

2024



Benefits Guide - Core



See Page 4
to learn
what is new
for 2024

FOCUSING ON YOUR HEALTH

LEARN
MORE
INSIDE



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Annual Enrollment for 2024 is here, and we want to update you on the benefit programs offered to eligible faculty and staff.

Please take a close look at all the information in this guide. For a more detailed benefit description, please visit the Benefits page of the Human Resources website at

<https://www.lesley.edu/faculty-staff/human-resources/benefits>.

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

Important Notes about Annual Enrollment

- Annual Enrollment Period is **Monday, November 6, through Wednesday, November 15, 2023**. All benefit changes made during this period will become effective January 1, 2024.
- If you are not making any changes to your medical coverage for 2024, it will automatically continue. You only need to amend your elections through [Workday](#) if you would like to change plans and/or tiers.
- **Employees participating in the health and/or dependent care FSA must re-elect within [Workday](#) each year as elections do not continue into the new plan year.**



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

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What is new for 2024?

1. New Health Plan Administrator (Harvard Pilgrim Health Care) & National network (United Healthcare)

Lesley will be moving to Harvard Pilgrim with Tufts Health plan being absorbed by Harvard Pilgrim under Point32Health. Harvard Pilgrim's national network solution on PPO plans is enhanced outside the New England area with United Healthcare's expansive network. **(see page 5 for more details)**

2. New PPO HDHP with HSA

This new plan offers the opportunity for employees to have an expansive physician network bundled Harvard Pilgrim Health Care and United Health Care with an out of network benefit as well. In addition this plan provides access to a health savings account which is the most tax-advantaged savings vehicle available with contributions made through payroll deductions never taxed. **(see page 8 for more details)**

3. New Pharmacy Benefit Manager (EmpiRx)

Beginning January 1st 2024, EmpiRx will be managing our pharmacy benefits, assuming those responsibilities from Optum Rx. Please check your mail carefully in the month of December for your EmpiRx for communication pieces from EmpiRx. **(see pages 11-12 for more details)**

4. New Diabetes Management Benefit

Abacus Health offers a personalized behavior-based messaging platform to enhance participation engagement, provide educational tools, and waive diabetes medication copays for those who are living with diabetes and are actively engaged in their program. **(see page 13 for more details)**

5. New Wellness Reimbursement program

Enhanced fitness reimbursements up to \$300, premium discounts and member focused incentives **(see page 5 for more details)**

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Introducing Harvard Pilgrim Health Care

How to Find a Doctor:

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

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

Need assistance? Call us.

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

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

Telehealth provided by Doctor On Demand

Access virtual health care in minutes 24/7

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

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

Set Up Your Account Today:

harvardpilgrim.org/create

NEW: Wellness Reimbursement – up to \$300

Get reimbursed for fees you pay towards wellness activities

What qualifies for reimbursement?

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

Studios and facilities that qualify for reimbursement include:

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

How do I get reimbursed?

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

Go to harvardpilgrim.org/reimbursement

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

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



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

In January of 2019, Lesley joined edHealth, a consortium of regional colleges and universities who got together to identify ways to slow the rising cost of medical insurance. For 2024, you will continue to have the choice of four health plan options, now administered through Harvard Pilgrim Health Care due to their merger with Tufts Health Plan taking effect 1/1/2024.

You do not have to do anything to maintain your current medical coverage. If you wish to change plans for 2024, you must do so during open enrollment. If you were enrolled in the Advantage Plan, your enrollment will be mapped to the HMO plan unless you elect an alternate plan at open enrollment.

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

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



- **Best Buy HSA HMO (formerly HMO Saver Plan):** This plan has the lowest monthly premium and is subject to an annual deductible of \$1,600 for Employee coverage and \$3,200 for Employee plus One or Family coverage. Everything except preventive care is subject to the deductible on this plan. After the deductible has been met, members pay 35% coinsurance (or copayments for prescriptions) up to the annual out-of-pocket maximum. You also have the ability to make pre-tax contributions to your Health Savings Account on top of the amount that Lesley contributes. Preventive care is covered in-full.
- **HMO (formerly HMO Value Plan):** This Health Maintenance Organization (HMO) plan requires the use of in-network providers. It covers only urgent and emergency care for services received from non-network providers. There are no deductibles for medical services. Preventive care is covered in-full.
- **Access America Best Buy HSA PPO will be replacing the Advantage HMO Plan:** This plan operates the same as the Best Buy HSA HMO plan outlined above but includes a more expansive network as well as an out of network benefit. Preventive care is covered in full, and Lesley University will contribute into a Health Savings Account for enrollees in this plan.
- **Access America PPO (formerly CareLink PPO Plan):** This Preferred Provider Organization (PPO) plan gives you the option of using either in-network or out-of-network benefits. Employee costs are lower when using in-network or “preferred” providers. You do not have to select a primary care physician or obtain a referral. Preventive care is covered in-full.

