2023 BENEFITS

Harvard Faculty, Administrative and Professional Staff, and Other Nonunion Staff

OPEN ENROLLMENT
October 25–November 3, 2022
Benefits Open Enrollment for Harvard Faculty, Administrative and Professional Staff, and Other Nonunion Staff is October 25–November 3, 2022. For more information, visit hr.harvard.edu/open-enrollment-2023.

MAKE IT YOUR HARVARD BENEFITS OPEN ENROLLMENT

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ATTEND THE VIRTUAL BENEFITS FAIR
Visit our Virtual Benefits Fair on Thursday, October 27, 2022. Many of our carriers will be available to answer questions between 11:00 a.m. and 2:00 p.m. ET. Register today.

HAVE QUESTIONS ABOUT YOUR BENEFITS?
You can learn more about your benefit options by going to HARVie.

Medical
hr.harvard.edu/medical

Dental
metlife.com/Harvard-Dental

Vision
hr.harvard.edu/vision

Flex Spending Accounts
hr.harvard.edu/flexible-spending-accounts

Disability and Life
hr.harvard.edu/disability

Reimbursement Program
hr.harvard.edu/reimbursement-programs

Legal Plan and Identity Theft Protection
hr.harvard.edu/employee-discounts
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**REVIEW YOUR BENEFITS CHECKLIST**

**PREPARE**
- Attend our [Virtual Benefits Fair](#) on Thursday, October 27, 2022, to hear from our benefit providers and get answers to your questions.
- Visit the Open Enrollment page on [HARVie](#) to learn more about your benefit options.
- Have questions? Email [benefits@harvard.edu](mailto:benefits@harvard.edu) or call 617-496-4001 any business day between 9:00 a.m. and 5:00 p.m. ET.

**REVIEW**
- Review your [medical](#), [dental](#), and/or [vision](#) coverage.
- Consider additional [life insurance](#) (including Dependent Life Insurance), [Long Term Disability (LTD) Insurance](#), [Legal Plan](#), and/or [Identity Theft Protection](#).
- Review the common [Open Enrollment Mistakes](#) (and how to avoid them) and the answers to [Frequently Asked Questions (FAQs)](#) before making your elections.

**ACT**
- Make changes to your medical, dental, and/or vision care coverage.
- **Estimate** your family’s out-of-pocket health care costs if you want to contribute to a Health Care FSA.
- **Determine** your family’s child or adult care costs if you want to contribute to a Dependent Care FSA.
- Enroll in the Flexible Spending Account (FSA) that suits your needs: Health Care, Limited Purpose (if you enroll in a Health Savings Account [HSA]), and/or Dependent Care. Please read the Common Open Enrollment mistakes on page 19 to learn more about each FSA.
- **Remember**: If you enroll in a High Deductible Health Plan (HDHP), make sure you enroll in the HSA to receive your tax-free contribution from Harvard. If you do not wish to make your own contribution, make an election of $0.

**DON’T FORGET TO MAKE YOUR BENEFIT ELECTIONS BY 11:59 P.M. ET ON THURSDAY, NOVEMBER 3, 2022.**

Have questions for your health plan administrator?
- Call HUGHP at 617-495-2008 or visit [hughp.harvard.edu](http://hughp.harvard.edu).
- Call BCBSMA at 888-389-7732 or visit [bluecrossma.com](http://bluecrossma.com).
EXPLORE YOUR BENEFITS

WHAT’S CHANGING
EFFECTIVE JANUARY 1, 2023

HUGHP POS and POS+ service area
Effective January 1, 2023, you must have a MA address to be enrolled in the Harvard University Group Health Plan (HUGHP) POS or POS Plus.

If you are enrolled in the HUGHP POS or POS Plus, live outside MA, and do not elect a new plan during Open Enrollment, your health plan will be selected for you based on where you live:

- If you live **inside New England**, you’ll be enrolled in the BCBSMA POS or POS Plus
- If you live **outside New England**, you’ll be enrolled in the BCBSMA PPO or PPO Plus

Dental insurance
The dental insurance carrier will change from Delta Dental to MetLife Dental effective January 1, 2023. If you are enrolled in Delta Dental, you will receive a new MetLife insurance card to use effective January 1, 2023.

Telehealth copayments
Effective January 1, 2023, telehealth copayments will be reduced to $15 under the BCBSMA or HUGHP HMO, POS, POS Plus, PPO, or PPO Plus medical plans for all services (behavioral health and medical) via Well Connection, and behavioral health services via any in-network telehealth provider.

Due to federal regulations, this change does not apply to the BCBSMA HDHP.

Harvard Benefits Open Enrollment is your opportunity to review and make changes to your health and welfare benefit elections for 2023. From medical plans to tax-advantaged medical reimbursement accounts, you can select the benefits that best meet your or your family’s needs.

Please take the time to read through this brochure and ensure that you understand the full spectrum of benefits available to you.

**Medical/Vision** | Page 5/16
Your 2022 election will continue unless you are enrolled in the HUGHP POS or POS Plus and reside outside Massachusetts.* If you want to change, elect, or drop coverage, or add/remove a dependent, you must do so during Open Enrollment.

**NEW: Dental** | Page 16
The dental carrier will change to MetLife Dental. If you are covered under Delta Dental, you will receive a MetLife insurance card to use effective January 1, 2023.

**FSA** | Page 12
Your 2022 FSA elections do not carry over to 2023. If you want to elect a Health Care FSA, a Limited Purpose FSA for dental and vision expenses (if you enroll in the HSA), and/or a Dependent Care FSA, you must do so during Open Enrollment.

**HSA** | Page 13
Your 2022 election will continue for 2023. See page 13 for details on 2023 limits and Harvard’s contribution. If you do not wish to make your own contributions, elect $0.

**LTD** | Page 16
Your 2022 election will continue. You can enroll in or drop LTD coverage at any time. Evidence of insurability is required when enrolling during Open Enrollment.

**Supplemental/Dependent Life Insurance** | Page 17
Your 2022 election will continue. You can enroll in or drop Supplemental/Dependent Life Insurance at any time. You must be enrolled in Supplemental Life Insurance to elect Dependent Life Insurance. A Statement of Health is required for supplemental and spouse/domestic partner (DP) coverage.

**Legal Plan/Identity Theft Protection** | Page 18
Your 2022 election will continue. Open Enrollment is your only opportunity to elect or drop the Legal Plan or Identity Theft Protection.

