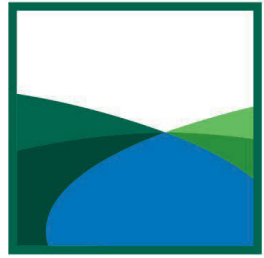


Welcome to



HudsonValley[®]
CREDIT UNION



Our greatest asset,
and the key to our success,
is YOU.

*the
benefits

HVCU Employee Benefits



Medical



Vision



Dental



Prescriptions



*Health &
Wellness*



*Flexible
Spending*



Fertility

Medical/Prescription, Dental, Vision and Flexible Spending

- ☐ Eligible on the first day of the month after 55 days of employment.
- ☐ Enroll yourself, your spouse or an eligible domestic partner (DP) and dependent children (up to age 26).

401(k)

- ☐ Automatically enrolled at 4% on the first of the month following date of hire, provided at least 18 years of age.
- ☐ Re-hires are automatically enrolled at 4% immediately upon re-hire.

Company Provided

- ☐ Automatically enrolled in Basic Life Insurance, Accidental Death & Dismemberment, Short Term Disability, and Long Term Disability.
- ☐ For full-time employees, these benefits are 100% company paid.
- ☐ Part-time employees may enroll in Long Term Disability for 50% of the total premium cost.

Domestic Partner (DP) Coverage

- ☐ HVCU offers medical, dental & vision benefit coverage to eligible domestic partners.
- ☐ In order to enroll a domestic partner on your plan(s), you will need to complete an affidavit and provide supporting documentation to verify your domestic partnership.
- ☐ Coverage is not extended to dependents of domestic partners.
- ☐ If you enroll in a Flexible Spending Account or a High-Deductible Health Plan with HRA funding, the IRS does not permit these funds to be used for a Domestic Partner's out-of-pocket expenses.
- ☐ Domestic partner coverage is subject to imputed income costs. This means that the value of the HVCU paid portion of the benefit will be considered taxable income and added to your W-2 at the end of the year.
 - ☐ For details on the annual domestic partner imputed income costs, please reach out to benefits@hvcu.org.

Spousal and Domestic Partner (DP) Surcharge

- ☐ If you enroll your spouse or domestic partner on the medical coverage, and they have the option of medical coverage through their own employer, a biweekly Surcharge may apply.
 - ☐ \$20 per pay period surcharge on Value Plan enrollments
 - ☐ \$30 per pay period surcharge on Premium Plan enrollments
 - ☐ No spousal surcharge on High-Deductible Health Plan enrollments
- ☐ Spousal/DP Affidavit + copy of Marriage Certificate or approved Domestic Partnership Affidavit is required to enroll a spouse/DP in coverage for all plans.
 - ☐ Applies to Employee + Spouse/DP and Employee + Family coverage
 - ☐ Affidavit requires spouse's/DP's employer information

Medical Plan Definitions...

Co-Pay

- Flat fee for services
- Not applied towards deductible
- Applied towards out-of-pocket maximum

Deductible

- Flat amount paid out of own pocket before plan pays
- Applies towards out-of-pocket maximum

Co-Insurance

- Shared coverage for costs once deductible is met
- 20% or 30% level
- Applies towards out-of-pocket maximum

Out-of-Pocket

- Annual limit for total amount you will pay before co-insurance no longer applies

Pre-certification

- Prior authorization for services

Qualifying Life Event

- A major change, such as loss of coverage, marriage, or birth of a child, that permits changes outside normal enrollment period

