

COLGATE UNIVERSITY 2021 Benefits Guide



Personal needs greatly influence the choices we make in our daily lives. This is true even in the selection of health, life, and supplemental benefits. The Colgate University Benefits Program offers you the freedom to select quality benefit options that work best for your situation. Colgate University is proud to offer in-depth, competitive benefit plans that support the health of you and your family.

Please take the opportunity to review all of your plan options in detail. Carefully consider each benefit option to determine if it is appropriate for your personal situation and the impact of the cost to you. By taking the time to choose accordingly, you will ensure that your elections meet your needs throughout the plan year.

This benefits guide describes the highlights of our Benefits Program in nontechnical language. Your specific rights to benefits under the plan are governed solely, and in every respect, by their respective official documents and not the information in this summary. If there is a discrepancy between the contents of this summary and the official documents, the official documents shall prevail as accurate. This benefits guide may not be reproduced or redistributed in any form or by any means without the express written consent of Colgate University.

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Contacts: Benefit

Relph Benefit Advisors (RBA)
Providing a single point of
contact for assistance
understanding and navigating
Colgate University's medical,
prescription, dental and flexible
spending plans, RBA services
are available for employees at
no cost.

RBA will help with locating providers, ordering replacement I.D. cards, estimating out-of-pocket costs and plan coverage, resolving provider billing and insurance claims, facilitating approvals and prior authorizations for services, and providing support for out-of-area services.

For Assistance email: <u>cuservice@relph.net</u> call: 800-836-0026 x7268, M- F, 8:00 a.m. - 4:30 p.m.

Colgate HR & Benefits: 315-228-7565 benefits@colgate.edu

Amy Ryan, Director of Benefits & Employee Wellness:

Rachael Enders, Human Resources Assistant, Benefits renders@coloate.edu

Plan Notes

Changing Your Benefits (Qualifying Life Events)

The Internal Revenue Service (IRS) states that employees enrolled in pre-tax benefit plans may only make benefit elections to these plans once a year. As such, your medical, dental, vision, and flexible spending account benefit choices are binding through December 31. The following special circumstances are the ONLY reasons you may change your benefits during the plan year:

- · Marriage, divorce, legal separation, or annulment
- · Birth, adoption, or placement for adoption of an eligible child
- · Loss of spouse's job or change in work status where coverage is maintained through the spouse's plan; a significant change in your or your spouse's health coverage attributable to your spouse's employment; the reduction or increase in hours of employment or other changes in employment category for you or your spouse or dependent, including a change between
- · Gain or loss of other coverage for your child
- · Death of a spouse or dependent
- · Loss of dependent status
- · Change in place of residence that affects eligibility
- · Becoming eligible for Medicare or loss or gain of Medicaid during the year
- · Receiving a Qualified Medical Child Support Order (QMCSO)

These special circumstances, often referred to as "Qualifying Life Events" or life event changes, will allow you to make plan changes anytime during the year in which they occur. For any allowable changes, you must notify human resources within 30 calendar days of the event and provide proof of the Qualifying Life Event to avoid a lapse in coverage. An election change must be consistent with the change in status. Changes that are requested due to a "change of mind" are not allowed until the next annual open enrollment period for a change in status. For a change in status, payroll deductions will change for the pay period following receipt of completed paperwork. For additional information concerning plan changes, please contact human resources.

Plan Year

The Colgate benefits plan year begins on January 1 and ends the following December 31. This Benefits Guidebook outlines the benefits that apply to this plan year.

Program Details

The Colgate Benefits Program offers two types of benefits: 1) those in which you are automatically enrolled and are offered at no cost to you and 2) those in which you have the option of enrolling and in which you will share a portion of the cost with the University or you will pay 100% of the group benefit rate.

Eligibility

All employees in regular, benefit-approved positions working at least 20 hours per week are eligible to participate upon date of hire in the Colgate University Benefits Program, unless a waiting period is specified for a specific plan.

Plan Notes - continued

Dependent Coverage

You have the opportunity to enroll your eligible dependents in the Colgate University medical, dental and vision plans. Your eligible dependents include your spouse, or your domestic partner and your dependent children/stepchildren. Your dependent children are eligible for medical, dental, and vision coverage provided that they are under the age of 26.

Open Enrollment

Current employees should review and make changes to their benefits as needed during the annual enrollment period. Changes in plan participation, other than within 30 days following a change in family status, may be made only during the annual enrollment period held each fall for the plan year beginning January 1. During this period, employees may change their benefit elections.



Enrolling in Your Benefits

Colgate University is proud to offer in-depth, competitive benefit plans that support the health of you and your family. Please take the opportunity to view all of your plan options in detail. The Online Benefit System contains information regarding the many benefits offered to employees, which are also described in the Colgate Benefits Summary found at http://www.colgate.edu/working-at-colgate/benefits.

Outlined below are the steps for you to take to ensure timely enrollment and payment:

- 1. Visit https://accounts.colgate.edu/ to finalize your Colgate network account.
- 2. Log into the Colgate portal at https://.portal.colgate.edu/ using your network username and password. Should you need assistance with this, contact the Colgate Helpline at 315-228-7111.
 - a. Select the Online Benefit System link on the Banner Self-Service channel under the HR section.
 - b. Enter your email and password used to log into the portal.
 - c. Read and respond to the agreement for acceptance of electronic records on the Let's Get Started page.
 - d. Select START HERE New Hire Enrollment.
 - e. You must complete the Online Benefit System to review and select your benefit elections.

 Please complete the information prior to your date of hire or there could be a delay in coverage.
 - f. For assistance with making your selections or using the Online Benefit System, contact Relph Benefit Advisors at 1-800-836-0026 x7268.
- 3. You must attend an orientation meeting in human resources, on or about your first day to finish completing the necessary payroll and employment forms. If this meeting has already been scheduled, it will be noted in your hire letter. During this meeting, you will need to provide the appropriate ID(s), as required on the Employment Eligibility Verification, and we will review your benefit elections.

