

Benefits in Brief

FEBRUARY 2017

Welcome to Barnes & Noble Education, the unmatched provider of “what’s next” in campus retail and digital learning experiences. Through our Barnes & Noble College subsidiary, we operate more than 700 of the finest campus bookstores in the country, delivering to five million students and more than 250,000 faculty an experience driven by innovation, deep student and faculty insights, and advanced technologies. We transform campus stores into destinations that support the academic and social lives of all members of the college community with a focus on affordable course materials, must-have apparel, groundbreaking technology, food and beverage options, and an overarching commitment to celebrating our campus partner’s brand.

We’re proud to be an industry leader, consistently recognized for excellence in quality and customer service in our stores and online, and at the forefront of digital education. We employ the best and brightest in America—and are excited to have you join us.

At Barnes & Noble Education, there are a host of benefits available to meet your needs. This brochure outlines your health and financial benefits, which are



part of your overall compensation package. It is intended to provide you with the basic information you will need to make enrollment decisions.

The benefit plans are described in more detail in the *Benefit Plans Summary* and the official plan documents, including written company policies. In the event of an information conflict, the plan document will control.

If you need help or more information (including a copy of the *Benefit Plans Summary*), please call the HR Service Center at (800) 799-5335, Monday through Friday, 8:00 a.m. to 5:30 p.m., Eastern Time.

What’s Inside:

HEALTH CARE PROGRAMS

- Medical Plan
- Dental Plan
- Flexible Spending Account

FINANCIAL SECURITY PROGRAMS

- 401(k) Plan
- Short and Long-Term Disability
- Life and Accident Insurance

ENROLLMENT FOR COVERAGE

- How to Enroll
- After Enrolling
- Changing Benefit Elections

MERCHANDISE DISCOUNTS

- LIFEWORKS
- ADDITIONAL PROGRAMS
- ADDITIONAL QUESTIONS

Medical Plan

The Barnes & Noble Education Medical Plan offers two options that provide comprehensive coverage, including prescription benefits and routine preventive care:

1. An Exclusive Provider Option (EPO), which provides generous coverage exclusively through network providers; and
2. A Preferred Provider Option (PPO), which allows a choice of using network or non-network providers.

UnitedHealthcare (UHC) is the medical claims administrator for both the EPO and PPO. The EPO and PPO network provider directories can be viewed via welcometouhc.com/bned.

Under either option there is a financial incentive to use network providers. As you determine which option to enroll in, please take note that the participating provider networks for the EPO and PPO are extensive, and nearly identical. Primary care physicians and doctors practicing in a wide array of medical specialties are available through either option (without the need for referrals) in most parts of the country, and the networks include world-renowned hospitals, such as the Mayo Clinic, Sloan Kettering, Cleveland Clinic, New York Presbyterian and UCLA Medical Center, to name just a few.

If you choose the EPO, you will pay a co-pay for office visits and enjoy a high level of coverage—90% of most covered charges after the annual deductible—when network providers are used. The EPO will not,

however, cover expenses you incur with a non-network health care provider and you will be entirely responsible for paying those expenses.

With the PPO, you may choose any physician you want. However, when you use network providers, you receive the advantage of negotiated fees that are lower than the fees charged by health care providers who aren't part of the network. Most services are covered at 80% after the annual deductible when received from network providers, compared to 60% of eligible expenses when non-network providers are used.

To help you find affordable health care when needed, both the EPO and PPO cover treatment at in-network Convenience Care Centers and Virtual Visits arranged through UnitedHealthcare. These features offer fast access to care, and plan members will pay a small co-pay for each visit—\$10 for EPO members and \$15 for PPO members.

At a **Convenience Care Center**, you will be seen by a health care professional (e.g., a nurse practitioner) qualified to diagnose routine conditions and licensed to prescribe appropriate medications. Because they are often located within drug stores, you may be able to pick up a needed prescription all in one visit. A **Virtual Visit** lets you see and talk to a doctor from your mobile device or computer without an appointment and without you having to leave the comfort of home. Most visits take about 10-15 minutes and in most states doctors can write a prescription, if needed, that you can pick up at your local pharmacy.

Health Care Program Eligibility

In general, full-time employees scheduled to work 30 or more hours per week are eligible for medical and dental benefits and healthcare flexible spending account participation after completing 60 days of continuous eligible service.

In addition, you may cover your spouse or domestic partner and your child(ren) up to age 26. In general, domestic partners are two adults of the same or opposite sex who reside

together and have chosen to share their lives in an exclusive and committed relationship.

