HOBART AND WILLIAM SMITH



Hobart and William Smith

2027 Benefits Guide

This book is intended for informational purposes only. Please refer to the group contract for specific benefit plan details.

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

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

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Benefits Overview

HWS is proud to offer a comprehensive benefits package to all eligible full-time employees working at least 20 hours per week.

You may also cover eligible dependents when you elect coverage for yourself. This includes your legal spouse, and dependent children until age 26 for medical, dental, and vision, along with disabled dependents of any age.

HWS offers:

- Medical Insurance
- Dental Insurance
- Vision Insurance
- Life & Accidental Death & Dismemberment Insurance
- Flexible Spending Account
- Optional Life & AD&D Insurance
- Disability Benefits
- Voluntary Benefits

Eligibility

Consiliarium Group is your main point of contact for assistance in understanding and navigating your benefit plans.

Questions & Help:

1-844-890-7955 or info@consiliariumgroup.com

You are first eligible to enroll in coverage based on the dates in the chart below.

Benefit	When you are eligible to enroll
Medical, Dental, Vision	First of the month coinciding with or after date of hire
Flexible Spending Account	First of the month coinciding with or after date of hire
Life & AD&D, Optional Life	Date of hire
Long-Term Disability	Date of hire
Accident and Critical Illness	First of the month coinciding with or after date of hire

Open Enrollment is your one chance each year to review your coverages and make changes to your benefits. Elections made will remain until the next open enrollment unless you and your dependents experience a life event.

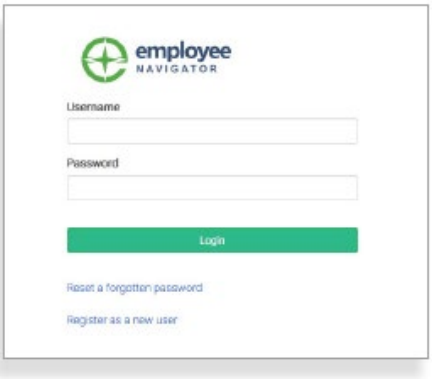
Life Events include:

- Marriage, divorce, legal separation or annulment
- Birth or adoption of a child
- A dependent becomes eligible or no longer qualifies for coverage
- Beginning or ending of a domestic partnership
- Your eligible dependent loses or gains health coverage elsewhere
- You become newly-eligible for Medicare

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Enrolling in Coverage

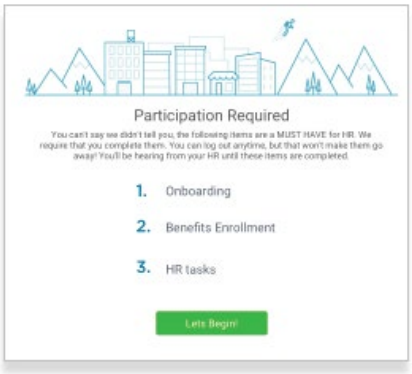
HWS uses Employee Navigator for enrolling in benefits this year. This is an active enrollment, so all benefit eligible employees will need to re-enroll in coverage. This is a passive enrollment, meaning benefit elections from the prior year will carry over unless you want to change coverage.



Step 1: Log In

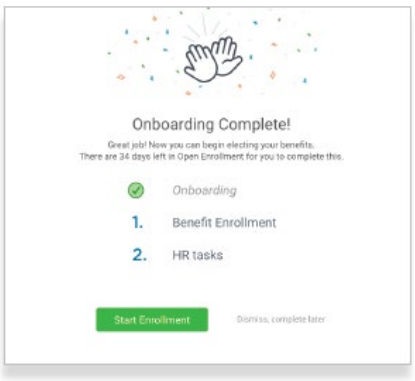
Go to www.employeenavigator.com and click Login

- Returning users: Log in with the username and password you selected.
    - Click **Reset a forgotten password** if necessary
- First time users: Click on your registration link in the email sent to you by your admin or **Register as a new user**. Create an account, and create your own username and password.



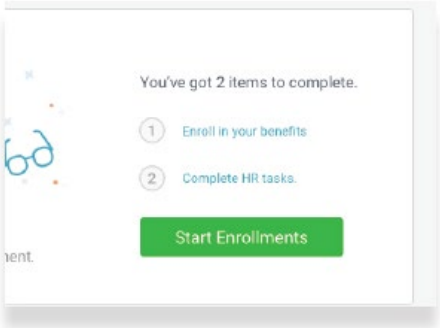
Step 2: Welcome!

After you login click **Let's Begin** to complete your required tasks.



Step 3: Onboarding (For first time users, if applicable)

Complete any assigned onboarding tasks before enrolling in your benefits. Once you've completed your tasks click **Start Enrollment** to begin your enrollments.



Step 4: Start Enrollments

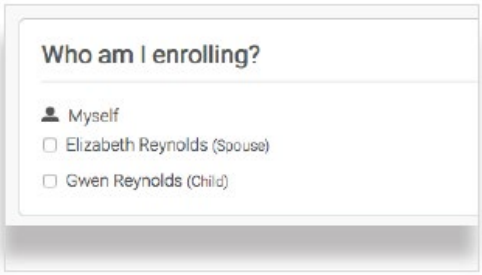
After clicking **Start Enrollments,** you'll need to complete some personal & dependent information before moving to your benefit elections.

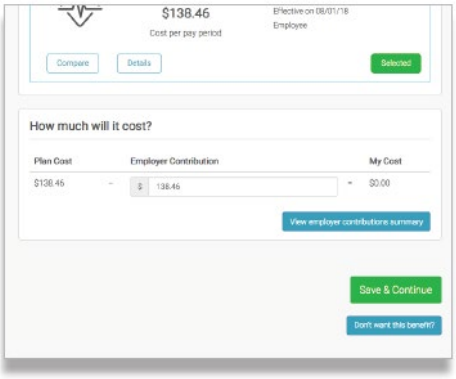
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Step 5: Benefit Elections

To enroll dependents in a benefit, click the checkbox next to the dependent's name under **Who am I enrolling?**

Below your dependents you can view your available plans and the cost per pay. To elect a benefit, click **Select Plan** underneath the plan cost.



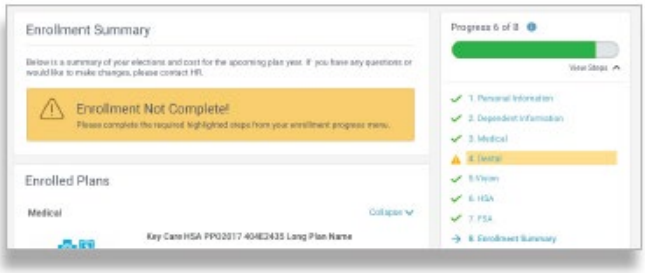


Click **Save & Continue** at the bottom of each screen to save your elections.

If you do not want a benefit, click **Don't want this benefit?** at the bottom of the screen and select a reason from the drop-down menu.

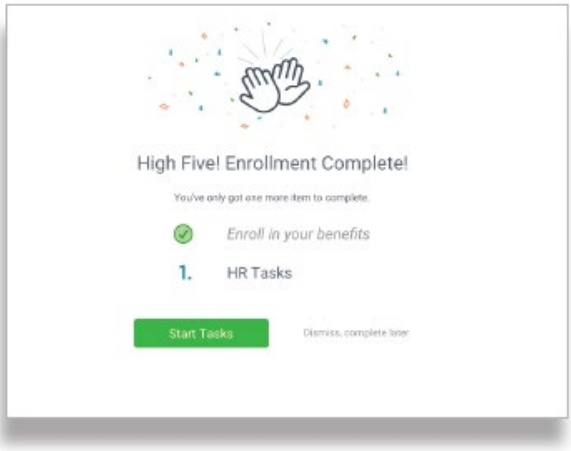
Step 6: Forms

If you have elected benefits that require a beneficiary designation, Primary Care Physician, or completion of an Evidence of Insurability form, you will be prompted to add in those details.