* See What’s Changing and HARVie for more information.
**COMPARE MEDICAL PLANS**

**YOUR MEDICAL PLAN OPTIONS**

Harvard offers you a choice of several medical plans, listed below. For more information, visit your preferred health plan’s website. For 2023, Harvard will offer subsidized medical coverage from Harvard University Group Health Plan (HUGHP) and Blue Cross Blue Shield of MA (BCBSMA).* If you enroll in a HUGHP plan, you must choose a primary care provider (PCP) within the Harvard University Health Services (HUHS) or Atrius Health provider network. **Effective January 1, 2023, you must have a MA address to be enrolled in any of the HUGHP options.** You may select from the following plans:

<table>
<thead>
<tr>
<th><strong>Plan</strong></th>
<th><strong>BCBSMA</strong></th>
<th><strong>HUGHP†</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health Maintenance Organization (HMO)</strong> – With an HMO, you select a PCP who coordinates your care and can provide you with referrals to in-network specialists. Out-of-network care is not covered except in certain emergency situations.</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td><strong>Point-of-Service (POS)</strong> – As with an HMO, you designate a PCP. However, you have the flexibility to use out-of-network providers with higher out-of-pocket costs.</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td><strong>POS Plus</strong> – Offering the same benefits as a traditional POS, the POS Plus plan has higher premiums and a higher out-of-pocket maximum in exchange for no deductible or coinsurance for in-network services.</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td><strong>High Deductible Health Plan (HDHP)</strong> – Featuring lower premiums and higher deductibles than a traditional health plan, an HDHP is offered in conjunction with an HSA. See page 13 for more information on HSAs.</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td><strong>Preferred Provider Organization (PPO)</strong> – This plan, offered through BCBSMA, is available only to employees who reside outside New England. With this plan, you can go to any health care professional you choose, in-or out-of-network, without a PCP referral. You will have higher out-of-pocket costs for out-of-network care.</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td><strong>PPO Plus</strong> – This plan, offered through BCBSMA, is available only to employees who reside outside of New England. It offers the same benefits as a traditional PPO but has higher premiums and a higher out-of-pocket maximum in exchange for no deductible or coinsurance for in-network services.</td>
<td>✓</td>
<td></td>
</tr>
</tbody>
</table>

* If you enroll in a BCBSMA plan other than the HDHP, you cannot have a primary care physician at Harvard University Health Services.
† You must live in Massachusetts to enroll in the HUGHP options. Note: in-network adult primary care is located primarily in Eastern Massachusetts.

Want to know more about your medical plan options? Visit [hr.harvard.edu/medical](http://hr.harvard.edu/medical).
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### MEDICAL PLAN ELIGIBILITY BY ROLE

<table>
<thead>
<tr>
<th>IF YOU ARE BENEFITS-ELIGIBLE:</th>
<th>YOU ARE ELIGIBLE FOR:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>HMO, POS, and POS Plus</td>
</tr>
<tr>
<td>Administrative/professional staff, nonunion staff, faculty, or internal postdoc</td>
<td>✓</td>
</tr>
<tr>
<td>External (&quot;stipendee&quot;) postdoc doing Harvard research</td>
<td>✓</td>
</tr>
<tr>
<td>Coaching assistant, teaching assistant, or visiting fellow</td>
<td>✓</td>
</tr>
</tbody>
</table>

* Available only through BCBSMA for employees who reside outside New England.

### MEDICAL PLAN ELIGIBILITY BY REGION

<table>
<thead>
<tr>
<th>IF YOU LIVE HERE:</th>
<th>YOU ARE ELIGIBLE FOR:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Massachusetts</td>
<td>HUGHP HMO</td>
</tr>
<tr>
<td></td>
<td>HUGHP POS</td>
</tr>
<tr>
<td></td>
<td>HUGHP POS Plus</td>
</tr>
<tr>
<td></td>
<td>BCBSMA HMO</td>
</tr>
<tr>
<td></td>
<td>BCBSMA POS</td>
</tr>
<tr>
<td></td>
<td>BCBSMA POS Plus</td>
</tr>
<tr>
<td></td>
<td>BCBSMA HDHP</td>
</tr>
<tr>
<td>Rest of New England (CT, ME, NH, RI, VT)</td>
<td>BCBSMA HMO</td>
</tr>
<tr>
<td></td>
<td>BCBSMA POS</td>
</tr>
<tr>
<td></td>
<td>BCBSMA POS Plus</td>
</tr>
<tr>
<td></td>
<td>BCBSMA HDHP</td>
</tr>
<tr>
<td>Outside of New England</td>
<td>BCBSMA PPO</td>
</tr>
<tr>
<td></td>
<td>BCBSMA PPO Plus</td>
</tr>
<tr>
<td></td>
<td>BCBSMA HDHP</td>
</tr>
</tbody>
</table>
**COMPARE MEDICAL PLANS**

**HOW DOES AN HDHP WORK?**

Distinguished by lower premiums and higher out-of-pocket costs, including higher deductibles, an HDHP is offered in conjunction with an HSA that lets you save for health expenses tax-free. Several features differ from the HMO, POS, and PPO plans, as described in the comparisons on page 8. For more details about the HDHP and HSA, go to hr.harvard.edu/medical and refer to the Medical Plan Overview.

**PRESCRIPTION DRUG COVERAGE**

Prescription coverage is provided by Express Scripts and is included in all Harvard medical plans. To confirm your prescription copayments for 2023, view the Preventive Medications List, or use the “Price Your Medication” tool on the Express Scripts Open Enrollment website at expressscripts.com/harvarduniversity. You can also call Express Scripts at 877-787-8684.

**TAKE ADVANTAGE OF THE LEARN TO LIVE PROGRAM**

The Learn to Live program offers confidential, self-guided online support for stress, anxiety, depression, insomnia, and substance use disorder. It is available to employees and family members over the age of 13 who are enrolled in a Harvard-sponsored HUGHP or BCBSMA plan. To learn more, visit learntolive.com/partners and enter code HUWellbeing.

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**Here’s a quick refresher on commonly used medical/dental insurance terms:**

**ALLOWABLE CHARGE** is the dollar amount typically considered payment-in-full by an insurance company and an associated network of health care providers.

**COINSURANCE** is the amount you pay, as a percentage of the allowed cost of your services, after you reach the deductible and until you reach the plan’s out-of-pocket maximum.

**COPAYMENT (COPAY)** is a fixed amount you pay for a health care service or prescription drug.

**DEDUCTIBLE** is the amount you pay before your insurance begins covering certain services, such as hospitalization or outpatient surgery.

**DRUG FORMULARY** is a list of prescription drugs, maintained by medical professionals, that is used by practitioners to identify commonly covered prescription drugs.