Get Started Today

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



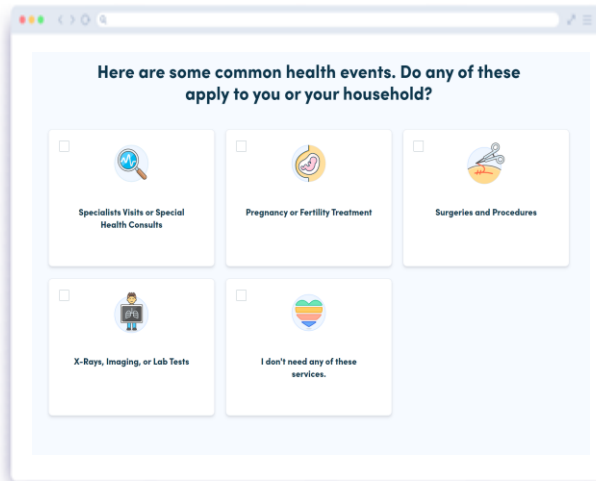
Access Decision Doc here:

www.myhyke.com/lesley2024

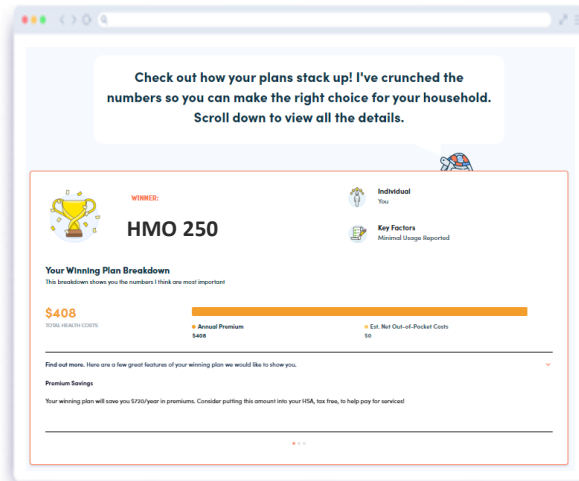


How it works

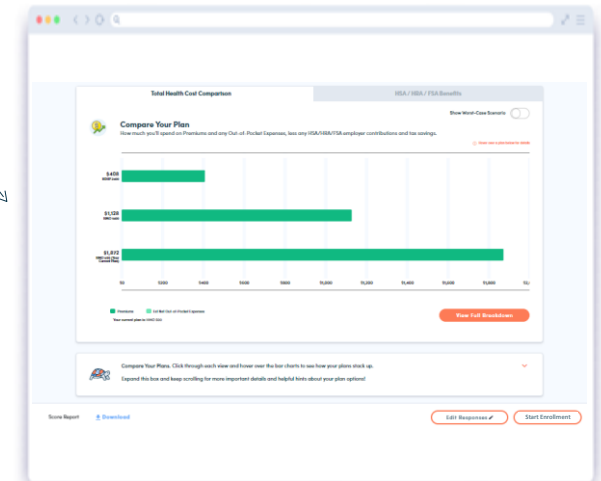
1 Share your medical and pharmacy needs in ~5 minutes



