Amherst College is pleased to provide a comprehensive, competitive benefits program that meet the needs of staff and faculty and their families. Benefits are an important part of our overall compensation, so it is important that you select the options that best meet your needs. This brochure is a summary of the programs available to Amherst staff and faculty. More information on the benefits program is available on the Office of Human Resources website at: https://www.amherst.edu/offices/human_resources/benefits.

Inside This Guide

- Introduction (page 1)
- Health Benefits (page 2)
- Financial Benefits (page 8)
- Time Off (page 9)
- Additional Benefits (page 10)
- Helpful Information (page 11)
- Legal Notices & Disclaimers (page 12)

TIP: click on the HOME button to return to this page to navigate through the benefits listed above. Simply the coverage and you will be redirected to the appropriate page.
Eligibility
All regular staff and faculty are eligible to enroll for Medical, Dental, Vision, Health Care and Dependent Care Flexible Spending Plans, Long Term Disability and Basic and Supplemental Life Insurance benefits within the first 30 days of eligibility. If you do not enroll when first eligible, you must wait until the next open enrollment period (held in May for a July 1 effective date) unless you have a change in family status. Whether you are a new hire or current staff and faculty transferring to a benefits-eligible status, certain benefits are effective the first of the month following 30 days of eligibility. Life and Long Term Disability (LTD) are effective the first of the month following three months of continuous employment. **Note:** you will be automatically enrolled in the LTD and Basic Life Insurance plans.

Staff and faculty are also eligible for the Retirement Plan. You will find a high-level overview of the Retirement Plan on page 8.

Eligible Dependents
In general, dependents eligible for Medical, Dental, Vision, Flexible Spending Plan, and Life Insurance coverage include:

- Legal spouse or domestic partner
- Dependent children up to age 26 regardless of the dependent’s Internal Revenue Service tax qualification status, marital status, student status, or employment status

**Note:** While you can cover your domestic partner on the HDHP medical plan, you cannot use your HSA to pay for their expenses unless they are a qualified tax dependent.

Need Help Choosing Your Benefits? Use ALEX!

ALEX, the official Amherst benefits counselor, walks you through the process of picking your best benefits and provides easy-to-understand explanations for any questions you have along the way. Visit [https://www.myalex.com/amherst/2020](https://www.myalex.com/amherst/2020) to give ALEX a try. See page 5 to learn more!

Paying for Your Benefits
Most benefits are paid for with pre-tax contributions taken from your pay before Federal, Social Security and State taxes are withheld. This lowers your taxable income and your subsequent tax liability, lowering your actual cost for these benefits. **Note:** Supplemental Life, Voluntary Long-Term Disability and Voluntary Long-Term Care premiums are taken post-tax.

Open Enrollment: Your Chance to Review and Change Benefits

Current staff and faculty should review and make changes to their benefits as needed during the annual open enrollment period. Changes in plan participation, other than within 30 days following a change in family status, may be made only during the annual open enrollment period held each spring for the plan year beginning July 1. During this period, staff and faculty may change health plans and/or enroll otherwise eligible dependents.

If you do not enroll by the deadline, you will not be able to make changes during the year unless you have a change in family status, including:

- Marriage, divorce, birth, adoption or death
- An employment status change for you, your spouse or your eligible dependents that impacts benefit eligibility
- Leaving or entering the service area
- A loss or gain of insurance coverage for either you, your spouse or your eligible dependents and
- Staff/faculty or eligible dependent becoming an ineligible dependent (for example, a child reaching the maximum age of 26 to be covered under the medical, dental or vision plans)

If you or one of your covered dependents has a change in family status, you must make changes and provide supporting documentation to HR within 30 days of the event.

How to Enroll
Eligible staff and faculty can enroll for benefits upon three occasions: when newly hired as an employee of the College, when moving to a benefits-eligible position and during annual open enrollment. You must complete the required forms and return them to HR within 30 days of your hire date, or by the open enrollment deadline. You can find the forms at [https://www.amherst.edu/mm/98700](https://www.amherst.edu/mm/98700)
Medical Coverage

Amherst offers you a choice of four* medical plans through Blue Cross Blue Shield of Massachusetts (BCBSMA):

- HMO Blue
- HMO Blue with Deductible
- Blue Choice POS
- Blue Care Elect Saver with Coinsurance (a High Deductible Health Plan with Health Savings Account)

* In addition, there is a PPO plan available for those residing outside Massachusetts. Contact HR for details on this plan.

You can select the option that works best for you and your family. All plans cover a wide range of medical care, prescription drugs and preventive care. The difference between them is whether you must use network doctors (in the HMO plans) and how much you pay for coverage and when you need care. As you make your decision, keep in mind which plan in total will cost you less for the entire year, considering both paycheck deductions and out-of-pocket costs that you expect to need this upcoming year. Do you prefer to have a higher premium deduction taken from your paycheck each pay period and pay less when you use the medical plan? Or would you be comfortable with a lower premium deduction from your paycheck and pay more when (or if) you use services? Use the online ALEX tool to help decide which plan is right for you (see page 5).