2023 Plan Comparison

| Carrier | Empire | | | |
|--|--|--|--|--|
| | | | | |
| Deductible (Individual / Family) | \$1,000 / \$2,000 (Embedded) | \$2,000 / \$4,000 (Embedded) | \$2,800 / \$5,600 (Embedded) | \$5,000 / \$10,000 (Embedded) |
| Out-of-Pocket Maximum (Individual / Family) | \$2,500 / \$5,000 | \$5,000 / \$10,000 | \$5,000 / \$10,000 | \$6,000 / \$12,000 |
| Coinsurance | 80% | 80% | 70% | 80% |
| Primary Care Physician Office Visit | \$35 Copay | \$35 Copay | Deductible & Coinsurance | Deductible & Coinsurance |
| Specialist Office Visit | \$50 Copay | \$50 Copay | Deductible & Coinsurance | Deductible & Coinsurance |
| Preventive Care | No Charge | No Charge | No Charge | No Charge |
| Medical Live Health Online | \$10 Copay | \$10 Copay | Up to \$59 | Up to \$59 |
| Emergency Room (waived if admitted) | \$350 | \$350 | Deductible & Coinsurance | Deductible & Coinsurance |
| Urgent Care | \$50 Copay | \$50 Copay | Deductible & Coinsurance | Deductible & Coinsurance |
| Inpatient Hospital | Deductible & Coinsurance | Deductible & Coinsurance | Deductible & Coinsurance | Deductible & Coinsurance |
| Diagnostic Bloodwork | Deductible & Coinsurance | Deductible & Coinsurance | Deductible & Coinsurance | Deductible & Coinsurance |
| Outpatient Surgery | Deductible & Coinsurance | Deductible & Coinsurance | Deductible & Coinsurance | Deductible & Coinsurance |
| NEW! Hospital Indemnity Coverage | N/A | N/A | Included | Included |
| Employer HRA Contribution | N / A | N / A | \$750 / \$1,500 | \$1,000 / \$2,000 |
| | | | | |
| Tier 1 and 2 Deductible (Rx that costs \$1,000 retail or \$3,000 mail order) | \$100 | \$100 | Before plan deductible is satisfied: | Before plan deductible is satisfied: |
| Tier 3 Deductible | \$100 | \$100 | All prescriptions are subject to the plan deductible with the exception of drugs on the preventive generic drug list | All prescriptions are subject to the plan deductible with the exception of drugs on the preventive generic drug list |
| Tier 4 Deductible | \$150 | \$150 | After plan deductible is satisfied: | After plan deductible is satisfied: |
| Prescription Drug Retail (Tier 1/2/3/4) | \$10 / \$35 / \$75 / 20% or \$100 copay* | \$10 / \$35 / \$75 / 20% or \$100 copay* | \$10 / \$35 / \$75 / 20% or \$100 copay* | \$10 / \$35 / \$75 / 20% or \$100 copay* |
| Mail Order | \$30 / \$105 / \$225 | \$30 / \$105 / \$225 | \$30 / \$105 / \$225 | \$30 / \$105 / \$225 |

Disclaimer: This is a brief summary of the plans for comparison and does not include all provisions and exclusions under the plans.

Please Note: Each plan has an embedded deductible. When a health plan has an embedded deductible, each member of the plan must meet either their own deductible, or the family deductible in aggregate, before after-deductible benefits kick-in for the individual.

High-Deductible Health Plan (HDHP)

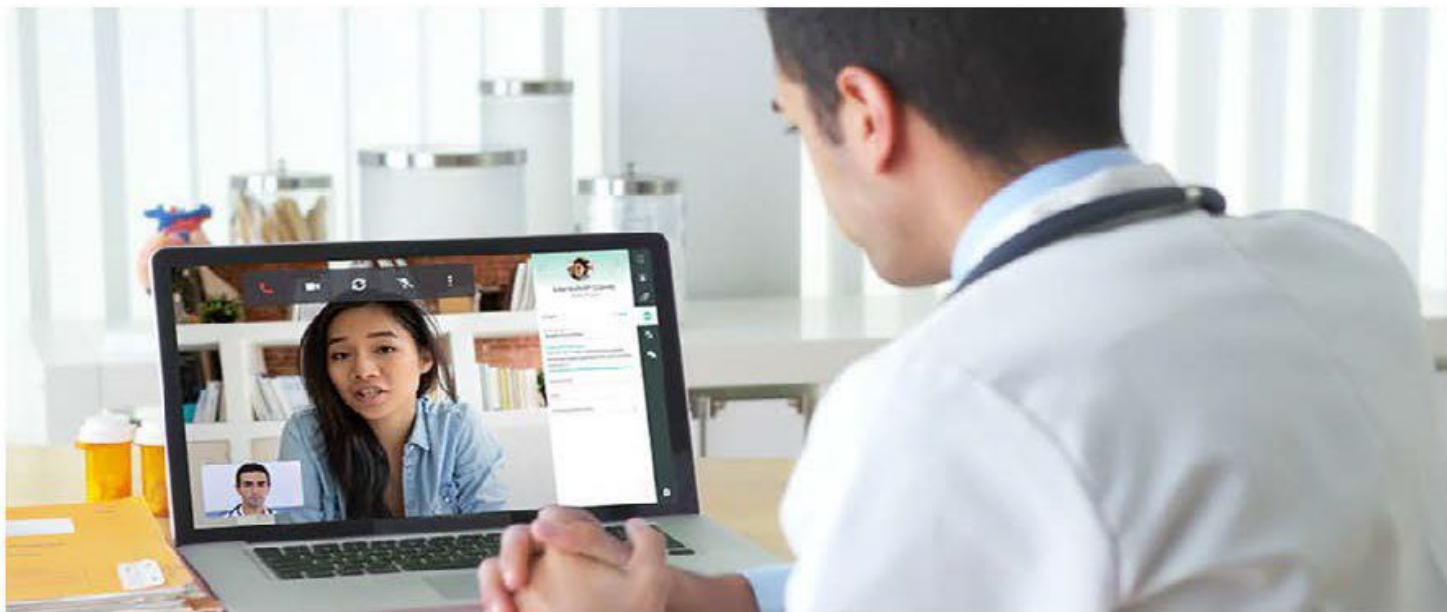
- ❑ An HDHP is a medical plan with a higher deductible than a traditional (co-pay) insurance plan. On these plans, the biweekly premiums are lower than the Value or Premium plans, but you pay more health care costs yourself before the insurance company starts to pay its share (your deductible).
- ❑ These plans have the same network of doctors and covered services as the Premium and Value plans.
- ❑ Preventive care is covered 100% (same as the Value and Premium plans).
- ❑ At HVCU, both HDHP options are paired with a company-funded **Health Reimbursement Arrangement (HRA)** and a company-paid **Hospital Indemnity Plan** through MetLife.