2 Receive personalized guidance on optimal plan



3 Enroll & save!



New Plan for 2024

Plan Comparison Chart

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	HMO	Access America Best Buy HSA PPO	
		In-Network	Out-of-Network
Calendar Year Deductible			
Employee	N/A		\$1,600
Employee plus One	N/A		\$3,200
Family	N/A		\$3,200
Out-of-Pocket Maximum (Medical & Rx)			
Employee	\$2,500		\$5,000
Employee plus One	\$5,000		\$10,000
Family	\$5,000		\$10,000
Doctor's Office Visits			
Primary Care Physician (PCP)	\$25	Covered in full after deductible	20% coinsurance after deductible
Specialist	\$25		
Preventive Care	Covered in full	Covered in full	20% coinsurance
X-rays, Lab Work, Etc.	Covered in full	Covered in full after deductible	20% coinsurance after deductible
Hi-Tech Imaging (MRI, PET/CT Scan)	\$75 per procedure <i>(max of 2 copays per year)</i>	Covered in full after deductible	20% coinsurance after deductible
Telemedicine	\$25	Covered in full after deductible	20% coinsurance after deductible
Urgent Care	\$25	Covered in full after deductible	20% coinsurance after deductible
Emergency Room	\$150 per visit <i>(waived if admitted)</i>	Covered in full after deductible is met	
Outpatient Surgery	\$150 per visit	Covered in full after deductible	20% coinsurance after deductible
Inpatient Hospital Care	\$250 per admission	Covered in full after deductible	20% coinsurance after deductible
Prescriptions	Retail (30-day supply) Generic: \$15 Preferred Brand: \$30 Non-Preferred Brand: \$50 Mail Order (90-day supply) Generic: \$30 Preferred Brand: \$60 Non-Preferred Brand: \$150	Retail (30-day supply) Generic: \$15 Preferred Brand: \$30 Non-Preferred Brand: \$50 Mail Order (90-day supply) Generic: \$30 Preferred Brand: \$60 Non-Preferred Brand: \$150	Not covered



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Plan Comparison Chart

	Best Buy HSA HMO	Access America PPO	
		In-Network	Out-of-Network
Calendar Year Deductible			
Employee	\$1,600	N/A	\$750
Employee plus One	\$3,200	N/A	\$1,500
Family	\$3,200	N/A	\$1,500
Out-of-Pocket Maximum (Medical & Rx)			
Employee	\$4,500	\$2,500	\$2,500
Employee plus One	\$9,000	\$5,000	\$5,000
Family	\$9,000	\$5,000	\$5,000
Doctor's Office Visits			
Primary Care Physician (PCP)	35% coinsurance after deductible	\$25	20% coinsurance after deductible
Specialist		\$25	
Preventive Care	Covered in full	Covered in full	20% coinsurance
X-rays, Lab Work, Etc.	35% coinsurance after deductible	Covered in full	20% coinsurance after deductible
Hi-Tech Imaging (MRI, PET/CT Scan)	35% coinsurance after deductible	\$75 per procedure <i>(max of 2 copays per year)</i>	20% coinsurance after deductible
Telemedicine	35% coinsurance after deductible	\$25	20% coinsurance after deductible
Urgent Care	35% coinsurance after deductible	\$25	20% coinsurance after deductible
Emergency Room	35% coinsurance after deductible <i>(waived if admitted)</i>	\$150 per visit <i>(waived if admitted)</i>	
Outpatient Surgery	35% coinsurance after deductible	\$150 per visit	20% coinsurance after deductible
Inpatient Hospital Care	35% coinsurance after deductible	\$250 per admission	20% coinsurance after deductible
Prescriptions	Retail (30-day supply) Generic: \$15 Preferred Brand: \$30 Non-Preferred Brand: \$50 Mail Order (90-day supply) Generic: \$30 Preferred Brand: \$60 Non-Preferred Brand: \$150	Retail (30-day supply) Generic: \$15 Preferred Brand: \$30 Non-Preferred Brand: \$50 Mail Order (90-day supply) Generic: \$30 Preferred Brand: \$60 Non-Preferred Brand: \$150	Not covered



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Health Insurance Premiums¹

	HMO	Access America Best Buy HSA PPO	Best Buy HSA HMO	Access America PPO	
				Rate A ²	Rate B ²
Monthly Rates					
Employee	\$252.15	\$241.50	\$110.70	\$258.30	\$307.50
Employee plus One	\$551.47	\$524.06	\$252.00	\$565.50	\$667.28
Family	\$900.18	\$862.16	\$436.75	\$922.13	\$1,080.00
Bimonthly Rates					
Employee	\$126.08	\$120.75	\$55.35	\$129.15	\$153.75
Employee plus One	\$275.74	\$262.03	\$126.00	\$282.75	\$333.64
Family	\$450.09	\$431.08	\$218.38	\$461.07	\$540.00

¹ These rates apply to employees working 28 hours or more per week. Rates for part-time employees can be found on the Human Resources web site. ² Rate A applies to employees who reside outside of the Harvard Pilgrim area of service and do not have the option of electing one of the HMO Plans. Rate B applies to employees who reside within the Harvard Pilgrim area of service and choose PPO coverage while being eligible for one of the HMO Plans. The HMO service area is MA, NH, RI, ME and VT.



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EmpiRx Health Pharmacy Benefits.