About the Blue Care Elect Saver with Coinsurance

Blue Care Elect Saver with Coinsurance is a High Deductible Health Plan (HDHP), with a tax-advantaged Health Savings Account (HSA). The HDHP offers the lowest premiums in exchange for a higher deductible. You will receive an HSA contribution from Amherst to help offset your out-of-pocket costs. You will also be able to make additional HSA contributions out of your paycheck on a pre-tax basis, up to the IRS limits. To enroll in the HSA, contact the Office of Human Resources for the required form.

What’s an HSA?

An HSA is a savings account (owned by you) that allows you to set aside pre-tax dollars to pay for current or save for future health care expenses for you and your eligible dependents. The HSA is administered by Health Equity.

Amherst will contribute $500 for individual coverage and $1,000 for family coverage. The IRS calendar year 2020 HSA contribution limits are $3,550 for individual coverage or $7,100 for family coverage, including Amherst’s contribution.

The money in your HSA rolls over from year-to-year, and the account is portable (you take it with you) in the event you leave Amherst.

Note: If you are enrolling in the HDHP and currently participate in a Health Care Flexible Spending Account, you must have a $0 balance in that FSA as of June 30, 2020. If you have a balance in the FSA, you will NOT be eligible to enroll for the HDHP.

HSA Eligibility

According to IRS regulations, to be eligible to make and receive contributions to an HSA, you must be enrolled in a HDHP. In addition:

- You cannot have other health coverage that pays for out-of-pocket health care expenses before you meet your plan deductible (another high deductible plan is allowed)
- You or your spouse cannot be enrolled in a Health Flexible Spending Account (FSA) in the same year
- If you are enrolled in Medicare or Medicaid, you are not eligible to contribute to the HSA
- You cannot be enrolled in TRICARE, or have received Veterans Administration (VA) health benefits in the previous three months
- You cannot be claimed as a dependent on someone else’s tax return.
**Health Benefits** (continued)

**HSA Contributions**
Amherst contributes to the HSA on your behalf. You can also elect to make pre-tax contributions from your paycheck, up to the IRS limit.

**Deductible**
You pay for covered services up to your deductible amount. The money from your HSA can help pay for these expenses.

**Coinsurance**
After the deductible has been met, you pay a percentage of covered services until you reach the out-of-pocket maximum.

**Plan Pays 100%**
Once your out-of-pocket maximum is reached, the plan pays the full cost of eligible expenses for the rest of the plan year.

Money left in your HSA at the end of the year will roll over to help cover future medical expenses, and can even be used to pay for Medicare premiums in retirement.

You pay less out of your paycheck for premiums and more out of pocket at the point of care.

You must meet a deductible before the plan pays benefits (except for preventive care, which is covered in full); you can use the HSA to pay these expenses on a tax-free basis.

You and the plan then share in the cost of care you receive through coinsurance.

Once you reach the out-of-pocket maximum, the plan pays 100%.

The HDHP will cover the same services as the other options, and you have access to the same network of providers as with the other plans.

**Note:** You may not participate in the Health Flexible Spending Account if you enroll in the High Deductible Health Plan option.

**Terms to Understand**

**Copay:** An amount you pay for a covered service each time you use that service. It does not apply toward the deductible.

**Deductible:** The amount you pay before the plan begins to pay.

**Coinsurance:** Percentage of the charge that your plan will pay, after you have met the deductible.

**Health Savings Account (HSA):** An account with tax-advantages that you can contribute to on a pre-tax basis and use to pay for out-of-pocket medical costs. You can also use the HSA to save for future medical expenses.

**Out-of-pocket costs:** Expenses you pay yourself, such as deductibles, copays, prescription drugs, and dental and vision expense.

**Out-of-pocket maximum:** The maximum amount you pay for covered services in a year. If you hit the maximum, the plan will pay 100% of covered services for the remainder of the year.

**Premium:** The amount you pay for medical coverage from your paycheck.

On the Human Resources website, the following items, and other information will assist you in evaluating your options.

- A **Summary of Benefits and Coverage (SBC)** is intended to give participants clear and consistent information about their health plan and a glossary of common health care terms, helping them to better understand and evaluate their choices. A copy of each plan’s SBC is located on the Office of Human Resources’ website, or a paper copy can be requested by contacting the Office of Human Resources.

- A **calculation tool** to help you estimate your costs, and to determine your potential savings.

- A **summary of the coverage differences** between the HMO Blue, Blue Choice, HMO Blue Deductible and Blue Care Elect Saver with Coinsurance plans.