You will find a dependent health insurance calculator in the Online Benefit System or at https://www.colgate.edu/about/campus-services-and-resources/colgate-employee-benefits. For the purposes of calculating the cost of dependent health and dental premiums, your annualized salary is outlined in your hire letter.

Please call or email the Human Resources Department at humres@colgate.edu or 315-228-7411 to schedule an appointment to complete your onboarding process. We look forward to your arrival to campus.



Finding a Provider

To locate an Excellus BCBS provider: call 800-499-1275, or Go to www.excellusbcbs.com.

Website Notes
Under the Find a Doctor tab:
Choose "Find a Doctor"
Choose "Local provider network
Search"

Select Plan: Excellus Blue PPO

If performing a national search, enter location and enter "VYA" when selecting plan.

Preferred Provider Organization (PPO) Terms:

Coinsurance: A dollar amount, expressed as a stated percentage of allowable charges.

Deductible: A fixed dollar amount which must be satisfied before Excellus will pay benefits for certain services.

Formulary: A formulary is an insurance company's list of approved prescription drugs. These are typically drugs that have been found to effectively treat most medical conditions at a reasonable cost.

Network: An insurance company's group or list of approved or contracted providers from which you can obtain service at the plan's highest benefit level. Out-Of-Pocket Maximum: The most you will pay in a plan year before the plan begins to pay 100% of allowed amounts (includes deductible, coinsurance, and copay amounts).

Medical Benefits

Excellus BlueCross BlueShield BluePPO Plan

Colgate is pleased to offer medical insurance through Excellus BlueCross BlueShield (BCBS). The Excellus BCBS BluePPO Plan is a comprehensive medical plan that gives employees the flexibility to receive the care they want from the provider they want, without the need to select a primary care physician or to obtain referrals for service. The BluePPO Plan is a network-based program that features an in-network and out-of-network component, which offers you a high level of flexibility when seeking covered medical services. The in-network component allows you to choose any provider from the BlueCard® program and provides a higher level of benefits. The out-of-network component of the plan provides you with the ability to see any physician of your choice, but at a greater cost. Before obtaining care or undergoing a procedure, be sure that you know whether your provider is in-network or out-of network, and the corresponding level of coverage you can expect. We encourage our employees to choose in-network providers when possible. Certain procedures and/or treatments require precertification in order to be covered under the plan.

In addition to a national network of providers participating in the BlueCard® program, members also have access to doctors and hospitals outside of the United States worldwide through the BlueCross BlueShield Global Core program. Your BlueCross BlueShield Plan ID card gives you access to doctors and hospitals in more than 200 countries and territories around the world and to a broad range of medical assistance services. For more information regarding this program, visit website: www.bcbsglobalcore.com, call the BlueCross BlueShield Global Core Service Center at 800-810-BLUE (2583) or call collect at 804-673-1177 24 hours a day, 7 days a week.

Premium Information

Colgate University pays 95% for single coverage and an additional subsidy for dependents. Please refer to the following worksheet at https://www.colgate.edu/about/campus-services-and-resources/colgate-employee-benefits to determine your premium amount. Premiums are deducted on a pretax basis. Should you enroll a domestic partner in the health insurance plan, the value of your domestic partner's coverage will be added as taxable income to your pay.

Telemedicine

Excellus includes a Telemedicine program, MDLive, at no cost to members. MDLive allows you to visit independently contracted board-certified doctors when you may need care. They may help treat medical, behavioral and pediatric health issues. They are also able to write and send prescriptions to a nearby pharmacy. There is no copay.

To register, please visit https://www.excellusbcbs.com/wps/portal/xl/member/registration/

Aubie income to your pay.		
Non-Emergency Medical Telemedicine:	Behavioral Health Telemedicine:	
Allergies	Addictions	
Asthma	Anxiety	
Cold & flu	Bipolar disorders	
Constipation	Depression	
Diarrhea	Eating disorders	
Fever	Grief and loss	
Headache	LGBTQ support	
Insect bites	Men's issues	
Joint aches	Panic disorders	
Nausea	Stress	
Pink eye	Trauma and PTSD	
Rashes	Women's issues	
And more	And more	

Prescription Benefits

Prescription Benefits

When you enroll in the BluePPO Medical Plan, you will also be provided with prescription benefits through OptumRx. Your prescription benefits include different pricing structures or "tiers" that enable you to control costs based on the types of medications you select. In most cases, more than one drug is available to treat the same medical condition. Generic medications include the same active ingredients as brandname medications, but cost less. Therefore, selecting a formulary generic medication over a formulary brand-name medication will result in you paying a lower сорау.

Visit <u>www.optumrx.com</u> (new users must register and log in) to view current formulary information. Specific copay amounts are listed within the "Prescription Drugs" section of the Medical Plan Summary.

OptumRx Home Delivery Service

Plan participants can save time and money with the OptumRx mail-order prescription program. This home-delivery service allows you to purchase up to 90-day supplies of maintenance medications (medications taken on a daily or routine basis) for the cost of one copay for generics, or two copayments for name brand drugs, generally three for two savings. In addition, the mail-order prescription program saves you trips to the pharmacy because prescriptions are delivered right to your door. For more details on the mail-order prescription program, please visit www.optumrx.com or call 855-463-6978.

Contact Optum Rx:

Member Services: 855-227-8568 BriovaRx: 855-427-4682

Need more information?

Refer to your Personnel Policies and Benefits Handbook or Summary Plan Description at https://www.colgate.edu/about/campus-services-and-resources/employee-handbook.



