Open Enrollment: October 3 through 18

This year’s Open Enrollment process will start and end earlier in preparation for the implementation of WorkDay. Your elections still take effect on January 1, 2017.

2017 Benefit Highlights

» The medial plan options will remain the same; however prescription drug coverage will be administered by OptumRx (instead of Harvard Pilgrim Healthcare). Go to www.wellesley.edu/hr/benefits/medicalplans/optumrx

» You may opt out of medical coverage through Wellesley and receive a total payment of $1,000, if you have coverage elsewhere.

» There are no changes to our dental plan options.

» There are some enhancements to the EyeMed vision plan and no change to the rates.

» You may elect to participate in a Health Care and/or Dependent Care Flexible Spending Account (or a Health Savings Account, if you choose the PPO Plus HSA Plan). You must choose an annual contribution amount if you want to participate in either Flexible Spending Account in 2017.

» You have the same disability and life coverages; you may elect or change your optional life insurance coverages during Open Enrollment.

Benefits Fair: October 6, Drop into the Alumnae Ballroom from 8:30 to Noon

» Flu shots will be available in the Ballroom Foyer from 8:30 to 1:00; you will pay $25 if you are not covered by a College medical plan*

» Learn about our Harvard Pilgrim Health Care (HPHC) plans

» Meet with a Certified Financial Planner to learn whether the PPO Plus HSA Plan might be right for you

» Check in with OptumRx, our new prescription drug vendor and bring your questions

» Visit the Nutrition table for more about portion control and sodium reduction

» Take the “grit test” at the Employee Assistance Program table

Continued on p. 2

Get the Information You Need about Open Enrollment

» Please read about your 2017 benefit options in this Illuminator

» Drop in during our Benefits Fair and talk with our vendors: October 6, from 8:30 to noon in the Alumnae Ballroom

» Access our Benefits Portal and make your elections by October 18.

Accessing the Benefits Portal – from October 3 through 18

You will make all of your benefit elections through our Benefits Portal:

» Log into your myWellesley account

» Click on “Employee Services”

» Click on “Benefits Portal”

If you have any trouble accessing or using the Benefits Portal, please contact Human Resources at Ext. 3202.
Open Enrollment (cont. from p. 1)

» Talk to Sun Life about your life insurance options
» Relax with a chair massage and
» Take advantage of healthy refreshments throughout the morning!

*If you can’t come to the Benefits Fair and are an HPHC member, you have many other options for free flu shots. You can receive the shot at retail pharmacies, your doctor’s office and clinics run by your city/town – as long as you bring your HPHC card.

Making Changes to Your Benefits

Open Enrollment is your once-a-year opportunity to make or change your benefit elections for the coming year.

Note that changes to your medical, dental and vision coverages and/or participation in a Flexible Spending Account must be made during the Open Enrollment period. You may elect or change your Health Savings Account contribution, update life or retirement beneficiaries and/or make changes to your 403(b) Retirement Plan contributions at any time during the year.

You may only make changes outside of Open Enrollment if you have a qualified change in family status (as defined by the Internal Revenue Service). These changes include: marriage, divorce, birth or adoption, termination or commencement of your spouse’s employment or a change in employment for you or your spouse (e.g., changing from part-time to full-time status (or vice versa) or taking a leave of absence.

If you have a qualified change during the year and want to change your benefit elections, please notify Human Resources within 30 days of the qualifying event at Ext. 2211 or Ext. 2212.

Your Medical Benefits

The Wellesley College medical plan offerings will not change for 2017. However, effective January 1, 2017, OptumRx will be our new prescription drug administrator.

Medical rates will increase by 8.5%, which is lower than the current industry average of 10% but still higher than our increases in recent years. We believe that our Healthy You and The Whole You programs support our long-term health and we are committed to continuing these programs in 2017 and beyond.

2017 Medical Rates

<table>
<thead>
<tr>
<th>HPHC Medical Plan</th>
<th>Total Monthly Premium</th>
<th>College Monthly Premium</th>
<th>College Contribution Percentage</th>
<th>Your Payroll Deduction</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HMO – Individual</td>
<td>$737.64</td>
<td>$553.23</td>
<td>75%</td>
<td>$42.56</td>
</tr>
<tr>
<td>HMO – Family</td>
<td>$1,999.01</td>
<td>$1,499.26</td>
<td>75%</td>
<td>$115.33</td>
</tr>
<tr>
<td>PPO Plus HSA – Individual*</td>
<td>$626.99</td>
<td>$485.92</td>
<td>77.5%</td>
<td>$32.56</td>
</tr>
<tr>
<td>PPO Plus HSA – Family*</td>
<td>$1,698.55</td>
<td>$1,316.38</td>
<td>77.5%</td>
<td>$88.19</td>
</tr>
<tr>
<td>PPO Plus HSA – Union</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual</td>
<td>$626.99</td>
<td>$470.24</td>
<td>75%</td>
<td>$36.17</td>
</tr>
<tr>
<td>PPO Plus HSA – Union Family</td>
<td>$1,698.55</td>
<td>$1,273.91</td>
<td>75%</td>
<td>$97.99</td>
</tr>
<tr>
<td>PPO – Individual**</td>
<td>$1,180.65</td>
<td>$550.18</td>
<td>47%</td>
<td>$145.49</td>
</tr>
<tr>
<td>PPO – Family**</td>
<td>$3,199.57</td>
<td>$1,491.00</td>
<td>47%</td>
<td>$394.29</td>
</tr>
</tbody>
</table>

