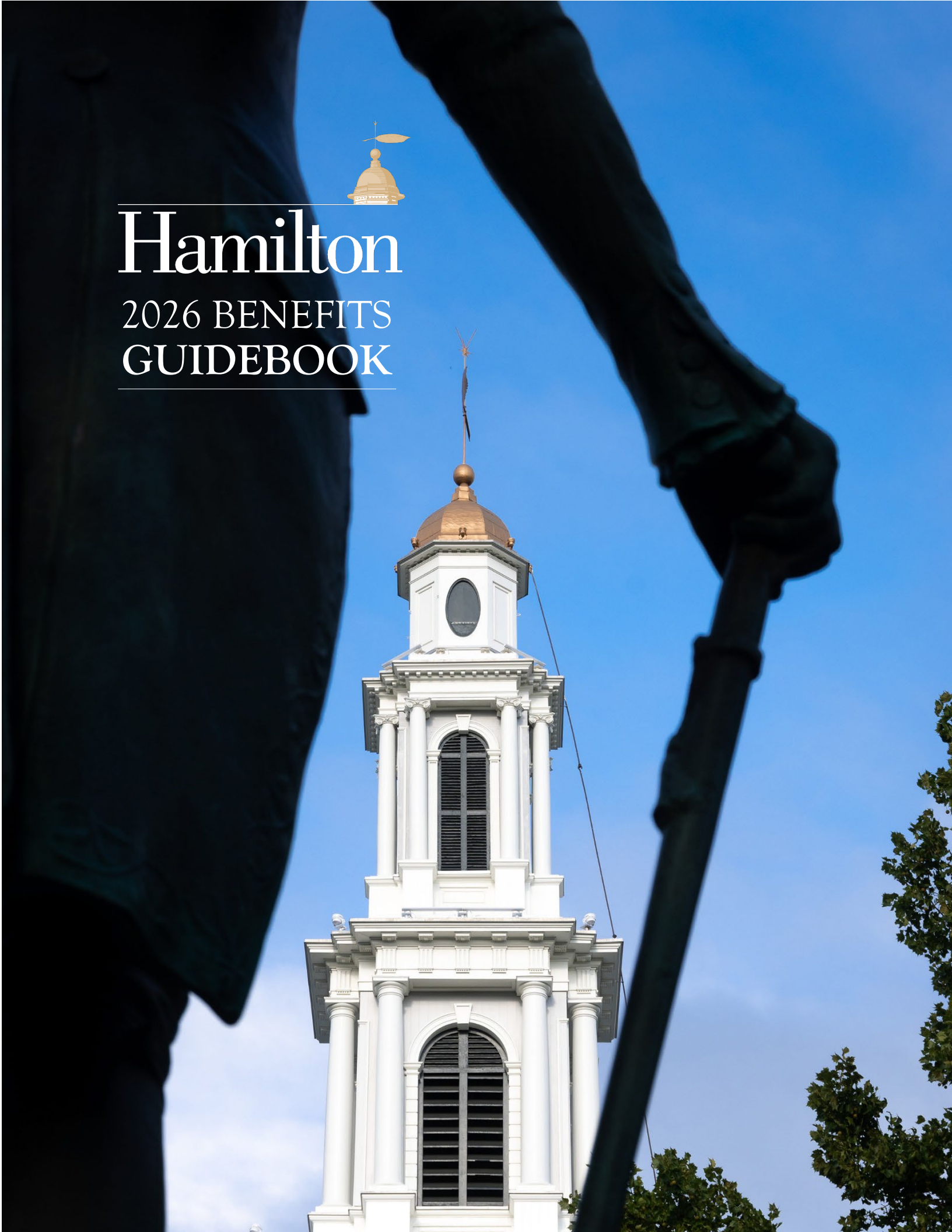

Hamilton

2026 BENEFITS GUIDEBOOK

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ABOUT THIS BENEFITS GUIDEBOOK

This Benefits Guidebook describes the highlights of the Hamilton College Benefits Program in non-technical language. Your specific rights to benefits under this program are governed solely, and in every respect, by the official documents and not the information contained within this Benefits Guidebook.

If there is any discrepancy between the descriptions of the program elements as contained within this Benefits Guidebook or other benefits enrollment materials you receive and the official plan documents, the language of the official plan documents shall prevail as accurate. Please refer to the plan-specific documents published by each of the respective carriers for detailed plan information. Eligibility for any benefit plan is determined by applicable plan documents and policies. You should be aware that any and all elements of the Hamilton College Benefits Program may be modified in the future to meet Internal Revenue Service rules or otherwise as determined by Hamilton College.

This Benefits Guidebook may not be reproduced or redistributed in any form or by any means without express, prior permission, in writing from Hamilton College.

Welcome

Hamilton employees take great pride in the important mission they uphold—an enduring devotion to the intellectual and personal development of students. The College appreciates the ongoing commitment of its faculty and staff. Thanks to you, our workplace is a dynamic educational environment that transforms lives.

We are pleased to offer a benefits program as part of your total compensation that offers:

- A wide range of competitive benefit plans to accommodate your personal needs and protect you and your family from financial hardship;
- Tuition benefits for you, your spouse/partner and dependent children;
- Generous time off programs to help you balance your work and family life;
- Access to fitness facilities, fitness classes and a wellness program;
- Access to one of the finest small college libraries in the nation.

Here's how you can learn more about the Hamilton Benefits Program and enroll in the benefits that best meet your needs.

Get the Most from Your Healthcare Benefits

Alera Group is your main point of contact for all your insurance-related questions and healthcare needs.