D (1)	Excellus BlueCross BlueShield BluePPO Plan	
Benefit Description	In-Network Member's Cost	Out-of-Network Member's Cost
Calendar Year Deductible	Individual: \$0 / Family: \$0	Individual: \$750 / Family: \$2,250
Medical Coinsurance	Member Pays 20%	Member Pays 30% after deductible
Medical and Prescription Out-of-Pocket Maximum	Medical: Individual \$1,400 / Family \$2,800 Prescription: Individual \$2,000 / Family \$4,000	Individual: \$1,775 / Family: \$5,300
Lifetime Benefit Maximum	Unlimited	Unlimited
Primary Physician's Office Visit	20% coinsurance	30% after deductible*
Specialist's Office Visit	20% coinsurance	30% after deductible*
Routine Adult Physicals & Immunizations	Covered 100%	30% after deductible*
Diagnostic Tests and Labs	20% coinsurance	30% after deductible*
Inpatient Hospital	20% coinsurance	30% after deductible*
Pre-Authorization of Treatment	Pre-Authorization required for all inpatient a therapy, durable medical equipment over \$2	
Urgent Care	20% coinsurance	30% after deductible*
Emergency Room Visit (for true emergency)	20% coinsurance (waived if admitted)	20% coinsurance (waived if admitted)
Outpatient Surgery	20% coinsurance	30% after deductible*
Maternity Care (prenatal and postnatal)	Physician & Labs/Radiology Covered 100% Inpatient 20% coinsurance to \$600 cap	30% after deductible*
Well-Baby Care/ Immunizations	Covered 100%	Covered 100%
Chiropractic Care	20% coinsurance	30% after deductible*
Physical Therapy	20% coinsurance	30% after deductible*
	Physical, Speech, and Occupational Therapies limited to 45 combined	
Mental Health Treatment Inpatient & Outpatient	20% coinsurance	30% after deductible*
Substance Abuse Treatment Inpatient & Outpatient	20% coinsurance	30% after deductible*
Retail Prescription	up to 30-day supply	Not Covered
Drug Coverage Generic/Brand Name/ Non-Formulary	\$10 copay/\$30 copay/\$50 copay	
Mail-Order Prescription	up to 90-day supply	Not Covered
Drug Coverage Generic/Brand Name/ Non-Formulary	\$20 copay/\$60 copay/\$100 copay	
Routine Eye Exam – covered annually	\$40 copay	30% after deductible*
Telemedicine by Excellus/ MDLive - 866-692-5045 www.ExcellusBCBS.com/ Telemedicine	Covered 100%	Not Covered

^{*}Out-of-Network reimbursement is based on Reasonable and Customary (R&C) Charges.

**To view the full benefit summary please refer to http://www.colgate.edu/working-at-colgate/resources/staff-handbook

Wellness Benefits

Live Better Today

The 2020–21 CU Well Program will reward you for making healthy choices. Get the motivation you need to reach personal health goals along with the education and support to make wellness a lifestyle.

Who Can Participate?

All benefit-eligible employees are eligible to log on to join.virginpulse. com/cuwellprogram or the VirginPulse® app to start the program. Download the mobile app by searching "Virgin Pulse" in the App Store or Google Play.

Getting Started

Start at <u>join.virginpulse.com/cuwellprogram</u> or the VirginPulse app to see where your health stands and take action toward a healthy lifestyle.

Health Check Survey

The Health Check Survey asks questions about your current health status and wellbeing habits. Once completed, your responses will be analyzed to generate a health score, show your health risks, and provide practical tips to help you improve. Complete your Health Check Survey by visiting **Programs.**

Bionetric Screening

Biometric Screenings provide vital information about youroverall health, including cholesterol (total, LDL, and HDL), triglicerides, cardiac risk, glucose, blood pressure, height, weight, Body Mass Index (BMI) and waist measurement. You may complete your screening at an upcoming onsite event, by visiting your physician or a LabCorp facility.

Note: Depending on your method of testing or location of screening, not all metrics may be included.

Earning Incentives

Earn credit for completing program activities in the 2020–21 CU Well Program and earn rewards. Manage all your program activities at member.virginpulse.com or the Virgin Pulse app.

Employees will be able to earn \$300 in an employer-paid flexible spending account.

The payment will be deposited into a flex account on January 1, 2022 for employees who complete a Health Check Survey, biometric screening, preventive care services and earn a total of 300 points between December 1, 2020, and November 30, 2021.



How to Register

New members: visit join.virginpulse.com/CUWellProgram

Exisitng members: sign in at member.virginpulse.com

Accept the terms and conditions

Download the Virgin Pulse mobile app by searching "Virgin Pulse" in the App Store or Google Play.



Additional Activities

Prioritize and personalize your experience by engaging in resources to help improve your wellbeing:

Daily Cards: Get helpful tips that are relevant to your current interests and goals.

Journeys: Make simple changes to improve your health, one step at a time

Challenges: Team up or go head to head to challenge your coworkers and track healthy habits.

Social Groups: Discuss your favorite hobbies and find a like-minded community.

Healthy Habits: Select healthy habits to work toward and track your progress every day.

All benefit-eligible employees hired between September 1, 2021 and October 31, 2021 must complete the MHA and earn a total of 100 points by November 30, 2021, to earn a \$150 flexible spending account reward.

The employer-paid flexible spending incentive will not be taxed and can be used on out-of-pocket medical, dental, and vision expenses for you and your dependents. The payment will be in addition to any employee flex election and the flex debit card can be used at the time of purchase.

Who Can I Contact With Questions?

Visit support.virginpulse.com

Email us at support@ virginpulse.com

Give us a call at 888-671-9395 (Monday-Friday 8am-9pm ET)

Join us on live chat on member. virginpulse.com (Monday-Friday 2am - 9pm ET).