* Police union members are covered under this rate.
** The PPO plan is closed to new entrants.
Opting Out of Medical Coverage

The 2016 opt-out pilot program will extend through 2017 and will give you an annual opt-out payment of $1,000 if you have coverage elsewhere (for example, through your spouse’s employer) and waive coverage through the College. For 2017, this taxable opt-out payment will be divided across the year and added to your paychecks. You must be employed at the College to receive these payments.

If you did not have medical coverage in 2016 and you do not elect coverage for 2017, you will automatically receive the opt-out payment. If you have medical coverage through Wellesley College now and want to waive coverage for 2017, you must elect “No Coverage” through the Benefits Portal during Open Enrollment to receive the payment.

For More Information. Contact Human Resources at Ext. 2211 or Ext. 2212.

Harvard Pilgrim Health Care (HPHC)

All of our medical plans are administered by Harvard Pilgrim Health Care – with prescription drugs managed through OptumRx. This year, because of the change to OptumRx, all medical plan participants will receive a new ID card in December. You will need to show your new ID card to the pharmacist the first time you or your family members fill a prescription in 2017.

HPHC offers many ways for you to access medical information, get answers to questions and benefit from wellness programs.

Using HPHConnect. With Harvard Pilgrim, you have round-the-clock access to your plan information plus health-improvement and decision-making tools.

» Go to www.harvardpilgrim.org and select “Members”

» Under the “Your Account” tab, select “Create an account”

» Enter your Harvard Pilgrim ID number (on your ID card), your birth date, zip code and the last four digits of the subscriber’s Social Security number and

» Choose a username and password to activate your account.

If You Have Questions. Call Harvard Pilgrim Member Services at 1-888-333-4742, Monday through Friday from 8 a.m. to 5:30 p.m. and until 7:30 p.m. on Mondays and Wednesdays.

The HPHC HMO

<table>
<thead>
<tr>
<th>Under the HMO, you pay:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>A $25 copay for an office visit</td>
<td></td>
</tr>
<tr>
<td>A $500 copay for an inpatient admission</td>
<td></td>
</tr>
<tr>
<td>A $250 copay for outpatient day surgery</td>
<td></td>
</tr>
</tbody>
</table>

...until you meet the annual out-of-pocket maximum:

$2,500/individual or $5,000/family

The HPHC PPO Plus HSA

The PPO Plus HSA plan works differently than the HMO. You must meet a deductible before the plan begins paying benefits (except for certain preventive care). (Then, you and the plan share the cost of the services you receive until you meet the out-of-pocket maximum.) Under the PPO Plus HSA, you always have a choice of going to in-network or out-of-network doctors; however, you will pay more whenever you go out-of-network. See the chart for a summary of in-network and out-of-network benefits under the PPO Plus HSA.

The Health Savings Account (HSA). When you elect the PPO Plus HSA, you have the opportunity to enroll in a Health Savings Account. The HSA allows you to contribute pre-tax dollars to help you fund your deductible and other eligible health care expenses, including dental and vision care. For 2017, the College will make a contribution to your HSA in January: $750 if you elect individual coverage and $1,500 if you elect family coverage. This amount is pro-rated if you enroll during the year.

In addition, you may contribute up to $3,400 a year to the HSA if you have individual coverage and up to $6,750 if you have family coverage. If you will be age 55 or older by the end of 2017, you may contribute an additional $1,000 for the year. Your contributions go into your account each pay period.

There are many advantages to the HSA:

» Tax-free savings. The money in your account grows tax-free and can be used for any eligible medical, dental and vision expenses, including your deductible and copays.

» Enrollment flexibility. You may start or stop contributing or change your contribution amount at any time during the year.

» Short- and long-term options. Unused money stays in your account until you use it – next year or even when you retire. If you leave the College, the money in your HSA is still yours.

» Investment earnings. You may invest your HSA money and benefit from earnings on your account.

» Retirement supplement. The money in your account can be used for future retiree health expenses.

To help you discuss whether the PPO Plus HSA plan is right for you:

» Use the PPO Plus HSA Excel spreadsheet to review your potential tax savings under this plan (available at www.wellesley.edu/hr/benefits/medicalplans/hphc-ppo-plus-hsa and/or

» Make an appointment to meet with one of our Certified Financial Planners in Human Resources by calling Ext. 3202 or Ext. 2211.
**The Limited Purpose Flexible Spending Account.** If you participate in the PPO Plus HSA, you may contribute to both the Health Savings Account and a Limited Purpose Flexible Spending Account (LPFSA). With an LPFSA, your entire annual contribution goes into your account at the beginning of the year (just as with a regular Flexible Spending Account). Also, if you have funds remaining in your account as of December 31, 2016, these funds (up to $500) will automatically be carried over to your 2017 account and can be used for 2017 expenses.

