Benefit for Health New England (HNE) Plan Members: Up to $150 reimbursement per employee per calendar year, toward the purchase of:

1. Qualifying Fitness Club Membership
2. Aerobic/Wellness Classes
3. Personal Training
4. Mindfulness-Based Stress Reduction (MBSR) and Transcendental Meditation (TM)

To be eligible for this benefit you must be:

- A Baystate Health (BH) employee enrolled in a BH medical plan with Health New England.
- A BH employee who is married to or a dependent of another BH employee and covered under the same plan is eligible to receive the reimbursement, in addition to the BH employee who is the subscriber on the plan. (Spouses and Dependents who are not BH employees are not eligible for reimbursement.)
- An active HNE member at the time of participation and when you request reimbursement.

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<tr>
<th>Qualifying Activities</th>
<th>Activity Requirements</th>
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| Fitness Club Membership                       | - Fitness club i.e. YMCA, Planet Fitness, Healthtrax, Gold’s Gym, LA Fitness, etc.  
- The Baystate Change of Heart Program and Baystate Cardiac Rehab & Wellness Gym are already subsidized by Baystate Health and do not qualify for the reimbursement. |
| Aerobic, Wellness Classes, Athletic Events, Personal Training | - Live classes may be in-person, live online, streaming. i.e. Zumba®, Pilates, yoga, spinning, aerobics, tai chi, strength training, kickboxing, martial arts, etc. Class instructors and personal trainers must be certified.  
- Athletic events, i.e. 5K, marathons, Tough Mudder, triathlons, etc. |
| Stress Management: Mindfulness (MBSR)         | Mindfulness-Based Stress Reduction (MBSR) Course or the Mindfulness-Based Eating Course  
The Mindfulness-Based Stress Reduction program was originally developed by Jon Kabat-Zin, PhD, at the University of Massachusetts Medical School. In order to qualify for reimbursement, the course must be taught by a Certified MBSR Instructor. |
| Transcendental Meditation (TM)                | Transcendental Meditation (TM)  
The TM technique was founded by Maharishi Mahesh Yogi over 50 years ago, and is a course carefully personalized for each individual. In order to qualify for reimbursement, the course must be taught by a Certified TM instructor (TM.org) |

HNE will not reimburse for:

- Classes or personal training fees with uncertified or unqualified personal trainers or instructors
- Memberships to country clubs; gymnastics facilities; tennis or pool only facilities; social clubs
- Vitamins, supplements, sports/exercise equipment, greens fees, program materials, etc.
Submit for HNE Reimbursement

Review all program criteria on Page 1 before completing this form. Specific rules apply. Incorrect or incomplete information may lead to delay or rejection of your application.

1. Complete Employee Information below and sign and date this form.

2. Gather all necessary documentation:
   - A copy of applicable contracts, membership agreements and personal trainer agreements with certification number. Documentation needs to include subscriber name.
   - Dated paid receipts or copies of bank or credit card statements that include the member’s name, the program name and the individual charges for each activity. Receipts will not be returned.
   - If you are a Spouse or Dependent you must submit a photo copy of your Baystate Health employee ID badge (picture side only). If you are the Subscriber of the BH medical plan, you do not need to submit the ID badge photo copy.

3. Mail the completed form and all documentation to Health New England. All applications must be postmarked by March 31, 2021. Forms submitted after March 31, 2021 will not be accepted.

   Health New England Claims Department
   One Monarch Place, Suite 1500
   Springfield, MA 01144-1500

   • You will be reimbursed for only the portion you have paid for your membership for the calendar year of your submission.
   • To be eligible for the entire $150, submit the reimbursement form after you have spent this amount. You can submit this form up to 2 times in each calendar year for a combined maximum annual reimbursement of $150 per employee. Please allow 4-6 weeks for processing.
   • For questions, call HNE at 1-800-791-7944 or 413-233-3060.

Employee Information

<table>
<thead>
<tr>
<th>Employee Name (print Last, First)</th>
<th>Date of Birth</th>
<th>HNE Member Number</th>
<th>BH Employee Number (EN#)</th>
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<tr>
<th>Home Street Address, City, State, Zip Code</th>
<th>Phone Number</th>
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<tr>
<th>Qualifying Activity (Select one)</th>
<th>Facility Name (or name/type of class if applicable)</th>
<th>Facility Address</th>
<th>Facility or Instructor Phone #</th>
<th>$ Amount Requested</th>
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<tbody>
<tr>
<td>□ Fitness Club</td>
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<td>□ Classes &amp; Events</td>
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<td>□ Personal Training</td>
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<td>□ MBSR</td>
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Certification and Authorization

I authorize the release of any information from my fitness center membership and/or my participation in a stress reduction program to Health New England. I certify that the information provided in support of this submission is complete and correct.

Employee Signature: _____________________________ Date: ________________

Baystate Health

Health New England