Tax Treatment

Your contributions for medical and dental benefits (including the healthcare flexible spending account) for yourself, your spouse and your child(ren) are deducted on a before-tax basis for federal, state and local tax purposes. In addition, the value

of the company's contribution toward coverage for you, your spouse and your child(ren) is not included in your taxable income.

However, contributions to cover your domestic partner, and your domestic partner's child(ren), must be deducted on an after-tax basis and the value of the company's contribution for their coverage will be imputed in your federal, state and local taxable income.

Summary of Medical Coverage Options

The coverage outline below helps you quickly and easily compare the provisions of your coverage options.

If you live outside the network service area, the PPO is the only coverage option available to you. In that case, your deductible, coinsurance and out-of-pocket maximum will be as described under “With Network Providers” in the PPO with the exception of

Virtual Visits and Convenience Care, which are covered subject to the deductible and coinsurance. Benefits will be based on eligible expenses as determined by UnitedHealthcare rather than a discounted fee.

To find out if your home address is in the network service area, please call the HR Service Center or visit HR Access under Benefits Enrollment.

PLAN FEATURE	BNED EPO PLAN	BNED PPO PLAN	
		With Network Providers	With Non-Network Providers
NETWORK REQUIREMENTS	In-network coverage only	You may choose network or non-network providers. With network providers, benefits are based on negotiated fees. With non-network providers, benefits are based on covered charges, which may be less than the billed amount.	
NETWORK	UnitedHealthcare Choice Network	UnitedHealthcare Choice Plus Network	
CALENDAR YEAR DEDUCTIBLES Per Person / Per Family Other Features	\$300 / \$600 Office Visit, Convenience Care, Virtual Visit, and Emergency Room co-pays do not count toward deductible.	\$500 / \$1,000	\$700 / \$1,400
VIRTUAL VISITS	\$10 per visit	\$15 per visit	Not covered
CONVENIENCE CARE	\$10 per visit	\$15 per visit	40% after deductible
OFFICE VISITS	\$20 per visit for primary care; \$35 for specialist visits	20% after deductible	40% after deductible
PREVENTIVE CARE SERVICES	No charge for routine preventive care as defined by regulation and UnitedHealthcare as claims administrator.	No charge for routine preventive care as defined by regulation and UnitedHealthcare as claims administrator.	40% after deductible
DIAGNOSTIC X-RAY AND LAB	10% after deductible	20% after deductible	40% after deductible
EMERGENCY SERVICES⁽¹⁾	\$150 co-pay per visit; then you pay 10% after deductible	\$150 co-pay per visit; then you pay 20% after deductible	\$150 co-pay per visit; then you pay 20% after deductible

PLAN FEATURE	BNED EPO PLAN	BNED PPO PLAN	
		With Network Providers	With Non-Network Providers
OTHER EMERGENCY SERVICES ⁽¹⁾ Urgent Care Center, Ambulance	10% after deductible	20% after deductible	40% after deductible
HOSPITALIZATION Room and Board, Nursing and Other In-Hospital Services	10% after deductible	20% after deductible	40% after deductible
MATERNITY Prenatal, Delivery and Postnatal Services	\$35 at first prenatal visit After that, you pay 10% after deductible for related services for diagnostic tests.	20% after deductible	40% after deductible
OUT-PATIENT REHABILITATION SERVICES	\$35 per visit	20% after deductible	40% after deductible
	Up to 60 visits per calendar year for physical, occupational and speech therapies combined	Up to 60 visits per calendar year for physical, occupational and speech therapies combined	
SURGERY	10% after deductible	20% after deductible	40% after deductible
ACUPUNCTURE	You pay \$35 per visit.	You pay 20% after deductible.	You pay 40% after deductible.
CHIROPRACTOR CARE	\$35 per visit	20% after deductible	40% after deductible
	Up to 30 visits per calendar year available	Up to 30 visits per calendar year available	
CALENDAR YEAR OUT-OF-POCKET MAXIMUMS Per Person / Per Family Includes Deductible and Coinsurance	\$2,000 / \$4,000	\$5,000 / \$10,000	\$7,000 / \$14,000
	Co-pays for Virtual Visits, Convenience Care, and office and emergency room visits count toward the out-of-pocket maximum, as do prescription co-pays.	Expenses credited toward the in-network and out-of-network out-of-pocket maximums cross-apply. You do not have to meet two separate maximums. Co-pays for Virtual Visits, Convenience Care, and emergency room visits count toward the out-of-pocket maximum, as do prescription co-pays.	
PRESCRIPTION DRUGS	Covered at pharmacies participating in Caremark network. The coverage is included in all Medical Plan options; see details on page 5.		