You may only use the LPFSA for eligible dental and vision expenses until you have met the deductible under the PPO Plus HSA. Once the deductible is met, you can use the LPFSA for medical expenses, too. If you have significant dental and vision expenses, or expect to meet your deductible early in the year, you may want to consider contributing to the LPFSA.

It’s important to consider whether you want to have both a Health Savings Account and a Limited Purpose Flexible Spending Account. Then, think about how much to put in each account – and use both accounts appropriately during the year.

---

<table>
<thead>
<tr>
<th>Under the PPO Plus HSA, you pay:</th>
<th>In-network</th>
<th>Out-of-network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible</td>
<td>$1,500/individual and $3,000/family</td>
<td></td>
</tr>
<tr>
<td>Coinsurance (the amount you pay after the deductible)</td>
<td>0%</td>
<td>20%</td>
</tr>
<tr>
<td>(although you will pay 20% for certain services, such as durable medical equipment, ostomy supplies, prosthetic devices and wig and scalp hair)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual out-of-pocket maximum</td>
<td>$5,000/individual and $10,000/family</td>
<td></td>
</tr>
<tr>
<td>Lifetime maximum</td>
<td>Unlimited</td>
<td></td>
</tr>
</tbody>
</table>

**Preventive services**

- **Routine physicals, including related tests:** Covered in full, You pay 20%/no deductible applies
- **Routine GYN exams, including lab–related tests (one per calendar year):** Covered in full, You pay 20%/no deductible applies
- **Routine vision exams (one every 12 months):** You pay $25 copay, You pay 20% after deductible
- **Family planning office visits:** Covered in full After deductible, You pay 20%/no deductible applies

**Other services**

- **Emergency room (waived if admitted):** Covered in full after deductible
- **Sick visits:** Covered in full after deductible, You pay 20% after deductible
- **Diagnostic testing (e.g., MRI, CT, PET):** Covered in full after deductible, You pay 20% after deductible
- **Inpatient hospital:** Covered in full after deductible, You pay 20% after deductible
- **Durable medical equipment:** You pay 20% after deductible, You pay 20% after deductible
- **Outpatient surgery and anesthesia (at an ambulatory surgical facility, hospital outpatient department or surgical day care unit):** Covered in full after deductible, You pay 20% after deductible

**Mental health/substance abuse**

- **Inpatient:** Covered in full after deductible, You pay 20% after deductible
- **Outpatient:** Covered in full after deductible, You pay 20% after deductible
**New Prescription Drug Administrator**

Go to [http://www.wellesley.edu/benefits/medicalplans/optumrx](http://www.wellesley.edu/benefits/medicalplans/optumrx)

OptumRx is our new prescription drug administrator, effective January 1, 2017. You will receive a new HPHC ID card that includes OptumRx information in December. Beginning January 1st, you must show your new ID card when you first fill a prescription for yourself or your dependents. All of the same pharmacies are available to you.

There are NO changes to your prescription drug coverage:

**To Learn More.** Stop by the OptumRx table at the October 6 Benefit Fair (between 8:30 a.m. and noon in the Alumnae Ballroom. Also, come to the OptumRx Prescription Drug Presentation on October 12, from 12:30 to 1:30 p.m. in the Library Lecture Room. No RSVP is necessary.

<table>
<thead>
<tr>
<th>Under the HMO</th>
<th>Under the PPO Plus HSA (In-network)</th>
<th>Under the PPO Plus HSA (out-of-network)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retail</td>
<td>After you meet your deductible:</td>
<td>After you meet your deductible:</td>
</tr>
<tr>
<td></td>
<td>You pay a $5/$20/$30/$50 copay</td>
<td>You pay a $5/$20/$30/$50 copay</td>
</tr>
<tr>
<td></td>
<td>(depending on the Tier) for up to a 30-day supply when filled by a participating pharmacy</td>
<td>(depending on the Tier) for up to a 30-day supply when filled by a participating pharmacy</td>
</tr>
<tr>
<td></td>
<td>Birth control and birth control devices are covered in full</td>
<td>Birth control and birth control devices are covered in full</td>
</tr>
<tr>
<td>Mail Service (maintenance medications only)</td>
<td>After you meet your deductible:</td>
<td>After you meet your deductible:</td>
</tr>
<tr>
<td></td>
<td>You pay a $10/$40/$60/$150 copay (depending on the Tier) for up to a 90-day supply</td>
<td>You pay a $10/$40/$60/$150 copay (depending on the Tier) for up to a 90-day supply</td>
</tr>
</tbody>
</table>

**Please Note**

- Your prescription drug benefit is not changing.
- The Tier of your prescription(s) could change, which would result in a copay change.
- You will receive a letter from OptumRx in November if the Tier of any of your prescriptions will change.
- You will continue to be able to use the same pharmacists you do now.
- Show your new HPHC ID card to your pharmacist the first time you get a prescription filled in 2017 for you or your dependents.
2016–2017 Healthy You Program: Focusing on Sleep and Nutrition

This year, our Healthy You program focus will be on creating sleep and nutrition habits that will power the body and mind. Eating healthier food and getting better sleep will help your body repair cells and tissues, release critical hormones, produce energy and recharge your brain, muscles and nervous system.