Massachusetts and current federal law requires each employee to have health plan coverage to avoid facing certain tax penalties.
## MEDICAL PLAN OPTIONS

<table>
<thead>
<tr>
<th>Annual Deductible</th>
<th>HMO Blue In-Network Only</th>
<th>HMO Blue Deductible In-Network Only</th>
<th>Blue Choice POS PCP/Plan Approved</th>
<th>Blue Care Elect Saver with Coinsurance In-Network</th>
<th>Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
<td>$0</td>
<td>$500 Individual</td>
<td>$0 Individual</td>
<td>$1,500 Individual</td>
<td>$3,000 Individual</td>
</tr>
<tr>
<td>Family</td>
<td>$0 Family</td>
<td>$1,000 Individual</td>
<td>$0 Family</td>
<td>$3,000 Family</td>
<td>$6,000 Family</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Annual Out-of-Pocket Maximum</th>
<th>Medical: $2,000 Individual</th>
<th>Prescription Drugs: $1,000 Individual</th>
<th>Medical: $2,000 Individual</th>
<th>Prescription Drugs: $1,000 Individual</th>
<th>Medical: $3,000 Individual</th>
<th>Prescription Drugs: $6,000 Individual</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-Network Only</td>
<td>Medical: $2,000 Individual</td>
<td>Prescription Drugs: $1,000 Individual</td>
<td>Medical: $2,000 Individual</td>
<td>Prescription Drugs: $1,000 Individual</td>
<td>Medical: $6,000 Individual</td>
<td>Prescription Drugs: $12,000 Individual</td>
</tr>
<tr>
<td>Approved</td>
<td>PCP/Plan Approved</td>
<td>Self-Referred</td>
<td>PCP/Plan Approved</td>
<td>Self-Referred</td>
<td>PCP/Plan Approved</td>
<td>Self-Referred</td>
</tr>
<tr>
<td>Out-of-Network</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| PCP Office Visit            | $15 copay                 | $20 copay                             | $15 copay                  | 20% coinsurance after deductible        | 10% coinsurance after deductible | 30% coinsurance after deductible |
| Specialist Office Visit     | $15 copay                 | $30 copay                             | $15 copay                  | 20% coinsurance after deductible        | 10% coinsurance after deductible | 30% coinsurance after deductible |
| Emergency Room              | $75 copay                 | $100 copay                            | $75 copay                  | $75 copay                              | $150 after deductible          |
| Outpatient Hospital         | $150 copay                | No charge after deductible            | $150 copay                 | 20% coinsurance after deductible        | 10% coinsurance after deductible | 30% coinsurance after deductible |
| Inpatient Hospital          | $250 copay                | No charge after deductible            | $250 copay                 | 20% coinsurance after deductible        | 10% coinsurance after deductible | 30% coinsurance after deductible |
| Diagnostic Labs, Tests, X-Rays | Covered in full             | Covered in full                       | Covered in full            | 20% coinsurance after deductible        | 10% coinsurance after deductible | 30% coinsurance after deductible |

### Prescription Drugs - Pharmacy

#### (30 Day Supply)

<table>
<thead>
<tr>
<th>Generic: $5 copay</th>
<th>Preferred Brand Name: $25 copay</th>
<th>Non-Preferred Brand Name: $50 copay</th>
<th>Generic: $10 copay</th>
<th>Preferred Brand Name: $30 copay</th>
<th>Non-Preferred Brand Name: $50 copay</th>
<th>Not covered After Deductible: Generic: $10 copay</th>
<th>Preferred Brand Name: $25 copay</th>
<th>Non-Preferred Brand Name: $50 copay</th>
</tr>
</thead>
</table>

#### (90 Day Supply)

<table>
<thead>
<tr>
<th>Generic: $10 copay</th>
<th>Preferred Brand Name: $50 copay</th>
<th>Non-Preferred Brand Name: $100 copay</th>
<th>Generic: $20 copay</th>
<th>Preferred Brand Name: $60 copay</th>
<th>Non-Preferred Brand Name: $100 copay</th>
<th>Not covered After Deductible: Generic: $20 copay</th>
<th>Preferred Brand Name: $60 copay</th>
<th>Non-Preferred Brand Name: $150 copay</th>
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## Medical Plan Monthly Rates (July 1, 2020 – June 30, 2021)

<table>
<thead>
<tr>
<th>Individual</th>
<th>$123.17</th>
<th>$67.48</th>
<th>$268.01</th>
<th>$43.76</th>
</tr>
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<tbody>
<tr>
<td>Family</td>
<td>$525.63</td>
<td>$379.64</td>
<td>$902.97</td>
<td>$258.27</td>
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</table>

## Medical Plan Weekly Rates (July 1, 2020 – June 30, 2021)

<table>
<thead>
<tr>
<th>Individual</th>
<th>$28.42</th>
<th>$15.57</th>
<th>$61.85</th>
<th>$10.10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family</td>
<td>$121.30</td>
<td>$87.61</td>
<td>$208.38</td>
<td>$59.60</td>
</tr>
</tbody>
</table>

## Sliding Scale

Through a program referred to as “Sliding Scale” the College generally subsidizes an additional portion of the premium cost for medical and dental coverage, depending on household income. The participant pays the balance. The income levels at which higher contributions are made are subject to periodic review.