Step 7: Review & Confirm Elections

Review the benefits you selected on the enrollment summary page to make sure they are correct then click **Sign & Agree** to complete your enrollment. You can either print a summary of your elections for your records or login at any point during the year to view your summary online.



Step 8: HR Tasks (if applicable)

To complete any required HR tasks, click **Start Tasks**. If your HR department has not assigned any tasks, you're finished!



You can login to review your benefits 24/7

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Helpful Terms & Resources

Insurance benefits come with a lot of terminology, so we have highlighted below some terms that may be helpful for your understanding.

Deductible

The amount which the member is required to pay before the insurance begins sharing in expenses through copays or coinsurance.

Coinsurance

The percentage amount that a member is required to pay for a service, with the insurance covering the remaining percentage.

Out-of-Pocket Maximum

The maximum amount a member is responsible to pay in a plan year. Upon reaching this amount, all services are covered in full.

Formulary

A list of drugs your insurance plan covers. May include tier level coverage, along with any specific requirements for each drug.

Guarantee Issue

The amount of coverage that will be issued without medical questions or underwriting.

UCR (Usual, Customary, and Reasonable)

The amount paid for a service in a geographic area based on what providers usually charge for the same service.

In-Network / Preferred-Provider

Providers who have a contract with your insurance carrier, are considered in-network and will provide the lowest-cost options.

Balance Bill

When you use an out-of-network provider, they may bill you the difference between what they charge and the amount insurance will cover.

Embedded (Individual) Aggregation

Deductible or OOPM coverage where each individual enrolled on a family plan cannot exceed the individual limit.

Aggregate (Family) Aggregation

Deductible or OOPM coverage where there is no individual limit within a family plan. The total family limit can be met by any combination or singular member.

Referral / Pre-Authorization

Some providers may require a referral from another doctor. These may include – but are not limited to – cardiology, psychiatry, orthopedic surgeons, imaging, etc.

Evidence of Insurability

A statement or proof of your health, finances, or job which helps the insurer decide if you are an acceptable risk to insure.

Waiting Period

The length of time an individual must wait to become eligible for benefits after coverage has begun.

Own Occupation Period

The period of time during which the test of disability is whether the insured has the ability to perform the material duties of their own occupation.

Any Occupation Period is the period of time following the Own Occupation Period during which the test of disability is whether the insured has the ability to perform the material duties of any occupation for which they are reasonably suited.

Elimination Period

The period of time form the day a disability begins until an insured is eligible to receive benefits.

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Make Preventive Care A Priority

Preventive Care Services are fully covered, even with a high deductible health plan. Take advantage of preventive care available to you and your family to ensure you identify concerns that can be treated early.

Below are a list of preventive services available with your health insurance.

What	Who + When	Why
Annual Routine Checkup	**Everyone** Once a year	This once-a-year visit is a great opportunity to touch base with your doctor. Adult males ages 55-69 should discuss if a prostate screening is necessary.
Well-Child Visit	**Infant** – 6 visits your baby's first year **Toddler** – 15, 18, 24, and 30 months **Age 3 and older** - Annually	Regular well-child visits allow your doctor to check your child's growth and development, and stay on track with recommended immunizations.
Annual OB/GYN Visit	**Females Ages 18-65** (younger if sexually active) Once a year	This once a year visit with your doctor is a great opportunity to touch base and share any concerns.
Autism Screening	**18 and 24 months**	Typically performed during a well-child visit, your doctor will assess your child's behavior or any early signs of developmental challenges.
Blood Pressure Screening	**Ages 3+** Once a year	Getting your blood pressure checked can give your doctor important information about your risk for stroke and heart attack.
Cervical Cancer Screening	**Females Ages 21-65** Every 3-5 years (talk to your doctor about which options are best for you)	Regular Pap and HPV testing based on your health history and before you have symptoms can help find abnormalities before they turn into cancer.
Cholesterol Screening	**Everyone** Every 4-6 years, more often if you have family history or other risk factors	Too much cholesterol makes it harder for blood to flow through your body. Lower your risk by eating healthier and exercising.
Colorectal Cancer Screening	**Ages 45-75** Regular testing; earlier if at higher risk	Special tests can detect colorectal cancer early, which makes it easier to treat.
Diabetes (Type 2) Screening	**Ages 35-79 and overweight/obese** Once a year	There are lots of ways to prevent and manage diabetes if you're aware of your risk.
Hearing Screening	**Newborn** **Ages 11-14 years** Once **Ages 15-18 yea**rs Once **Ages 18-21 years** Once	All babies receive a hearing screening in the hospital. Early screenings can help prevent delays in speech and language development caused by hearing problems.
HIV Screening	**Age 15-65** At least once in lifetime; once a year if high risk	The only way to know you don't have HIV is to get tested.
Immunization Vaccines	**Everyone** As directed by your doctor	Vaccinations aren't just for kids. Vaccines save lives, even for otherwise healthy people.
Lead Screening	**12 and 24 months** New York State requirement Risk assessment are completed at each visit from 6m to 6 yrs	Too much lead in the blood of small children and pregnant women can result in serious developmental issues.
Lung Cancer Screening	**Everyone, Ages 50-80 with a history of heavy smoking** Once a year	Adults are at high risk for lung cancer if they're heavy smokers (30 year history), currently smoke, or have quit in the past 15 years.
Mammography Screening	**Females Ages 50+** Every 1-2 years	Screening may result in earlier detection and possible cure. Women younger than 50 and with a family history, or older than age 75 should talk with their health care provider.
Obesity Screening and Counseling	**Everyone** As directed by your doctor	Maintaining a healthy weight can give you more energy and reduce your risk for serious health conditions.
Oral Health Risk Assessment	**6 and 9 months** **1-4 years** **5-10 years**	Your doctor can determine if your child is at a high risk of tooth decay and/or oral disease and refer you to a dentist early if necessary.
Osteoporosis Screening	**Females Age 65+** (postmenopausal)	A bone measurement screening is recommended. Risk increases with age.
Vision Screening	**Age 3, 4, 5, 6, 8, 10, 12, and 15 years**	Even if your child doesn't show any symptoms of eye problems, regular vision checkups are essential.

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Medical Insurance

Excellus

Hobart and William Smith Colleges offers employees one (1) medical plan option administered by Excellus BCBS.

Below is a summary outline of coverage.

	Excellus BluePPO	
	In-Network	**Out-of-Network**
Annual Deductible	Individual: $750 Family: $2,250	Individual: $1,000 Family: $3,000
Medical Annual Out-of-Pocket Maximum	Individual: $5,000 Family: $10,000	Individual: $5,500 Family: $11,000
Pharmacy Annual Out-of-Pocket Maximum	Individual: $2,400 Family: $4,800	N/A
Coinsurance	20%	40%
Doctor's Office Visits		
Primary Care Physicians (PCP)	$30 Copay	20% Coinsurance, subj. to ded.
Specialist	$50 Copay	20% Coinsurance, subj. to ded.
Preventive Health Care Services (routine exams, x-rays / tests, adult immunizations, well baby care and mammograms)	Covered in Full	40% Coinsurance, subj. to ded.
Physician Office Visits		
Diagnostic X-Rays	$50 Copay	40% Coinsurance, subj. to ded.
Diagnostic Laboratory and Pathology	Covered in Full	40% Coinsurance, subj. to ded.
Allergy Test	PCP: $30 Copay Specialist: $50 Copay	40% Coinsurance, subj. to ded.
Allergy Treatment Including Serum	Covered in Full	40% Coinsurance, subj. to ded.
Chemotherapy	$30 Copay	40% Coinsurance, subj. to ded.
Radiation Therapy	$30 Copay	40% Coinsurance, subj. to ded.
Inpatient Hospital Services		
Hospital Services	20% Coinsurance, subj. to ded.	40% Coinsurance, subj. to ded.
Mental Health Care	20% Coinsurance, subj. to ded.	40% Coinsurance, subj. to ded.
Substance Use Detoxification	20% Coinsurance, subj. to ded.	40% Coinsurance, subj. to ded.
Skilled Nursing Facility (60-day limit)	20% Coinsurance, subj. to ded.	40% Coinsurance, subj. to ded.
Physical Rehab	Not Covered	40% Coinsurance, subj. to ded.
Anesthesia	20% Coinsurance, subj. to ded.	40% Coinsurance, subj. to ded.
Maternity Services		
Prenatal Care	Covered in Full	40% Coinsurance, subj. to ded.
Hospital Care for Mom (including delivery)	20% Coinsurance, subj. to ded.	40% Coinsurance, subj. to ded.

