



SMITH COLLEGE

2017 Health Care Expense Subsidy Application

The information on this application is confidential, and will be treated as such.

Employee's Name: _____
(Please print)

Smith ID Number: _____

Household income for 2015 from U.S. federal income tax return(s) for both you and your spouse (if there were two returns, add the amounts for each line):

(1)	Wages, salaries, tips	\$ _____	(1)
(2)	Interest income	+ _____	(2)
(3)	Dividends	+ _____	(3)
(4)	Other income (alimony received, business and farm income, capital gains, pensions, annuities, rents, unemployment compensation, Social Security, Railroad Retirement, and any other taxable income)	+ _____	(4)
(5)	Total family income in 2015:	\$ _____	(5)

For calendar 2017, I will be enrolled in a: Double Health Plan
 Family Health Plan

I have read the important information about the Health Care Expense Subsidy Program on the back of this form and certify that the information I have provided is correct.

Employee Signature

Date

Submit this form with your 2015 tax return(s) to Human Resources.

FOR HR USE ONLY:

FSA @ \$ _____

610 @ \$ _____

Entered by: _____

Date: _____

IMPORTANT INFORMATION ABOUT THE HEALTH CARE EXPENSE SUBSIDY

A college-paid subsidy of from \$663 to \$2,652 is available to help offset health care expenses in 2017 for Smith employees who meet all of the following criteria:

- participate in a Smith College family or double health insurance plan
- had family income of less than \$65,245.35 in 2015

Please note the following terms and conditions:

- The plan year for the subsidy runs from January to December.
- The subsidy is not based on financial obligations or family size.
- For current employees, 2017 subsidy eligibility is based on total family income (including income from a spouse) in the 2015 tax year. There are no midyear adjustments. Subsidy amounts are prorated based on when the application is approved.
- For new employees, the 2017 subsidy is based on current Smith salary OR 2015 family income (including income from a spouse), whichever is higher.
- Family income must be verified by a signed federal income tax return. If yours is a two-income household, both spouses' income must be verified by tax return(s).
- Up to the first \$500 of the subsidy amount is made available through a health care flexible spending account and is nontaxable to the employee.

This subsidy program is funded in full by Smith College, and the college reserves the right to amend, modify, or terminate the program at any time.

<u>Family Income</u>	<u>2017 Subsidy of up to:</u>
\$27,792 or less	\$2,652
\$27,793 to \$34,036	\$2,320
\$34,037 to \$40,279	\$1,989
\$40,280 to \$46,522	\$1,657
\$46,523 to \$52,765	\$1,326
\$52,766 to \$59,008	\$994
\$59,009 to \$65,244	\$663
\$65,245 or more	\$0