WAYS TO EARN	POINTS
PROGRAM REQUIREMENTS (ONCE PER PROGRAM PER Y	EAR)
Complete the Health Check Survey (required)	150
Member Health Assessment (MHA) (Required)	150
Preventive Care Screening	150
TOBACCO-FREE (ONCE PER PROGRAM PER YEAR)	
Complete Nicotine-free Agreement	20
HEALTH METRICS (ONCE PER PROGRAM PER YEAR)	
Achieve ideal or improved BM or waist circumference	25
Achieve ideal or improved LDL cholesterol	25
Achieve ideal or improved blood pressure	25
Achieve ideal or improved fasting or non fasting glucose	25
CHALLENGES	
Create a personal challenge	10 each / 120 max
Join the company challenge	15 each / 30 max
Win the promoted healthy habit challenge	10 each / 120 max
JOURNEY (QUARTERLY)	
Complete a Journey	20 each / 80 max
ACTIVITIES	
Track sleep 20 days in a month	10 each / 120 max
20-Day Triple Tracker: 7,000 steps/15 active minutes/ 15 workout minutes	10 each / 120 max
20-Day Triple Tracker: 10,000 steps/30 active minutes/ 30 workout minutes	10 each / 120 max
Complete 20 daily cards in a month	5 each / 60 max
Complete 20 daily cards in a month	5 each / 60 max
Connect first activity device	5 max

Dental Benefits

Colgate offers eligible employees the Delta Dental PPO with Point-of-Service (POS) Plan that encompasses varying levels of coverage and accessibility. The Delta Dental PPO Plan features a participating provider and a nonparticipating provider component. The participating provider component offers you access to two Delta Dental networks: 1) the Delta Dental PPO network and 2) the Delta Dental Premier network. The nonparticipating provider component allows you to receive care from any dentist of your choice outside of the Delta Dental provider networks. You will save the most money and spend the least out-of-pocket amount when you visit a Delta Dental PPO dentist.

90% Usual, Customary & Reasonable (UCR) Charges

The amount paid for services in a geographic area is based on what providers in the area usually charge for the same or similar services. 90% UCR is used to determine Deltas allowed amount for a claim. The plan pays up to the 90th percentile, this means that 90% of dentists in a given area charge that fee or less for services.

Premium Amounts

Tier	Total Cost Monthly	Employer Cost Monthly	Employee Cost Monthly	Employee Cost Bi-weekly
Employee Only	\$40.08	\$40.08	\$0.00	\$0.00
Employee/ Spouse	\$84.14	\$40.08	\$44.06	\$22.03
Employee/ Children	\$80.20	\$40.08	\$40.12	\$20.06
Family	\$103.66	\$40.08	\$63.58	\$31.79
CU Family (both spouses are employees)	\$103.66	\$80.16	\$23.50	\$11.75



Pretreatment Estimate

It is recommended that you receive a pretreatment estimate for any dental work that you consider expensive. Simply ask your dentist to submit the information for a pretreatment estimate to Delta. Delta will then inform you and your dentist of the exact amount your insurance will cover and the amount you will be responsible for paying.

Colgate University covers 100% of the premium for employees. Premiums for dependents are paid for by the employee on a pretax basis.

To Find a Participating Delta Dental Provider:

Visit <u>www1.deltadentalins.com</u>. Select Member

- > Find a Dentist
- > Your Plan
- > Delta Dental PPO Premium

	Delta Dental PPO with POS Plan		
Benefit Description	Participating Delta Dental PPO and Premier Providers*	Non-Participating Providers**	
Annual Deductible	Individual: \$25 / Family: \$50	Individual: \$25 / Family: \$50	
Annual Benefit Maximum	\$1,500 per person	\$1,500 per person	
Diagnostic and Preventive Care	Covered 100% after deductible	Covered 100% after deductible	
Basic Restorative Care	Covered 80% after deductible	Covered 80% after deductible	
Major Restorative Care	Covered 50% after deductible	Covered 50% after deductible	
Oral Surgery	Covered 80% after deductible	Covered 80% after deductible	
Endodontics	Covered 80% after deductible	Covered 80% after deductible	
Periodontics	Covered 80% after deductible	Covered 80% after deductible	
Posterior Composites	Covered 80% after deductible	Covered 80% after deductible	
Prosthodontics	Covered 50% after deductible	Covered 50% after deductible	
Implants	Covered 50% after deductible	Covered 50% after deductible	

^{*}Delta Dental PPO providers are paid up to the Delta Dental PPO maximum plan allowances. Participating Delta Dental Premier providers are paid up to the Delta Dental Premier maximum plan allowances. The maximum plan allowances for each network are different.

^{**}Nonparticipating providers may bill you the difference between Delta's reimbursement for covered services and their actual charge for covered services



To Find a VSP Provider:

Visit www.vsp.com

Enter zipcode under "Find a Doctor" Doctor Network – "Choice"

Using Your VSP Vision Benefits

Employees enrolling in the plan will receive an ID card. In-Network providers may also verify plan coverage levels by contacting Guardian. In-Network providers will coordinate the plan benefit at the time of purchase and will require payment for the patient's responsibility only. If you utilize an Out-of-Network provider, you are required to pay in full at the time of the appointment and submit a claim to Guardian for partial reimbursement, according to the schedule of benefits.

The Guardian Vision Plan uses the Vision Service Plan (VSP) Network. You can elect to enroll in a voluntary vision benefit provided through Guardian, utilizing the Vision Service Plan (VSP) network. The plan provides you with access to affordable, quality vision care coverage by allowing you to receive a complete eye examination and materials (if needed). If you elect to participate in the voluntary vision plan, you will be responsible for paying 100% of the premium.

Vision Rates:

Tier	Employee Cost Monthly	Employee Cost Bi-weekly
Employee	\$8.69	\$4.35
Employee+Spouse	\$14.63	\$7.32
Employee+Child(ren)	\$14.92	\$7.46
Family	\$23.61	\$11.81

Vision Plan Summary

The chart below summarizes the benefits provided under the Guardian Vision Plan.