Consiliarium

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	Excellus BluePPO	
	In-Network	**Out-of-Network**
Outpatient Facility Services		
Freestanding Ambulatory Surgical Care	20% Coinsurance, subj. to ded.	40% Coinsurance, subj. to ded.
Diagnostic X-Rays	$50 Copay	40% Coinsurance, subj. to ded.
Diagnostic Laboratory and Pathology	Covered in Full	40% Coinsurance, subj. to ded.
Chemotherapy	$30 Copay	40% Coinsurance, subj. to ded.
Radiation Therapy	$30 Copay	40% Coinsurance, subj. to ded.
Mental Health Care	$30 Copay	40% Coinsurance, subj. to ded.
Substance Use Care	$30 Copay	40% Coinsurance, subj. to ded.
Emergency Care		
Emergency Room Visit	$300 Copay	$300 Copay
Ambulance Service	$100 Copay	$100 Copay
Urgent Care Visit	$30 Copay	40% Coinsurance, subj. to ded.
Prescription Drug Coverage		
Retail – Generic Drug	$5 Copay	Not Covered
Retail – Preferred Brand Drug	$45 Copay	
Retail – Non-Preferred Brand Drug	$90 Copay	
Retail - Specialty	$200 Copay	
Diabetic Drugs & Insulin	$30 Copay	40% Coinsurance, subj. to ded.
Other Services		
Home Health Care	Covered in Full	25% Coinsurance, subj. to $50 ded.
Hospice Care	Covered in Full	40% Coinsurance, subj. to ded.
Outpatient Therapy (60-day limit)	Covered in Full	40% Coinsurance, subj. to ded.
Durable Medical Equipment	20% Coinsurance, subj. to ded.	40% Coinsurance, subj. to ded.
Chiropractic	$30 Copay	40% Coinsurance, subj. to ded.
Acupuncture	Not Covered	Not Covered
Telemedicine Program	Covered in Full	Not Covered
Dependent Coverage	To Age 26	
Domestic Partner Coverage	Covered	

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2027 Employee Premium Cost

Faculty Cost Share

Excellus Blue PPO	Bi-Weekly Deductions
Employee Only	$39.46
Employee & Spouse / DP	$329.87
Employee & Child(ren)	$293.57
Employee & Family	$467.17
Family with Spouse / DP Employed at HWS	$311.45

Hourly Cost Share

Excellus Blue PPO	Bi-Weekly Deductions
Single	$39.46
Employee & Spouse	$82.47
Employee & Child(ren)	$73.39
Employee + Family	$116.80
Family with Spouse / DP Employed at HWS	$116.80

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Pharmacy Benefit Manager

As a member of HWS' Health Plan with Excellus, you will automatically be enrolled in Prescription Drug Coverage with TrueScripts.

TrueScripts will be the Pharmacy Benefits Manage for HWS. TrueScripts has a dedicated in-hours clinical team made up of nurses, pharmacists, technicians, and care specialists who are dedicated to ensuring that you are your family are getting the right medications at the best price.

Be sure to register for your **TrueScripts** member portal at **https://memberportal.truescripts.com/**.

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Maximize Your Savings

By Considering These Best Practices

90 Day Supply / Retail Pharmacy: To help cut costs and increase convenience to you, TrueScripts allows 90-day prescriptions to be filled at retail pharmacies nationwide. To obtain a 90-day prescription, have your prescribing provider call into your pharmacy of choice with the updated prescription; an office visit is typically not required.

Generic Medications: Generic medications provide quality, cost-effective alternatives to brand medications. Generic equivalents work the same way in the body and have the same ingredients, strength, dosage, and form as their brand-name counterparts. Unless otherwise directed by your doctor, it is a good idea to use generic equivalents when possible.

Over-the-Counter (OTC) Products: Some brand-name prescription drugs have OTC alternatives that are therapeutically identical and are likely a much lower cost option for treating your condition. When talking to your prescriber, ask if an OTC product is available. TrueScripts will also do our part to identify situations where OTC coverage will benefit both you and your health plan.

Coupons & Copay Cards: Several websites, such as goodrx.com, offer large databases of savings opportunities. Please have your pharmacy check pricing through all sources before checking out. If any of those sources provide greater savings, please select that option and submit your receipt(s) via the Electronic Drug Reimbursement form found at www.truescripts.com/members. The amount paid will be applied to your deductible and/or out of pocket, based upon plan structure.

Manufacturer websites also list additional copay assistance programs on their websites. Keep in mind that only copay cards can be used *in addition to* your TrueScripts coverage.

Shop Around: Drug prices can vary significantly by pharmacy location. Use our Drug Price Lookup tool to compare drug prices at more than 70,000 pharmacies nationwide. Please note that prices are subject to change without notice at any time.

Take Medications as Directed: Not taking your medication as directed by your doctor can lead to health complications. This includes missing doses, ending prescribed medicines early, or not taking them at all. If you are unable to afford your medication, please speak freely with your physician to discuss other options.

TrueScripts™ Amazing Care

We are Experts in Prescription Benefits.
Questions? Please call and speak to a care specialist who will answer your questions. **844-257-1955**

Constiarium

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KEEPING YOU CONNECTED

Member Portal

- Real-Time Drug Price Lookup
- Text & Live Chat
- Pharmacy Locator
- Personal Plan Information & Claims History
- Additional Member Forms & Resources

Scan above
or
Enter below

memberportal.truescripts.com Get Started!

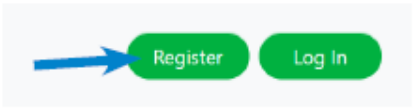


TrueScripts Members, follow these instructions to register:

- Enter the URL above into your web browser or click "Get Started" if viewing this document electronically. You can also scan the QR code from your mobile device to begin the registration process.

Note: You will not be able to register until on or after your effective date with TrueScripts.

- On the Member Portal landing page, choose 'Register' from the top navigation bar.



- Enter your personal information to complete the registration process.

Note that you will need to have your Member ID card readily available

- Check your email to verify and complete your account set-up.
- Once inside the portal, quickly access important information and helpful resources from your Member Dashboard. *Pro Tip: The Drug Price Lookup tool will help you find the best price for your medications!*

Members can register beginning 6.1.26



If you have any questions along the way, please call us at 844-257-1955.
Our Member Care Advocates are prepared to provide you with *Amazing Care!*

We are *Your* Experts in Prescription Benefits

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New International Program: Savings and First Class Care

TrueScripts is thrilled to offer our fully integrated **Distinct Rx Advantage - International**. Offering your members the opportunity to access affordable medications from countries such as Canada, New Zealand, Australia, and the UK.

Specialty and brand-name medications in the U.S. can be expensive and put a strain on budgets. Our new international sourcing (or personal importation) offering expands our Specialty Care solutions to help members get the lowest possible net cost on their medications.

Why Choose Distinct Rx Advantage - International?

Cost-Effective Solutions:

Members can save significantly on specialty and brand-name medications by sourcing directly from licensed International pharmacies. With the same medications available at a fraction of U.S. prices, this program offers a powerful way to control prescription costs without sacrificing quality.

Uncompromised Quality and Safety:

Rigorous standards include continuous quality assurance monitoring and temperature-controlled shipping. Every prescription is reviewed by licensed pharmacists to ensure clinical relevance, safety, and efficacy. Physicians review each prescription with patient care as the priority—not per-script fees.