Make the most of this year’s Healthy You program:

» Take advantage of new opportunities to get and stay healthy.

» Earn $200 by learning sleep and nutrition skills – whether you have medical coverage through the College or not. If your spouse is enrolled in your College medical plan, he/she can earn $50 by participating.

See all of the programs available to you on www.wellesley.edu/hr/benefits/healthyyou.

New Wellness Portal

Our Healthy You program will now be accessed through HPHC's new Wellness Portal. If you participated in the Active You Walking Challenge, you're familiar with this platform. However, you will now log in using your HPHConnect credentials at the following URL: https://www.harvardpilgrim.org/wellnessaccount.

Getting Started. To use the new wellness platform, go to www.harvardpilgrim.org/wellnessaccount. Log in using your HPHConnect username and password. If you are not a Harvard Pilgrim member, simply create a guest account using the following code C10177.

Need assistance? Email HPWellness@HarvardPilgrim.org or contact our wellness service line at 1–877–594–7183, Monday – Friday, between 9 a.m. to 5 p.m.

This Year’s Incentives – Earn $200

HPHC’s Wellness Portal has all the information you need to earn and track your progress toward this year’s incentive.

For Faculty and Staff ENROLLED in a College Medical Plan

REQUIRED: You must complete the HPHC Personal Health Assessment and two of the following three activities to get 200 points which equals $200. Your options are:

» Register with Doctor on Demand (so you can access telemedicine services for minor urgent care). First create an account within the Doctor on Demand (DoD) app, or on the DoD website using your computer and providing your name, address, insurance coverage, preferred pharmacy, chronic conditions and general health (15 minutes) AND

» Complete the meQuilibrium Sleep Better skill* by logging in to mymeq.com/Wellesley (20 minutes) OR

» Attend the HPHC Sleep and Nutrition workshop on November 8, 12:00 to 1:00 p.m., at the Campus Center, Room 413 – or complete the HPHC online sleep workshop by logging in to the HPHC Wellness Portal (45–60 minutes)

For Faculty and Staff NOT ENROLLED in a College Medical Plan

You must complete the HPHC Personal Health Assessment and the following two activities to get 200 points which equals $200:

» Complete the meQuilibrium Sleep Better skill* by logging in to mymeq.com/Wellesley (20 minutes) OR

» Attend the HPHC Sleep and Nutrition workshop on November 8, 12:00 to 1:00 p.m., at the Campus Center, Room 413 – or complete the HPHC online sleep workshop by logging in to the HPHC Wellness Portal (45–60 minutes)

*The meQuilibrium Sleep Better skill focuses on helping you find the habits and routines that may be keeping you awake at night. It will also help you identify simple changes to your routine so that you fall asleep easier and stay asleep longer. You’ll receive tips to practice what you have learned. Go to meQuilibrium (mymeq.com/Wellesley) to complete this skill.
For Spouses **ENROLLED** in a College Medical Plan

Your spouse earns 50 points which equals **$50** – if he/she attends the HPHC Sleep and Nutrition workshop on November 8, 12:00 to 1:00 p.m., at the Campus Center, Room 413 – or completes the HPHC online sleep workshop by logging in to the HPHC Wellness Portal.

You will receive a gift card for the dollar value of your (and your spouse’s) points. The gift cards will be given out on campus between January and June 2017.

**Doctor on Demand – Available to HPHC Members**

Doctor on Demand is a new HPHC service that allows you to video chat with a doctor from your phone, tablet or computer. If you’re in the HMO or PPO plan, you pay a $25 copay. Under the PPO Plus HSA plan, the deductible applies. No referral from your PCP is required. You will be connected with doctor who is Board-certified and licensed in your state. These doctors can diagnose, treat and write prescriptions for many conditions.

**To Get Started.** Go to [DoctoronDemand.com](http://DoctoronDemand.com) or look for the Doctor on Demand app in your App Store or on Google Play. First create an account within the Doctor on Demand (DoD) app, or on the DoD website using your computer. Provide information on: yourself, your insurance coverage, preferred pharmacy, chronic conditions and general health.

**Onsite Events and Programs**

HPHC will be offering several events that are open to all faculty and staff.

**Sleep and Nutrition Presentation**

**NOVEMBER 8, 2016, NOON TO 1 P.M. IN THE CAMPUS CENTER, ROOM 413**

Have you noticed that you eat more on the days you haven’t slept well? Or that when you eat better, you also sleep better? This seminar will review how some of the hormonal changes that occur with sleep affect your appetite and weight. You’ll also learn how good nutrition helps you sleep better.

**10% Happier Series**

**JANUARY 24 AND 31, 4:30 TO 5:30 P.M. IN THE COLLEGE CLUB COUNCIL DINING ROOM (WITH LIGHT REFRESHMENTS)**

This multi-session course will give you the opportunity to learn about mindfulness and build your own personal plan using a combination of live and app-based supports. 10% Happier is a best-in-class program/app hosted by best-selling author, ABC News personality and self-described “fidgety skeptic” Dan Harris, alongside Joseph Goldstein, one of the renowned meditation teachers in the world.