You can use ALEX to determine if you are eligible for the slide scale contribution; just scan this code. Visit the Human Resources website to learn more about the sliding scale and required forms.
Flexible Spending Accounts
(The Amherst Plan)

The Amherst Plan allows eligible participants to contribute pre-tax dollars, through payroll deductions, to pay for many dependent care expenses and eligible medical expenses not covered by the health or dental plans. You may enroll in either or both the Health and Dependent Care Spending Accounts. Elections to the Health Care Spending Account cannot exceed $2,750 and elections to the Dependent Care Spending Account cannot exceed $5,000. Additional information is available on the Human Resources website. You may not participate in the Health Flexible Spending Account if you enroll in the High Deductible Health Plan option. In addition, you cannot have a balance in your current FSA as of June 30, 2020 in order to receive and make HSA contributions.

Note: You must re-enroll in the Flexible Spending Plans each year you want to participate; IRS rules do not allow you to contribute to the plan unless you make an election each year.

Retiree Health Program

Through this defined contribution plan, starting at age 40 the College sets aside a percentage of the current Medicare supplement for each eligible staff and faculty. Vesting of a participant’s account occurs with retirement from the College at age 62 or older and 10 years of service. At retirement funds are contributed to a health retirement account from which a retiree may receive a reimbursement for eligible expenses. Staff and faculty that were hired prior to June 30, 2003 are grandfathered under certain features of the post-retirement health coverage and may be eligible for a free Medicare supplement plan.

Use ALEX to Choose Your Benefits

ALEX is an easy-to-use online tool that asks a series of questions to help you determine which benefit plans are right for you.

ALEX uses your responses – including information about your family situation, location, coverage needs, and preferences – to help you make decisions. It can provide plan details, estimate out-of-pocket costs, and compare plans. No information entered into ALEX is shared with Amherst.

ALEX is optimized for any device, including your phone, for benefits guidance from home. Most users spend about 7 minutes with ALEX, but it depends upon how much guidance you’d like.

Scan this code on your phone or visit https://www.myalex.com/amherst/2020 to give ALEX a try.
Well-Being at Amherst

Well-being is more than wellness – it encompasses your physical, financial and emotional health. Here are some of the programs Amherst offers to help you manage your well-being.

### Physical Well-Being

- **Preventive Care at No Cost to You** if received from network providers.
- **Find a Doctor & Estimate Costs** tool to understand your costs for medical care and services. Visit [https://myblue.bluecrossma.com/health-plan/find-doctor-provider-dentist](https://myblue.bluecrossma.com/health-plan/find-doctor-provider-dentist) or call Member Services at 800-358-2227
- **Telehealth** to arrange a video visit with a medical or behavioral health provider (see below).
- **$150 gym membership** and **$150 weight loss program reimbursements**
- **HRWellness@Amherst**: In conjunction with BCBS, the College offers a separate website, ahealthyme ([https://bluecrossma.ahealthyme.com/dt/v2/bcbsmaindex.asp](https://bluecrossma.ahealthyme.com/dt/v2/bcbsmaindex.asp)). On this site, you will be able to access information about online wellness classes, read articles about health-related issues, take part in “wellness challenges” that can earn you rewards, and much more.

### Financial Well-Being

- **TIAA Available Financial Webinars**: TIAA offers a wide range of webinars that are available to all staff and faculty along with their dependents.
- **Care.com** provides local services for child care, senior care, special needs care, tutoring, pet care and housekeeping. Members can log in to the website and select the provider that meets their needs. This benefit helps staff and faculty with their work/life balance and in the event of life’s unexpected challenges. Visit [amherstcollege.care.com](http://amherstcollege.care.com) or call 855-781-1303 (enter your Amherst employee ID to validate your employment when enrolling)
- **Benefit Hub** is a reward portal that allows for discounted pricing on merchandise. Computers, cars and movie tickets are just a few of the many services that can be purchased through this platform. You can also receive preferred pricing through Nationwide Pet Insurance, which includes fixed premiums and no age limits or age based premium increases. Review the BenefitHub video for more information about this program: [https://benefithub.wistia.com/medias/mo6lxk95m5](https://benefithub.wistia.com/medias/mo6lxk95m5). Go to [Amherst.benefithub.com](http://Amherst.benefithub.com) and enter Referral Code: J2AUOK and complete your registration.

### Emotional Well-Being

- **Employee Assistance Program**: New Directions offers a wide range of services, workshops and phone consultations to help you manage life’s situations. Some of the resources and services available include:
  - Family and Caregiving assistance and services
  - Daily Living (legal, financial and convenience) consultations and referrals
  - Emotional Well-Being counseling services and referrals
  - Health and Wellness services and programs

You can access New Directions at (800) 624-5544 and [http://eapndbh.com](http://eapndbh.com) [company code: Amherst College]. To read more about the services offered and how to access New Directions, please visit the New Directions webpage on the Human Resources website. Accessing and using these services is confidential.
Dental Coverage

Amherst College also offers a choice of dental plans. Both plans provide comprehensive coverage, however, one plan provides a higher calendar year and orthodontia coverage for adults and dependents. You do not need to be enrolled in medical to elect a dental plan.