Seamless Experience:

Integrated claims processing and billing, combined with live claims submission and real-time tracking, make the process effortless for both clients and members. The pharmacy management system includes comprehensive documentation, ensuring transparency and trust. TrueScripts regularly visits these pharmacies to ensure compliance and quality.

Maximizing Savings on Prescription Benefits

TrueScripts™ Amazing Care

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Distinct Rx Advantage - International:

Savings and First-Class Care



Easy Enrollment | Reliable Delivery | Amazing Care

1. **Easy Enrollment:** Current plan members will have their medications reviewed proactively to identify potential savings. If eligible, they'll receive simple instructions to enroll. Alternatively, members can enroll directly by calling our dedicated support line.
2. **Reliable Delivery:** Medications are dispensed from International accredited pharmacies using best-in-class cold chain shipping for temperature-sensitive drugs, ensuring what arrives at their doorstep is exactly what they need, as if they had picked it up from their local pharmacy.
3. **Amazing Care:** Our partnerships ensure that all processes, from procurement to delivery, meet the highest standards of quality, safety, and compliance.

Unlock Savings Today:

Join the ranks of satisfied clients and their members who are already experiencing the benefits of international sourcing.

Contact your representative to learn how **Distinct Rx Advantage - International** can help you achieve unparalleled cost savings and superior patient care for both clients and members.

Maximizing Savings on Prescription Benefits

TrueScripts™ Amazing Care

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Virtual Care

We understand that absence from work due to both office visits and illnesses alike impacts your clients' business productivity and, ultimately, their profitability. But it's as important as ever to get the necessary urgent care and behavioral health care when it's needed.

If their primary doctor isn't available, telemedicine may be an option for them. Excellus BCBS provides 24/7/365 access to virtual urgent care, physical therapy, dermatology and behavioral health care via our partners **MD Live® virtual care** and **Vori Health.**

Our virtual care program helps:



Reduce costs, while increasing employee access to high-quality health care



Decrease absenteeism and improve productivity by reducing visit times



Increase member peace of mind by providing care in the comfort and safety of their home

MD Live: Urgent Care ($0, before deductible)

If a primary care doctor is not available or instead of going to the ER/urgent care center, your employees can use virtual care through MD Live, which is covered in full for all members.

When to use virtual Urgent Care:

- Allergies
- Asthma
- Cold and Flu
- Constipation
- Diarrhea
- Joint Aches
- Nausea
- Pink Eye
- Rashes
- And more

Vori Health: Physical Therapy ($0, before deductible)

If an employees primary doctor recommends physical therapy to decrease pain, virtual physical therapy might be a great options. Our partnership with Vori Health works by designing a personalized treatment plan so they can help get back to living their life.

When to use virtual Physical Therapy:

- Back aches
- Joint pain
- Knee injuries
- Muscle strains

MD Live: Dermatology (Specialist cost share, before deductible)

Employees can get a diagnosis, treatment, and prescription (as needed) from a board certified dermatologist for more than 3,000 skin, hair, and nail conditions in an average turnaround time of 24 hours using MD Live.

When to use virtual Dermatology Services

- Acne
- Alopecia (Hair Loss)
- Cold Sores
- Dermatitis
- Eczema
- Fungal Skin Infections
- Psoriasis
- Rosacea
- Suspicious Spots & Moles
- Warts
- And more

Don't wait until you need it. There are four easy ways to activate telemedicine today.

WEB - Register/Log in at ExcellusBCBS.com/Member

APP - Download the MDLIVE app

TEXT - EXCELLUS to 635483 (Message and data rates may apply.)

VOICE - Call 1-866-692-5045

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Online Account

Making the most of your plan shouldn't be complicated. When you sign up for an Excellus BlueCross BlueShield online member account, you get instant access to a variety of tools and other resources to make living healthy a little easier.

It's your plan. Get more out of it online.

When you sign up for an Excellus BlueCross BlueShield online member account, you get instant access to all your benefits, tools, member-only resources and more.



Member Card(s)
View or order



Claims
Submit, view and download



Find Providers
Find in-network doctors or specialists



Costs and Spending
Estimate medical costs, track deductibles, and view out-of-pocket spending



Benefits and Coverage
View a summary



Get Rewards
Access available spending and rewards programs



Go Paperless

Receive available documents electronically.

Register or log in today

Visit ExcellusBCBS.com

Scan the QR code with your smartphone camera

Take your plan with you 24/7

Download the app!

5 easy steps

It's easy to get started with an online member account.

1. **Have your member card handy**

2. **Visit our website or download our app**

3. **Complete registration**

4. **Choose username and password**

5. **Verify your email**

(Tip: an email will be sent to you during registration)

This book is intended for informational purposes only. Please refer to the group contract for specific benefit plan details.

Blue Card Network

With access to the largest provider network in the world, your Excellus BlueCross BlueShield plan offers a world of options. Our members have access to medical assistance services, doctors, and hospitals in all 50 states and more than 200 countries and territories around the world. Whether you live, work or travel across the country or across the globe, you can have confidence knowing that quality care can be accessed wherever and whenever you need it. And in most cases, you can take advantage of savings the local BCBS company has negotiated with its doctors and hospitals.

BlueCard® for Coverage in the United States

- Always carry your current member ID card.
- Visit **ExcellusBCBS.com/FindaDoctor** or download the Excellus **BCBS mobile app** to find a provider or medical facility near you. You'll be able to narrow your search by ZIP code, county, specialty, or even doctor's name. For personalized results based on your plan, sign into the tool as a member.
- If you're a PPO member, always use a BlueCard PPO doctor or hospital to ensure you receive the highest level of benefits.
- Call us for precertification or prior authorization, if necessary. Refer to the phone number on the back of your member card.
- When you arrive at the participating doctor's office or hospital, show the provider your member card so they can identify your benefit level.

After you receive care in the U.S., you should:

1. Not have to complete any claim forms.
2. Not have to pay upfront for medical services, except for the out-of-pocket expenses (non-covered services, deductible, copayment and coinsurance) you normally pay.
3. Receive an explanation of benefits from Excellus BCBS.

Blue Cross Blue Shield Global® Core for International Coverage

- Always carry your current member ID card.
- Before you travel, contact Excellus BCBS for coverage details. Coverage outside the United States may be different.
- If you need medical assistance, call the Blue Cross Blue Shield Global Core Service Center (see number below) or use the Global Core mobile app to locate providers. An assistance coordinator, in conjunction with a medical professional, can arrange a physician appointment or hospitalization, if necessary. **If it's an emergency, go directly to the nearest hospital.**

Inpatient claims: Call the Blue Cross Blue Shield Global Core Service Center if you need inpatient care to arrange direct billing.

- In most cases, you should not need to pay upfront for inpatient care at Blue Cross Blue Shield Global Core hospitals except for the out-of-pocket expenses (non-covered services, deductible, copayment and coinsurance) you normally pay. The hospital should submit the claim on your behalf.
- In addition to contacting Blue Cross Blue Shield Global Core, call Excellus BCBS for precertification or preauthorization. Refer to the phone number on the back of your member card.

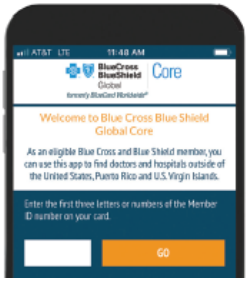
Professional claims: You may need to pay upfront for outpatient and doctor care, or inpatient care not arranged through the Service Center. Visit **BCBSGlobalCore.com/claims** to file an eClaim or to download a blank international claim form.

Contact Blue Cross Blue Shield Global Core

If you have questions about Blue Cross Blue Shield Global Core or need medical care while abroad, call **+1.800.810.BLUE (2583)** or collect at **+1.804.673.1177.**

The Global Core app allows you to:

- Search providers for medical, dental, or mental health care **and map them using GPS technology.**
- Find a medication's **availability, generic name, and local brand name**.
- Access embassy information including location, contact, and GPS technology.
- Translate medical terms and phrases **for many symptoms and situations; use the audio feature to play the translation**.
- File International Claims conveniently and securely.