Save time and effort by allowing Alera Group to assist with your medical, prescription, dental and flexible spending plan questions including:

- Help understanding and navigating your health care plan
- Ordering replacement insurance I.D. cards
- Locating providers and specialists
- Estimates for out-of-pocket cost and plan coverage
- Assistance with resolving provider billing and insurance claims
- Help with facilitating approvals and prior authorizations for services, as required
- Support with out of area services
- Any other related healthcare topic

How to Proceed

This Benefits Guidebook will help familiarize you with the Hamilton College Benefits Program. Carefully consider each benefit option, its cost and value to you and whether it meets your particular needs. At the back of this Benefits Guidebook is a step-by-step Decision Guide that outlines each step of the enrollment process. Please make sure that you submit your benefit elections on or before the enrollment deadline. Contact Human Resources if you have questions about this deadline.

If you need any help along the way, please take advantage of the benefit resources identified on the Contact Information page.

Plan Notes

Plan Year

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

Eligibility

Regular employees working half-time or more are eligible for benefits. Specific details can be found in the employee handbook.

Program Details

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

Dependent Coverage

Dependents eligible for medical/Rx/dental/vision coverage are spouses/domestic partners and children to age 26. For more information regarding the definition of domestic partner, contact Human Resources.

Medical Coverage Opt-Out

If you waive medical coverage, you are eligible to receive an opt-out credit that is equivalent to $1,000 a year for full-time employees. In order to receive this opt-out credit, you must certify coverage under another health insurance plan each year during open enrollment in Workday. Please be aware that if you waive medical coverage, you are still eligible to select other benefit options.

The 30 calendar-day deadline is a critical factor toward successfully completing a life event change. If you do not add the event in Workday, and provide the requested documentation within 30 calendar days of the event, you will not be able to make changes until the next annual open enrollment period.

Changing Your Benefits (Qualifying Life Events)

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

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

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

Medical/Prescription Benefits

Excellus BlueCross BlueShield BluePPO Plan

Hamilton College is pleased to offer medical insurance through Excellus BlueCross BlueShield (BCBS). The Excellus BCBS BluePPO Plan is a comprehensive medical plan that gives employees the flexibility to receive the care they want from the provider they want, without the need to select a primary care physician or to obtain referrals for service. The BluePPO Plan is a network-based program that features an in-network and out-of-network component which offers you a high level of flexibility when seeking covered medical services. The in-network component allows you to choose any provider from the BlueCard® program and provides a higher level of benefits. The out-of-network component of the plan provides you with the ability to see any physician of your choice, but at a greater cost.

Before obtaining care or undergoing a procedure, be sure that you know whether your provider is in-network or out-of network, and the corresponding level of coverage you can expect. We encourage our employees to choose in-network providers when possible. Certain procedures and/or treatments require precertification in order to be covered under the plan.

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

Prescription Benefits

When you enroll in the BluePPO Medical Plan, you will also be provided with prescription benefits through OptumRx. Your prescription benefits include different pricing structures or "tiers" that enable you to control cost based on the types of medications you select. In most cases, more than one drug is available to treat the same medical condition. Generic medications include the same active ingredients as brand name medications but cost less. Therefore, selecting a formulary generic medication over a formulary brand name medication will result in you paying a lower copay. Visit optumrx.com (new users must register and log-in) to view current formulary information. Specific copay amounts are listed within the "Prescription Drugs" section of the Medical Plan Summary.

OptumRx Home Delivery Service

Plan participants can save time and money with the OptumRx mail order prescription program. This home-delivery service allows you to purchase up to 90-day supplies of maintenance medications (medications taken on a daily or routine basis) for the cost of one copay for generics, or two copayments for name brand drugs, generally 3 for 2 savings. In addition, the mail order prescription program saves you trips to the pharmacy because prescriptions are delivered right to your door. For more details on the mail order prescription program, please visit optumrx.com or call 855-463-6978.

90-Day Retail Service

Plan participants can now bring prescriptions for maintenance medications to any CVS Pharmacy to fill a 90-day supply. When you use a CVS Pharmacy to fill a 90-day supply you will receive the same cost savings as with home delivery.

Preferred Provider Organization (PPO) Network

An insurance company's group or list of approved or contracted providers from which you can obtain service at the plan's highest benefit level.

Deductible

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

Coinsurance

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

Formulary:

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

Out-Of-Pocket Maximum

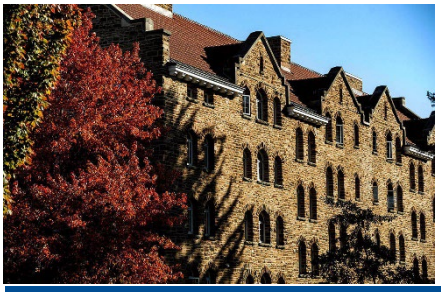
The most you will pay in a plan year before the plan begins to pay 100% of allowed amounts (includes deductible, coinsurance, and copay amounts).

Finding a Provider

To locate an Excellus BCBS provider:
Call 800-499-1275, or
Online excellusbcbs.com

Website Notes
Under the Find a Doctor tab:

Choose "Find a Doctor, Provider or Facility"
Log in or search as a guest
If searching as a guest, enter a location and search for plan: BluePPO and Signature PPO



Medical Plan Summary

This chart is a quick reference of your medical coverage. Please refer to the Plan's coverage booklet for actual coverage information.