**OUT-OF-POCKET MAXIMUM** is the most you pay per plan year for plan-covered health care expenses, including prescription drugs. Once you reach this limit, the plan pays 100% of health care expenses for the remainder of the plan year.

**PREMIUM** is the amount you pay for insurance, using pre-tax or post-tax dollars via paycheck deductions. (Note: Harvard pays a portion of the premium.)
## COMPARE MEDICAL PLANS

### 2023 HEALTH PLANS

<table>
<thead>
<tr>
<th>IN-NETWORK</th>
<th>HMO</th>
<th>POS PPO*</th>
<th>POS PLUS PPO PLUS*</th>
<th>HDHP†</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DEDUCTIBLE</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Per Individual</td>
<td>$250</td>
<td>$250</td>
<td>None</td>
<td>$1,500</td>
</tr>
<tr>
<td>Family Maximum</td>
<td>$750</td>
<td>$750</td>
<td>None</td>
<td>$3,000‡</td>
</tr>
<tr>
<td><strong>OUT-OF-POCKET (OOP) MAXIMUM</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Per Individual</td>
<td>$1,500</td>
<td>$1,500</td>
<td>$2,000</td>
<td>$3,000</td>
</tr>
<tr>
<td>Family Maximum</td>
<td>$4,500</td>
<td>$4,500</td>
<td>$6,000</td>
<td>$6,000‡</td>
</tr>
<tr>
<td><strong>MEMBER COSTS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inpatient Hospital</td>
<td>Deductible, then 10% coinsurance</td>
<td>Deductible, then 10% coinsurance</td>
<td>Fully covered, no OOP cost to member</td>
<td>Deductible, then 15% coinsurance</td>
</tr>
<tr>
<td>Emergency Room</td>
<td>$100 copay</td>
<td>$100 copay</td>
<td>$100 copay</td>
<td>Deductible, then 15% coinsurance</td>
</tr>
<tr>
<td>Preventive Care as Defined by Affordable Care Act</td>
<td>Fully covered, no OOP cost to member</td>
<td>Fully covered, no OOP cost to member</td>
<td>Fully covered, no OOP cost to member</td>
<td>Fully covered, no OOP cost to member</td>
</tr>
<tr>
<td>Office Visits—PCP &amp; Specialist</td>
<td>$30 copay</td>
<td>$30 copay</td>
<td>$30 copay</td>
<td>Deductible, then 15% coinsurance</td>
</tr>
<tr>
<td>Telehealth via Well Connection (and non-Well Connection for behavioral health)</td>
<td>$15 copay</td>
<td>$15 copay</td>
<td>$15 copay</td>
<td>Deductible, then 15% coinsurance</td>
</tr>
<tr>
<td>Physical/Occupational Therapy (limited to 100 visits per calendar year)</td>
<td>$30 copay</td>
<td>$30 copay</td>
<td>$30 copay</td>
<td>Deductible, then 15% coinsurance</td>
</tr>
<tr>
<td>Chiropractic Care (limited to 18 visits per calendar year)</td>
<td>$30 copay</td>
<td>$30 copay</td>
<td>$30 copay</td>
<td>Deductible, then 15% coinsurance</td>
</tr>
<tr>
<td>Acupuncture (limited to 20 visits per calendar year)</td>
<td>$30 copay</td>
<td>$30 copay</td>
<td>$30 copay</td>
<td>Deductible, then 15% coinsurance</td>
</tr>
<tr>
<td>High-Tech Imaging (MRI, PET scan, CT scan, etc.)</td>
<td>Deductible, then 10% coinsurance</td>
<td>Deductible, then 10% coinsurance</td>
<td>Fully covered, no OOP cost to member</td>
<td>Deductible, then 15% coinsurance</td>
</tr>
<tr>
<td>Mental Health/Substance Abuse</td>
<td>Inpatient: deductible, then 10% coinsurance Outpatient: $30 copay Telehealth: $15 copay</td>
<td>Inpatient: deductible, then 10% coinsurance Outpatient: $30 copay Telehealth: $15 copay</td>
<td>Inpatient: fully covered Outpatient: $30 copay Telehealth: $15 copay</td>
<td>Deductible, then 15% coinsurance</td>
</tr>
<tr>
<td>Outpatient Diagnostic Labs/X-Rays</td>
<td>Fully covered, no OOP cost to member</td>
<td>Fully covered, no OOP cost to member</td>
<td>Fully covered, no OOP cost to member</td>
<td>Deductible, then 15% coinsurance</td>
</tr>
</tbody>
</table>

* Available only through BCBSMA for employees who reside outside New England.
† Under the HDHP, amounts paid for both in-network and out-of-network care can be combined to satisfy the deductible.
‡ Unlike with the HMO, POS, and PPO plans, if you enroll in HDHP family coverage, you must meet the full family deductible before coinsurance begins for any individual and you must reach the full family out-of-pocket maximum before the plan covers the costs in full for any individual.
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### 2023 HEALTH PLANS

<table>
<thead>
<tr>
<th></th>
<th>POS PPO*</th>
<th>POS PLUS PPO PLUS*</th>
<th>HDHP†</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DEDUCTIBLE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Per Individual</td>
<td>$750</td>
<td>$750</td>
<td>$1,500</td>
</tr>
<tr>
<td>Family Maximum</td>
<td>$2,500</td>
<td>$2,500</td>
<td>$3,000‡</td>
</tr>
<tr>
<td><strong>OUT-OF-POCKET MAXIMUM</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Per Individual</td>
<td>$2,500</td>
<td>$2,500</td>
<td>$6,000</td>
</tr>
<tr>
<td>Family Maximum</td>
<td>$7,500</td>
<td>$7,500</td>
<td>$12,000‡</td>
</tr>
<tr>
<td><strong>MEMBER COSTS</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Member-Paid Coinsurance</td>
<td>30% after out-of-network deductible</td>
<td>30% after out-of-network deductible</td>
<td>35% after out-of-network deductible</td>
</tr>
<tr>
<td>Mental Health</td>
<td>Inpatient: deductible, then 30% coinsurance</td>
<td>Outpatient: 20% coinsurance, no deductible</td>
<td>Inpatient: deductible, then 30% coinsurance</td>
</tr>
</tbody>
</table>

* Available only through BCBSMA for employees who reside outside New England.
† Under the HDHP, amounts paid for both in-network and out-of-network care can be combined to satisfy the deductible.
‡ Unlike with the HMO, POS, and PPO plans, if you enroll in HDHP family coverage, you must meet the full family deductible before coinsurance begins for any individual and you must reach the full family out-of-pocket maximum before the plan covers the costs in full for any individual.