This book is intended for informational purposes only. Please refer to the group contract for specific benefit plan details.

Excellus | Everybody Benefits | personify HEALTH

ThriveWell℠ in partnership with Personify Health

Wellbeing for all, all in one place

Introducing ThriveWell, a digital home base for your health and wellbeing. Our partnership with Personify Health will give you the tools and support you need to make small, everyday changes to your wellbeing that are focused on the areas you want to improve the most. You'll build healthy habits, have fun with friends and experience the lifelong rewards of better health and wellbeing.

Within ThriveWell, you can:



Connect a fitness tracker so they can log activity and watch for small improvements over time.



Set their interests by choosing to work on areas that matter the most to them, like eating habits, sleep, physical activity, relationships, or finances.



See a clear picture of their health by completing the online Health Check, a certified health risk assessment.



Add friends and family, connecting with up to 10 others to help encourage and motivate one another.



Rally coworkers for the latest company step challenge! Or gather a small group of coworkers or friends, and challenge one another to start a new healthy habit.



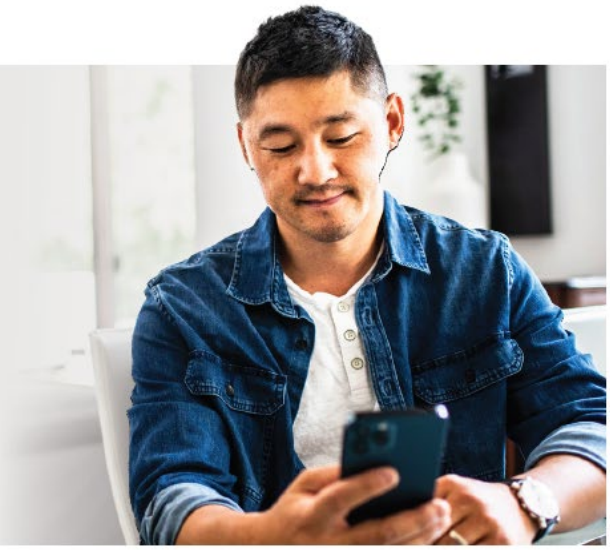
Use Journeys® digital coaching to make simple changes to their health, one small step at a time.

ThriveWell is now included with your health plan. Log into your member account to get started. Member.ExcellusBCBS.com

This book is intended for informational purposes only. Please refer to the group contract for specific benefit plan details.

Manage your overall wellbeing with one simple tool

Headspace, integrated with Personify Health, is the preferred mindfulness and meditation partner of Excellus BlueCross BlueShield. Now, we're proud to include it with your plan.



Headspace for work and home

The power to create lasting change in your happiness, mindfulness, and productivity is officially right in your hands. With the Headspace science-based app, you get hundreds of meditations and exercises for stress, focus, sleep, and movement – and our partnership with Personify Health provides you curated access to it all. Headspace will help you gain greater insight into your health and wellbeing than ever before, all while building healthy habits along the way.

- Learn to manage feelings and thoughts with everyday mindfulness
- Sleep better with sleepcasts, music, and other unique audio experiences
- Get moving with exercises to strengthen your mental and physical wellbeing
- Boost focus with music and meditations
- Start your morning right with inspiring stories

Reduced stress

32%

less stress after 30 days of Headspace[1]

Improved focus

22%

less mind-wandering after one session of Headspace[2]

Decreased depression and anxiety symptoms

29%

decrease in depressive symptoms after eight weeks of Headspace[3]

19%

decrease in anxiety symptoms after eight weeks of Headspace[3]

Headspace is included with your health plan. Log in to your member account to get started. Member.ExcellusBCBS.com

Excellus BlueCross BlueShield | Everybody Benefits | personify HEALTH

This book is intended for informational purposes only. Please refer to the group contract for specific benefit plan details.

Nourishing meals delivered right to your employees' doors

Excellus | Everybody Benefits®



MOM'S MEALS®

Medical recovery can take a lot out of a person. In the days and weeks following a surgery or hospital stay, meeting dietary needs is critical to getting back on the road to wellbeing. However, shopping for and preparing meals is often difficult during this time of healing.

Excellus BlueCross BlueShield helps to support the recovery process by offering to have healthy and balanced meals delivered to your employees homes through our vendor, **Mom's Meals®[1]** – a national provider of fully prepared, refrigerated home-delivered meals.

About the Mom's Meals benefit:

Program menus offer meal options that taste great and can be tailored to meet your nutritional needs, such as lower-sodium, diabetes-friendly, and heart-friendly diets.

Employees can receive up to two home-delivered meals per day for seven days following a hospital observation, or an inpatient acute, an inpatient maternity, or a skilled nursing facility stay.

There is no cost to members and no limit on the number of times the benefit can be used during the calendar year.

Meals can be received up to 30 days after discharge.

This book is intended for informational purposes only. Please refer to the group contract for specific benefit plan details.

Excellus BlueCross BlueShield | Blue365

A nonprofit independent licensee of the Blue Cross Blue Shield Association



HEALTHY LIVING IS JUST A DEAL AWAY

Join Blue365 and start saving today!

As an Excellus BlueCross BlueShield member, you have free access to the industry's best health and wellness discounts through Blue365.

Blue365 helps you stay healthy for less with exclusive discounts including:

- Discounted gym memberships with access to over 10,000 gyms nationwide from Tivity Fitness Your Way and Gympass
- Wearable devices from Fitbit, Polar, Garmin and more
- Healthy eating discounts (including Jenny Craig and Nutrisystem)
- LASIK eye surgery, hearing aids and much more

Getting Started

Joining Blue365 and redeeming our deals is easy as 1-2-3. Get started with your free registration at Blue365Deals.com/register

1. **Click the Join or Check Eligibility Button**
   You'll find these at the middle and top right of the Blue365 home page at Blue365Deals.com
2. **Enter Your BCBS Member Information**
   To check your eligibility, simply enter the first 3 characters in your member ID card.
3. **Complete Your Registration**
   Enter your personal information, accept our Terms and you are ready to enjoy our deals!

REGISTER NOW

Consiliarium

This book is intended for informational purposes only. Please refer to the group contract for specific benefit plan details.

BEST IN INDUSTRY DISCOUNTS
FROM TOP BRANDS

FITNESS

fitbit
GARMIN
fitness your way
GymNetwork 360
Heart Rate MONITORS USA
fitboombah
Gympass
BURNALONG
INNOVA DISC GOLF
the Wearables Store
ECHELON
Leader
RUGGED MANIAC OBSTACLE RACE SERIES
WITHINGS
incentaHEALTH
LIVEKICK
Adventure Cycling Association
fyt

APPAREL & FOOTWEAR

Reebok
SKECHERS
Moosejaw

HEARING & VISION

GLASSES.COM
contactsdirect
DAVIS VISION EYECARE REFRAMED
TruHearing
American HEARING BENEFITS
LasikPlus Imagine your life in focus
Beltone
Crookies
eyeMed
HearUSA
Jonathan Paul

TRAVEL

Walt Disney World
Fairmont
Hotels.com
Zeal TRIPS
Budget
AVIS

HOME & FAMILY

InNite HEALTH
Petplan pet insurance
Quicken Loans Mortgage Insiders Program
CryoCell INTERNATIONAL
wishlife
Petmate
chewy
GradFin
VOUS VITAMIN
guaranteed Rate
PHILIPS AVENT
HEARST

PERSONAL CARE

eMindful
MOLECULAR FITNESS
PHILIPS sonicare
STICKYJMEDICAL The home of medical ID jewelry.
dentalsolutions
MEDLINE
Medisafe
beautystoredepot.com
BREVENA
carezone

NUTRITION

Nutrisystem
sunbasket
HUNGRY HARVEST
Prevention
InsideTracker
jenny CRAIG
Creative Cajun Cooking
wisely well
KIND
EAT FIT GO
Farmbox DIRECT
Smoothie BOX
profile SANFORD
MARY RUTH'S

*Offers are subject to change

This book is intended for informational purposes only. Please refer to the group contract for specific benefit plan details.