<table>
<thead>
<tr>
<th>DENTAL PLAN OPTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dental Blue with Orthodontia</td>
</tr>
<tr>
<td><strong>Annual Deductible</strong></td>
</tr>
<tr>
<td><strong>Preventive and Diagnostic Care (cleanings, x-rays)</strong></td>
</tr>
<tr>
<td><strong>Basic Treatment (fillings, oral surgery)</strong></td>
</tr>
<tr>
<td><strong>Major Treatment (bridges, crowns, dentures)</strong></td>
</tr>
<tr>
<td><strong>Orthodontia</strong></td>
</tr>
<tr>
<td><strong>Annual Limit</strong></td>
</tr>
</tbody>
</table>

**Dental Plan Monthly Rates (July 1, 2020 – June 30, 2021)**

<table>
<thead>
<tr>
<th></th>
<th>Individual</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dental</td>
<td>$14.61</td>
<td>$57.91</td>
</tr>
<tr>
<td>Blue</td>
<td>$8.14</td>
<td>$37.86</td>
</tr>
</tbody>
</table>

**Dental Plan Weekly Rates (July 1, 2020 – June 30, 2021)**

<table>
<thead>
<tr>
<th></th>
<th>Individual</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dental</td>
<td>$3.37</td>
<td>$13.36</td>
</tr>
<tr>
<td>Blue</td>
<td>$1.88</td>
<td>$8.74</td>
</tr>
</tbody>
</table>

Vision Coverage

You may also elect vision coverage, which is provided through EyeMed. The plan covers vision exams, frames, lenses and contacts. You pay less when you use network providers, which include both private practitioners and large national retail chains (Lenscrafters, Target Optical, JCPenney Optical, and more). You pay the full cost of coverage, and you do not have to be enrolled in a medical plan to enroll for vision. You can learn more on the Human Resources website.

<table>
<thead>
<tr>
<th>Vision Plan Monthly Rates (July 1, 2020 – June 30, 2021)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
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<tr>
<td>Family</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Vision Plan Weekly Rates (July 1, 2020 – June 30, 2021)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
</tr>
<tr>
<td>Family</td>
</tr>
</tbody>
</table>
**Financial Benefits**

**Disability**
The College contracts with Prudential Insurance – one of the leading insurance carriers in the U.S. – to administer the Short and Long Term Disability programs. Prudential provides claim review and case management services, to help streamline the employee experience. If you have questions, contact Prudential at 800-842-1718.

**Short Term Disability:** After one year of service working a minimum of 20 hours per week, regular staff and faculty are eligible for paid time-off due to the employee’s own disability (up to a maximum of six months). Short term disability pay begins after a two-week waiting period at the following schedule:

<table>
<thead>
<tr>
<th>Length of Service</th>
<th>Percentage of Pay</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 – 3 years</td>
<td>70% pay</td>
</tr>
<tr>
<td>4 – 6 years</td>
<td>80% pay</td>
</tr>
<tr>
<td>7 – 9 years</td>
<td>90% pay</td>
</tr>
<tr>
<td>10+ years</td>
<td>100% pay</td>
</tr>
</tbody>
</table>

**Long Term Disability:** After a six-month absence due to disability, and approval by Prudential, the benefit will pay 60% of the annual salary in effect at commencement of disability. The maximum benefit is $15,000 per month. The College pays the full cost of the insurance; no employee contribution required. Coverage for all regular staff and faculty is effective the first of the month following three months of employment.

**Life Insurance**
Coverage for all regular staff and faculty is effective the first of the month following three months of employment.

The College pays the full cost of Basic Life Insurance coverage equal to 1.5 times annual salary to a limit of $600,000, at no cost to the staff and faculty. Basic coverage reduces to one times salary at age 65 and to 67% of salary at age 70.

You may purchase Supplemental Life Insurance equal to 1, 2, 3, 4, or 5 times your salary. The combined maximum amount for Supplemental and Basic Life Insurance is $750,000.

You may elect Spouse/Partner Life Insurance at $10,000, $25,000 or $50,000 of coverage. Child Life Insurance is available at a flat $10,000 of coverage per child.

**Note:** Some amounts of life insurance require evidence of good health.

**Retirement Plan**
Preparing for your future financial security requires careful planning. The Amherst College Defined Contribution Retirement Plan, which includes voluntary contributions, can help you meet your retirement goals. You are eligible to begin contributing on your first day of employment, and you will begin receiving College contributions after two years of continuous regular employment.

- **Voluntary Staff and Faculty Contributions:** You can elect to contribute up to $19,500 per year (or $26,000 if you are age 50 or older). You may make contributions into tax-deferred options through salary reduction, which lowers your taxable income while you save for retirement.

- **Automatic Enrollment:** If you do not enroll within 30 days of becoming eligible for the plan, you will be automatically enrolled at 3% of eligible compensation. You can choose to contribute more, less or nothing.