### PRESCRIPTION DRUGS

<table>
<thead>
<tr>
<th></th>
<th>Preventive Medications List</th>
<th>All Other Drugs*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Retail at Participating Pharmacy (up to 30-day supply)</td>
<td>Mail Order Through Express Scripts (up to 90-day supply)</td>
</tr>
<tr>
<td>Generic</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Preferred Brand</td>
<td>$10</td>
<td>$25</td>
</tr>
<tr>
<td>Non-Preferred Brand</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

* Unlike with the other plans, if you enroll in HDHP coverage, you must meet the deductible before these prescription copayments apply. If you have HDHP family coverage, you must meet the full family deductible before these prescription drug copayment costs apply. You do not need to satisfy the deductible to receive the drugs on the preventive medications list at the copays listed above. Per IRS guidelines, only drugs on preventive medication lists may bypass the deductible.
**COMPARE MEDICAL PLANS**

**RATES FOR 2023**

Harvard’s progressive practice of using salary tiers makes premiums more affordable for those who earn less. Salary tiers are based on full-time-equivalent (FTE) salary. If you work part-time, your FTE is the salary you would earn if you worked full-time at the same rate of pay.

<table>
<thead>
<tr>
<th>MONTHLY COST BY SALARY TIER</th>
<th>TIER 1 LESS THAN $60,000</th>
<th>TIER 2 $60,000–$79,999</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>EMPLOYEE</td>
<td>EMPLOYEE + SPOUSE/DP</td>
</tr>
<tr>
<td>HMO</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HUGHP*</td>
<td>$94</td>
<td>$242</td>
</tr>
<tr>
<td>BCBSMA</td>
<td>$116</td>
<td>$299</td>
</tr>
<tr>
<td>POS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HUGHP*</td>
<td>$136</td>
<td>$348</td>
</tr>
<tr>
<td>BCBSMA</td>
<td>$159</td>
<td>$405</td>
</tr>
<tr>
<td>POS Plus</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HUGHP*</td>
<td>$152</td>
<td>$390</td>
</tr>
<tr>
<td>BCBSMA</td>
<td>$175</td>
<td>$448</td>
</tr>
<tr>
<td>HDHP</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BCBSMA</td>
<td>$53</td>
<td>$140</td>
</tr>
<tr>
<td>PPO**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BCBSMA</td>
<td>$159</td>
<td>$405</td>
</tr>
<tr>
<td>PPO Plus**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BCBSMA</td>
<td>$175</td>
<td>$448</td>
</tr>
</tbody>
</table>

* HUGHP is available only to employees who reside in Massachusetts. In-network adult primary care physicians are primarily located in Eastern MA.

** Available only to employees who reside outside of New England.
COMPARISON OF MEDICAL PLANS

**RATES FOR 2023 (CONTINUED)**

Harvard’s progressive practice of using salary tiers makes premiums more affordable for those who earn less. Salary tiers are based on full-time-equivalent (FTE) salary. If you work part-time, your FTE is the salary you would earn if you worked full-time at the same rate of pay.

<table>
<thead>
<tr>
<th>MONTHLY COST BY SALARY TIER</th>
<th>TIER 3</th>
<th>TIER 4</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>EMPLOYEE</td>
<td>EMPLOYEE + SPOUSE/DP</td>
</tr>
<tr>
<td>HMO</td>
<td>$167</td>
<td>$430</td>
</tr>
<tr>
<td>HUGHP*</td>
<td>$189</td>
<td>$487</td>
</tr>
<tr>
<td>BCBSMA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>POS</td>
<td>$209</td>
<td>$536</td>
</tr>
<tr>
<td>HUGHP*</td>
<td>$232</td>
<td>$593</td>
</tr>
<tr>
<td>BCBSMA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>POS Plus</td>
<td>$225</td>
<td>$578</td>
</tr>
<tr>
<td>HUGHP*</td>
<td>$248</td>
<td>$636</td>
</tr>
<tr>
<td>BCBSMA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HDHP</td>
<td>$126</td>
<td>$328</td>
</tr>
<tr>
<td>BCBSMA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PPO**</td>
<td>$232</td>
<td>$593</td>
</tr>
<tr>
<td>BCBSMA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PPO Plus**</td>
<td>$248</td>
<td>$636</td>
</tr>
</tbody>
</table>

* HUGHP is available only to employees who reside in Massachusetts. In-network adult primary care physicians are primarily located in Eastern MA.
** Available only to employees who reside outside of New England.
SAVE ON ELIGIBLE EXPENSES

Interested in lowering your taxable income while paying for eligible health and/or dependent care expenses? Be sure to take advantage of the Flexible Savings Account (FSA) or Health Savings Account (HSA) options. You can find examples of eligible FSA and HSA expenses on HARVie.

FSA

You can contribute to your FSA before taxes are withheld from your paycheck, thus decreasing your taxable income. With a convenient FSA debit card, you can quickly pay for eligible expenses. Plus, the full amount of your Health Care FSA (or Limited Purpose FSA) is immediately available to you as of January 1. Harvard offers three types of FSAs:

1. **Health Care FSA** – Used to pay for eligible out-of-pocket medical, dental, and vision care expenses for you and your eligible dependent(s). Note: Participants enrolled in an HSA are not eligible.

2. **Limited Purpose FSA** – Used to pay for eligible dental and vision expenses only. Note: This is available only to participants enrolled in the Harvard-sponsored HSA.

3. **Dependent Care FSA** – Used to pay for eligible expenses for the care of a dependent child under age 13 or a dependent adult so that you and your spouse (if applicable) can work, look for work, or go to school full-time. Eligible expenses include eligible preschool, before- and after-school programs, certain summer day camps, and child or elder day care. **Note:** Cannot be used for your dependents’ health care expenses; those expenses may be covered with a Health Care FSA.

Voya Financial (formerly Benefit Strategies) administers both the FSAs and the HSA. Have questions about what an FSA is and how it works? Visit benstrat.com/clients/harvard/ for helpful videos and more information or contact Voya at 855-HVD-FLEX or hvdflex@benstrat.com.

### 2023 FSA LIMITS *

<table>
<thead>
<tr>
<th>Category</th>
<th>Limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Care</td>
<td>$3,050</td>
</tr>
<tr>
<td>Limited Purpose</td>
<td>$3,050</td>
</tr>
<tr>
<td>Dependent Care</td>
<td>$5,000 per household</td>
</tr>
</tbody>
</table>

* For exceptions to these limits, please refer to the FSA/HSA Overview.