Flexible Spending Account (FSA)

Administered by Lifetime Benefit Solutions

Healthcare Flexible Spending Account

A medical FSA can be used to pay for any qualified medical expenses not paid by your insurance. This includes copays, deductibles, and coinsurance, as well as dental and vision services. An FSA allows you to set aside money on a pre-tax basis. Any unused funds are forfeited at the end of each plan year.

Healthcare FSA Funding Limit for 2026:	**$3,400 per year**
2027 limits have not been released	

Dependent Care Flexible Spending Account

A Dependent Care FSA (DCFSA) is a pre-tax benefit account used to pay for eligible dependent care services. To be eligible for this account, care must be for dependents under age 13, or an adult dependent incapable of self-care. This care must enable you (and your spouse, if married) to work, look for work, or attend school full-time.

Eligible Expenses

- Child Care
- Nursey School
- Before / After School Care
- Adult Care
- In-Home Dependent Care

How it Works

- At the beginning of the plan year, you will make an annual election of up to $7,500
- Your annual election will be taken before tax throughout the year based on payroll
- You will submit claims to be reimbursed for dependent care expenses
- Claims will not be paid until the service has been provided
- Claims must be submitted within the designated time period for your plan

This book is intended for informational purposes only. Please refer to the group contract for specific benefit plan details.

Enroll in an FSA today

An FSA is a special account you can use to put money aside pre-tax for certain out-of-pocket health care or dependent care costs. It's a smart and simple way to prepare for unexpected expenses and increase your spendable income.

An FSA saves you even more money by reducing your taxable income. With an FSA, your contributions are taken out before taxes, then taxes are calculated on the lower amount that remains.

Types of FSAs

Medical

As health care costs continue to rise, you can stay ahead by using this account to pay for qualified medical expenses not reimbursed by insurance. This includes everyday out-of-pocket expenses such as copays, coinsurance, prescription drugs, orthodontics, vision expenses, hearing aids, dental services, eligible over-the-counter (OTC) items and more.

Dependent Care ($7,500 maximum)

Have kids in day care or other family members who depend on you? Plan ahead for ongoing expenses for dependent children and adults.

Limited Purpose

This FSA type focuses on helping you cover dental and vision expenses for you and your family. It can be used together with a Health Savings Account – another type of tax-advantaged benefit plan.

Estimate your expenses

You can maximize your FSA account using this helpful planning tool. You may also use the FSA calculator on our website at lifetimebenefitsolutions.com/fsa-calculator. Some common items to consider are listed in the chart below:

Medical FSA Account	Annual Expense
Deductibles	$
Copays	$
Dental Expenses Not Covered by Insurance	$
Orthodontia	$
Vision Expenses (Exams, Glasses, Lenses)	$
Hearing Expenses (Exams, Hearing Aids)	$
Prescription Drugs	$
Eligible Over-the-Counter Items	$
Diabetic Supplies	$
Therapy (Physical Therapy, Speech, Chiro)	$
Medical Mileage	$
Other	$
Total Estimated Health Care Expenses	$
Dependent Care Account	**Annual Expense**
Payment to Dependent Care Facility	$
Payment to Dependent Care Individual	$
Payment to Adult Care Provider	$
Total Estimated Dependent Care Expenses	$
Total Health Care PLUS Dependent Care	$

Plan ahead for your FSA!

Planning ahead is important when signing up for your company's FSA plans. Understanding the benefits offered is critical.

Read your Summary Plan Description (SPD) carefully to understand the specific terms of your plan. The plan document and SPD govern your rights and benefits under each plan and are available through your employer.

This book is intended for informational purposes only. Please refer to the group contract for specific benefit plan details.

Filing a claim

Submit your claims online 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.

Claims deadlines apply. Be sure to carefully read your Summary Plan Description to understand the terms and deadlines associated with your plan.



Customer service

Most of your questions can be answered by visiting the website. You can also call 1-800-327-7130 and utilize our automated interactive voice response system to check your balance, the status of a claim or contributions when it's most convenient for you. Or, if you prefer to speak with a customer service representative, you can call that same number 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 our Customer Service department at **lbs.customerservice@lifetimebenefitsolutions.com**.

Mobile app

Manage your spending accounts with ease using the LBS Health Spending App. Get secure, 24/7 mobile access to your Health Reimbursement Account—track balances, file claims, and stay updated anytime, anywhere.

- Easy, secure access to your Health Reimbursement Account
- Current balance and transaction details
- Account activity and text alerts
- Claim filing by uploading receipt photos
- Quick access to customer service via phone or email

Scan to download the LBS Health Spending App to your device.

Download on the App Store

GET IT ON Google Play

Web access

Access your account anytime at **LifetimeBenefitSolutions.com** to:

- Submit claims for reimbursement
- View claim history
- Sign up for Direct Deposit
- Check your balance
- Use tools like the expense calculator and eligible expense listing
- Access forms like Direct Deposit, Certification of Medical Necessity, and Reimbursement Requests
- Enter your email for important Plan updates

Follow these instructions to access the LBS online member portal.

1. Visit **LifetimeBenefitSolutions.com**, click on the **"Login"** drop down and choose **"Member."**
2. Choose **"Spending Account Login"** to be taken to the Consumer Portal.
3. Once you are on the login page you can begin the New User Registration process by clicking on **"Get Started"** in the New User section.

This book is intended for informational purposes only. Please refer to the group contract for specific benefit plan details.

Dental Insurance

Below is a summary outline of coverage for the dental plan offered to eligible employees. HWS shares a portion of the cost of premium.

	Low Plan	High Plan
Annual Deductible	Individual: $50 – 2 Per Family	Individual: $50 3 Per Family
Calendar Year Maximum	$1,500 per person	
Preventive Dental Services (cleanings, exams, x-rays)	Covered 100% - Deductible Waived	
Basic Dental Services (fillings, root canals, Perio Surgery)	Covered 50% After Deductible	Covered 80% After Deductible
Major Dental Services (crowns, inlays, onlays, bridges, dentures)	No Coverage	Covered 50% After Deductible
Orthodontia Services – to Age 19	No Coverage	Covered 50% After Deductible
Orthodontia Lifetime Maximum – to Age 19	No Coverage	$1,000
Maximum Rollover	Not Applicable	Yes
Dependent Age Limits	26	



Employee Contributions for Dental Plan

Benefit Plan	Low Plan Bi-Weekly Deduction	High Plan Bi-Weekly Deduction
Employee	$4.11	$10.74
Two Person	$9.35	$24.46
Family	$14.36	$35.71

This book is intended for informational purposes only. Please refer to the group contract for specific benefit plan details.

Vision Insurance

Below is a summary outline of coverage for the vision plan offered to eligible employees. HWS shares a portion of the cost premium.

	In-Network (Plus Providers)	In-Network (Outside Plus Providers)
Eye Exam (once every 12 months)	$0	$10
Lenses (once every 12 months)	$25 (single/bifocal/trifocal)	$25 (single/bifocal/trifocal)
Frames (once every 24 months in lieu of contacts)	$180 Max Allowance + 20% off balance	$130 Max Allowance + 20% off balance
Contact Lenses (once every 12 months in lieu of frames)	$180 Max Allowance + 15% off balance	$130 Max Allowance + 15% off balance
Dependent Age Limits	26	



Employee Contributions for Vision Plan

Benefit Plan	Bi-Weekly Deduction
Single	$1.41
Employee & Spouse	$2.67
Employee & Child(ren)	$2.82
Family	$4.14

This book is intended for informational purposes only. Please refer to the group contract for specific benefit plan details.

Ready to live your best EyeMed life?

There's so much more to your vision benefits than copays and coverage. Get ready to see the good stuff for yourself.



Your network is the place to start

See who you want, when you want. You have thousands of providers to choose from—independent eye doctors, your favorite retail stores, even online options.

Keep your eyes open for extra discounts

Members already save an average 71% off retail using their EyeMed benefits,[1] but our long list of special offers takes benefits even further.