Benefit Description	Excellus BlueCross BlueShield PPO Plan	
	In-Network	Out-of-Network[1]
Annual Deductible – Individual/Family	$350/$1,050	$1,250/$3,750
Annual Out-of-Pocket Max. – Individual/Family[2]	$2,000/$6,000	$4,000/$10,000
Lifetime Maximum	Unlimited	Unlimited
PCP or Specialist Office Visits (including Office Surgery)	$25/$40 copay	70% after deductible
Telemedicine (call or videoconference)	Covered 100%	Not Covered
Preventive Care **Adult Physicals (one per year)** **Well-Child Care Services[3]** **Routine GYN Exam/Pap Test, Mammogram**	 Covered 100% Covered 100% Covered 100%	 70% after deductible Covered 100% 70% after deductible
Diagnostic Imaging, X-ray, CAT, MRI[7]Physician's Office or Outpatient Setting	$40 copay	70% after deductible
Diagnostic Laboratory and Pathology, Physician's Office or Outpatient Setting	Covered 100%	70% after deductible
Radiation Therapy and Chemotherapy	90% after deductible	70% after deductible
Maternity Care **Physician Pre/Postnatal Care Office Visits** **Hospital Services (Facility/Physician)**	 Covered 100% 90% after deductible	 70% after deductible 70% after deductible
Emergency Care Urgent Care Center Emergency Room Ambulance	 $25 copay $250 copay[4] $200 copay	 70% after deductible $250 copay[4] $200 copay[1]
Inpatient Hospital Stays[5,6]	90% after deductible	70% after deductible
Outpatient Surgery (Hospital/Facility)	90% after deductible	70% after deductible
Physical/Occupational/Speech Therapy[8]Physician's Office or Outpatient Setting	$25 copay	70% after deductible
Chiropractic Benefit	$25 copay	70% after deductible
Mental Health – Inpatient[6]	90% after deductible	70% after deductible
Mental Health – Outpatient Office Visits	$40 copay	70% after deductible
Chemical Dependence – Inpatient[6]	90% after deductible	70% after deductible
Chemical Dependence – Outpatient	$40 copay	70% after deductible
Durable Medical Equipment[6]	80% (no deductible)	70% after deductible
Prescription Drugs	**Provided by Optum Rx**	
Retail – up to a 30-day supply **Formulary Generic/Preferred/Non-Preferred** **Mail Order – up to a 90 day supply / 90-day Retail CVS Pharmacy** **Pharmacy Annual Out-of-Pocket Max. – Individual/Family**	$0 generics for children to age 19 $0 HCR Preventive/$25 Diabetic Supplies $10/$35/$60 copay $10/$70/$120 copay $2,000/$6,000	 Not Covered Not Covered Not Applicable

1. Out-of-Network Copays and Coinsurance percentages apply to Excellus's scheduled of Allowable Charges. Balance billing may apply.
2. In-Network Annual Out-of-Pocket Maximum includes deductibles, coinsurance and copays for medical services. Out-of-Network Max includes deductibles and coinsurance only. Separate Out-of-Pocket Maximums apply for prescription drugs.
3. Well-Child Care Services are provided according to Health Care Reform Guidelines.
4. The Emergency Room copay is waived if you are admitted to the hospital.
5. Inpatient Hospital Services include surgery, anesthesiology, radiology, laboratory and doctor visits/consultations.
6. Precertification applies.
7. Precertification applies to MRI, PET & CAT scans.
8. 45 visits per calendar year

Dental Benefits

Good dental health is important to your overall well-being. The College offers a comprehensive dental benefit available through Guardian.

Guardian Dental PPO Plan

The Guardian Dental PPO Plan allows for freedom of choice each time you need covered dental services. You can obtain services from any dentist or specialist within the Guardian network, or you can visit any provider of your choice outside of the plan's network. Guardian network dentists have agreed not to charge more than the PPO schedule of allowable charges. Therefore, you will pay only the applicable deductibles and/or coinsurance until you reach the Annual Benefit Maximum. Out-of-network claims will be paid on the basis of 90% Usual, Customary & Reasonable (UCR) charges. Members will pay the applicable deductibles and/or coinsurance as well as any provider charges in excess of the 90% UCR charges.

Dental Plan Summary

This chart highlights the benefits provided under the plan. For specific plan details, please refer to the group Dental Insurance Certificate.

Benefit Description	Guardian Dental PPO Plan	
	In-Network	Out-of-Network
Annual Deductible[1] **Family Limit** **Waived For**	$50 per Person per Calendar Year 3 per Family Type 1 - Preventative	
Annual Benefit Maximum[1]	$1,000 per Calendar Year plus Maximum Rollover	
Allowances	Guardian PPO Schedule	90% UCR
Type 1 Services – Preventative **Includes routine exams, cleanings, fluoride treatments (to age 19) and sealants (to age 16)**	100%	100%
Type 2 Services – Basic **Includes x-rays, restorative amalgams, restorative composites, denture repair, simple/complex extractions and anesthesia**	80%	80%
Type 3 Services – Major **Includes inlays, onlays, crowns, crown repairs, endodontics, periodontics and prosthodontics**	50%	50%
Annual Maximum Rollover[1, 2]	$250 Rollover Amount $350 Rollover Amount (In-Network Claims Only) $1,000 Per Member Limit	
Dependent Age Limits	To age 26	

[1.] Per member enrolled in the plan.
[2.] Applies if member files dental claims each year and does not exceed $500 in claims in a year.

Finding a Provider

To locate a Guardian participating provider near you:

CALL: 800-541-7846, or

ONLINE: guardianlife.com

Select "Find a dentist" under the "Dental Benefits Brought to You by Your Workplace"

Plan Type: PPO: DentalGuard Preferred

Pre-Treatment Estimate

It is recommended that you receive a pre-treatment estimate for any dental work that you consider expensive. Simply ask your dentist to submit the information for a pre-treatment estimate to Guardian.

Guardian will then inform you and your dentist of the exact amount your insurance will cover and the amount you will be responsible for paying.

90% Usual, Customary & Reasonable (UCR) Charges

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

Finding a Provider

To locate a Guardian/VSP participating provider near you:

CALL: 877-814-8970

ONLINE: guardianlife.com

Website Notes
Select "Find a Vision Provider" tab
Select "VSP"
For Advanced Search;
Doctor Network is Signature

Using Your VSP Vision Benefits

Employees enrolling in the plan will receive an ID card. In-Network providers may also verify plan coverage levels by contacting Guardian.

In-Network providers will coordinate the plan benefit at the time of purchase and will require payment for the patient's responsibility only.

If you utilize an Out-of-Network provider, you are required to pay in full at the time of the appointment and submit a claim to Guardian for partial reimbursement, according to the schedule of benefits.