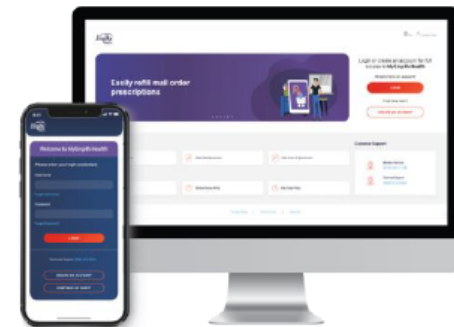
Welcome to EmpiRx Health! We'll be managing your prescription benefits ensuring you receive the *best care*. EmpiRx Health provides a personalized touch at every level, with Member Services and pharmacists available 24/7/365 to assist with all your prescription needs.

Mail Order Pharmacy.



The EmpiRx Health mail order pharmacy can save you *time* and *money* by delivering your long-term medications right to your door.

Manage your prescriptions easily online and on-the-go.



- Prescription History
- Mail-order Refills & Reminders
- Claims Details & History
- Drug Information & Pricing
- Pharmacy Search & Directions
- Benefits Information
- ID Card
- Available in Spanish

myempirxhealth.com

App available for iOS & Android



If you have any questions or require additional information, you can always contact EmpiRx Health Member Services toll-free at **833-412-3623** TDD 711.

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ID Cards

Your medical and pharmacy benefits information will be integrated into one card, which will be mailed to you by Point32Health. Present your new ID card to your participating pharmacy on or after January 1st before filling any prescriptions. You can present a physical copy of your card, or you can access a digital version using the EmpiRx Health App on your mobile device or online at myempirxhealth.com.



Mail Order Pharmacy

Our mail-order pharmacy is Prescription Mart. They fill or coordinate most maintenance, high-cost, and specialty medications that require special handling and administration. Where applicable, alternative funding for select high-cost specialty drugs may be obtained, and your out-of-pocket costs could be reduced.

If you have been receiving medications through the mail, please contact EmpiRx Health Member Services at (833) 412-3623 to verify the transition to our mail-order pharmacy.



For Your Health & Safety

Some prescriptions require clinical review before being filled. This process is a safety measure that protects you from potential side effects and harmful interactions with other medications and ensures you receive the most appropriate therapy for your health condition. If a clinical review is needed for your medication, EmpiRx Health works directly with your doctor to get the information needed before filling the prescription.

If you have any questions or require additional information, please contact our Member Services toll-free at (833) 412-3623 TDD 711. We are always available to assist you with live Member Services Representatives and Pharmacists 24 hours a day, seven days a week.

We look forward to taking care of you.

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edHEALTH and Lesley University are committed to your health and wellness.

As part of your benefit package, if you or a family member enrolled in a Lesley University health plan through edHEALTH are living with pre-diabetes or any type of diabetes, you can join the **Good Health Gateway®** Diabetes Care Rewards Program at no cost.

Program Benefits

Get a 90-day Introductory Period when you join so you can get \$0 copays on your covered diabetes medications and supplies right away.

Get unlimited access and support in meeting your personal health goals from Certified Diabetes Educators: Pharmacists, Nurses, and Dietitians any time you need it.

Get help in managing your diabetes care, and **continue to earn \$0 copays beyond your Introductory Period** when you complete the Program's activities recommended by the American Diabetes Association. This can save you hundreds of dollars a year!

THE DIABETES CARE REWARDS PROGRAM IS COMING JANUARY 2, 2024!

Information about the program and how to join coming soon.

The Diabetes Care Rewards Program is voluntary and confidential. None of your personal healthcare information is ever shared with Lesley University or edHEALTH.



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

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

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

Contributions

For anyone enrolled in the Best Buy HSA HMO or the Access America Best Buy HSA PPO in 2024, the University will make a contribution of \$600 (Employee) and \$1,200 (Employee Plus One and Family) to your Health Savings Account.

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

Coverage Level	IRS Combined Maximum for 2024	Lesley Contribution	Amount You Can Contribute*
Employee Only	\$4,150	\$600 (Lesley contribution)	\$3,550 (max you can contribute)
Employee Plus One or Family	\$8,300	\$1,200 (Lesley contribution)	\$7,100 (max you can contribute)

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

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



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Important Rules

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

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

Eligible Expenses

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

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

See these IRS Publications for information about eligible HSA expenses:

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

Hassle-Free Withdrawals

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

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



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

There are two types of FSAs available to eligible employees:

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

FSAs are a great way to save because they let you set aside pre-tax dollars out of your pay — up to **\$5,000** annually for dependent care expenses and **\$3,050** annually for unreimbursed health care expenses.