**Time vs. Energy Presentation**

**MARCH 8, 4:15 TO 5:15 P.M. IN THE CAMPUS CENTER, ROOM 413**

Do you wish you had more than 24 hours in a day to get things done? While you can’t change the time in a day, you can get energy to accomplish more during the same timeframe. This session looks at how good nutrition and the lack of it affect the four energy domains: physical, emotional, mental and spiritual – and includes practical eating tactics for energy management.

**Need assistance? Email [HPWellness@HarvardPilgrim.org](mailto:HPWellness@HarvardPilgrim.org) or contact our wellness service line at 1-877-594-7183, Monday through Friday, between 9 a.m. and 5 p.m.**

**Expanded Fitness and Weight Loss Programs – Available to all HPHC members**

You may receive up to $150 for certain fitness and $150 for weight loss programs if you’re covered by one of our HPHC medical plans – for a total of $300 per year.

**For Information.** You may call HPHC’s Member Services Department at 1-888-333-4742 with any questions about the Fitness or Weight Loss Programs.

**Learn More About Doctor on Demand and the Wellness Portal**

HPHC will present three sessions on campus to review the advantages of these new services and tools:

- **January 26**, from 12:30 to 1:30 in the Library Lecture Room
- **February 15**, from 4:15 to 5:15 in the Wang Campus Center, Room 413
- **June 14**, from 12:30 to 1:30 in the Library Lecture Room

No RSVP is necessary.
meQuilibrium
meQuilibrium is an online coaching platform that delivers clinically validated and highly personalized solutions to help you manage your stress, health and well-being. The program modules incorporate video learning, journaling, interactive workbooks, timely and relevant content, and activities to help you reduce your current stress and to cope with stress in the future.

New! meQuilibrium’s Financial Wellbeing Track
meQuilibrium has added a financial wellbeing track to their existing programs. This new program can help you uncover, examine and break free from your own personal relationships with money and the “money mindsets” that contribute to financial stress. Go to mymeq.com/Wellesley for information.

AllOne Health Seminars
AllOne Health manages our Employee Assistance Program (EAP). The EAP is available throughout the year, whenever you or your family need help managing work/life balance. During the next few months, they will be sponsoring several online seminars. Listen in at your convenience.

To Contact AllOne Health. Go to www.allonehealtheap.com (username: Wellesley; password: employee) or call 1-800-45-1834. You can also access the seminars from the home page of the website.

A Review of Last Year’s Healthy You Program
Last year, 244 participants completed our wellness survey. Here are some of the results:
» 202 faculty/staff and spouses completed the Health Questionnaire (HQ)
» 228 faculty/staff attended a biometric screening event
» 156 faculty/staff earned the incentive
» 42 spouses earned the incentive
» 256 individuals participated in a Whole You event and/or downloaded the meQuilibrium and AllOne Health apps.

Our Active You Walking Challenge also had great participation and we know it generated camaraderie and spirit. This year, 86 people participated as individuals and 177 were part of teams, with a total of 37 teams. By the end of the Challenge, we had walked a total of 128,497,390 steps and 54,937.84 miles. That’s like circumnavigating the Earth more than twice!

ESI Wellness
Early Symptom Intervention is a free Healthy You program (paid for by the College) for anyone with aches and pains. Clinicians use a special type of physical therapy to help relax your muscles, realign your body and help prevent these conditions in the future.

For More Information. Contact Cynthia Cox at 781-283-3496 or ccox@wellesley.edu to schedule your 20-minute appointment (at the Physical Plant).
Dental, Vision and FSA Options

Dental

2017 Dental Rates

<table>
<thead>
<tr>
<th>Delta Dental Plan</th>
<th>Total Monthly Premium</th>
<th>College Monthly Premium</th>
<th>College Contribution Percentage</th>
<th>Your Payroll Deduction</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Premier – Individual</td>
<td>$52.69</td>
<td>$42.15</td>
<td>80%</td>
<td>$2.43</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$10.54</td>
</tr>
<tr>
<td>Premier – Family</td>
<td>$137.53</td>
<td>$68.77</td>
<td>80%</td>
<td>$15.87</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$68.77</td>
</tr>
<tr>
<td>Delta Care – Individual</td>
<td>$37.65</td>
<td>$30.12</td>
<td>50%</td>
<td>$1.74</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$7.53</td>
</tr>
<tr>
<td>Delta Care – Family</td>
<td>$98.06</td>
<td>$46.53</td>
<td>50%</td>
<td>$10.74</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$46.53</td>
</tr>
</tbody>
</table>

Vision – Additional Benefits for 2017

There are no changes to vision rates for 2017. You will see enhancements to the plan’s benefits: you will not pay a copay for UV, tint or scratch resistant lenses if you use an in-network provider.