Vision Benefits

Using Your VSP Vision Benefits

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

Guardian Vision Plan with VSP Network

You can choose to receive care from a VSP participating provider (in-network) or from any doctor of your choosing (out-of-network). Dollar for dollar, you get the best value from your vision benefit when you visit a participating provider. If you decide to see an out-of-network provider, you will receive a lesser benefit and typically pay more out-of-pocket.
This plan allows for services and materials to be obtained every calendar year or every other calendar year (see "Vision Plan Summary" below).

Vision Plan Summary

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

Benefit Description	Guardian Vision Plan	
	In-Network	Out-of-Network
Network & Allowances	Vision Service Plan (VSP)	Fee Schedule
Service Intervals Eye Exam Lenses Frames Contacts (in lieu of glasses)	 Calendar year Calendar year Every other calendar year Calendar year	
Eye Exam	Covered in full after $10 Copay	Up to $65 after $10 Copay
Lenses (per pair) Single Vision Lined Bifocal Lined Trifocal Lenticular	Covered in full after $25 copay[1]	Up to $50 after $25 copay[1] Up to $75 after $25 copay[1] Up to $100 after $25 copay[1] Up to $126 after $25 copay[1]
Frames	Covered up to $130 & 20% off balance	Up to $75
Contact Lenses (in lieu of glasses)	$130 max (Copay waived)	$130 max (Copay waived)
Additional Discounts	Available In-Network ONLY[2] 20% off any additional pairs of glasses purchased within 12 months of the exam 20% off the amount exceeding the copay and allowance on frames purchased 15% off providers' professional services for prescription contact lenses 20-25% discounts on lens options	
Dependent Age Limits	To age 26	

[1] This Copay only applies once to the purchase of lenses and frames.
[2] Discounts are applied to the Usual and Customary charges for such services

Flexible Spending Accounts

Why Use a Flexible Spending Account?

Hamilton College lets you redirect a portion of your pay through payroll deduction into Flexible Spending Accounts (FSAs) administered by Inspira Financial. The money that goes into an FSA is deducted from your pay on a pre-tax basis (before federal, Social Security, Medicare and some state taxes are calculated). Because you do not pay these taxes on money that goes into an FSA, you decrease your taxable income and potentially increase your spendable income.

Health Care FSA

A Health Care FSA provides you with the ability to set aside money on a pre-tax basis for any IRS-allowed health expenses not covered by your health care coverage. These expenses include, but are not limited to, deductibles, copayments, coinsurance payments, and uninsured dental, vision and hearing care expenses (e.g. eyeglasses, contact lenses, hearing aids and orthodontia expenses). With a Health Care FSA, you can be reimbursed an amount up to the total annual contribution you have elected and can begin to use all or some of the total amount elected as soon as the plan year begins.

Hamilton's plan will allow up to the IRS max to be deposited into Health Care FSA accounts.

You may use your Health Care FSA and debit card for items such as contact lens solution, band aids, first aid supplies, reading glasses and diabetic supplies. In addition, you no longer need a prescription from your physician when using your Inspira Financial funds to pay/get reimbursed for over the counter (OTC) drugs and medicines. Such items include allergy medicine, cold medicine, paint relievers, etc. Feminine hygiene products are now part of the list of eligible over-the-counter items.

Dependent Care FSA

A Dependent Care FSA provides you with the ability to set aside money on a pre-tax basis for day care expenses for your child, disabled parent or spouse. Generally, expenses will qualify for reimbursement if they are the result of care for: your children, under the age of 13, for whom you are entitled to a personal exemption on your federal income tax return; and your spouse or other dependents, including parents, who are physically or mentally incapable of self-care. With a Dependent Care FSA, you will be reimbursed only for dependent care services you have already received and can only be reimbursed for funds that you have already had deducted.

The maximum annual amount you can deposit into the Dependent Care FSA is $7,500. Please note that any amount deducted in excess of the IRS maximum of $7,500 (single or married and filing jointly) or $3,750 (married and filing individually) will be considered taxable income.

Please keep in mind that you may be able to take a federal tax credit for eligible dependent care expenses. Any amounts deferred to a Dependent Care FSA will reduce, dollar-for-dollar, the maximum allowable expense under the tax credit. You should consult your personal tax advisor if you think you may be eligible for this tax credit.

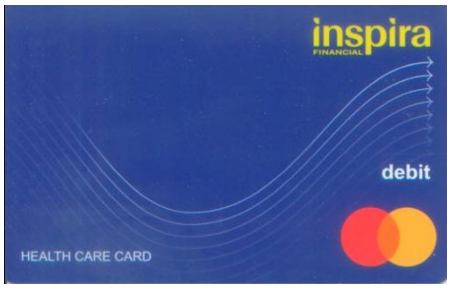
Important Note: Once enrolled, FSA elections must be made every year during open enrollment, to participate in the next calendar year.

For additional information regarding your FSAs, please contact Inspira Financial at 800-284-4885 or visit www.inspirafinancial.com.

You can use the website to check lists of eligible and non-eligible items and to use the online calculator to estimate annual health care and dependent care expenses.

FSA FACT

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



Please Note

Hamilton College has a grace period provision for Flexible Spending Accounts, providing more time for you to use the funds in your account. All amounts elected for 2026 must be used for expenses incurred in 2026 or in the initial 2-1/2 months of 2027. You will have until March 31, 2027, to submit claims for expenses incurred January 1, 2026 through March 15, 2027.

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

e-Notify

If you provide Inspira Financial with your email address you can receive an electronic receipt for claims you submit, letting you know that your claim has been processed. You can sign up online at inspirafinancial.com.

Flexible Spending Accounts

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

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

Debit Card

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

It is necessary to **save your itemized receipts**, even when using your Debit Card, as the IRS mandates that all services should be substantiated.