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

- If you are enrolled in the Health Care FSA for 2023, you must incur all eligible expenses prior to December 31, 2023, and submit reimbursement for these expenses by March 31, 2024. You may also roll over any unused funds, up to \$610, to the 2023 benefit plan year.
- **If you enroll in the Health Care FSA for 2024:** You will be able to roll over up to \$610 of your unused Health Care FSA balance for use at any time in the 2024 plan year. Rollover funds are in addition to the \$3,050 annual contribution limit and can be used any time during the plan year.
- If you are enrolled in the Health Care FSA for 2024, you can not participate in the Health Savings Account described on [Pages 7 & 8](#).

Note: Anyone electing the Best Buy HSA HMO or the Access America Best Buy HSA PPO in 2024 will want to use all Health Care FSA funds during the 2023 plan year in order to be eligible to make and receive HSA contributions in 2024. You do not need to be enrolled in Lesley's health plans to enroll in the FSA.

Participation in FSAs requires a new enrollment form each plan year because your current benefit election does not automatically carry over into the next plan year. **You need to actively re-enroll into the FSA each year.** The new plan year will run from January 1, 2024, through December 31, 2024.

Be sure to estimate your expenses carefully because you will forfeit any unused funds if the expenses are not incurred during the coverage period and exceed the \$610 allowable rollover amount.

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

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



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Rolling Over Funds

How It Works:

- On 12/31/2023, employee has \$1,000 remaining in an FSA account.
- Employee has from 1/1/2024 to 3/31/2024 to submit any FSA eligible claims incurred from 1/1/2023 to 12/31/2023 against the \$1,000 remaining balance.
- On 4/15/2024, any balance up to \$610 still remaining in the 2023 FSA will be rolled over into the 2024 FSA. If the remaining balance is over \$610, only \$610 will roll over, and all other remaining 2023 FSA funds will be forfeited.



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

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

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

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

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Dental Insurance

Delta Dental gives you plenty of reasons to smile.

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

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

Employees participating in the dental insurance program are responsible for paying the premium shown in the table to the right. **Premium payment amounts decreased for 2024.**

Dental Premiums

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

Vision Insurance

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

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

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

Employees participating in the vision insurance program are responsible for paying the premium shown below: **Premium payment amounts did not increase for 2024.**

Vision Premiums

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



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

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

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

Supplemental Life Insurance Premium Rates*

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

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

- Supplemental Employee / Dependent AD&D Insurance:** Follows Supplemental Life schedule of benefits.

 - Employee Rate: \$0.025/\$1,000 of Coverage
 - Spouse Rate: \$0.025/\$1,000 of Coverage
 - Child Rate: \$0.025/\$1,000 of Coverage

Beneficiary Designation

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



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Long-Term Disability Insurance (LTD)

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

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

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

Long-Term Care (LTC)*

LTC insurance is a voluntary insurance benefit available to eligible employees through Genworth Life Insurance Company. Long-Term Care offers financial protection if you or another insured family member requires long-term care services. It helps pay for covered long-term care expenses whether services are received at home, in the community or in a nursing facility. You have several benefit options to choose from. For more information on LTC through Genworth, visit the Lesley Human Resources benefits website at <https://www.lesley.edu/faculty-staff/human-resources/benefits> and www.genworth.com/groupltc

(Group ID: **lesleyu** and Access code: **groupltc**) to enroll.

* If you have a Unum LTC policy, you may keep your policy until you choose to cancel it. Unum is no longer our primary LTC insurance provider, and no longer offers new policies. However, Unum policyholders may apply for additional coverage with Genworth.



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

Employee Assistance Program (EAP)