**REMEMBER**

You have until March 15, 2024, to incur expenses for your Dependent Care FSA. You have until your FSA enrollment end date to incur expenses for your Health Care or Limited Purpose FSA, or until March 15, 2024, if you are enrolled through December 31, 2023. Be sure to carefully estimate the amount you’d like to put aside, as unused funds at the end of this grace period will be forfeited. Reimbursement requests must be submitted by March 31, 2024.

Not sure how much to contribute? Voya Financial’s online worksheet will help you estimate your annual expenses.
**SAVE ON ELIGIBLE EXPENSES**

**HSA**
To contribute to the HSA, you must be enrolled in the Harvard-sponsored HDHP. The HSA allows you to put aside money on a pre-tax basis to pay for out-of-pocket health care expenses. You will receive a debit card that makes it easy to access your funds quickly. Unlike an FSA, funds in an HSA roll over and may continue to grow from year to year—and can therefore be used to pay for qualified medical costs today, five years from now, or even in retirement. Once you enroll in Medicare Part A or B, you can no longer contribute to an HSA, but you can still draw from your balance.

Your current HSA election will carry over. That means if you have an HSA election for 2022, it will automatically continue in 2023. If you’d like to contribute up to the new IRS limit, you’ll need to increase your election. For more information about the HSA, please visit [hr.harvard.edu/flexible-spending-accounts](http://hr.harvard.edu/flexible-spending-accounts) or contact Voya Financial (formerly Benefit Strategies) at 855-HVD-FLEX.

Please note: If you contribute to an HSA, you cannot be enrolled in a general purpose FSA, including through a spouse or other employer.

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**2023 HSA LIMITS***

<table>
<thead>
<tr>
<th></th>
<th>Individual</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$3,850</td>
<td>$7,750</td>
</tr>
</tbody>
</table>

If you’re age 55 or older, you may contribute an additional $1,000.

**Harvard Tax-Free Contribution to HSA***

- **Individual** – $500
- **All other coverage levels** – $1,000

*IMPORTANT: You must be enrolled in the HSA in order to receive Harvard’s tax-free contribution, even if you do not wish to make your own contributions. Simply make an election of $0.

---

**HOW TO MAKE THE MOST OF YOUR HSA BASED ON YOUR AGE**

**UNDER AGE 55**
- Start contributing to an HSA early, and contribute as much as you can within the annual federal limit.
- Increase the amount you contribute over time, with a goal of “maxing out.”
- Pay for current health care expenses tax-free and save for future expenses on a tax-favored basis.

**AGE 55 OR OLDER**
- Use your HSA to pay for doctor visits, hospitalizations, dental care, prescriptions, and more.
- Max out your HSA to enhance your other retirement savings.
- Make additional “catch-up” contributions when you can.

**IN RETIREMENT**
- Use your HSA tax free to pay health care premiums or cover the costs of hospital bills, long-term care, nursing services, and medications.
- Draw from your balance whenever you like. You don’t have to start withdrawing funds at age 72.
- If you use your HSA for nonmedical expenses, keep in mind that you will owe taxes on the withdrawals.
UTILIZE COST-SAVING RESOURCES

SAVE WITH SMARTSHOPPER
Did you know that prices for the same quality medical services, such as an MRI, mammogram, and colonoscopy, can vary by hundreds to thousands of dollars? Because these prices aren’t often published, it’s been difficult to shop around for the best price...until now.

SmartShopper is an easier way to shop for certain health care services, either online or by phone, and earn a financial incentive when you receive services at a preferred provider. When your doctor recommends a procedure or test, visit the SmartShopper portal or call the Personal Assistant Team to shop for inpatient and outpatient health care services in your area.

By using SmartShopper, you can determine whether the procedure is offered at different convenient providers at a lower price. Best of all, when you use SmartShopper to select a more cost-effective location for certain procedures or tests, you become eligible to earn a financial incentive of up to $250, depending on the service (payments are taxable). Harvard employees and their dependents enrolled in a Harvard-sponsored medical plan are automatically eligible for this program (some exceptions may apply; see HARVie for details).

To learn more, check out the SmartShopper flyer or visit hr.harvard.edu/medical.

PRESCRIPTION COPAYMENT ASSISTANCE PROGRAM ADMINISTERED BY PILLARRX CONSULTING
Harvard offers a program through PillarRx Consulting, a prescription benefit consulting firm, which finds copay assistance programs that may be available from drug manufacturers for certain specialty medications. If you are prescribed an eligible medication, you will be contacted by PillarRx to facilitate enrollment in the manufacturer programs. If you do not enroll, you will be responsible for up to 30% of the cost of the eligible prescription. Please note, manufacturer assistance dollars may not accumulate toward deductibles and/or out-of-pocket maximums.

To use the program, you must enroll and fill the prescription through Accredo, Express Scripts’ specialty pharmacy. For more details, please visit hr.harvard.edu/medical.

USE MYFITAGE: YOUR ONLINE FINANCIAL ADVISOR
As part of our commitment to providing tools and resources to help you reach financial independence, Harvard gives you access to myFiTage, an interactive digital tool that makes it easier for you to monitor your savings habits and helps you to get—and stay—in good financial health.

By offering personalized tips for linking your saving behaviors to your long-term goals, including ways to make the most of your HSA and other benefit options, myFiTage helps you determine your Financial Independence Target Age.

To access myFiTage, visit My Harvard Total Rewards (HarvardKey required), and at the bottom of the Welcome page, click the Learn More button on the myFiTage tile.

Attend the Virtual Benefits Fair on Thursday, October 27, 2022, to see a live demo of myFiTage.
The Reimbursement Program is a unique benefit that reimburses in-network, out-of-pocket medical expenses above certain thresholds, including copayments, deductibles, and coinsurance incurred through a Harvard-sponsored HMO, POS, or PPO plan. Out-of-network expenses and services not covered by the plan are ineligible. To use the program, you must be enrolled in a Harvard-sponsored HMO, POS, or PPO plan (including POS and PPO Plus) and have an FTE salary of less than $110,000. You are not eligible for this program if you are enrolled in the HDHP.