Your Debit Card includes an expiration date. Your card does not expire until the expiration date shown on the card. Inspira Financial will re-load your card each year with your new FSA election. It is important to keep your current Debit Card from year to year, unless directed otherwise.

Inspira Financial Website

Inspira Financial's website is inspirafinancial.com. You may use inspirafinancial.com to check your account balances, file claims, manage your debit cards and sign up for electronic account updates.

Submitting Claims

When not using the Inspira Financial debit card, participants may submit claims using the following methods:

- **Online:** Complete the claim information and upload itemized receipts (PDF format) via:
  1. Website: inspirafinancial.com
  2. The Inspira Financial Mobile App
- **Offline:** Use a paper claim form with itemized receipts. Form can be obtained from inspirafinancial.com, Hamilton's website, or the Human Resources office, submit via:
  1. Fax to 888-238-3539
  2. Mail: Inspira Financial
     P.O. Box 8396
     Omaha, NE 68103-8396

Claims are processed on a daily basis. Reimbursements will be made directly to you. A check can be mailed to your home address on file with Inspira Financial, or the funds can be directly deposited into your bank account. If you want to enroll for the direct deposit feature, you may enroll at inspirafinancial.com, or by completing a paper request form. If you provide Inspira Financial with your email address and/or cell phone number, you can receive email, or text confirmations when claims are processed.

Life/AD&D Benefits

Life/AD&D Insurance

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

Basic Life/AD&D Insurance

Hamilton College provides you with Basic Life/AD&D Insurance in an amount that equals 100% of your basic annual earnings (rounded to the next higher $1,000). **This coverage is provided at no cost to you.**

Supplemental Life/AD&D Insurance

If you need additional protection beyond the Basic Life/AD&D Insurance provided to you at no cost, you may purchase Supplemental Life Insurance for yourself. Coverage can be elected in an amount that equals 150% or 300% of your basic annual earnings (rounded to the next higher $1,000). If you elect Supplemental Life Insurance, you are responsible for paying 100% of the benefit cost and deductions are taken from your paycheck in after-tax dollars.

Please Note: The combined Basic and Supplemental Life/AD&D maximum available is $500,000.

Evidence of Insurability

Evidence of Insurability (EOI) is an insurance company requirement and is satisfied by completing a form supplied by Equitable and answering any questions that may be presented to you. EOI is required for all Supplemental Life/AD&D Insurance coverage elected more than 31 days after you are first eligible for coverage and on all future coverage increases, regardless of amount.

Supplemental Life/AD&D Insurance purchase amounts requiring EOI do not become effective and therefore are not deducted from your pay until approval is obtained from Equitable.

Accidental Death and Dismemberment (AD&D) Insurance

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

Disability Benefits

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

Short-Term Disability

Nonexempt and exempt staff are provided with Short-Term Disability coverage that replaces your salary if you become disabled and cannot work due to a non-work-related illness or injury. This coverage provides full salary and benefits for up to six months. Nonexempt staff are required to exhaust all of their accrued sick time.

Long-Term Disability

Long-Term Disability coverage is provided through a policy with Prudential. You are eligible to participate in this plan after completion of one year of service.

If you meet the definition of disability, you will be eligible to receive a Monthly Income Benefit that equals 60% of your monthly wage base (i.e. 1/12th of your basic annual wage) to a maximum of $10,000 per month. You are also eligible for a Monthly Annuity Benefit that equals 10% of your monthly wage base. This annuity benefit will be credited to your 403(b) account with TIAA. Monthly Income Benefits and Monthly Annuity Benefits for partial disability are adjusted according to the amount of lost income. Long-Term Disability benefits begin after six months of continuous disability and are generally payable up to age 65.

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

When Am I Eligible for Long-Term Disability Benefits?

You are considered to have a Long-Term Disability when the insurance company determines that:

1. due to sickness, bodily injury or pregnancy you are unable to perform the material duties of your normal occupation during both the elimination period (six months) and the normal occupation period (the first 24 months following the elimination period); and for any period of time thereafter, being unable due to sickness, bodily injury or pregnancy to perform the material duties of any occupation for which you are reasonably qualified by education, training or experience; or
2. after you have been continuously disabled for the elimination period (six months), you are working, but due to sickness, bodily injury or pregnancy you are unable to earn 80% or more of your monthly wage base.

In addition, you must be under the regular care of a physician in order to be considered disabled.

Retirement Benefits

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

College Contributions

Beginning the first of the month after the completion of one year of service, the College will contribute the equivalent of 10 percent of an eligible employee's earnings to a 403(b) account with TIAA. Included in earnings are extra pay amounts such as overtime and stipends. Contributions are made each payroll period and contributions by employees are not required. Enrollment instructions will be sent by Workday to new enrollees for completion prior to their one-year eligibility date.

Voluntary Contributions

Beginning at date of hire, employees may make voluntary contributions on a pre-tax or after-tax (Roth) basis to a 403(b) account with TIAA. (Under current law, your pre-tax contributions to the plan are not subject to federal income tax. However, your contributions are subject to Social Security and Medicare taxes. Contributions may be subject to state or local income tax, depending on applicable state and local law. Under New York State law, contributions are not subject to income tax). Federal law governs the maximum amount an employee is eligible to contribute under the plan and restrictions and penalties may apply for withdrawals prior to age 59 ½. Your contributions are transmitted to your account each payroll period. Although you're not required to make voluntary contributions, the sooner you start making voluntary contributions, the more money you will have at retirement.

Enrollments and changes to contribution amounts may be added in Workday at any time.