Health Reimbursement Arrangement (HRA)

- ☐ By enrolling in either HDHP (HD2800 or HD5000), you are eligible for Health Reimbursement Arrangement (HRA) funding.
- ☐ Administered by American Benefits Group (ABG).
- ☐ The HRA plan is funded by HVCU to help lower the cost of the deductible and co-insurance on your medical plan.
- ☐ These funds can be used for in-network deductible, co-insurance and prescription co-pay expenses.
- ☐ You will not be asked to supply receipts to verify prescription purchases, but you will be required to submit your health plan Explanation of Benefits (EOB) to verify other covered deductible and co-insurance expenses.
- ☐ No rollover provision on HRA dollars. Any unused funds at the end of the year are forfeited.
- ☐ You can contribute to a Flexible Spending Account (FSA) if you are enrolled in the HDHP and are eligible for an HRA but NOT a Health Savings Account (HSA).

Health Reimbursement Arrangement (HRA) Funding

| | Single Coverage | Employee + Spouse + Dependents |
|--------|-----------------|--------------------------------|
| HD2800 | \$750 | \$1,500 |
| HD5000 | \$1,000 | \$2,000 |



LiveHealth Online

A connection to high quality care, wherever it's needed, using empireblue.com or Sydney Health 24/7/365

- › Costs less than or equal to an office visit.
 - + \$10 for the Premium and Value plan.
 - + Up to \$59 for the HD2800 & HD5000 plans.
- › Secure access to board-certified doctors, **licensed therapists, psychologists, and board certified psychiatrists**.¹
 - + \$10 for the Premium and Value plan.
 - + HD2800 and HD5000 plans – Up to \$95 for Psychology and up to \$175 for Psychiatry.
- › E-prescriptions can be sent to your pharmacy of choice.²



1. Average wait time for licensed psychologists and therapists is four days or less; average wait time for board-certified psychiatrists is 14 days or less.
 2. Only non-controlled substances can be prescribed via telemedicine.
 Online counseling is not appropriate for all kinds of problems. If you are having suicidal thoughts, it's important that you seek help immediately. Please call 1-800-273-8255 (National Suicide Prevention Lifeline) or 911 for help. If you're in an emergency, call 911 or go to your nearest emergency room. Live Health Online does not offer emergency services.



Additional Benefits if You Enroll in Empire Medical Coverage

- ☐ Register at empireblue.com or on the Sydney Health mobile app to get personalized information online and on-the-go.
- ☐ Use the self-service tools to:
 - ☐ Find a doctor
 - ☐ Update your email address for fast, easy access to plan information you need
 - ☐ Estimate costs before you step into the doctor's office
 - ☐ Take a health assessment to get tips for staying healthy
 - ☐ View your health account balance, claims and Explanations of Benefits (EOBs), and pay your bills
- ☐ 24/7 Nurse Line: 1-800-337-4770
 - ☐ The Nurse Line is staffed by registered nurses to talk to you about general health issues. They can help you determine if you can treat your issue at home, if you need to make an appointment to see your doctor or if you should head to urgent care or the emergency room.