2017 Vision Rates

<table>
<thead>
<tr>
<th>EyeMed Plan</th>
<th>Your Payroll Deduction</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Weekly</td>
</tr>
<tr>
<td>Employee Only</td>
<td>$1.59</td>
</tr>
<tr>
<td>Employee + Spouse</td>
<td>$3.01</td>
</tr>
<tr>
<td>Employee + Child(ren)</td>
<td>$3.17</td>
</tr>
<tr>
<td>Family</td>
<td>$4.66</td>
</tr>
</tbody>
</table>

Flexible Spending Accounts

Flexible Spending Accounts (FSAs) allow you to set aside money before federal and most state taxes are withheld – and use this money to pay or be reimbursed for health care or dependent care expenses:

> The Health Care FSA can be used for health-related expenses such as deductibles and copays for your medical, prescription drug, dental and vision expenses. You may contribute up to $2,550 for 2017. You may start using your FSA for expenses you incur from January 1st on. Also, if you have funds remaining in your account as of December 31, 2016, these funds (up to $500) will automatically be carried over to your 2017 account and can be used for 2017 expenses. Note: If you participate in the PPO Plus HSA medical plan and elect to participate in this Flexible Spending Account, you will be enrolled in the Limited Purpose FSA.

> The Dependent Care FSA can be used for day (or nursing) care expenses for a child up to age 13 or elder tax dependent that allow you (and your spouse, if you are married) to work. You may contribute up to $5,000 for 2017. Your contributions go into this account with each paycheck, so you may get reimbursed for the amount in your account at that time. There is no carryover for the Dependent Care Flexible Spending Account. You will lose any money remaining in your account as of December 31, 2016.

Disability and Life Insurance Plans

Long–Term Disability
The College pays the full cost of long–term disability insurance. This coverage helps protect a portion of your College salary if you suffer a disability that prevents you from working. You are automatically covered if you are full–time. No election is required.

Life Insurance
The College provides you with term life insurance equal to 1x your basic annual earnings, rounded to the next higher $1,000, to a maximum of $450,000. This coverage provides a benefit to your beneficiary(ies) in the event of your death.

» Optional Life Insurance. You may elect to buy 1x, 2x, 3x or 4x your basic annual earnings, rounded to the next higher $1,000, to a maximum of $900,000 (combined with your basic life insurance). If you do not currently have optional coverage, evidence of insurability (EOI) will be required for any amount. If you have are enrolled with at least 1x coverage, you may elect up to 2x coverage (to a maximum of $300,000) without EOI. Amounts above 2x coverage or $300,000 will be subject to EOI.

» Spouse Life Insurance. You may elect coverage for your spouse equal to a flat $15,000 or 50% of your optional coverage. Evidence of insurability will be required if you elect the 50% option.


» Call the Sun Life Customer Service Center toll–free at 1–800–247–6875, Monday through Friday from 8 a.m. to 8 p.m.

The Wellesley College 403(b) Retirement Plan

Our CFPs Are Available!
Our Certified Financial Planners can help you consider whether the Roth option makes sense for you. This benefit is paid for by the College. Make an individual campus appointment to talk through your choices by calling Ext. 3202.

You may begin or change your voluntary contributions to the 403(b) Retirement Plan at any time. You may also be eligible to receive College contributions to your account.

There are two important changes to our Retirement Plan that take effect on January 1, 2017:

» Voluntary Contribution Amount. Going forward, you must elect a percentage for any voluntary contributions you make to the 403(b) Retirement Plan. That is, you will choose 1%, 2%, etc. of your pay to go into the plan. Because of the transition to WorkDay, you will no longer be able to contribute a flat dollar amount.

» Eligibility for Core and Matching Contributions. If you are hired on or after January 1, 2017, the College’s matching and core contributions will begin as of the first of the month following or coincident with 12 months of eligible service, provided you work at least half–time, nine months. (If you are already employed on January 1, 2017, the current eligibility rules will continue to apply.)

The Roth Option
The 403(b) Retirement Plan gives you another way to save for retirement through the Roth option. This option allows you to make post–tax contributions to the Retirement Plan instead of – or in addition to – pre–tax contributions. When you make after–tax contributions, your contributions and the earnings on them are tax–free when you withdraw them.

For More Information. Contact Human Resources at Ext. 2212 if you have questions about the 403(b) Retirement Plan, including the Roth option.
Prosperous You Programs

Our Prosperous You programs give you financial and investment guidance – to help you make wise decisions now and for the future. To schedule an individual session with a TIAA representative, call 1-800-732-8353 or go to www.tiaa-cref.org/letstalk. Take advantage of our upcoming events.

TIAA Programs

TIAA is always available to provide financial and investment options. In October, TIAA will be hosting a special event at the College:

The 2016 Presidential Election and the Economy Presentation

OCTOBER 19, 12:30 TO 1:30 IN THE LIBRARY LECTURE ROOM (LUNCH WILL BE PROVIDED)

TIAA’s Derek Dom, Managing Director of Regulatory Engagement and Policy, will talk about how this year’s race could reshape tax reform, Social Security and health care. TIAA’s head of public policy will provide an overview of what’s at stake in this election and review the potential for key policy changes in 2017. Derek will share his perspective on regulatory issues that could be shaped by a new administration and Congress – and what it could mean for you as an investor, taxpayer, consumer and future retiree.