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

Important Facts

- You are not taxed on the amounts in your pre-tax and College-contributed accounts until they are distributed to you. After-tax (Roth) contributions are taxed at time of contribution and not at withdrawal.
- You are 100% vested in your retirement plan accounts at all times.
- You determine how the contributions to your retirement plan accounts are invested by choosing among available investment options. You may reallocate funds in your account (subject to any restrictions particular to that fund) and also change the allocation of future contributions. Keep in mind that all investments have some degree of risk. You are responsible for your investment decisions.
- Your retirement plan accumulations are intended to provide you and your family with income in your retirement. The College's contributions are not available for disbursement until you separate employment with the College. Voluntary contributions may be withdrawn beginning at age 59 ½.
- Additionally, you may borrow, or withdraw under hardship provisions, a portion of your voluntary contributions subject to certain restrictions.
- If you should die before receiving the money in your accounts, payment will be made to your beneficiary(ies). Please be sure that your beneficiaries are up to date with TIAA. If you are married and wish to name someone other than your spouse as your primary beneficiary for more than 50% of your benefit, your spouse will have to sign the spousal waiver on the designation form.

Additional Benefits

The descriptions below and on the following pages summarize the additional benefits and programs available to you as a Hamilton College employee. If there is any discrepancy between these benefit descriptions and the official policies that govern the benefits and programs being highlighted, the official policies shall prevail as accurate.

Vacation

Nonexempt Staff, who have completed 90 days of employment, will accrue vacation according to the following schedule:

Years of Service	Accrued Vacation Time
From hire date through the 5th anniversary date	2 weeks/10 days per year
From the 5th anniversary date through the 10th anniversary date	3 weeks/15 days per year
After the 10th anniversary date	4 weeks/20 days per year

Exempt Staff are eligible for 22 days of vacation per academic year (this amount will be prorated during their first year of employment).

Half-time or more employees will have their vacation prorated according to their annual work schedule. Less than half-time employees are not eligible for vacation.

Holidays

The College recognizes the following as paid holidays:

- New Year's Day
- Martin Luther King Day
- Memorial Day
- Fourth of July
- Labor Day
- Thanksgiving
- Day After Thanksgiving
- Day Before or After Christmas
- Christmas Day

Less than full-time employees may be eligible for pay if the holiday falls within their regular work schedule.

Personal Days

Nonexempt Staff are eligible for three personal days per academic year. Days are prorated for new employees (based on hire date) and employees who are less than full-time.

Sick Leave Days

Nonexempt Staff accrue paid sick days based on their hire date and employment status (half-time, etc.).

Half-time or more employees will have their sick time prorated. Less than half-time employees are not eligible for sick pay.

Additional Benefits (cont.)

Workers' Compensation

All employees are provided with Workers' Compensation insurance that provides partial income replacement and coverage of medical costs for illness or injury incurred in the course of or arising directly out of employment with the College. **This coverage is provided at no cost to you.**

Bereavement Leave/Pay

Employees will be eligible for an appropriate amount of paid time off (up to three days) for the death of family members.

Paid Family Leave / Parental Leave

Parental Leave – An employee may request up to four weeks of fully paid leave to spend time with their new child (newborn or adoption). Time must be used within six months of the date of birth or adoption of the child. The leave will be granted in addition to the disability period for a birth mother (Part-time employees receive a prorated benefit).

Paid Family Leave – Paid Family Leave is available under New York State legislation for the following qualifying family circumstances: (1) for the birth, adoption, or placement of a new child; (2) to care for a family member with a serious health condition; or (3) for a qualifying exigency arising from a family member's military service.

The Paid Family Leave benefit is available for up to 12 weeks (in a 52-week period) at 67% of an employee's average weekly wage (capped at 67% of New York State's Average Weekly Wage)

Time taken under Parental Leave will run concurrently with Paid Family Leave entitlements and will therefore reduce the number of weeks available under Paid Family Leave. Additionally, Parental Leave and Paid Family Leave also run concurrently with any entitlements under federal FMLA regulations.

Faculty should refer to the Faculty Handbook for leave information.

Courses at Hamilton College

Employees are eligible to take one course at Hamilton each semester free of tuition.

Tuition for Job-Related Courses

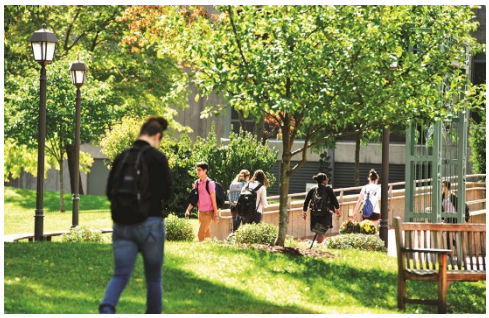
Upon successful completion of a course that will strengthen or extend the skills the employee applies to their work at the College, employees may be reimbursed for one-half of the tuition cost; this will be limited to six courses per calendar year. The College may also request that the employee take a course that would enhance their performance on the job; in this event, the College will pay the full tuition cost.

Tuition Grant Program for Dependent Children

Full-time employees who have at least three years of continuous service are eligible for tuition grants for their dependent children. Grants are payable for 50% of the tuition of the institution attended, including Hamilton, not to exceed 50% of Hamilton's then current tuition. Employees working half-time or more schedules are eligible on a pro-rated basis. Additional provisions may apply to employees who accepted employment prior to June 3, 2000.

Scholarship Plan for Spouses

The spouse/partner of a full-time employee may take courses at Hamilton on a full-time or part-time basis free of tuition. This benefit will be prorated for spouses of employees who are working half-time or more schedules.



Additional Benefits (cont.)

Emergency Loan

Nonexempt Staff, who have been employed by the College for at least one year, are eligible to apply for a short-term, interest-free loan for last-resort emergency purposes.

Employee Assistance Program

Hamilton College offers a confidential Employee Assistance Program (EAP) to you and your family at no cost to you. The EAP, provided by BRiDGES Employee Assistance Program, offers professional, comprehensive and personalized services that are community based and conveniently located at 1507 Upper Lenox Ave. in Oneida, NY 13421.

BRiDGES EAP is a program designed to assist you and your family members in addressing personal challenges such as marital, financial, stress and anxiety, balancing work and home, problems with co-workers, or concerns with alcohol/drugs which may be affecting one's health, well-being, or even job performance. You or a family member may attend up to five sessions unless a referral to a community provider is recommended.