<table>
<thead>
<tr>
<th>IF YOUR FTE SALARY IS...</th>
<th>YOU CAN BE REIMBURSED FOR COSTS ABOVE:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>INDIVIDUAL*</td>
</tr>
<tr>
<td>&lt; $30,000</td>
<td>$600</td>
</tr>
<tr>
<td>$30,000–$39,999</td>
<td>$800</td>
</tr>
<tr>
<td>$40,000–$49,999</td>
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<td>$50,000–$59,999</td>
<td>$900</td>
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<td>$60,000–$69,999</td>
<td>$900</td>
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<tr>
<td>$70,000–$79,999</td>
<td>$1,250</td>
</tr>
<tr>
<td>$80,000–$89,999</td>
<td>$1,250</td>
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<tr>
<td>$90,000–$99,999</td>
<td>$1,500</td>
</tr>
<tr>
<td>$100,000–$109,999</td>
<td>$1,500</td>
</tr>
</tbody>
</table>

* Enrolled in individual coverage or other coverage levels and submitting expenses for only one family member for the plan year.

REMEMBER
You may not be reimbursed for the same expenses through the Reimbursement Program and a Health Care FSA. However, you may use your FSA to cover expenses up to the thresholds shown. If you exceed these thresholds, you will then be eligible to receive reimbursement for qualifying in-network out-of-pocket costs. Voya Financial (formerly Benefit Strategies) administers the program. Program details and claim forms are available at benstrat.com/clients/harvard.

Want to know more about the reimbursement program? Watch this video.
Benefits Open Enrollment for Harvard Faculty, Administrative and Professional Staff, and Other Nonunion Staff is **October 25–November 3, 2022**. For more information, visit [hr.harvard.edu/open-enrollment-2023](http://hr.harvard.edu/open-enrollment-2023).

## EVALUATE OTHER BENEFITS

### DENTAL

**NEW!** Effective January 1, 2023, Harvard's dental insurance will change from Delta Dental to MetLife Dental. If you are enrolled in the dental plan, you do not need to take any action—you will automatically be enrolled in MetLife Dental effective January 1, 2023, and issued a new MetLife card.

Please note these changes as part of the transition to MetLife:
- Adult orthodontia will be covered.
- Your insurance will cover one set of bite wings per year instead of two.

Visit MetLife at [metlife.com/Harvard-Dental](http://metlife.com/Harvard-Dental) for more information including network provider search, FAQs, and plan summaries. You can also live chat with a MetLife Dental representative during the Virtual Benefits Fair on Thursday, October 27, from 11:00 a.m. to 2:00 p.m.

### VISION

In addition to the vision benefits offered under our medical plans, you can elect EyeMed’s vision plan, which covers vision exams, eyewear, and contact lenses and provides discounts on services such as laser surgery.

For more information, please visit [hr.harvard.edu/vision](http://hr.harvard.edu/vision).

### LONG TERM DISABILITY (LTD) INSURANCE

Optional LTD Insurance protects your financial security if you are unable to work for more than 180 days due to illness or injury. If you elect LTD Insurance during Open Enrollment, you must provide proof of good health by completing an Evidence of Insurability form, which Harvard Benefits will send to you in December. This form can also be found at [hr.harvard.edu/disability](http://hr.harvard.edu/disability). Final approval comes from Lincoln Financial Group, the Plan Administrator.

For more information, please visit [hr.harvard.edu/disability](http://hr.harvard.edu/disability).

### MONTHLY COST

<table>
<thead>
<tr>
<th></th>
<th>EMPLOYEE</th>
<th>EMPLOYEE + SPOUSE/DP</th>
<th>EMPLOYEE + CHILD(REN)</th>
<th>FAMILY</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NEW!</strong> Effective January 1, 2023, Harvard's dental insurance will change from Delta Dental to MetLife Dental. If you are enrolled in the dental plan, you do not need to take any action—you will automatically be enrolled in MetLife Dental effective January 1, 2023, and issued a new MetLife card.</td>
<td></td>
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</tr>
<tr>
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<td></td>
<td></td>
<td></td>
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</tr>
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### MONTHLY COST

<table>
<thead>
<tr>
<th>FTE SALARY TIER</th>
<th>ANNUAL COST PER $100 OF SALARY</th>
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</thead>
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<tr>
<td>Less than $15,000</td>
<td>$0.218</td>
</tr>
<tr>
<td>$15,000–$69,999</td>
<td>$0.248</td>
</tr>
<tr>
<td>$70,000–$94,999</td>
<td>$0.535</td>
</tr>
<tr>
<td>$95,000 and above</td>
<td>$0.674</td>
</tr>
</tbody>
</table>
EVALUATE OTHER BENEFITS

SUPPLEMENTAL LIFE INSURANCE

You must be enrolled in Supplemental Life Insurance in order to apply for Dependent Life Insurance, which provides coverage for your spouse/domestic partner (DP) and/or dependent children. If required, a Statement of Health form will be mailed to you in December. For more information and Statement of Health forms, please visit hr.harvard.edu/disability.

<table>
<thead>
<tr>
<th>WHO’S ELIGIBLE</th>
<th>COVERAGE CHOICES</th>
<th>REQUIREMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>SUPPLEMENTAL LIFE INSURANCE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Faculty and Staff Members</td>
<td>1x–6x annual salary (rounded to the nearest $1,000 of coverage), up to $2.5 million</td>
<td>Enroll or increase by completing a Statement of Health.*</td>
</tr>
<tr>
<td>DEPENDENT LIFE INSURANCE</td>
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<td></td>
</tr>
<tr>
<td>Spouse/DP</td>
<td>Option 1: $25,000 Option 2: $50,000 Option 3: $75,000 Option 4: $100,000</td>
<td>Enroll or increase by completing a Statement of Health* for your spouse/DP.</td>
</tr>
<tr>
<td>Dependent Child(ren) (from birth to age 26)</td>
<td>Option 1: $5,000 Option 2: $10,000</td>
<td>No Statement of Health is required. Enroll or increase during the Open Enrollment period or at any other time by contacting the Benefits Office.</td>
</tr>
</tbody>
</table>

* MetLife will review your information and evaluate your request for coverage based on your answers to the health questions, MetLife’s underwriting rules, and other information you authorize MetLife to review. In certain cases, MetLife may request additional information to evaluate your request for coverage. Final approval comes from the Metropolitan Life Insurance Company.

For important information about effective dates and special circumstances, please visit the Life Insurance Overview.

IMPORTANT INFORMATION ABOUT BASIC LIFE INSURANCE REDUCTION

Please note: On the January 1 following your 67th and 70th birthdays (and every five years thereafter), your basic life insurance coverage amount reduces by 35%. You will receive a packet from MetLife outlining your options for porting or converting the reduction amount. For important information, please visit the Life Insurance Overview.
EVALUATE OTHER BENEFITS

LEGAL PLAN
MetLife Legal Plans provide you, your spouse/domestic partner, and your dependent child(ren) with fully covered legal services from attorneys experienced in estate planning, civil suits, adoption, and much more. You’ll have no deductibles, copays, claim forms, or usage limits when you use one of the 14,000 network attorneys, or you can choose an out-of-network attorney and be reimbursed for covered services (you pay any difference between the plan’s payment and the attorney’s charges for services). Some services are excluded under this plan, including employment-related matters, divorce, rental issues where the employee is the landlord, class actions, and more. Please go to hr.harvard.edu/employee-discounts for more information.