Remember, you're never alone

We're always here to help you use your benefits like a pro. Stay in-the-know with text alerts or healthy vision resources from the experts. If it can make benefits easier for you, we do it.

[1] Based on weighted average of sample transactions; EyeMed Insight network/$10 exam copay/$10 materials copay/$120 frame or contact lens allowance.



Create a member account at eyemed.com

Everything is right there in one spot. Check claims and benefits, see special offers and find an eye doctor—search for one with the hours, location and brands you want. For maximum mobility, try the EyeMed Members App (Google Play or App Store).

INDEPENDENT PROVIDER NETWORK + LENSCRAFTERS PEARLE VISION OPTICAL

PDF-2004-M-377

This book is intended for informational purposes only. Please refer to the group contract for specific benefit plan details.

Life & AD&D Insurance

Life Insurance

Life insurance provides financial security for the people who depend on you. Your beneficiaries will receive a lump sum payment if you pass away while employed by HWS. **HWS provides basic life insurance at no cost to you.**

Accidental Death and Dismemberment (AD&D) Insurance

Accidental Death and Dismemberment (AD&D) insurance provides payment to you or your beneficiaries if you lose a limb or pass away in an accident while employed by HWS. **The company provides basic life insurance at no cost to you.** This coverage is in addition to your company-paid life insurance described above.

HWS provides the following benefit:

1x Your Annual Salary
To a Maximum of $200,000

Optional Life

In addition to the company provided Life & AD&D Insurance, HWS also offers eligible employees the option to purchase additional Life coverage on themselves as well as their spouse and child(ren).

Coverage	Benefit Options	Guarantee Issue*
Employee	Option of 1, 2, 3 or 4 times annual salary to a maximum of $450,000	$200,000
Spouse	**Option 1:** Choice of $10,000 or $$25,000 **Option 2:** 50% of Employee Amount to a maximum of $100,000	$25,000
Child(ren)	**Birth – 14 days:** $500 **14 days – Age 26:** $4,000	$4,000

**Evidence of Insurability (EOI) is required for amounts beyond this Guarantee Issue amount*

***You must purchase optional life insurance on yourself in order to purchase coverage for your spouse and/or child(ren)*

This book is intended for informational purposes only. Please refer to the group contract for specific benefit plan details.

Disability Insurance

Long Term Disability

Long Term Disability is intended to protect your income, when you are away from work due to a non-work related illness or injury for a long duration. The amount you receive is based on the amount you earned before your disability began. HWS provides Long Term Disability insurance at no cost to you.

- **Eligibility**: Date of hire
- **Coverage Amount**: 60% of Salary
- **Maximum Benefit**: $10,000 Monthly Benefit
- **Elimination Period**: 180 days
- **Benefit Duration**: Up to SSNRA
- **Pre-Existing Limitation:** 3 / 12

This book is intended for informational purposes only. Please refer to the group contract for specific benefit plan details.

Disability Insurance

New York State Disability

Administered by New York Life

Eligibility: All Employees

Weekly Benefit: 50% of weekly earnings to a maximum benefit of $170 per week

Benefits begin: After the 7th consecutive day of disability (i.e. surgery, injury, illness, accident, maternity)

Benefits payable: Up to 26 weeks

New York State Paid Family Leave

Paid Family Leave (PFL) is a mandatory benefit in New York, providing you with job protection and paid time off for these qualifying events:

Providing care for a family member with a serious health condition

The common cold or taking off for general doctor visits **don't qualify** – the person you care for must have a "**serious health condition**"

Bonding leave after giving birth, adoption, or welcoming a child into foster care. You can use paid family leave benefits during the **first 12 months** after your baby's birth, adoption, or foster placement. **Yes, dads can go out on paid leave too!** You may take paid leave even for events leading up to adoptions, such as travel to another country to complete an adoption.

Qualifying military exigency

You can take paid leave to attend to family matters if your family member (spouse, domestic partner, child, or parent) is on **active duty** or has been **notified of an impending call** to active duty.

01/01/2027	**12 weeks**	**67% of employee's AWW, up to 67% SAWW**

This book is intended for informational purposes only. Please refer to the group contract for specific benefit plan details.

Voluntary Accident Benefit

Administered by MetLife

Accident Insurance is designed to compliment your health and disability insurance plans by paying you money for covered accidental injuries and their treatment. This benefit will pay a set benefit amount based on the type of injury you have and the type of treatment you need. It covers accidents that occur off the job. *Employees can elect coverage on their spouse and children if they elect coverage on themselves.*

	Low Plan	High Plan
General Plan Information		
Who Pays for Coverage	Employee – 100% Voluntary	Employee – 100% Voluntary
Dependent Age Limit	To Age 26	To Age 26
Eligibility Requirements	Must be Actively at Work	Must be Actively at Work
Type of Coverage	24 Hour Coverage – On/Off the Job	24 Hour Coverage – On/Off the Job
Can I take the policy with me if I leave the company?	Yes, you can port this coverage	Yes, you can port this coverage
Do I have to answer medical questions as part of purchasing this insurance?	No	No
Accident Benefit – Employee		
Accidental Death Benefit Amount	$25,000	$50,000
Accident Benefit – Spouse		
Accidental Death Benefit Amount	$12,500	$25,000
Accident Benefit – Child(ren)		
Accidental Death Benefit Amount	$5,000	$10,000
Sample of Covered Services		
Hospital Admission- *1x per accident; unlimited per calendar year*	$1,000	$2,000
Blood/Plasma/Platelets- *1x per accident; unlimited per calendar year*	$400	$500
Ambulance – Air	$1,000	$1,250
Ambulance – Ground	$300	$400
Emergency Room	$75 - $150 depending on location of care	$100 - $200 depending on location of care
Medical Testing (X-rays, MRI/MR, Ultrasound, NCV, CT/CAT, EEG) – 2x per accident; unlimited per calendar year	$150	$200

Employee Cost	Low Plan Bi-Weekly Deduction	High Plan Bi-Weekly Deduction
Single	$3.90	$5.72
Employee & Spouse	$7.70	$11.25
Employee & Domestic Partner	$7.70	$11.25
Employee & Child(ren)	$8.99	$13.08
Family	$10.77	$15.69

This book is intended for informational purposes only. Please refer to the group contract for specific benefit plan details.

Voluntary Critical Illness Benefit

MetLife

Administered by MetLife

Critical Illness Insurance is protection designed to help cover costs, not covered by your health insurance, when you, your spouse, or child is diagnosed with a covered condition. *Employees can elect coverage on their spouse and children if they elect coverage on themselves.*

	Critical Illness (Specified Disease)
General Plan Information	
Who Pays for Coverage	Employee – 100% Voluntary
Dependent Age Limit	To Age 26
Eligibility Requirements	Must be Actively at Work
Critical Illness Benefit	
Benefit Amount	Employee – Choice of $15,000 or $30,000 Spouse – 50% of Employee's Benefit Child(ren) – 50% of Employee's Benefit
Guarantee Issue Amount	Employee – Choice of $15,000 or $30,000 Spouse – 50% of Employee's Benefit Child(ren) – 50% of Employee's Benefit
Conditions	
Full Benefit Cancer *(Invasive)*	100% of Coverage Amount
Skin Cancer	5% of Coverage Amount
Partial Benefit Cancer *(Non-Invasive)*	25% of Coverage Amount
Heart Attack	100% of Coverage Amount
Stroke	100% of Coverage Amount
Coronary Artery Disease	100% of Coverage Amount
Kidney Failure	100% of Coverage Amount
Alzheimer's Diseaser	100% of Coverage Amount
Benefit Limitations / Key Features	
Pre-Existing Limitations	Does Not Apply
Health Screening Benefit	MetLife will provide an annual benefit of $50 per calendar year for taking one of the eligible screening/prevention measures. MetLife will pay only one health screening benefit per covered person per calendar year.

For cost information, please refer to Employee Navigator, as rates vary based on age and the benefit amount selected.

Constiarium

This book is intended for informational purposes only. Please refer to the group contract for specific benefit plan details.