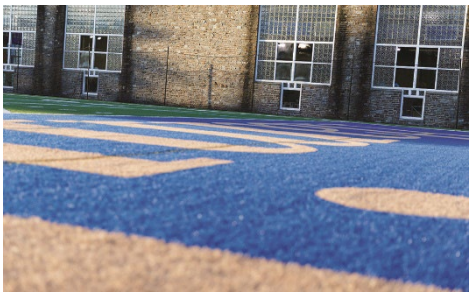
Appointments with a BRiDGES EAP professional are available 8:00 am until 5:00 pm Monday through Friday with evening hours on Tuesday. Simply call 315-697-3949 or 800-834-3947 during working hours and a staff member will personally assist you in booking an appointment and/or answering any of your questions. A 24-hour answering machine is also available after hours to provide callers with the numbers for crisis services or to take messages.

Business Travel Accident Insurance

While traveling on College business you are covered under the College's Business Travel Accident (BTA) insurance plan provided by AIG.
As part of this coverage, you are also provided with travel assistance services from AIG Travel such as travel security assistance, travel medical assistance and concierge services.

For additional information on BTA Insurance coverage and travel assistance services, visit https://www.aig.com/us/travelguardassistance, or call 877-244-6871.

Additional Benefits (cont.)



Use of College Facilities

Hamilton employees and members of their immediate family may use the Burke Library and athletic facilities of the College. Use of the facilities may not interfere with scheduled student activities.

Clinton Early Learning Center (Child Care)

Although the College does not own or operate a childcare center, it partners with the Clinton Early Learning Center, a not-for-profit organization that is run independently of the College, which prioritizes College families. The Center accepts children from the ages of 3 months through five years. The Center also operates a School Age Program for students enrolled in the Clinton Elementary School, ages 5-12. The Center is located in Clinton, NY. For details call the Center at 315-859-9702 or visit www.clintonelc.com.

College Rental Housing

The College has a limited number of rental properties available on campus. The opportunity to occupy College rental housing is available to faculty who have been employed by the College for seven years or less and to other employees who have been employed by the College for four years or less. College rental housing is provided as transitional housing. For additional information, contact Auxiliary Services at 315-859-4998 or visit hamilton.edu/auxiliaryservices.

Other Benefits

Many other benefits may be available to you as an employee of Hamilton College. These benefits, include the following:

- On-campus Bookstore Discount
- Personal Office Supply Discount
- Membership at local Credit Unions
- Dining Halls
- Service Recognition
- Vendor Discounts (see listing at Human Resources website)

If you have any questions regarding your benefits or need assistance with the enrollment process, please contact Human Resources.

When Can I Make Changes to the Plan?

Medical, Dental, Vision and FSA

Changes to your Medical, Dental, Vision and FSA elections are only allowed during the Annual Open Enrollment period, or as a result of a Qualifying Life Event.

Life Insurance

An increase to your Voluntary Life Insurance election can only be made with insurance company approval of Evidence of Insurability.

403(b)

You can enroll or change your 403(b) elections at any time in Workday.

Decision Guide

You've reviewed your benefit plan options and made your choices. Now take a moment to wrap up the enrollment process by completing the following steps.

Step 1 – Make Your Medical/Prescription, Dental and Vision Benefit Elections

Before you do, think about the expenses that you and your family have had in the past year. Does the plan offered meet your personal health care needs and those of your family? Do your doctors participate in the plan? If you are married, does your spouse have coverage available through his/her job? If so, you should compare what's available to you from both Hamilton College and your spouse's employer to determine which benefits meet your specific needs.

Step 2 – Make Your FSA Benefit Election(s)

Consider the pre-tax benefits associated with using a Health Care or Dependent Care FSA to pay for your ongoing, qualified expenses. While using an FSA can be very beneficial, it does require careful, advance planning. To assist you in estimating your annual health care and dependent care needs, you can use the online calculator at inspirafinancial.com. FSA elections must be made every year to participate.

Step 3 – Make Your Life/AD&D Insurance Benefit Election and Designate Your Beneficiary(ies)

After reviewing your options, stop and consider how much money your family would need to cover your financial obligations if something should happen to you. Think of things like rent or mortgage payments, college tuition and regular day-to-day living expenses. How much coverage do you have elsewhere? Remember to consider all sources of protection you have available.

Also, take a moment to designate your beneficiary(ies) for your life insurance. It is important to keep your beneficiary designation as up to date as possible. Should something happen to you, your benefits will be paid to the most recent beneficiary(ies) on file. If you neglect to designate a beneficiary, your benefits will be paid as defined under the life insurance policy.

Step 4 – Review Your Voluntary 403(b) Retirement Contributions and Designate Your Beneficiary(ies)

Think about the value of starting or increasing voluntary contributions to the 403(b) Retirement Plan. Again, it's important to keep your beneficiary designations for your retirement accounts up to date.

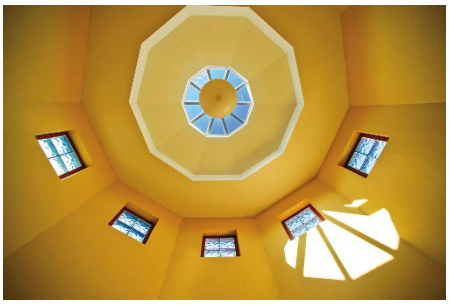
Step 5 – Double-Check Your Benefit Elections

Double-check your benefit elections, making sure they accurately reflect the benefits and levels of coverage that you want to maintain throughout the plan year.

Step 6 – Submit Your Benefit Elections

Once you have decided what benefit options best meet your needs, please submit your benefit elections in Workday within the requested timeframe.