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

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

GuidanceResources®

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

Critical Incident Services

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

Wellbeing Coaching

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

KnovaSolutions

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

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

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

Health Club

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

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

New York Life Secure Travel

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

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

Financial, Legal, and Estate Support

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

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



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

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

When You Have Questions About	Provider	Phone Number or Email Address	Website
Dental Insurance	Delta Dental	1-800-872-0500 (Delta Dental PPO Plus Premier) 1-800-327-6277 (DeltaCare)	www.deltamass.com
Flexible Spending/Transit Reimbursement Accounts	HSA Bank	1-800-357-6246	www.hsabank.com
Health Insurance	Harvard Pilgrim Health Plan	1-866-623-0184	www.harvardpilgrim.org
Health Savings Account	HSA Bank	1-800-357-6246	www.hsabank.com
Lesley University Benefits	Human Resources	1-617-349-8787 hr@lesley.edu	https://www.lesley.edu/faculty-staff/human-resources/benefits
Lesley University's Employee Benefits Advocate	Consiliarium Group	1-844-890-7955	info@consiliariumgroup.com
Life/AD&D/LTD	New York Life	1-800-362-4462	www.newyorklife.com
Long-Term Care	UNUM Genworth	1-800-227-4165 1-800-416-3624	www.unum.com https://www.genworth.com/groupltd
Retirement Plan	TIAA	1-800-842-2252	www.tiaa.org/lesley
Rx Mail Order	EmpiRx	1-833-419-3436	MyEmpiRxHealth.com
Vision Insurance	EyeMed	1-866-939-3633	www.eyemedvisioncare.com
529 College Savings Plan	ScholarShare 529 Savings Plan	Jennifer Benson, jabenson@tiaa.org , 510-907-2601	www.ScholarShare.com



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Enrollment Period

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

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

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

All plan enrollments and/or changes to current plan elections must be completed in [Workday](#) by **Wednesday, November 15, 2023**. Changes made during the Annual Enrollment period will become effective January 1, 2024.

As a reminder, you will need to make an election for the FSA plans, otherwise you will not have coverage in 2024. Please be sure to actively enroll in coverage for the 2024 plan year.

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



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

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Special Enrollment Notice

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

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

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

Newborns' Act Disclosure

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

WHCRA Notice

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



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Creditable Coverage Disclosure Notice – Active Employees

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

The purpose of this notice is to advise you that the prescription drug coverage listed below under the Lesley University medical plans is expected to pay out, on average, at least as much as the standard Medicare prescription drug coverage will pay in 2023. This is known as "creditable coverage."

Why this is Important

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

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

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

Notice of creditable coverage

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

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

If you are covered by Lesley University's prescription drug plans listed below, you'll be interested to know that coverage is, on average, at least as good as standard Medicare prescription drug coverage for 2023. This is called creditable coverage. Coverage under these plans will help you avoid a late Part D enrollment penalty if you are or become eligible for Medicare but decide to enroll in a Medicare prescription drug plan later.

Lesley University plans:

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

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



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

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If you or your children are eligible for Medicaid or CHIP and you’re eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren’t eligible for Medicaid or CHIP, you won’t be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit www.healthcare.gov.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, contact your State Medicaid or CHIP office to find out if premium assistance is available.

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

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

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of July 31, 2023. Contact your State for more information on eligibility.

ALABAMA – Medicaid	FLORIDA – Medicaid
Website: http://myalhipp.com/ Phone: 1-855-692-5447	Website: https://www.flmedicaidprecovery.com/flmedicaidprecovery.com/hipp/index.html Phone: 1-877-357-3268
ALASKA – Medicaid	GEORGIA – Medicaid
The AK Health Insurance Premium Payment Program Website: http://myakhipp.com/ Phone: 1-866-251-4861 Email: CustomerService@MyAKHIPP.com Medicaid Eligibility: http://dhss.alaska.gov/dpa/Pages/medicaid/default.aspx	GA HIPP Website: https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp Phone: 678-564-1162, Press 1 GA CHIPRA Website: https://medicaid.georgia.gov/programs/third-party-liability/childrens-health-insurance-program-reauthorization-act-2009-chipra Phone: (678) 564-1162, Press 2
ARKANSAS – Medicaid	INDIANA – Medicaid
Website: http://myarhipp.com/ Phone: 1-855-MyARHIPP (855-692-7447)	Healthy Indiana Plan for low-income adults 19-64 Website: http://www.in.gov/fssa/hip/ Phone: 1-877-438-4479 All other Medicaid Website: http://www.in.gov/medicaid/ Phone 1-800-457-4584
CALIFORNIA—Medicaid	IOWA – Medicaid & CHIP (Hawki)
Health Insurance Premium Payment (HIPP) Program Website: https://dhcs.ca.gov/hipp Phone: 916-445-8322 Email: hipp@dhcs.ca.gov	Medicaid Website: https://dhs.iowa.gov/ime/members Hawki Website: http://dhs.iowa.gov/Hawki Medicaid Phone: 1-800-338-8366 Hawki Phone: 1-800-257-8563 HIPP Website: https://dhs.iowa.gov/ime/members/medicaid-a-to-z/hipp HIPP Phone: 1-888-346-9562