Additional Benefits

Employee Assistance Program (EAP)

Administered by Bree Health

HWS provides confidential referral services to benefit eligible administrative hourly and salaries employees and their eligible dependents through Bree Health EAP.

Service provided by the program includes:

- Counseling services
- Child/elder care recourses
- Legal and financial consultations
- Concierge services among other resources.

Participants' right to privacy is fully protected by law and the College's EAP policy. Employees may contact the EAP directly, or the Office of Human Resources for related literature.

HWS EAP Code: 8956

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Bree HEALTH

Enhance Your Well-Being with Mindfulness



Bree Health's provides personalized guidance to help you cultivate mindfulness practices that improve focus, resilience, and emotional balance. Whether you're managing stress, navigating life changes, or building healthier thought patterns, our Solutions Paths, Video Library, and expert coaching will support your journey.

- **Mindfulness for Stress Relief:** Follow guided exercises and structured Solutions Paths designed to help you manage stress and enhance emotional resilience.
- **Focus and Clarity:** Utilize tools like the Bree Video Library to improve concentration and productivity with expert-led mindfulness techniques.
- **Building Healthy Thought Patterns:** Learn strategies to manage negative thinking and foster a balanced mindset through personalized coaching and self-guided resources.
- **On-Demand Mindfulness Tools:** Access guided meditations, breathing exercises, and expert-curated content anytime, anywhere to support your well-being.

Access Barrier-Free Certified Life Coaching via the Mobile App.



(800) 327-2255 login.breehealth.com Mobile App: Bree Health

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Bree HEALTH

Tailored Support for Your Well-Being Journey

Your journey to well-being starts here—customized support, expert coaching, and guided resources, all tailored to your unique needs.



Customized Resources

Find support tailored just for you with Bree Health's Solutions Paths. Whatever life brings your way—stress, relationships, career changes, or just a desire to boost your well-being—Bree Health's personalized approach connects you to resources, tools, and guidance designed to help you thrive.

What Are Solutions Paths?

Solutions Paths are guided, customized journeys created to address your unique needs and goals. By choosing a category or typing in a personal challenge, Bree Health's AI Branching technology builds a Solutions Path that fits where you are today, bringing together helpful resources and support.

Solutions Paths Can Support You In:

- Career & Education
- Finances
- Family & Relationships
- Physical Health
- Spirituality & Religion
- Mental Well-Being

Personalized Guidance

Solutions Paths offer curated resources—including articles, videos, and podcasts to help you tackle life's challenges with confidence.

Areas That Matter Most

Find support in areas like mental health, personal growth, family, finances, and physical well-being. No matter your focus, there's a path that's just right for you.

Track Your Progress

Stay motivated as you see your progress on completing resources and experience growth toward your well-being goals.

Weekly Happiness Boosts

Keep motivated and uplifted with encouraging messages from the Bree Health coaching team, designed to brighten your week.

Easy Access to Expert Coaching

When you're ready, connect seamlessly with certified coaches specializing in stress management, career guidance, and more. Choose a format that fits your comfort, from live chat to video sessions.

Bree Health Video Library

Access guided meditations, relaxation exercises, and educational insights, all tailored to uplift and support your journey.

(800) 327-2255 login.breehealth.com Mobile App: Bree Health

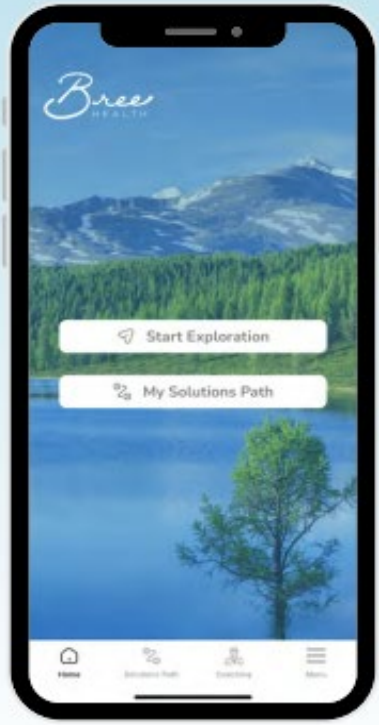
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PERSONALIZED SUPPORT FOR EVERY STEP OF LIFE'S JOURNEY.

How to Get Started

- Log in to Bree Health.
- Choose a category that resonates with you, or type in a specific challenge. Bree's smart AI will create a Solutions Path filled with the resources and support you need.
- Explore your customized path and track your journey toward a balanced, empowered life.



Discover a New Approach to Well-Being

Log in to the Bree Health portal and let Solutions Paths guide you to a healthier, more fulfilling life. Start your journey today!

Download the app by scanning the QR code or find the Bree Health App on on the Apple App Store or the Google Play Store.

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Additional Benefits

Medicare Support

Approaching age 65 or forecasting retirement? It's time to review your Medicare and Group Health Insurance Options.

There are many plan options and they're not all the same. If you're unfamiliar with Medicare, you risk choosing a plan that doesn't suit your needs or your budget. Consiliarium Group will help navigate the complexity of Medicare.

Corinne is happy to meet or speak with you for a no sales pressure consultation.



- Understand Medicare
- Ensure Your Doctor Participates
- Maximize Your Coverage
- Minimize Your Costs
- Select a High-Quality Rated Plan

YOUR BENEFIT RESOURCES

Your employer offers you access to a Benefits Advocate who can:

- Provide general benefit plan information offered by your employer
- Respond to benefit plan questions during Open Enrollment and/or throughout the year
- Finding in-network providers
- Assist with claim issues/concerns
- Help with understanding your Explanation of Benefits (EOB)
- Guide you if you are experiencing a qualifying event/lifestyle change

Your inquiry will be handled by a highly trained benefits specialist at Consiliarium Group. Contact by phone or email and you will receive a response within the next business day.

Consiliarium Group | 1-844-890-7955 | info@consiliariumgroup.com





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Child Health Plus

New York State offers a health insurance program called Child Health Plus for children under the age of 19 who reside in New York State. To be eligible, children must not be covered by another health insurance plan or eligible for Medicaid. The program provides comprehensive coverage with no deductibles or co-payments. Monthly premiums are determined based on household income and family size. Eligibility and costs can be found on the NYS of Health website.

Child Health Plus Contact Information

New York State of Health

Phone: 1-855-355-5777

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Contact Information

Hobart and William Smith Human Resources **Email Address: HR@HWS.edu**

Plan or Program	Administered By	Phone	Email/Website
General Benefit Questions	Consiliarium Group	1-844-890-7955	info@consiliariumgroup.com
Medicare Assistance	**Corinne Hillmon** Senior Healthcare Advisor	585-421-8000	chillmon@consiliariumgroup.com
Medical	Excellus		www.excellusbcbs.com/hws
Pharmacy	TrueScripts	1-800-257-1955	https://memberportal.truescripts.com
Dental	Excellus		www.excellusbcbs.com/hws
Vision	EyeMed	1-866-939-3633	www.member.eyemedvisioncare.com/member/en
Life Insurance & AD&D / Optional Life Insurance & AD&D	New York Life	1-800-225-5695	https://www.newyorklife.com/
Flexible Spending Account	Lifetime Benefit Solutions (LBS)	1-800-327-7130	www.lifetimebenefitsolutions.com/members/login
Critical Illness & Accident	MetLife	1-866-626-3705	https://www.metlife.com/insurance/accident-health/critical-illness-insurance/
Employee Assistance Program (EAP)	ENI / Bree Health	1-800-327-2255	https://login.breehealth.com/#/login
Retirement	TIAA	1-800-842-2252	www.trsretire.com/

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Legally Required Notices

The following are notices that HWS is required to provide to Employee on an annual basis.

Scan the QR code to Access the Notices OR Click here

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HOBART AND WILLIAM SMITH

Consiliarium Group is your main point of contact for assistance in understanding and navigating your benefit plans.

Questions & Help:

1-844-890-7955 or info@consiliariumgroup.com

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