EXPRESS SCRIPTS®

Prescription Coverage

For Empire Value and Premium Plan enrollments, the copay structure is as follows:

- | | |
|----------------------------------|--------------|
| • Generic Drugs | \$10 co-pay |
| • Formulary Brand Name Drugs | \$35 co-pay |
| • Non-Formulary Brand Name Drugs | \$75 co-pay |
| • Specialty Drugs | \$100 co-pay |

Please note the National Preferred Formulary List changes annually.

A \$100 annual deductible per covered person per calendar year will apply when:

- Retail Generic or Formulary Brand Name drug where cost is equal to or greater than \$1,000
- Mail-Order Generic or Formulary Brand Name drug where cost is equal to or greater than \$3,000, or any Non-Formulary.

A \$100 annual deductible per covered person per calendar year will apply when:

- Tier 3 (non formulary) Rx

A \$150 annual deductible per covered person per calendar year will apply when:

- Tier 4 (specialty) Rx

Once the deductible is met, either at retail or mail order, the applicable co-pays will apply.



Prescriptions



EXPRESS SCRIPTS®

Prescription Coverage

For HDHP enrollments:

- Prescription drug costs apply toward the deductible (no co-pays) until the deductible is satisfied.
- The only exception to this are certain preventive generic drugs. Drugs on this list are subject to co-pays rather than deductible.
 - This list is available on the Benefits page of the Infonet.
- Once the deductible is satisfied, the following co-pay structure would apply:

| | |
|----------------------------------|--------------|
| • Generic Drugs | \$10 co-pay |
| • Formulary Brand Name Drugs | \$35 co-pay |
| • Non-Formulary Brand Name Drugs | \$75 co-pay |
| • Specialty Drugs | \$100 co-pay |



Prescriptions



EXPRESS SCRIPTS®

Prescription Coverage

- **Specialty Co-Pay Assistance Program:** Specialty drugs are a classification of pharmaceuticals that are high-cost, high complexity and/or high touch, such as injectable medications, infusions and biologic drugs. If you receive any specialty medications, through this program you may be eligible to receive manufacturer co-pay assistance. You may contact NFP Rx Solutions Team at 1-888-201-9175 or customercare@nfp.com prior to filling your next specialty prescription to enroll in the Co-Pay Assistance Program and start saving on your specialty prescription.
- **Express Scripts Generics Preferred Physicians Choice Program:** Member will pay the difference between the Brand and Generic Cost plus the Brand co-pay if a Generic is available and the member chooses the Brand. If physician writes Brand prescriptions as Dispense as Written (DAW), member will pay only the co-pay and deductible, if applicable. Please note: this may require prior authorization from Express Scripts.



- Generic drugs are drugs that have the same active ingredients in the same dosage form and strength as their brand-name counterparts. The color and shape may differ; however the FDA requires that both the Brand and Generic drugs have the same active ingredients and are absorbed in the body the same way. These requirements assure that Generic drugs are as safe and effective as Brand drugs.

Prescriptions

Deductible:

- ☐ \$50 per person
- ☐ \$150 per family

Plans Options:

- ☐ Full-Time - Bronze
- ☐ Full-Time - Silver
- ☐ Full-Time - Gold
- ☐ Part-Time

FT Plan comparison:



Dental

| Covered Services | FT & PT with 5+ years of service | Part-Time |
|--|----------------------------------|-----------|
| Calendar Year Maximum (in-network) | \$1,750 | \$500 |
| Diagnostic & Preventive Benefits (Oral exams, routine cleanings, x-rays, etc.) | 100% | 100% |
| Basic Benefits – Fillings | 80% | 80% |
| Major Benefits - Crowns | 50% | 50% |
| Endodontics – Root Canals | 80% | 0% |
| Periodontics – Gum Treatment | 80% | 0% |
| Orthodontics (\$2,000 Lifetime Maximum) – Silver and Gold plan designs only | 50% | 0% |

| Plan | Implants | Adult Orthodontia | Children's Orthodontia |
|--------|----------|-------------------|------------------------|
| Bronze | No | No | No |
| Silver | No | No | Yes |
| Gold | Yes | Yes | Yes |

Blue View VisionSM

| Covered Services | In Network | Out of Network |
|---|--|--|
| Routine eye exam (once every 12 months) | \$10 copayment | \$50 allowance |
| Eyeglass frames (once every 24 months) | \$130 allowance then 20% off balance | \$70 allowance |
| Eyeglass lenses – Standard single lenses - Standard bifocal lenses - Standard trifocal lenses | \$20 copay, then covered in full \$20 copay, then covered in full \$20 copay, then covered in full | \$50 allowance \$75 allowance \$100 allowance |
| Eyeglass lenses upgrades – UV Coating Tint (solid and coated) Standard Scratch Resistance Standard Polycarbonate Standard Progressive Standard Anti-Reflective Coating | \$15 \$15 \$15 \$40 \$65 \$45 | Discounts on lens upgrades are not available out-of-network. |
| Contact lenses (available every 12 months with no copay in place of lenses). | \$130 allowance then 15% off balance | \$105 allowance |