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<p>COLORADO – Health First Colorado (Colorado’s Medicaid Program) & Child Health Plan Plus (CHP+)</p> <p>Health First Colorado Website: https://www.healthfirstcolorado.com/ Health First Colorado Member Contact Center: 1-800-221-3943/ State Relay 711 CHP+: https://www.colorado.gov/pacific/hcpf/child-health-plan-plus CHP+ Customer Service: 1-800-359-1991/ State Relay 711 Health Insurance Buy-In Program (HIBI): https://www.colorado.gov/pacific/hcpf/health-insurance-buy-program HIBI Customer Service: 1-855-692-6442</p>	<p>NEW HAMPSHIRE – Medicaid</p> <p>Website: Health Insurance Premium Program New Hampshire Department of Health and Human Services (nh.gov) Phone: 603-271-5218 Toll free number for the HIPP program: 1-800-852-3345, ext 5218</p>
<p>KENTUCKY – Medicaid</p> <p>Kentucky Integrated Health Insurance Premium Payment Program (KI-HIPP) Website: https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx Phone: 1-855-459-6328 Email: KIHIPP.PROGRAM@ky.gov KCHIP Website: https://kidshealth.ky.gov/Pages/index.aspx Phone: 1-877-524-4718 Kentucky Medicaid Website: https://chfs.ky.gov</p>	<p>NEW JERSEY – Medicaid and CHIP</p> <p>Medicaid Website: http://www.state.nj.us/humanservices/dmahs/clients/medicaid/ Medicaid Phone: 609-631-2392 CHIP Website: http://www.njfamilycare.org/index.html CHIP Phone: 1-800-701-0710</p>
<p>KANSAS – Medicaid</p> <p>Website: http://www.kancare.ks.gov/ Phone: 1-800-792-4884 HIPP Phone: 1-800-967-4660</p>	<p>NEW YORK – Medicaid</p> <p>Website: https://www.health.ny.gov/health_care/medicaid/ Phone: 1-800-541-2831</p>
<p>LOUISIANA – Medicaid</p> <p>Website: www.medicaid.la.gov or www.ldh.la.gov/lahipp Phone: 1-888-342-6207 (medicaid hotline) or 1-855-618-5488 (LaHIPP)</p>	<p>NORTH CAROLINA – Medicaid</p> <p>Website: https://medicaid.ncdhhs.gov/ Phone: 919-855-4100</p>
<p>MAINE – Medicaid</p> <p>Enrollment Website: Maine (mymaineconnection.gov) Phone: 1-800-442-6003 TTY: Main relay 711 Private Health Insurance Premium Webpage: https://www.maine.gov/dhhs/ofi/applications-forms Phone: 1-800-977-6740 TTY: Main relay 711</p>	
<p>MASSACHUSETTS – Medicaid and CHIP</p> <p>Website: https://www.mass.gov/info-details/masshealth-premium-assistance-pa Phone: 1-800-862-4840 TTY: (617) 886-8102</p>	<p>NORTH DAKOTA – Medicaid</p> <p>Website: Healthcare Coverage Health and Human Services North Dakota Phone: 1-844-854-4825</p>
<p>MINNESOTA – Medicaid</p> <p>Website: https://mn.gov/dhs/people-we-serve/children-and-families/health-care/health-care-programs/programs-and-services/other-insurance.jsp Phone: 1-800-657-3739</p>	<p>OKLAHOMA – Medicaid and CHIP</p> <p>Website: http://www.insureoklahoma.org Phone: 1-888-365-3742</p>
<p>MISSOURI – Medicaid</p> <p>Website: http://www.dss.mo.gov/mhd/participants/pages/hipp.htm Phone: 573-751-2005</p>	<p>OREGON – Medicaid</p> <p>Website: http://healthcare.oregon.gov/Pages/index.aspx Phone: 1-800-699-9075</p>
<p>MONTANA – Medicaid</p> <p>Website: http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP Phone: 1-800-694-3084 Email: HHSHIPPProgram@mt.gov</p>	<p>PENNSYLVANIA – Medicaid</p> <p>Website: https://www.dhs.pa.gov/Services/Assistance/Pages/HIPP-Program.aspx Phone: 1-800-692-7462 CHIP Website: Children’s Health Insurance Program (CHIP) (pa.gov) CHIP Phone: 1-800-986-KIDS (5437)</p>
<p>NEBRASKA – Medicaid</p> <p>Website: http://www.ACCESSNebraska.ne.gov Phone: 1-855-632-7633 Lincoln: 1-402-473-7000 Omaha: 1-402-595-1178</p>	<p>RHODE ISLAND – Medicaid and CHIP</p> <p>Website: http://www.eohhs.ri.gov/ Phone: 855-697-4347, or 401-462-0311 (Direct Rlte Share Line)</p>