- **Auto Save:** You can also elect to participate in the Auto Save feature that will automatically increase your voluntary contributions based on the criteria you set.

- **College Matching Contributions:** Amherst will match your contributions to the plan, up to 3% of eligible compensation. You become vested in matching contributions after two years.

- **College Core Contributions:** The College will contribute 6.8% of eligible compensation up to one-half of the federal Social Security wage cap on July 1 each year (FY2020: $68,850 since the 2020 wage cap is $137,700) and 9% over the base.

The retirement plan is administered by TIAA. To learn more, visit the Amherst College microsite at TIAA (https://www.tiaa.org/public/tcm/amherst). From this site you are also able to gain access to your account and utilize many useful tools for retirement planning. You can change elections, direct transfers between funds, and change the way your future contributions are invested.
The College provides a variety of leave programs for staff and faculty.

**Vacation**

The amount of vacation depends on service and employee type. Staff and faculty begin accruing vacation on their first day of employment, and time is available as accrued. You may carry over up to one year’s accrual to the next year. Time off should be arranged in advance with the approval of your supervisor.

<table>
<thead>
<tr>
<th>Non-Exempt Vacation Accrual</th>
<th>Exempt Vacation Accrual</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-5 years</td>
<td>1-10 years</td>
</tr>
<tr>
<td>12 days</td>
<td>20 days</td>
</tr>
<tr>
<td>5-10 years</td>
<td>10+ years</td>
</tr>
<tr>
<td>15 days</td>
<td>25 days</td>
</tr>
<tr>
<td>10-20 years</td>
<td></td>
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<td>20 days</td>
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<td>20+ years</td>
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<tr>
<td>25 days</td>
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Vacation time is tracked and paid out at termination of employment. Accrued time will appear on the paycheck of non-exempt staff and faculty. Exempt staff and faculty, along with their supervisor, are responsible for the tracking of vacation time.

**Floating Holidays**

Regular full-time, fiscal year staff and trustee-appointed employees are entitled to 4.5 floating holidays per fiscal year. These days may be used for personal, religious, or government holidays that are not observed as regular College Holidays. Floating Holidays do not roll over to subsequent years and are forfeited if unused. Use of Floating Holidays should be arranged in advance. They are not paid out at termination of employment.

**Excused Time**

Time equal to two workdays per year is available for personal emergencies or scheduled business such as a mortgage closing that cannot be conducted during regular business hours. If the reason is not an emergency, the staff and faculty should give the reason and advance notice for the use of excused time to their supervisor. Excused days are not carried over and are not paid out at termination.

**Sick/Family Care Leave Days**

Each fiscal year each staff and faculty receives one day of sick/family care leave for each month worked in that fiscal year. Sick/family care leave days may be used for your own illness, ill family member, birth or adoption of a child, or to supplement Short Term Disability (STD). Medical/family leave days may accumulate to 130 days with no replenishment (if used, they must be re-accrued). They may accrue, with carryover to following years, to a total of 130 days. The balance of any unused sick/family care leave days is not paid out at termination.

**Extended Family Leave**

After one consecutive year of employment, four weeks at 100% pay are available after a two-week waiting period. One extended family leave may be taken within a rolling calendar year. Extended family leave may be used when you are needed to provide care as the primary caregiver for more than 10 consecutive workdays. It may be used for the care of a newborn child, adoption, or serious illness of a family member. When a spouse and partner are both employed by the College, combined paid leave under this policy will not exceed four weeks for any one reason.
Additional Benefits

Research Leave
The President and your Department Head will consider requests for leaves to pursue research or study projects for regular, benefited employees who have worked for the College for six continuous years. If approved, this leave is taken as one continuous leave for three months at full pay or six months at half pay, or as a series of short leaves totaling no more than 65 working days during a period, not to exceed two years. Full benefits will continue during the leave. Please contact Human Resources for additional terms.

Grant in Aid
After the full time equivalent of five years of continuous regular status employment, a staff or faculty member’s dependent child may receive up to a certain dollar amount per fiscal year of tuition cost for full-time, matriculated, undergraduate study at a two or four-year institution. Contact HR for the current benefit.

Professional Development
Regular full-time, and part-time staff and faculty on a prorated basis, are eligible to receive reimbursement for tuition, certificate programs, registration and lab fees for approved courses, which are either job-related or non-job-related, but directly related to future career opportunities at the College. The maximum reimbursement per fiscal year is $3,000 after one year of continuous employment for job-related courses, and 50% of the costs to a maximum of $1,500, for non-job-related courses after three years of continuous employment.

Death in Service Benefit
In case of the death of a regular staff or faculty, the College will give to their spouse or domestic partner, or if none, their dependent(s), a death in service benefit. This is in addition to TIAA Retirement benefits, if applicable, and life insurance benefits. The benefit is equal to one month’s pay, if the deceased was employed by the College for less than five years; three months’ pay, if employed between five and ten years; and six month’s pay, if employed for ten years or longer. Only time in regular employment at the College will be counted toward this benefit.