Donast	Guardian Vision Plan	
Benefit	In-Network	Out-of-Network
Network & Allowances	Vision Service Plan (VSP)	Fee Schedule Allowance
Service Intervals Eye Exam Lenses or Contacts Frames	Calendar Calendar Every Other Cal	Year
Eye Exam Copay Materials Copay	\$10 \$25	
Lenses	Materials Copay	See Benefit
Frames	Covered up to \$130 & 20% off balance	Summary
Contact Lenses (in lieu of glasses) Contact Fitting	Covered up to \$130 (no copay) Up to \$60	

Flexible Spending Accounts (FSA)

Colgate University offers you the option to redirect a portion of your pay, through payroll deduction, into Health Care and/or Dependent Care FSAs administered by Lifetime Benefit Solutions. Per Health Care Reform guidelines, you may deposit up to \$2,750 into a Health Care FSA which provides you with the ability to save money on a pretax basis for any IRS-allowed health expense not covered by your health care coverage.

In addition, you may deposit up to \$5,000 (\$2,500 if you are married and both you and your spouse elect the benefit) into a Dependent Care FSA. Eligible expenses include payments to day care centers, preschool costs (up to kindergarten), after-school, and elder care.

What Is a Flexible Spending Account?

A Flexible Spending Account (FSA) is an employee-funded program established to save a portion of their income to pay for qualified medical or dependent care expenses incurred during their benefit plan year. Contributions are taken pretax, reducing employee taxable income and increasing their "take home pay."

Health Care FSAs—\$2,750 Annual Maximum

The money employees contribute to their Health Care FSA is used to reimburse the employee's and/or their covered dependents' eligible out-of-pocket health care expenses. FSAs are funded with payroll deductions. The employer determines the plan year and the annual maximum contribution employees may contribute to their Health Care FSA during the plan year, provided it falls within IRS limits.

Dependent Care FSAs—\$5,000 Annual Maximum

A Dependent Care FSA is set up to reimburse eligible dependent care expenses in order for the employee to work. Some examples of eligible expenses include:

- · Before- and after-school care for children to age 13
- · Expenses for pre-school or nursery school
- Extended-day programs
- · Au pair services (amounts paid for the actual care of the dependent)
- · Babysitter (in or out of the home)
- · Nanny services (amounts paid for the actual care of the dependent)
- · Summer day camp for qualifying children under age 13
- · Elder care for a qualifying individual
- · Care for a disabled spouse and/or an IRS tax dependent, disabled relative or household member

A Dependent Care FSA is funded with payroll deductions. The IRS limits the dependent care maximum to \$5,000 per year, \$2,500 if the employee is married and filing separately.

Note: Payments to your spouse, child under age 19, the parent of your child (not your spouse), or to an individual qualifying as a tax dependent exemption are not qualifying expenses for Dependent Care FSAs.



Important Note: Once enrolled, FSA elections must be made every year during open enrollment to participate in the next calendar year.

For additional information regarding your FSAs, please contact Lifetime Benefit Solutions at 800-327-7130 or visit www.lifetimebenefitsolutions.com. You can use the website to check lists of eligible and non-eligible items and to use the online calculator to estimate annual health care and dependent care

FSA Fact:

You will not be able to change the amount you contribute to an FSA in the middle of a plan year unless you have a Qualifying Life Event. If there is any money remaining in your FSA at the end of the plan year, including the grace period, federal law requires you to forfeit the balance.

Flexible Spending Accounts - continued

Customer Service

Most of your questions can be answered by visiting the website. If you prefer to speak with a customer service representative, call 800-327-7130 Monday-Thursday from 8 a.m. to 5 p.m. ET and Friday, from 9 a.m. to 5 p.m. ET. You can also email the Customer Service department at customerservice@

lifetimebenefitsolutions.com.

Important!

The IRS requires you save your itemized receipts, even when using your Lifetime Benefit Solutions Card. In some instances, Lifetime Benefit Solutions is unable to automatically substantiate or validate the debit card transaction and must request a receipt from the participant based on IRS guidelines. Itemized receipts must include date of purchase, descriptions of purchase, and name of merchant. If you are submitting a health care claim, the patient's name must also be included.

Please Note

Colgate University has a grace period provision for Flexible Spending Accounts, providing more time for you to use the funds in your account. All amounts elected for 2020 must be used for expenses incurred in 2020 or in the initial 2.5 months of 2021. You will have until June 30, 2021, to submit claims for expenses incurred January 1, 2020, through March 15, 2021.

How much money should you contribute to an FSA each pay period?

That depends on your expenses. The best way to estimate your expenses for the year is by looking over the eligible expenses you incurred over the past few years. Divide the total predictable yearly expenses by the number of pay periods in the year. The resulting number represents the amount you should consider contributing each pay period to an FSA. It is important to estimate carefully. If you do not use all of the money in your FSA by the end of the plan year, including the grace period, federal law requires you to forfeit the balance.

Lifetime Benefit Solutions Debit Card

The debit card makes using your health and dependent care flex dollars easier. As long as a merchant or service provider accepts VISA, you may use your card to pay for IRS-eligible health care expenses that are not otherwise covered by insurance. In addition, you can use your debit card as often as you wish.

Your debit card includes an expiration date. Your card does not expire until the expiration date shown on the card. Lifetime Benefit Solutions will reload your card each year with your new election. It is important to keep your current debit card from year to year, unless directed otherwise.

Web and Mobile App Access

View your account online 24/7 via <u>lifetimebenefitsolutions.com</u> or download "LBS Health Spending App," mobile app. While online, you can:

- · Submit claims for reimbursement
- · View claims history
- · Sign up for direct deposit
- · Check your available balance
- Access forms such as Direct Deposit, Certification of Medical Necessity, Release of Information, and various Reimbursement Request forms
- Enter your email address to receive important plan-related materials
- · Use the online services, such as the online calculator to estimate your out-of-pocket expenses and the online eligible expense listing

To access your account online, visit <u>lifetimebenefitsolutions.com</u> and click on the Participants link. Select Reimbursement Accounts: FSA/HRA/HSA/QTB then click on the green login button. For detailed instructions on how to view your account online, click on the link for Login Directions to Your Reimbursement Account located under the green login button. Your initial username will be your Social Security number (or whatever identifier your employer provides). Your password will be the first letter of your first name (lowercase) followed by your five digit ZIP code.