To attend this session, go to the Whole You page (www.wellesley.edu/hr/events) and follow the link to RSVP for this session.

Webinars

TIAA offers regular webinars on financial education topics. You can join on the day (or listen to them later). All you do is register at tiaa.org/VE.

Metro Credit Union Programs (lunch is provided)

Metro Credit Union is partnering with us to provide a series of Financial Wellness Lunch and Learns. Lunch will be included, courtesy of Metro Credit Union. Most sessions will be held from 12:30 to 1:30 p.m. in the Library Lecture Room; the January Session will be held in the Campus Center, Room 413.

First-time Home Buyers

NOVEMBER 3, 2016 AND FEBRUARY 8, 2017

Budgeting

JANUARY 18, 2017 (CAMPUS CENTER, ROOM 413)

Identity Theft

MARCH 15, 2017

To Sign Up. Go to the Whole You page (www.wellesley.edu/hr/events) and follow the link to RSVP for any of these sessions.

Whole You

We’re excited to kick off our second year of “The Whole You” programs – offering presentations and events that support our commitment to support the Healthy You, Prosperous You, Develop and Recognize You and Engage You initiatives. See below for the latest schedule – or go to www.wellesley.edu/hr/events for all the details and to RSVP.
Other Benefits

Care.com
Care.com offers all types of care to help you manage your life at home:

» Child care. Find babysitters, nannies and tutors
» Senior care. Help your parents stay independent with in-home providers and transportation assistance
» Pet care. Search out dog walkers, pet sitters and groomers
» Housekeeping. Hire housekeepers, house sitters and errand runners

This year, we have enhanced this benefit and added:

» Enhanced: In-home back-up care. Pay $8 per hour (down from $15/16) for care in your own home (with Wellesley paying the rest)
» New: Center back-up care. Pay $25 per child per day at a center (with Wellesley paying the rest)


Wellness Course Offerings through PERA

Pilates
TUESDAYS: 7:15 TO 8:00 A.M., DANCE STUDIO, DS201 (MAGILL)
THURSDAYS: 12:30 TO 1:15 P.M., DS 201 (MAGILL)

Aqua Aerobics
TUESDAYS: 12:00 TO 12:45 P.M., POOL (MAGILL)

Yoga
GENTLE YOGA, TUESDAYS: 12:30 TO 1:30 P.M., DS 202 (MASTERS)
YOGA, FRIDAYS: 12:30 TO 1:30 P.M., DS 202 (MASTERS)

For Class Questions. Contact the instructors directly at: pmagill@wellesley.edu or smasters@wellesley.edu.
Required Annual Federal Health Insurance Notices for Benefit Eligible Employees

General Notices

For the purposes of these notices, the Plan Administrator is Wellesley College. If you have any questions, contact Marymichele Delaney, Human Resources at 781-283-3202.

SPECIAL ENROLLMENT RIGHTS

If you do not enroll yourself and your dependents in a group health plan after you become eligible or during annual enrollment, you may be able to enroll under the special enrollment rules under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") that apply when an individual declines coverage and later wishes to elect it. Generally, special enrollment is available if (i) you declined coverage because you had other health care coverage that you have now lost through no fault of your own (or employer contributions to your other health care coverage terminated); or (ii) you have acquired a new dependent (through marriage or the birth or adoption of a child) and wish to cover that person.

As long as you meet the necessary requirements, you can enroll both yourself and all eligible dependents in the group health plan if you provide notice to the Plan Administrator within 30 days after you lose your alternative coverage (or employer contributions to your alternative coverage cease) or the date of your marriage or the birth, adoption, or placement for adoption of your child. See the Plan Administrator for details about special enrollment.

CHIP

You may also enroll yourself and your dependents in a group health plan if you or one of your eligible dependents’ coverage under Medicaid or the state Children’s Health Insurance Program (CHIP) is terminated as a result of loss of eligibility, or if you or one of your eligible dependents becomes eligible for premium assistance under Medicaid/CHIP. See the Plan Administrator for details about special enrollment.

GRANDFATHERED STATUS

Wellesley College does not maintain any “grandfathered health plans” under the Patient Protection and Affordable Care Act (the “Affordable Care Act”).

SPECIAL RULE FOR MATERNITY AND INFANT COVERAGE

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 attending provider or physician, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours, as applicable).

SPECIAL RULE FOR WOMEN’S HEALTH COVERAGE

The Women’s Health and Cancer Rights Act of 1998 ("WHCRA") requires group health plans, insurance issuers, and HMOs who already provide medical and surgical benefits for mastectomy procedures to provide insurance coverage for reconstructive surgery following mastectomies. This expanded coverage includes (i) reconstruction of the breast on which the mastectomy has been performed; (ii) surgery and reconstruction of the other breast to produce a symmetrical appearance; and (iii) prostheses and physical complications at all stages of mastectomies, including lymphedemas.