Other Benefits
Amherst provides many other benefits, including:
- Voluntary benefits, including Long Term Disability and Long-Term Care
- Commuter benefits
- Loans for computer device purchase
- Free parking
- Free access to the library and museums
- Reduced cost of meals
- Use of the gym

Visit the Human Resources website to learn more about these programs.
# Important Contacts

<table>
<thead>
<tr>
<th>Medical</th>
<th>Blue Cross Blue Shield of Massachusetts</th>
<th>800-358-2227</th>
<th>bcbsma.com</th>
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<tbody>
<tr>
<td></td>
<td>BCBSMA Care Concierge</td>
<td>888-456-1351</td>
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<tr>
<td></td>
<td>BCBSMA Nurse Care Line</td>
<td>888-247-2583</td>
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<td></td>
<td>Prescription Mail Service Pharmacy</td>
<td>800-892-5119</td>
<td></td>
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<tr>
<td>Dental</td>
<td>Blue Cross Blue Shield of Massachusetts</td>
<td>800-358-2227</td>
<td>bcbsma.com</td>
</tr>
<tr>
<td>Vision</td>
<td>EyeMed</td>
<td>866-804-0982</td>
<td>eyemed.com</td>
</tr>
<tr>
<td>Health Savings Account</td>
<td>HealthEquity</td>
<td>866-346-5800</td>
<td>healthequity.com</td>
</tr>
<tr>
<td>Flexible Spending Accounts</td>
<td>WageWorks</td>
<td>877-924-3967</td>
<td>wageworks.com</td>
</tr>
<tr>
<td>Employee Assistance Program</td>
<td>New Directions</td>
<td>800-624-5544</td>
<td>eap.ndbh.com</td>
</tr>
<tr>
<td>Life Insurance, Short-Term Disability, Long-Term Disability</td>
<td>Prudential</td>
<td>800-842-1718</td>
<td>prudential.com/mybenefits</td>
</tr>
<tr>
<td>Retirement Plan</td>
<td>TIAA</td>
<td>800-842-2252</td>
<td>TIAA.org/Amherst</td>
</tr>
<tr>
<td>Care.com</td>
<td>Care.com</td>
<td>855-781-1303</td>
<td>amherstcollege.care.com</td>
</tr>
<tr>
<td>BenefitHub</td>
<td>BenefitHub</td>
<td>866-664-4621</td>
<td>amherst.benefithub.com</td>
</tr>
<tr>
<td>Leave, Professional Development &amp; Other Benefits</td>
<td>Human Resources</td>
<td>413-542-2372</td>
<td><a href="mailto:hr@amherst.edu">hr@amherst.edu</a></td>
</tr>
</tbody>
</table>
**Legal Notices and Disclaimers**

**Your Privacy Rights**

It is each Amherst health plan’s policy to protect your health information to the extent required by applicable law, including the Health Insurance Portability and Accountability Act of 1996 (HIPAA). All health plans will make reasonable effort to use, share or request only the minimum necessary information to accomplish the intended purpose, taking into consideration practical and technological limitations.

**HIPAA Privacy Notice**

Annual notice of your rights under the law. Any health information that is collected or maintained by Amherst’s medical plan, dental plan, vision plan, Health Care Flexible Spending Account (FSA) or other plan for you or a covered family member is protected. Amherst and its business associates are committed to protecting the privacy of your health information. A Notice of Privacy Practices, which sets forth the circumstances under which the plans may use and/or disclose your health information, is available at [https://www.amherst.edu/mm/561614](https://www.amherst.edu/mm/561614).

**HIPAA Special Enrollment Rights**

The following rules apply under HIPAA. If you do not enroll in a medical plan for yourself or your dependents (including your spouse/partner) when you are first eligible because you have other health insurance coverage, you may be eligible to enroll yourself or your dependents at a future date, provided that you request enrollment within 30 days after your other coverage ends (or if the employer stops contributing toward your or your dependents’ other coverage). In addition, if you have a new dependent as a result of marriage, birth, adoption or placement for adoption, you may be eligible to enroll yourself and your dependents, provided that you request enrollment within 30 days after the marriage, birth, adoption or placement for adoption. To request special enrollment or to obtain more information, please contact HR. If you do not enroll within the 30-day period following such an event, your next chance to enroll will be during the annual Open Enrollment period.

**Health Care Exchange**

You have the opportunity to enroll in a plan through the Health Care Exchange. Go to [www.healthcare.gov](http://www.healthcare.gov) for options and costs. Amherst’s full notice on this can be found on [https://www.amherst.edu/offices/human_resources/benefits/news-about-health-insurance-exchanges](https://www.amherst.edu/offices/human_resources/benefits/news-about-health-insurance-exchanges).

