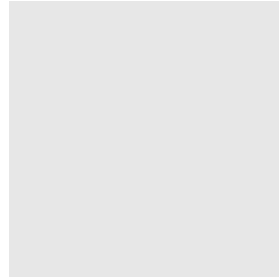
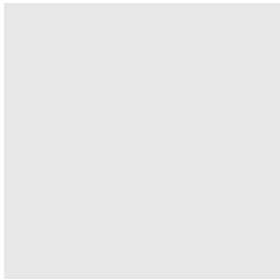
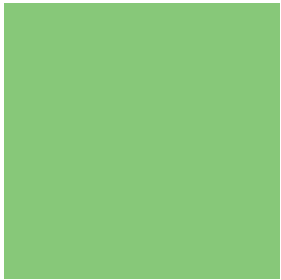
U.S. Department of Health and Human Services
Centers for Medicare & Medicaid Services
www.cms.hhs.gov
1-877-267-2323, Menu Option 4, Ext. 61565

Paperwork Reduction Act Statement

According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13) (PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a Federal agency cannot conduct or sponsor a collection of information unless it is approved by OMB under the PRA, and displays a currently valid OMB control number, and the public is not required to respond to a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512.

The public reporting burden for this collection of information is estimated to average approximately seven minutes per respondent. Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Employee Benefits Security Administration, Office of Policy and Research, Attention: PRA Clearance Officer, 200 Constitution Avenue, N.W., Room N-5718, Washington, DC 20210 or email ebsa.opr@dol.gov and reference the OMB Control Number 1210-0137.





About This Guide

This document is an outline of coverage proposed by the carrier(s), based on information provided by Lesley University. It does not include all of the terms, coverage, exclusions, limitations, and conditions of the actual contract language. The policies and contracts themselves must be read for those details. Policy forms for your reference will be made available upon request.

The intent of this document is to provide you with general information regarding the status of, and/or potential concerns related to your current employee benefits environment. It does not necessarily fully address all of your specific issues. It should not be construed as, nor is it intended to provide, legal advice. Questions regarding specific issues should be addressed by your general counsel or an attorney who specializes in this practice area.

Note: The benefits highlighted and described in this guide may be changed at any time and do not represent a contractual obligation — either implied or expressed — on the part of Lesley University.