NOTICE REGARDING LIFETIME AND ANNUAL DOLLAR LIMIT

In accordance with applicable law, none of the lifetime dollar limits and annual dollar limits under our medical plan(s) shall apply to “essential health benefits,” as this term is defined under Section 1302(b) of the Affordable Care Act. The law defines “essential health benefits” to include, at a minimum, items and services covered within certain categories including emergency services, hospitalization, prescription drugs, rehabilitative and habilitative services and devices, and laboratory services, but currently provides little further information. Accordingly, a determination as to whether a benefit constitutes an “essential health benefit” will be based on a good faith interpretation by the Plan Administrator of the guidance available as of the date on which the determination is made.

PATIENT PROTECTION DISCLOSURE

You have the right to designate any participating primary care provider who is available to accept you or your family members (for children, you may designate a pediatrician as the primary care provider). For information on how to select a primary care provider and for a list of participating primary care providers, contact the Plan Administrator. You do not need prior authorization from your medical plan or from any other person, including your primary care provider to obtain access to obstetrical or gynecological care from a health care professional; however, you may be required to comply with certain procedures, including obtaining prior authorization for certain services, following a pre-approved treatment plan, or procedures for making referrals.

For a list of participating health care professionals who specialize in obstetrics or gynecology, contact the Plan Administrator.

AFFORDABLE CARE ACT CONSUMER PROTECTIONS

The Affordable Care Act of 2010 prohibits our medical plans, or any insurer, from rescinding your health insurance coverage for misrepresentation.

NOTICE OF MARKETPLACE/EXCHANGE

If this health insurance is unaffordable (your cost of the premium exceeds 9.5% of your income) as defined under the Affordable Care Act, you may have the right to subsidized health insurance purchased through an exchange/marketplace created pursuant to the Affordable Care Act.

MICHELLE’S LAW

Michelle’s Law provides for continued health and dental benefits for dependent children who are covered under our medical and/or dental plans as a student but lose their student status in a post-secondary school or college because they take a medically necessary leave of absence from school. If your child is no longer a student because he or she is out of school because of a medically necessary leave of absence, your child may continue to be covered under our medical plan for up to one year from the beginning of the leave of absence.

THE GENETIC INFORMATION NONDISCRIMINATION ACT (GINA)

GINA prohibits the Plan from discriminating against individuals on the basis of genetic information in providing any benefits under the Plan. Genetic information includes the results of genetic tests to determine whether someone is at increased risk of acquiring a condition in the future, as well as an individual’s family medical history.

WELLNESS

Our medical plans include a Wellness Program that provides rewards when you complete certain activities. You have the right to request a reasonable alternative should it be determined that it is not medically advisable for you to complete these activities.
Important Notice from Wellesley College About Your Prescription Drug Coverage and Medicare

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with Wellesley College and about your options under Medicare’s prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

Please note the following about your current coverage and Medicare’s prescription drug coverage:

1. Medicare prescription drug coverage became available in 2006 to anyone with Medicare coverage. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (such as an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.

2. Wellesley College has determined that the prescription drug coverage offered by the Wellesley College HMO and PPO Plans are, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered creditable coverage. Because your existing coverage is creditable coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

WHEN CAN YOU JOIN A MEDICARE DRUG PLAN?

You can join a Medicare drug plan when you first become eligible for Medicare and each year from October 15th through December 7th. However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two-month Special Enrollment Period (SEP) to join a Medicare drug plan.

WHAT HAPPENS TO YOUR CURRENT COVERAGE IF YOU DECIDE TO JOIN A MEDICARE DRUG PLAN?

If you decide to join a Medicare drug plan and you drop your current Wellesley College coverage, be aware that you and your dependents will be able to get this coverage back only during Wellesley College’s open enrollment period or if you have a qualifying life event during the year.

WHEN WILL YOU PAY A HIGHER PREMIUM (PENALTY) TO JOIN A MEDICARE DRUG PLAN?

You should also know that if you drop or lose your current coverage with Wellesley College and don’t join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later. If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base premium per month for every month that you did not have that coverage. For example, if you go 19 months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join a Medicare prescription drug plan.

FOR MORE INFORMATION ABOUT YOUR OPTIONS UNDER MEDICARE PRESCRIPTION DRUG COVERAGE...

More detailed information about Medicare plans that offer prescription drug coverage is in the “Medicare & You” handbook. You’ll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans. For more information about Medicare prescription drug coverage:

- Visit www.medicare.gov,
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the “Medicare & You” handbook for their telephone number) for personalized help or
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at www.socialsecurity.gov, or call them at 1-800-772-1213 (TTY 1-800-325-0778).

REMEMBER

Keep this Creditable Coverage notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and, therefore, whether or not you are required to pay a higher premium (a penalty).

Date: October 15, 2018
Name of Entity/Sender: Wellesley College
Contact Person: Marymichele Delaney, Human Resources
Phone Number: 781-283-3202

FOR MORE INFORMATION ABOUT THIS NOTICE OR YOUR CURRENT PRESCRIPTION DRUG COVERAGE...

Contact information is listed below.

NOTE: You will get this notice each year. You will also get it before the next period you can join a Medicare drug plan and if coverage through Wellesley College changes. You may request a copy of this notice at any time.