Filing a Claim

Submit your claims online or by mobile app to receive the fastest reimbursement for an eligible out-of-pocket expense. Supporting receipts and documentation can be scanned and attached to your online claim, or you can email, fax, or mail the required paperwork. Another option is to download a paper Reimbursement Request form. Complete the form by itemizing your expenses and following the instructions found directly on the form. Reimbursement Request forms and required documentation can either be mailed or faxed for processing.

Cancer Care Insurance-Aflac

FACTS SHOW the NEED for Aflac Cancer Care Insurance

- Fact 1: In the United States, men have slightly less than a one in two lifetime risk of developing cancer. 1
- Fact 2: In the United States, women have slightly more than a one in three lifetime risk of developing cancer.¹
 - 1. Cancer Facts & Figures 2012, American Cancer Society.

Cash Benefits

This plan provides valuable cash benefits upon diagnosis of cancer and throughout the entire course of treatment and after-care, including reconstructive surgery. Aflac pays cash benefits directly to you, unless assigned, to pay expenses such as out-of-pocket medical expenses, deductibles, copayments, mortgage or rent, child-care expenses, or other daily living expenses.

Aflac CLASSIC CANCER CARE BENEFIT HIGHLIGHTS See the brochure for full benefit details and limitations		
**CANCER WELLNESS	\$75/year/covered person	
Initial Diagnosis	\$4,000, Insured / Spouse \$18,000 children includes child rider	
++Initial Diagnosis Building Benefit Rider	\$500 increase to this benefit on each rider anniversary. See the brochure for exact terms and limitations.	
Injected Chemotherapy	\$600/day, limited to one payment / week, no lifetime max	
Oral Chemotherapy	\$250/day up to \$750 max / month	
Radiation Therapy	\$350/day, limited to one payment / week, no lifetime max	
Anti-nausea	\$100/month, no lifetime max	
Bone Marrow Transplantation	\$7,000, lifetime max/covered person; \$750 to the donor	
Egg Harvesting & Storage	\$1,000/extraction; \$350/storage \$1,350 lifetime max/covered person	
Hospital Confinement	\$200/day, no lifetime max	
Outpatient Hospital Surgical Room	\$200/day, no lifetime max	
Reconstructive Surgery	\$220-\$2,000 (Anesthesia: 25% of Reconstructive Surgery Benefit); no lifetime max	
Ambulance	\$250 ground or \$2,000 air, no lifetime max	
Transportation	\$.40/mile, max \$1,200 / round trip	

Note: Employees must have medical insurance to apply for coverage. Also, applicants applying for family coverage may cover children up to age 26 but must be under age 26 on the plan effective date, regardless of status related to education, marriage or IRS dependent requirements.

**CANCER WELLNESS: Pays \$75 per Calendar Year when a covered person receives one of the following:

the following.	
Mammogram	CA15-3 (blood test for breast cancer tumor)
Breast ultrasound	hemoccult stool specimen (lab confirmed)
Breast MRI	CEA (blood test for colon cancer)
Pap smear	CA 125 (blood test for ovarian cancer)
ThinPrep	PSA (blood test for prostate cancer)
Biopsy	testicular ultrasound
Chest X-ray	X-ray
Colonoscopy	flexible sigmoidoscopy virtual colonoscopy

No Deductibles or Networks

Aflac policies have no deductibles or network restrictions.

Guaranteed Renewable, Portable, and Stable Rates

The renewal of your Aflac policy is guaranteed, which means you can never be cancelled for medical reasons or age. Rates cannot increase due to claims or age.

Portable Coverage: This means employees can take the plan with them if they leave their current employment. Aflac will bill the employee directly.

Family Coverage

Aflac's policy provides coverage for you, your spouse, and dependent children to age 26.

See the brochure for full benefit details, limitations & exclusions.

Life / AD&D Benefits

Employee Premium		
Age	Rate per \$1,000	
<25	0.08	
25-29	0.08	
30-34	0.1	
35-39	0.11	
40-44	0.14	
45-49	0.24	
50-54	0.53	
55-59	0.96	
60-64	1.15	
65-69	1.67	
70-74	2.63	
75+	4.30	

Dependent Life	
\$5,000 Spouse	\$1.79/month
\$2,000 Child	

Dependent Life	
\$10,000	\$3.58/month
Spouse	
\$4,000 Child	

Accidental Death and Dismemberment (AD&D) Insurance

This insurance is similar to regular life insurance. If you should lose your life in an accident — for example, an automobile accident — the amount of coverage you receive is paid to your beneficiary. However, AD&D Insurance also pays a benefit if you are seriously injured in an accident. Part of your benefit may be paid to you if you lose a limb or the ability to see, hear or speak. For more information, please refer to the Certificate of Coverage.

Life / AD&D Insurance is an important part of your financial security, especially if others depend on you for support. That's why Colgate University provides all eligible employees with Basic Life / AD&D Insurance and the opportunity to purchase additional Supplemental Life Insurance. These insurances are provided through a policy with Symetra.

Basic Life / AD&D Insurance

Colgate University provides you with Basic Life / AD&D Insurance in an amount that equals 2x your basic annual earnings (rounded to the next higher \$1,000) to a maximum of \$300,000. This coverage is provided at no cost to you.

Supplemental Life / AD&D Insurance

If you need additional protection beyond the Basic Life / AD&D Insurance provided to you at no cost, you may purchase Supplemental Life Insurance for yourself and your dependents. If you elect Supplemental Life Insurance, you are responsible for paying 100% of the benefit cost and deductions are taken from your paycheck in after-tax dollars.