Flexible Spending Account (FSA) – Medical

- ☐ Up to \$3,050 may be contributed per year on a pre-tax basis.
- ☐ Minimum election required to enroll - \$130 annually (\$5/pay period).
- ☐ Withheld funds easily accessible on a MasterCard debit card.
- ☐ Administered by American Benefits Group (ABG).
- ☐ At the end of the year, up to \$610 in unused funds may be carried over to the next plan year.
- ☐ Used for eligible out-of-pocket expenses. Eligible expenses include:
 - ☐ Co-insurance, co-pay amounts and deductibles
 - ☐ Contact lenses and cleaning solutions
 - ☐ Dental care and procedures not covered under a plan
 - ☐ Lasik eye surgery
 - ☐ Speech therapy
 - ☐ Prescription eye glasses
 - ☐ Many over-the-counter medicines such as pain relievers, cold and allergy medicines, bandages, sunscreen, menstrual products, etc.
- ☐ If you are enrolled in the HDHP with HRA and also a Medical FSA, the card will automatically use the HRA funds first for deductible, co-insurance and prescription co-pay expenses.

Flexible Spending Account (FSA) – Dependent Care

- ☐ Up to \$5,000 may be contributed per year on a pre-tax basis.
- ☐ Minimum election required to enroll - \$130 annually (\$5/pay period).
- ☐ Administered by American Benefits Group (ABG), but Dependent Care FSA funds are not linked with the MasterCard debit card.
- ☐ You can use your account throughout the year to help pay for expenses related to the care of qualifying dependents.
- ☐ A qualifying dependent is:
 - ☐ A tax dependent of yours who is under age 13, or
 - ☐ Any other tax dependent of yours, such as an elderly parent or spouse, who is physically or mentally incapable of self-care and has the same principle residence as you.
- ☐ Account balances cannot be carried over from year-to-year. If you have any unused funds at the end of the plan year, those funds will be forfeited.
- ☐ Plan has a “spend down” feature that may allow you to submit dependent care expenses incurred after your employment termination date.

MetLife Hospital Indemnity Plan

- ❑ Since you never know when an unpredictable event may occur, the Hospital Indemnity coverage will provide you with a level of protection in case you need to go to the hospital.
- ❑ This additional coverage provides cash benefits to insureds who are admitted and/or confined to the hospital due to a covered illness or injury.
- ❑ Employees not enrolled in an HDHP may enroll in the Hospital Indemnity insurance coverage with a payroll deduction.

| Covered Conditions | Hospital Indemnity Plan Pays |
|---|--|
| Hospital Coverage | |
| Admission (payable 3x per calendar year) | \$1000 |
| Confinement (paid per sickness) | Non-ICU: \$100 a day, up to 15 days ICU: \$165 a day, up to 15 days |

MetLife Supplemental Benefits

- ❑ Accident, Critical Illness, and Hospital Indemnity insurance coverages
- ❑ These benefits are not a replacement for traditional medical insurance. They are a supplement to this coverage.
- ❑ Help offset financial gaps in your health insurance plan.
- ❑ Guaranteed issue coverage if you enroll as a New Hire (within 30 days).
- ❑ Payments are made directly to you to spend as you choose.
- ❑ You can take the coverage with you if you change jobs or retire.

Out-of-pocket costs not covered by health insurance may include:

Co-pays

Deductibles

Out-of-Network Doctor

Visits Therapy



Critical Illness insurance



Accident insurance



Hospital Indemnity insurance

MetLife Accident Insurance – Claim Example (High Plan)



- Ambulance: \$400



- Medical testing: \$200



- Emergency room visit: \$200



- Broken Tooth - Repaired Crown: \$300



- Follow-up with Physician: (\$100 x 2): \$200



- Concussion Benefit: \$500

Total Lump-sum Payment: **\$1,800**

Critical Illness Insurance – Plan Breakdown

Coverage is guaranteed and you may enroll yourself and eligible dependents.