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NEVADA – Medicaid	SOUTH CAROLINA – Medicaid
Medicaid Website: https://dhcfp.nv.gov Medicaid Phone: 1-800-992-0900	Website: https://www.scdhhs.gov Phone: 1-888-549-0820
SOUTH DAKOTA - Medicaid	WASHINGTON – Medicaid
Website: http://dss.sd.gov Phone: 1-888-828-0059	Website: https://www.hca.wa.gov/ Phone: 1-800-562-3022
TEXAS – Medicaid	WEST VIRGINIA – Medicaid
Website: Health Insurance Premium Payment (HIPP) Program Texas Health and Human Services Phone: 1-800-440-0493	Website: WV Bureau for Medical Services/ West Virginia HIPP (mywvhipp.com) Medicaid Phone: 304-558-1700 CHIP Toll-free phone: 1-855-MyWVHIPP (1-855-699-8447)
UTAH – Medicaid and CHIP	WISCONSIN – Medicaid and CHIP
Medicaid Website: https://medicaid.utah.gov/ CHIP Website: http://health.utah.gov/chip Phone: 1-877-543-7669	Website: https://www.dhs.wisconsin.gov/badgercareplus/p-10095.htm Phone: 1-800-362-3002
VERMONT– Medicaid	WYOMING – Medicaid
Website: Health Insurance Premium Payment (HIPP) Program Department of Vermont Health Access Phone: 1-800-250-8427	Website: https://health.wyo.gov/healthcarefin/medicaid/programs-and-eligibility Phone: 1-800-251-1269
VIRGINIA – Medicaid and CHIP	
Website: https://www.coverva.org/en/famis-select https://www.covera.org/en/hipp Medicaid/CHIP Phone: 1-800-432-5924	

To see if any other states have added a premium assistance program since July 31, 2023, or for more information on special enrollment rights, contact either:

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

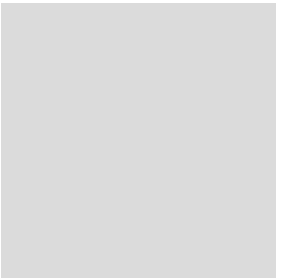
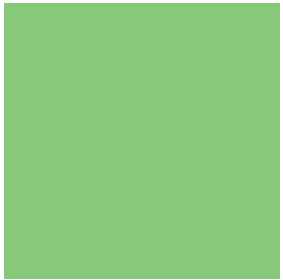
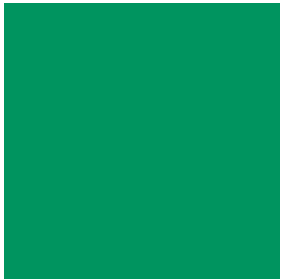
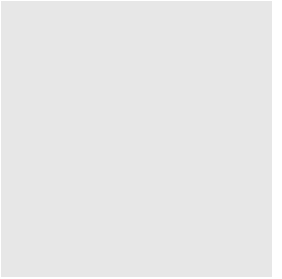
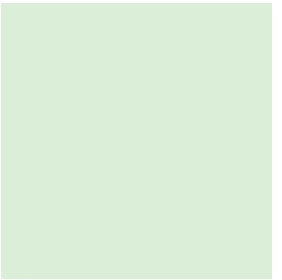
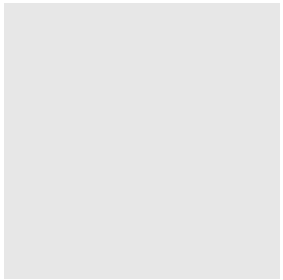
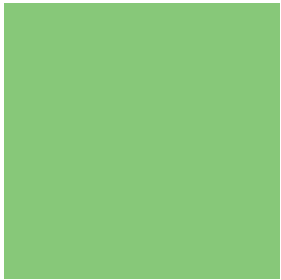
U.S. Department of Health and Human Services
Centers for Medicare & Medicaid Services
www.cms.hhs.gov
1-877-267-2323, Menu Option 4, Ext. 61565

Paperwork Reduction Act Statement

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

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





About This Guide

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

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

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