Your Plan Rights



Hamilton College is required to provide you with certain protections administered by the Internal Revenue Service and the United States Department of Labor. The Hamilton College group insurance plans are classified by the Department of Labor as "welfare benefit plans" and by the IRS as "specified fringe benefit plans" under IRC s.6039(D). The Flexible Benefits Plan is also governed by Internal Revenue Code Section 125. Plan participants are entitled to certain protections and directions for recourse in the event of mistreatment by the Plans, their sponsor or administrator. Since these protections are essentially the same as federal law, this Statement of Rights is published here for your information.

The Employer Identification Number (EIN) assigned to Hamilton College is 15-0532200. The ERISA number for the Welfare Benefits Plan is 510. The ERISA number for the Flexible Spending Plan is 511. You should refer to these numbers in any correspondence about these Plans.

Statement of Plan Rights

Hamilton College is designated as the Administrator in connection with claims processed under the Plan. Such claim matters may be served by directing the process to the:

Plan Administrator at Hamilton College
198 College Hill Road
Clinton, NY 13323.

The Internal Revenue Code and specific Department of Labor Regulations were enacted to help ensure that all employer-sponsored group benefit programs conform to the standards set by Congress. An employee who is a participant in a flexible benefits plan is entitled to certain rights and protections under federal law, which provides that all participants will be entitled to (1) examine, without charge, at the Benefits Office, all Plan documents and copies of all Plan documents and other Plan information upon written request to the Human Resources Department, subject to a reasonable charge for the copies; and (2) receive a summary of the Plan's annual financial report. The Plan Administrator is required by law to furnish each participant with a copy of this summary annual report. Plan records are kept on a plan-year basis.

In addition to creating rights for Plan participants, federal law imposes duties upon those responsible for the operation of a Plan who are called "fiduciaries" and who have a duty to operate the Plan prudently and in the interest of the participants and beneficiaries. If a claim for a benefit under a Plan is denied in whole or part, the claimant must receive a written explanation of the reason for the denial. The claimant has the right to have the claim reviewed and reconsidered.

Under federal law, there are steps an employee covered under a Plan can take to enforce the above rights. For instance, if the person requests materials and does not receive them within 30 days, the person may file suit in a federal court. If a person has a claim for benefits which is denied or ignored, in whole or part, the person may file suit in a state or federal court. If it should happen that Plan fiduciaries misuse the Plan's money, or if an employee under a Plan is discriminated against for asserting his or her rights, the person may seek assistance from the U.S. Department of Labor or may file suit in a federal court. The court will decide who should pay court costs and legal fees. If the claimant is successful, the court may order the Employer to pay these costs and fees. If the claimant loses, the court may order the claimant to pay these costs and fees, for example, if it finds the claim to be frivolous.

If an employee covered under a Plan has any questions about the Plan, the employee should contact the Hamilton College Human Resources Department. If an employee has any questions about this statement of the employee's rights under federal law, the employee should contact the nearest Area Office of the U.S. Labor-Management Services Administration, Department of Labor.

Contact Information

The resources identified below are available to assist you if you have any questions about your benefits.

Questions Regarding	Contact	Phone Number	Online/Address	Group Number
General eligibility, enrollment, deductions, plan options, life event changes and COBRA	Kim Hatzinger, Human Resources	315-859-4689	khatzing@hamilton.edu	N/A
Benefit Administration Assistance	AleraCARE	800-836-0026, Option 2	support@aleracare.zendesk.com	N/A
Medical Benefits	Excellus BlueCross BlueShield	800-499-1275	excellusbcbs.com P.O. Box 21146 Eagan, MN 55121-0146	00122472
Prescription Benefits	OptumRx	855-463-6978	optumrx.com OptumRx PO Box 2975 Mission, KS 66201	PURHAMILC
Dental Benefits	Guardian	800-541-7846	Guardian Group Dental Claims P.O. Box 981572 El Paso, TX 79998-1572	532833
Vision Benefits	Guardian	877-814-8970	guardiananytime.com PO Box 385018 Birmingham, AL 35238-5018	532833
Flexible Spending Accounts	Inspira Financial	888-678-8242	inspirafinancial.com Inspira Financial P.O. Box 2495 Omaha, NE 68103	N/A
Life Insurance	Equitable Life Insurance Company	866-274-9887	Equitable's Employee Benefits Group 8501 IBM Drive, Suite150B Charlotte NC 28262	002767
Basic Retirement Plan & Voluntary Retirement Plan	TIAA	800-842-2252	tiaa.org/hamilton	150587/150590
Short-Term Disability **Long-Term Disability**	Michael Thayer, Human Resources Kim Hatzinger, Human Resources	315-859-4688 315-859-4689	mtthayer@hamilton.edu khatzing@hamilton.edu	N/A 70585
Employee Assistance Program	BRiDGES EAP	315-697-3949	bridges-mccasa.org 1507 Upper Lenox Ave. Oneida, NY 13421	N/A
Business Travel Accident Insurance	Auxiliary Services or Human Resources	315-859-4974 315-859-4689	adenny@hamilton.com	9156848
Vacation, Personal Days, Holidays, Tuition Grant Program for Dependent Children	Kim Hatzinger, Human Resources	315-859-4689	khatzing@hamilton.edu	N/A
Sick Leave, Sick and Emergency Leave Banks, Parental Leave, Family Leave	Michael Thayer, Human Resources	315-859-4688	mtthayer@hamilton.edu	N/A
Courses at Hamilton, Tuition for Job-Related Courses, Scholarship Plan for Spouses	Michael Thayer, Human Resources	315-859-4688	mtthayer@hamilton.edu	N/A
Use of College Facilities, Service Recognition, Bereavement, Emergency Loan Fund	Human Resources	315-859-4302	amoskal@hamilton.edu	N/A
Clinton Early Learning Center (childcare)	Early Learning Center	315-859-9702	clintonelc.com	N/A
Payroll Questions	Hamilton Payroll Department	315-859-4316	jwaterma@hamilton.edu	N/A