Covered Conditions

- Cancer
- Heart attack
- Stroke
- Major organ transplant
- Alzheimer's disease
- Coronary artery bypass graft
- Kidney failure

You have a **choice** of a \$5,000, \$10,000, \$15,000, or \$20,000 initial benefit amount

Your total benefit amount will be **3 times** the initial benefit amount you selected

You can receive **initial benefit payments and recurring benefit payments** until your total benefit amount is reached

Hospital Indemnity Insurance – Plan Breakdown

- ☐ Automatically included when you elect HD2800 or HD5000 Medical Plan.
- ☐ If you are not enrolled in a HDHP, you have the choice to elect this coverage.



Covered conditions

Hospital Indemnity Plan MetLife Hospital Indemnity pays you

Hospital coverage

Admission

Payable 3x per calendar year

\$1,000

Confinement

Paid per sickness

Non-ICU – **\$100** a day, up to 15 days

ICU – **\$165** a day, up to 15 days

Carrot: Our fertility healthcare and family-forming benefit

We have partnered with Carrot to make fertility and family-forming care more accessible and affordable.



We support all unique journeys

- Fertility health
- Fertility preservation
- Assisted reproduction
- Adoption
- Gestational surrogacy and donor assistance
- Pregnancy
- Menopause and low testosterone (low T)



Get personalized guidance

Get a free, personalized Carrot Plan, developed by a Carrot Expert, with step-by-step guidance to support you – at no cost to you.



Connect with a team of experts

Schedule unlimited, free virtual visits with fertility and family-forming experts to answer your questions and get connected with vetted, trusted providers.



Exclusive discounts and resources

Access expert-produced resources, pregnancy support, exclusive discounts, and Carrot Rx, a pharmacy service to get you fertility medications at competitive prices.

Visit get-carrot.com/signup to create your account and explore the resources available.

"I was shocked by how fast I got an answer and a list of providers for what I was looking to accomplish. I felt like we would wait weeks to get anything concrete, but I feel like we are that much closer to forming a family" - Carrot Member

NFP Benefits Concierge Services

Claims Advocacy

- A one-step contact center for resolving benefit claim issues.



Answers At Your Fingertips!
Dedicated Claim Advocates are here to assist every employee with regard to all the benefits our company provides.

For example:
medical, dental, vision, and disability claims



Areas We Can Help:

- Claims Questions
- Review of Explanation of Benefits
- Questions Regarding Bills/Claims Resolution
- Prescription Issues
- Appeals
- And Much More

Contact Us: Csclaims@nfp.com

Benefits Administration

- A one-step contact center for answering your benefit plan questions and resolving benefit claim issues.



Answers At Your Fingertips!
Your dedicated Benefits Concierge Representatives are here to assist every employee with regard to all the benefits your company provides.

For example: medical, dental, vision, life, disability and COBRA.



Areas We Can Help:

- Benefits Questions
- ID Card Issues
- Prescription Issues
- Provider Network Questions
- And Much More

Contact Us:

For personal service that is confidential and responsive,
call 877.835.1361 or email Dbbenadmin@nfp.com
Business Hours: 9 a.m. – 6 p.m. Eastern Time



Medical



Prescriptions



Dental



Vision



*Flexible
Spending*

Enroll or decline the medical, dental, vision, flexible spending and/or supplemental MetLife Accident, Critical Illness and Hospital Indemnity coverages via the ADP web portal within 30 days of date of hire.

Any elections made as a new hire are in effect for the entire plan year unless you experience an IRS Qualifying Life Event.



401(k) Savings Plan

- ☐ Eligible on the first day of the month after your hire date.
- ☐ Auto-enrolled at a 4% deferral percentage unless you affirmatively elect a different percentage.
- ☐ Regular pre-tax or Roth after-tax deferral options available.
- ☐ HVCU will match 50% of the first 6% of your deferral (e.g. if you defer 6%, we will match 3%).
- ☐ 100% vested in the HVCU Company Match after five years of service (20% each year until you reach 100% after five years of service).
- ☐ Additionally, HVCU will make an automatic, bi-weekly employer contribution (known as a Non-Elective Employer Contribution) of two to four percent of your base earnings (and/or commission, if applicable) to your account depending on years of service:
 - 0 – 2 years of service - Two percent
 - 3 – 6 years of service - Three percent
 - 7 or more years of service - Four percent

Additional Voluntary Term Life Insurance



*HVCU offers company-paid **Basic Life** and **Accidental Death & Dismemberment (AD&D)** insurance benefits to part and full-time employees.*

*Additionally, employees have the option to purchase voluntary **Term Life Insurance** via payroll deduction.*