**The Women’s Health and Cancer Rights Act of 1998**

Annual notice of your rights under the law. Under an Amherst medical plan, coverage will be provided to a member who is receiving benefits for a medically necessary mastectomy and who elects breast reconstruction after the mastectomy for:

- Reconstruction of the breast on which a mastectomy has been performed
- Surgery and reconstruction of the other breast to produce a symmetrical appearance
- Prostheses and
- Treatment of physical complications of all stages of mastectomy, including lymphedema

This coverage will be provided in consultation with the attending physician and the patient, and will be subject to the same annual deductibles and coinsurance provided for the mastectomy.

**Newborns’ and Mothers’ Health Protection Act of 1996**

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 issuer for prescribing a length of stay not in excess of 48 hours (or 96 hours). To obtain a copy of the Privacy Notice or for more information on the Plan’s privacy policies or your rights under Health Insurance Portability and Accountability Act (HIPAA), you may contact HR.

**Family Medical Leave Act (FMLA)**

As an eligible employee, you can receive up to 12 weeks of time off in situations such as the birth or adoption of a child, an employee’s serious illness, or the need to be a caregiver for a seriously ill immediate family member.

**Workers’ Compensation**

As an Amherst employee, your enrollment in our workers’ compensation program is automatic and at no cost to you. If you become injured on the job, however, your specific benefits are established by the state where the injury occurred.

Amherst’s workers’ compensation insurance covers medical expenses and lost wages due to a work-related injury. For details, contact Human Resources.
**Patient Protection Disclosure**
Amherst College’s HMO and POS health plans requires the designation of a primary care provider (PCP). You have the right to designate any primary care provider who is in-network and who is available to accept you or your family members. Until you make this designation, Blue Cross Blue Shield of Massachusetts group health plan designates one for you. For information on how to select a primary care provider, and for a list of the participating primary care providers, contact Blue Cross Blue Shield of Massachusetts at [www.bcbsma.com](http://www.bcbsma.com) or 888-456-1351.

- For children you may designate a pediatrician as the primary care provider.
- You do not need prior authorization from Blue Cross Blue Shield of Massachusetts or from any other person (including a primary care provider) in order to obtain access to obstetrical or gynecological care from a health care professional in our network. The health care professional, however, may be required to comply with certain procedures, including obtaining prior authorization for certain services, following a pre-approved treatment plan, or procedures for making referrals. For a list of participating health care professionals who specialize in obstetrics or gynecology, contact Blue Cross Blue Shield of Massachusetts at [www.bcbsma.com](http://www.bcbsma.com) or 888-456-1351.

**Mental Health Parity and Addiction Equity Act of 2008**
In accordance with the law, mental health and substance abuse benefits are provided in the same manner as medical and surgical benefits. The medical plans meet the requirements for equity between medical benefits and mental health/substance abuse benefits in:

- Financial requirements, including deductibles, copays, coinsurance and out-of-pocket expenses
- Treatment limits, including number of visits and days of coverage; and out-of-network coverage

**COBRA Rights**
If your employment with the company ends, your health coverage will end on the last day of the pay period in which you terminate. If you wish to continue coverage beyond this date, you may be eligible to elect COBRA continuation coverage if you timely elect it. Contact HR for more information.

**Important Information About Your Prescription Drug Coverage and Medicare**
Amherst has determined that the prescription drug coverage offered under each of its medical plans described in this guide is, on average for all plan participants, expected to pay out as much as the standard Medicare prescription drug coverage will pay. You should compare the coverage available to you from Amherst, including which drugs are covered, with the coverage and cost of the plans offering Medicare prescription drug coverage in your area and determine which is best for you. If you decide to enroll in an Amherst medical plan, you will have the opportunity to enroll in a Medicare prescription plan when your Amherst coverage ends.

A Medicare Part D creditable coverage notice is available at [https://www.amherst.edu/mm/561614](https://www.amherst.edu/mm/561614). More information about Medicare prescription drug coverage is available by calling 1-800-MEDICARE, visiting [www.medicare.gov](http://www.medicare.gov) or contacting your state’s health insurance assistance program.

**Minimum Creditable Coverage**
Most Massachusetts residents age 18 or older must have affordable health coverage that meets Minimum Creditable Coverage (MCC) standards. Although employers are not required to provide health coverage to their Massachusetts employees or meet MCC standards, the Massachusetts Health Connector agency has requested that employers help their employees meet MCC requirements. While there appear to be no requirements that carriers or employers notify individuals in advance as to whether or not the coverage available for election meets MCC requirements, Massachusetts employees should know this information before signing up for employer-sponsored coverage.

In addition, reporting obligations apply to those whose employee health benefits do meet MCC standards. All employers or their vendors that provide “creditable coverage” as of any December 31 to an employee who resides in Massachusetts must send the employee Form 1099-HC no later than January 31 of the next calendar year.
This Benefits Guide provides a summary of some of the benefit plans offered to Amherst College staff and faculty. If there are discrepancies between the information included in this guide and the applicable plan documents or insurance contracts, the plan documents and insurance contracts will govern in all cases. Amherst College reserves the right to amend or discontinue the plans described in this guide at any time.

May 2020