If you are already enrolled in this benefit, your election will automatically continue unless you cancel it during Open Enrollment. Open Enrollment is your only opportunity to enroll in or cancel coverage for 2023. For more information, call MetLife at 800-821-6400, Monday–Friday from 8:00 a.m. to 8:00 p.m. ET.

MONTHLY COST OF COVERAGE
$16.50

IDENTITY THEFT PROTECTION
Get peace of mind and protect yourself against privacy breaches and fraud with Identity Theft Protection from Allstate Identity Protection. The protection provides full identity monitoring, proactive alerts, and full-service restoration if your identity is stolen. If you are already enrolled in this benefit for 2022, your election will automatically continue unless you cancel it during Open Enrollment.

Open Enrollment is your only opportunity to enroll in or cancel coverage for 2023. You must be actively at work to enroll in this program. Once enrolled, you will need to activate your coverage. Allstate will mail you instructions. Learn more at hr.harvard.edu/employee-discounts.

MONTHLY COST OF COVERAGE
Individual  $9.95
Family*      $17.95

* Those you financially support or who live under your roof are covered under the family plan.
Benefits Open Enrollment for Harvard Faculty, Administrative and Professional Staff, and Other Nonunion Staff is October 25–November 3, 2022. For more information, visit hr.harvard.edu/open-enrollment-2023.

**REVIEW COMMON OPEN ENROLLMENT MISTAKES (AND HOW TO AVOID THEM)**

"I missed the Open Enrollment deadline."

Benefits Open Enrollment is your once-a-year opportunity to make changes to your benefits. If you miss the deadline—11:59 p.m. ET on Thursday, November 3, 2022—you won’t be able to make changes until the next Open Enrollment period, unless you experience a qualifying life event like getting married or having a baby.

Helpful tips:
- Set an alert on your calendar
- Don’t wait until the last minute, if possible

What is a qualifying life event? Visit hr.harvard.edu/life-events to learn more.

"I chose the wrong FSA."

Here are the three types of FSAs and what they can be used for:

1. **Dependent Care FSA** is for qualifying day care expenses for dependent children under the age of 13, or a disabled spouse, elderly parent, or other qualified dependent who is physically or mentally incapable of caring for themself.

2. **Health Care FSA** is for qualifying medical expenses for you and your qualified dependents, including your spouse and children.

3. **Limited Purpose FSA**—only available to those who enroll in an HSA—is for qualifying dental and vision expenses for you and your qualified dependents, including your spouse and children.

Helpful tips:
- Prior to making your election, be sure to review the list of eligible Dependent Care, Health Care, and Limited Purpose FSA expenses.
- Choose a Dependent Care FSA if you will have qualifying day care expenses for a child under age 13 or for a dependent adult.
- Choose a Health Care FSA if you or a qualified dependent will have qualifying health expenses and are not enrolled in an HSA.
- Choose a Limited Purpose FSA if you are enrolled in the HSA and will have qualifying dental or vision expenses.

"I accidentally elected more than the IRS allows in my Dependent Care FSA."

For 2023, the maximum amount the IRS allows in a Dependent Care FSA is:

- **$5,000 per year for individuals or married couples who file jointly** OR
- **$2,500 per year for married individuals who file separately.**

This means that if you are married, and you and your spouse both contribute to Dependent Care FSAs, you must take care not to exceed the IRS limit. If you do, you will be unable to change your election during the plan year unless you experience a qualifying life event. You may need to talk to your tax preparer about your options.

Helpful tip:
If you are married and file jointly, talk with your spouse before you submit your Open Enrollment elections. If you both plan to elect a Dependent Care FSA through your employers, make sure your combined elections do not exceed $5,000 for the 2023 calendar year.

"I didn’t notice an enrollment error until the plan year began."

If, for example, you accidentally elected a Dependent Care FSA instead of a Health Care FSA or forgot to enroll a dependent in the dental plan, you won’t be able to make a correction until the next Open Enrollment period unless you experience a qualifying life event.

Helpful tips:
- **Read carefully.** When making your elections online, take time to read all information and instructions, including any pop-up text.
- **Review before submitting.** Take a few minutes to carefully review your elections before hitting the Submit Enrollment button.
- **Check your Confirmation Statement.** Open the Confirmation of Elections Statement that is mailed to your home address in November. If you see an error, contact Harvard Benefits right away to see if a correction is allowed.
**REVIEW** COMMON OPEN ENROLLMENT MISTAKES (AND HOW TO AVOID THEM)

“I changed my medical plan and later learned that my primary care provider (PCP) is not part of my new plan’s network.”

Harvard offers medical plans through BCBSMA and HUGHP:
- BCBSMA’s PCP network varies according to your specific plan—HMO, POS, POS Plus, PPO, PPO Plus, or HDHP.
- HUGHP’s PCP network of providers consists of:
  - For adult care: HUHS and Atrius Health (which includes all Harvard Vanguard locations)
  - For pediatric care: Any HMO Blue of Massachusetts network pediatrician or family medicine practitioner, including Mt. Auburn Pediatrics and Atrius Health

**Helpful tips:**
Before selecting a new plan, confirm that your preferred PCP is in-network:
- HUGHP: Visit the [website](#) or call 617-495-2008.
- BCBSMA: Visit the [website](#) or call 888-389-7732.

<table>
<thead>
<tr>
<th>PLAN</th>
<th>PCP NETWORK</th>
</tr>
</thead>
</table>
| HUGHP HMO, POS, POS Plus | Adult
  • HUHS
  • Atrius Health Locations
| | Pediatric
  • NEW! Any HMO Blue MA Network pediatrician or family medicine practitioner, including Mt. Auburn Pediatrics and Atrius Health |
| BCBSMA* HMO, POS, POS Plus | • HMO Blue New England |
| BCBSMA* PPO and PPO Plus | • BCBS PPO/EPO Network |
| BCBSMA HDHP | • BCBS PPO/EPO Network
  • HUHS Locations |

*Cannot have primary care provider at HUHS

**ANSWERS** TO FREQUENTLY ASKED QUESTIONS (FAQs)

**How do I access my FSA and/or HSA funds?**
Voya Financial (formerly Benefit Strategies) will provide you with a debit card by January 1, which you can use to purchase eligible goods or services where accepted. Your full health and limited purpose election is available to you as of the date your coverage starts. For dependent care FSA and HSA, you can be reimbursed up to the amount in your account at the time you file for reimbursement. If the provider doesn’t accept debit cards, you can file for reimbursement. Note: if you have a valid Benefit Strategies debit card, you won’t receive a new one until it expires.