- ☐ Offered to employees who are scheduled to work **at least 20** hours per week
- ☐ Provider: Anthem Life Insurance Company
- ☐ Employees can purchase Voluntary Term Life Insurance for spouses, domestic partners and dependent children

Student Loan Repayment Plan with Gradifi

- ☐ This program can help eligible employees pay down up to \$5,000 of their undergraduate student loan debt.
- ☐ The payment schedule is tiered and will increase over a 5-year period, based on your employment status, with an added bonus at the end of the 5th year. The longer you remain employed with HVCU, the more contributions and benefit you will receive.
- ☐ As an added benefit, from 11/1/2021 – 12/31/2025, benefits payable under this Plan will not be taxable (based on IRS guidelines).
- ☐ Gradifi offers additional benefits:
 - ☐ Personalized calculators and impact view dashboards to help you better understand your student loan debt.
 - ☐ Access to a marketplace of leading student loan refinancing lenders and their rates to help you potentially lower your interest rates and monthly payments.
 - ☐ Interactive learning modules to help you make smart choices in your financial decisions.
- ☐ Please refer to the Student Loan Repayment Plan Policy located on the Benefits page of the Infonet for specific benefit details and eligibility.

HVCU Education Assistance

- ❑ HVCU offers an education assistance program for approved, job-related courses or industry-related degree programs.
- ❑ All regular, full-time and part-time employees who have been employed at least one full year from their date of hire, prior to the start of the course, are eligible to apply for education assistance.
- ❑ The maximum benefit is \$5,250 per year.
- ❑ Additionally, HVCU has developed a partnership with multiple colleges to offer employees (and immediate family members where applicable) a tuition discount: University of Phoenix, Strayer University, Marist College, Mount Saint Mary College, Walden University, and Cambridge College Global.
- ❑ Employees and family members may be eligible for this tuition discount benefit on their date of hire.
- ❑ Please refer to the “Continue My Education” section located on the Organizational Development page of the Infonet for specific benefit details, eligibility and process.

The HVCU Wellness Committee strives to encourage employees and their families to create and practice sustainable, healthy lifestyles by providing opportunities for awareness, activities, education and support.

- ☐ Robust Wellness platform through Wellworks for You
- ☐ Weight Watchers and Nicotine Replacement Therapy Reimbursement Programs
- ☐ Gym Membership Discounts
- ☐ Designated walking paths at each location
- ☐ Monthly newsletter with Wellness education and information
- ☐ Challenges



WELLNESS

Wellworks For You – Earn up to \$1,250 in Rewards!

- ❑ All regular full and part-time employees are eligible to participate in the various wellness activities offered through the program to receive Wellness Dollars. These Wellness Dollars can be redeemed through the Wellworks For You Rewards Mall.
- ❑ There are 4 categories of activities:
 - ❑ Preventive – earn incentives for completing various annual screenings such as an annual physical exam, eye exam, and flu shot.
 - ❑ Mental Wellbeing – includes informational webinars and e-learning series.
 - ❑ Physical Wellbeing – connect a device and track your steps.
 - ❑ Reimbursement Programs - earn wellness dollars for going to the gym or participating in a sports league.
- ❑ Wellbeats – free access to 500+ premier on-demand fitness and nutritional videos.

Employee Assistance Program

Available to all employees and family, free of charge.

The Employee Assistance Program (EAP) offers:

- ☐ Legal advice
- ☐ Assistance with child and elder care
- ☐ Counseling for family difficulties, financial issues, and substance abuse
- ☐ Financial coaching
- ☐ Wellness coaches
- ☐ Training modules
- ☐ Wellness materials