EMPLOYEE SUPPLEMENTAL LIFE INSURANCE FEATURES			
Life Insurance Benefit	Purchased in increments of 1 or 2x basic annual earnings		
Maximum Benefit	The lesser of 2x-earnings or \$200,000		
Reductions Due to Age	Reduces to 65% at age 65 Reduces to 50% at age 70		
SPOUSE LIFE INSURANCE FEATURES			
Life Insurance Benefit	\$5,000 or \$10,000		
Maximum Benefit	\$10,000		
Reductions Due to Age	Same as the employee and based on the employee's age		
CHILD LIFE INSURANCE FEATU	RES		
Eligible Dependents	Unmarried dependent children, to age 26		
Life Insurance Benefit	\$2,000 or \$4,000		
Birth to 6 months	\$500		
Maximum Benefit	\$4,000		

Business Travel Accident Insurance

In the event of an employee's death in a commercial vehicle, while traveling on University business, a single payment of \$200,000 will be made to the named beneficiary(ies).

^{*}Beneficiaries should be reviewed and updated (if applicable) annually on the benefits portal

Disability Benefits

The disability benefits available to you work together to help you pay your household expenses if you become disabled and cannot work. Short-term and long-term benefits are provided by Colgate University at no cost to you.

Short-Term Disability

Administrators & Faculty

Less than one year of service:

- 60% of monthly earnings
- 1+ Years of Service:
- 100% of monthly earnings

Eligible after 30 days of employment

Benefits begin after one day of disability and are payable for a maximum of six months with an approved disabilit

Support Staff & Facilities

Coverage replaces 60% of weekly earnings to a maximum of \$350 per week. Provided by Svmetra

Eligible after 30 days of employment

Benefits begin after seven days of disability and are payable for a maximum of 26 weekly payments.

Long-Term Disability

Long-Term Disability coverage is provided through a policy with Symetra. You are eligible to participate in this plan after completion of one year of service. To be eligible for immediate enrollment in Colgate's long term disability plan, you need to have been enrolled in a group long-term disability plan with your previous employer within three months prior to employment with Colgate and the plan must have offered benefits payable for five years or more. Please complete the necessary eligibility form provided by human resources.

If you meet the definition of disability, you will be eligible to receive a Monthly Income Benefit that equals 60% of your monthly wage base (i.e., 1/12 of your basic annual wage) to a maximum of \$12,500 per month. You are also eligible for a Monthly Annuity Benefit credited to your 403(b) account. Monthly Income Benefits and Monthly Annuity Benefits for partial disability are adjusted according to the amount of lost income. Long-term disability benefits begin after six months of continuous disability and are generally payable to age 65.

Please Note: The disability benefits you receive will be reduced by any benefits you are eligible to receive from Social Security, Workers' Compensation, Retirement Benefits and any other disability coverage to which you are entitled.



Employee Assistance Program (EAP)

All employees and their immediate family members or dependents living with them have access to EAP provided through Family Services Associates. EAP provides short-term, solution-focused counseling (usually four to six sessions) to assist with problems such as substance abuse, marital and family issues, financial or legal concerns, and iob stress. To take advantage of the benefits available through the EAP, contact Family Services Associates at 315-451-2161, or www.fsacounseling.com.

When Am I Eligible for Short-Term Disability Benefits?

You are considered to have a short-term disability when the insurance company determines that your sickness or injury prevents you from performing with reasonable continuity the material substantial duties of your regular occupation and as a result the income you are able to earn is less than or equal to 80% of your pre-disability earnings.

When Am I Eligible for Long-Term Disability Benefits?

You are considered to have a long-term disability when the insurance company determines that: 1. Due to sickness, bodily injury or pregnancy you are unable to perform the material duties of your normal occupation during both the elimination period (six months) and the normal occupation period (the first 24 months following the elimination period); and for any period of time thereafter, being unable due to sickness, bodily injury or pregnancy to perform the material duties of any occupation for which you are reasonably qualified by education, training or experience; or

2. After you have been continuously disabled for the elimination period (six months), you are working, but due to sickness, bodily injury or pregnancy you are unable to earn 80% or more of your monthly wage base.



TIAA 1-800-842-2252
To schedule appointments call 1-800-732-8353 or schedule a virtual appointment at tiaa.org/schedulenow.

Fidelity 1-800-343-3548
To schedule appointments call 1-800-642-7131 or set up a virtual appointment at fidelity.com.

Enrollment forms and changes to voluntary contribution amounts may be requested at any time.

The University's contributions are not available for disbursement until you separate employment with the University. Voluntary contributions may be withdrawn beginning at age 59 ½.

Retirement Benefits

It's never too soon — or too late — to start planning for your retirement. Colgate University realizes the importance of saving toward retirement and the Colgate University 403(b) Retirement Plan will help provide you with income for your retirement years. An important step in planning for retirement is to establish investment goals and then selecting investment choices that match those goals. As you proceed through your career, you will want to periodically reevaluate your investment goals and choices.

Retirement benefits are available for faculty, administrative, non-represented staff employees, members of the Collective Bargaining Unit Represented by Local 200 United, S.E.I.U. – Library, Mail Services & Dispatchers, and members of the Collective Bargaining Unit Represented by the International Security, Police and Fire Professionals of America (SPFPA) Union, Local 502.

University Contributions			
The University will contribute	Less than 52 years of age: 5% of the employees accumulated year-to-date base salary up to \$97,600 and 10% over \$97,600.		
	52 years of age and older: 7% of the employees accumulated year-to-date base salary up to \$97,600 and 12.7% over \$97,600.		