Go to [benstrat.com/clients/harvard](#) for details.
ANSWERS TO FREQUENTLY ASKED QUESTIONS (FAQs)

Am I eligible to open an HSA?
HSA contributions can be made only if you are enrolled in an HSA-compliant HDHP. Harvard's HDHP meets these requirements. Additional eligibility requirements are:

- You must be a U.S. resident and work and pay taxes in the U.S.
- You cannot be enrolled under a non-HSA-compliant health plan through Harvard or elsewhere.
- You cannot be enrolled in a regular Health FSA. (However, enrollment in a Limited Purpose FSA for vision and dental expenses only is permitted. Harvard University offers a Limited Purpose FSA).
- If you are married, your spouse cannot be enrolled in a Health FSA, but enrollment in a Limited Purpose FSA is permitted.
- You cannot be enrolled in any part of Medicare.
- You cannot be claimed as a dependent on someone else's tax return.

Will my orthodontic lifetime maximum be reset when the dental coverage changes to MetLife Dental?
No. Your orthodontic lifetime maximum won't be reset.

Go to metlife.com/Harvard-Dental for more information about the transition to Metlife Dental, including a list of FAQs.

What options do I have regarding behavioral health?
There is a diverse range of programs you can take advantage of to help you and your family live a healthier and happier life through BCBSMA’s partnership with the learntolive.com program. Here you can find a collection of self-directed online resources based on proven cognitive behavioral therapy (CBT). Use the code HUWellbeing. You must be enrolled in a Harvard-sponsored BCBSMA or HUGHP plan.

Additionally, if you and your dependent children are enrolled in a Harvard-sponsored BCBSMA or HUGHP plan and reside in MA or CA, you may be eligible for behavioral health support for your family through Brightline.

What are the benefits included in the Employee Assistance Program (EAP)?
Harvard’s EAP provides free, confidential help for you and your adult household members. Our EAP utilizes the services of KGA, a provider of several work/life services, including legal, financial, child care, career support, and more. For assistance or to speak with a trained counselor 24/7, please call 877-EAP-HARV (877-327-4278).
ENROLL ONLINE

Benefits Open Enrollment is available online via PeopleSoft from 8:00 a.m. ET on Tuesday, October 25, 2022, through 11:59 p.m. ET on Thursday, November 3, 2022. (Due to nightly data processing, you may find it easier to make your elections between 6:00 a.m. and 9:00 p.m. ET.)

Select the PeopleSoft link at the top of any page on HARVie. Log in using your HarvardKey. If you do not have internet access, please call Benefits at 617-496-4001 before November 2, 2022, to make enrollment arrangements. Elections will be effective as of January 1, 2023, except for LTD and life insurance, which are effective upon approval by the specific carrier.

After you have logged in to PeopleSoft, click on the Open Enrollment tile. This will bring you to the Welcome to Open Enrollment 2023 page, where you may do the following:

ENROLL OR MAKE CHANGES

• Follow the steps on the left of the page, starting with Make Your Elections, where you will see your current benefit elections and options for 2023. Your current elections will be effective January 1, 2023, if you make no changes, except your FSA, which requires an active election every year.

• Click on the Benefit tile to make any desired changes to your coverage, including adding an eligible dependent. If you don’t want to make any changes, you do not need to take any action unless you want an FSA for 2023.

• If you add a new dependent to coverage, including dependent life insurance, during Open Enrollment, you must submit documentation to Benefits showing your dependent’s relationship to you no later than December 2, 2022. By clicking on the benefit plan in question, you can verify dependent information for your spouse/DP and child(ren). If documentation is not received by the deadline, your dependents won’t be enrolled in coverage.

• Your elections are not complete until you hit the Submit Enrollment button on the Make Your Elections page. (If you click Done, your elections will not be completed—you must click the Submit Enrollment button.)

• You can also conveniently review and update your personal information in PeopleSoft following the steps in the left menu of the page.

DON’T HAVE A HARVARDKEY?

If you don’t have a HarvardKey to log into PeopleSoft, you can get your HarvardKey by:

• Visiting key.harvard.edu and following the prompts to Claim Your HarvardKey.

• Calling 617-495-7777 or emailing ithelp@harvard.edu if you have any questions.

SYSTEM REQUIREMENTS

For the best experience with PeopleSoft Self-Service, we recommend using Firefox or Chrome.
ENROLL ONLINE

CONFIRM YOUR DEPENDENTS
To confirm your covered dependents’ information, log into PeopleSoft and go to My Self-Service > My Benefits > Dependent/Beneficiary Info. To correct any information, please contact Benefits at 617-496-4001 any business day between 9:00 a.m. and 5:00 p.m. ET. To comply with federal regulations, Harvard collects Social Security numbers (SSNs) of dependents who are covered by a Harvard-provided medical plan. Please note, this is not a record of your life insurance beneficiary designation. It is a listing of dependents who have been covered on a Harvard health plan, either currently or in the past. For details on confirming your life insurance beneficiaries, refer to HARVie.

REVIEW YOUR 2023 OPEN ENROLLMENT ELECTIONS
You will receive a confirmation of your elections from Harvard in November at your home address on file, even if you made no changes. Please open and review this notification immediately and contact Harvard Benefits if there are any errors.

If you enroll in or change your medical or vision care coverage during Open Enrollment, you will receive your plan ID card(s) in late December. If you elect an FSA or HSA for the first time in 2023, you will receive your Benefit Strategies debit card in December. Note: anyone enrolled in the dental plan will receive new MetLife Dental ID cards in December.

WANT TO SEE YOUR CHANGES BEFORE RECEIVING THE CONFIRMATION?
Beginning November 7, you may view your 2023 elections online by logging into PeopleSoft and going to My Self-Service > My Benefits > Benefits Summary; at the top of the page, go to the “as of date” and enter 1/1/23 to view 2023 coverage.
Have questions? We can help. Email benefits@harvard.edu anytime, or call 617-496-4001 any business day between 9:00 a.m. and 5:00 p.m. ET.

Remember: You must make your benefit elections by

11:59 P.M. ET
THURSDAY, NOVEMBER 3, 2022.