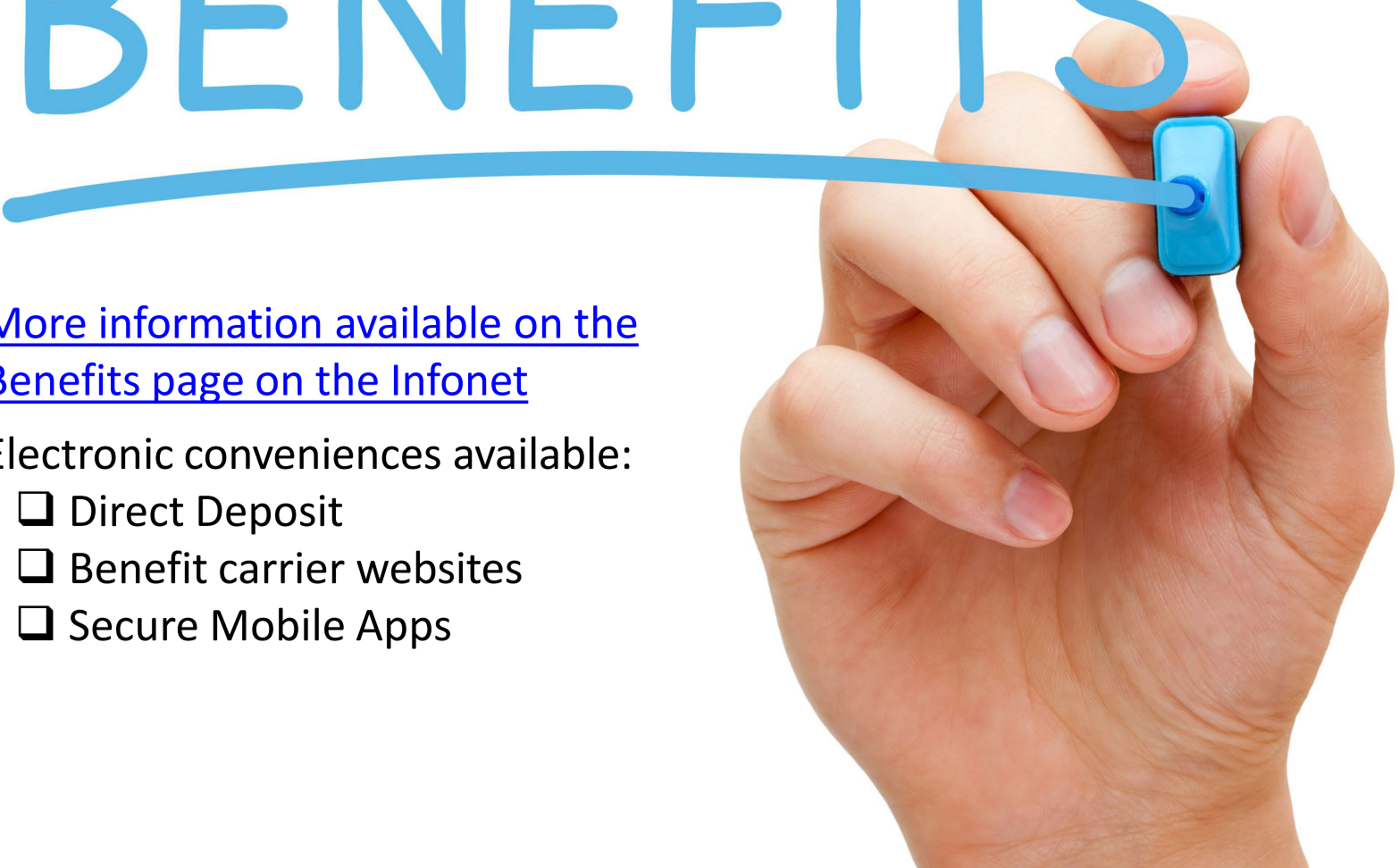




Paid Time Off

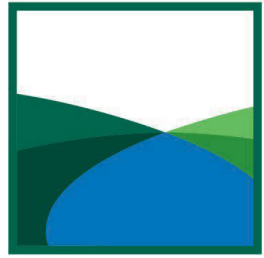
- ☐ Employees receive 11 paid holidays per calendar year.
- ☐ Paid Time Off (PTO) combines Personal, Sick and Vacation time.
 - ☐ NYS Paid Sick Leave Law requires HVCU to provide paid sick leave to all employees. This protected leave can be used for the employee's, or a family member's, mental or physical illness, injury, or health condition.
 - ☐ The Paid Sick Leave is inclusive of our standard PTO distributions. Each calendar year, full-time employees may use up to 56 hours each calendar year of their distributed and available PTO as job protected sick leave under the NYS Paid Sick Leave Law. Part-time employees will be based on standard hours.
- ☐ Distributed semi-annually.
- ☐ Employees may carry over distributed, but unused, PTO into the following calendar year up to the equivalent of their annual Paid Sick Leave allowance.
- ☐ Mandatory 5-day leave requirement annually.
- ☐ More information about HVCU's policies can be found on the Infonet: Human Resources -> Benefits -> Paid Time Off and Leave Benefits.

BENEFITS



- ☐ [More information available on the Benefits page on the Infonet](#)
- ☐ Electronic conveniences available:
 - ☐ Direct Deposit
 - ☐ Benefit carrier websites
 - ☐ Secure Mobile Apps

Welcome to



HudsonValley[®]
CREDIT UNION



 we care