^{*}Maximum base salary eligible for contributions is \$290,000. The base salary may change each January 1 based on Social Security taxable wage base

Voluntary Contributions			
Colgate	1% Salary = 1.5% Match		
University will contribute	2% Salary = 3% Match		
	3% Salary = 3.5% Match		
	4%+ Salary = 4% Match		

Local 200 SEIU - Facilities

The University will contribute an amount equal to 8% of the employee's base annual salary. The employee is required to contribute at least 2% of their base annual salary. Employees age 52 or older that contribute at least an additional 1%, for a total of 3%, the University will contribute an additional 2% for a total of 10%.

Important Facts

- · You are not taxed on the amounts in your pre-tax and University-contributed accounts until they are distributed to you. After-tax (Roth) contributions are taxed at time of contribution and not at withdrawal.
- · You are 100% vested in your retirement plan accounts at all times.
- You determine how the contributions to your retirement plan accounts are invested by choosing among available investment options. You may reallocate funds in your account (subject to any restrictions particular to that fund) and also change the allocation of future contributions. Keep in mind that all investments have some degree of risk. You are responsible for your investment decisions.
- Your retirement plan accumulations are intended to provide you and your family with income in your
 retirement. The University's contributions are not available for disbursement until you separate employment
 with the University. Additionally, you may borrow, or withdraw under hardship provisions, a portion of your
 voluntary contributions subject to certain restrictions.
- If you should die before receiving the money in your accounts, payment will be made to your beneficiary(ies). Please be sure that your beneficiaries are up to date with the retirement vendor. If you are married and wish to name someone other than your spouse as your primary beneficiary for more than 50% of your benefit, your spouse will have to sign the spousal waiver on the designation form.



For additional information, including waiting period requirements and how to apply for these benefits, please visit the Colgate Employee Benefits page (https://www.colgate.edu/about/campus-services-and-resources/colgate-employee-benefits). Information can be found under Benefit Forms and Information and Academic and Professional Development Benefits.

Educational Benefits

Colgate Higher Education Grant Program

The University currently grants an amount up to one-half of Colgate's tuition for any eligible sons or daughters of an eligible employee, who are matriculated and attend an accredited college or university in pursuit of an initial undergraduate degree on at least a half-time basis. For the full list of eligibility requirements for this benefit, please review the Colgate Higher Education Program Policy.

Staff and Professional Development Funds

Funds are available through the Human Resources Department for Support and Technical Staff to provide assistance with attendance at off-campus conferences, workshops, or courses that enhance individual skills.

Professional development funds, budgeted by individual departments/ divisions, can be used for staff to attend conferences, for administrators' attendance at workshops, and for staff memberships in professional organizations. Staff should contact their supervisors for professional development funds.

Tuition-Free Courses at Colgate University

Employees in regular full- and regular part-time, benefit-eligible positions are eligible to take up to two Colgate courses per term without any tuition charge. A registration fee of \$20.00 per course is required.

Spouses or domestic partners of employees in regular full- and regular part time, benefit-eligible positions are also eligible to take up to two Colgate courses per term without any tuition charge.

Employees are also able to audit a Colgate course. Auditing a course is an informal arrangement made between the employee and the instructor of the course, with the permission of the employee's supervisor. The ability to audit a class is contingent upon space being available in the course.

Work-Related Courses

Employees holding continuing appointments and working regular schedules of half-time or more that are benefit eligible, will be eligible to take work-related courses. This benefit provides some reimbursement for tuition for undergraduate and graduate courses, which are related in a direct or general way to the employee's work and professional development. A "work-related" course is one in which the course content is of significant assistance to the employee in their present duties and responsibilities or in their professional development. Courses that are not directly work-related, but form part of a work-related degree program may also qualify under this benefit. Employees must complete three months of employment to be eligible for this benefit.

Additional Benefits

Benefit	Administrators, Staff Coaches and Language Interns	Faculty: Teaching, Library and Athletic	Technicians Support Staff & Campus Safety Officers	Local 200 SEIU- Facilities
Workers' Compensation	Insurance that provides partial income replacement and coverage of medical costs for illness or injury arising directly out of employment with Colgate University.			
	20 days per year for full-time employees	Teaching faculty - not applicable	The number of vacations days an employee can accrue is based on their date of hire.	
Vacation Days* (prorated for part- time employees)		Library & athletic faculty receive the same benefit as administrators, staff coaches and language interns.		
Holidays	13 1/2 holidays			
Sick Leave (prorated for part- time employees)	Provided based on New York State Regulations.		The amount of sick leave an employee can accrue is based on their date of hire.	
Funeral Leave	Employees are eligible for up to three days off for the death of an immediate f member.			mediate family
Housing Loan	Not applicable	Maximum of \$20,000. Some restrictions apply.	Not applicable	
Athletic Facilities	ies Employees may use the athletic facilities at no cost.			

For Assistance

Relph Benefit Advisors 1-800-836-0026 x7268

*These benefits may be subject to an eligibility waiting period.

Important Contact Information					
Many websites require registration to log in using information from your ID card and SSN					
Benefit	Insurance Provider	Website	Phone		
Medical	Excellus	www.excellusbcbs.com	800-499-1275		
Prescription	Optumrx	www.optumrx.com	800-356-3477		
Dental	Delta	www.deltadentalins.com	800-521-2651		
Vision	Guardian	www.guardiananytime.com	800-627-4200		
FSAs	Lifetime Benefit Solutions	www.lifetimebenefitsolutions.com	800-327-7130		
Short-Term Disability Insurance	Symetra	www.symetra.com	800-426-7784		
Long-Term Disability Insurance	Symetra	www.symetra.com	800-426-7784		
Term Life & AD&D Insurance (Employer Paid)	Symetra	www.symetra.com	800-426-7784		
Term Life Insurance (Voluntary)	Symetra	www.symetra.com	800-426-7784		
Retirement	TIAA	www.tiaa.org/public/tcm/colgate	1-800-842-2252		
Retirement	Fidelity Investments	www.fidelity.com/	1-800-343-3548		