⁽¹⁾ In an emergency, you do not have to find an in-network provider. Emergency services required to stabilize or to initiate treatment at a hospital or alternate facility are covered, regardless of whether an in-network or non-network provider is used. Keep in mind an emergency is a serious medical condition or symptom resulting from injury or illness, which arises suddenly and requires immediate care and treatment to avoid threat to life or health.

Prescriptions

Most prescription drugs are covered under our program managed by Caremark. Our pharmacy network includes major chains like CVS, Walgreens, Rite Aid, Target and Wal-Mart, and many independent pharmacies. You can locate a network pharmacy by calling Caremark at (855) 559-1393.

Your cost for prescriptions depends on whether you buy medication at a participating pharmacy or through the mail,

and on whether the medication is a generic drug, a brand name drug on the preferred drug list (PDL), a brand name drug not on the PDL, or a specialty drug.

The plan pays all of the cost above your co-pay. In cases where a brand name drug has a generic equivalent, your cost may be higher than the co-pays shown if the brand name drug is dispensed for any reason.

FOR A...	At a retail pharmacy			Through mail order		
	You pay	Minimum	Maximum	You pay	Minimum	Maximum
Generic drug	\$10	n.a.	n.a.	\$25	n.a.	n.a.
Brand drug on preferred drug list	20%	\$30	\$45	20%	\$75	\$112.50
Brand drug not on preferred drug list	20%	\$60	\$75	20%	\$150	\$187.50
Specialty drug	20%	\$75	\$112.50	n.a.	n.a.	n.a.
For up to a	30-day supply			90-day supply		

If your prescription is for a maintenance medication, the plan allows two fills, each for up to a 30-day supply, at any network pharmacy. After that, you will be required to use the plan's mail order pharmacy to receive a 90-day supply of your medicine. Alternatively, you can choose to have your maintenance prescription filled at a CVS/pharmacy and receive a 90-day supply for the regular mail service co-pay. You'll realize a savings because you'll pay only two-and-a-half times the retail co-pay.

The Specialty Pharmacy Program is designed to help patients understand and manage their conditions, take their specialty medicine correctly, and coordinate delivery of specialty prescriptions through Caremark Specialty Pharmacy Services, a separate mail order pharmacy that concentrates on filling specialty drug prescriptions. Medical plan members who take a specialty drug covered by the program will be required to use the CVS Caremark Specialty Pharmacy to fill those prescriptions.

The Barnes & Noble Education Medical Plan provides services in other important areas too:

- **VISION CARE** Through EyeMed, you're eligible for an annual routine examination for eyeglasses for only \$10. Eyewear can be purchased at discounted prices. For participating providers, call (866) 723-0514 or visit www.enrollwiththeyemed.com.
- **ASSISTANCE & ADVICE** Plan participants have access to Advocates, as well as Registered Nurses, who have the tools, training and resources to make the health plan and health system more simple and effective, leveraging claims information to resolve member issues and provide treatment decision support and education. Call UnitedHealthcare at (844) 234-7920.
- **WEB ACCESS** Through UHC's website, myuhc.com, plan participants can inquire into the status and history of their health claims, search for participating providers, order a new medical ID card, and access health and well-being information.

For more information about medical coverage and up-to-date information on participating providers, visit www.myuhc.com or call UnitedHealthcare at (844) 234-7920.

Dental Plan

While you are free to choose any dentist for you and your dependents, you'll discover that coverage is more generous and dental benefits go further with our MetLife Preferred Dental Program (PDP) network providers. The PDP provider directory is found on metlife.com under "Find a Dentist."



Here's How It Works:

	With Network Providers	With Non-Network Providers
Network Requirements	You may choose network or non-network providers. With network providers, benefits are based on negotiated fees. With non-network providers, benefits are based on reasonable and customary charges.	
Network	MetLife Preferred Provider Network	
Calendar Year Deductibles Per Person / Per Family Other Features	\$50 / \$150	\$50 / \$150
	Deductible does not apply to preventive services or orthodontia. Expenses credited toward in-network and out-of-network deductibles cross-apply. You do not have to meet two separate deductibles.	
Preventive Services	The plan pays 100% of eligible charges.	The plan pays 100% of eligible charges.
Basic Services	After deductible is met, you pay 20% and plan pays 80%.	After deductible is met, you pay 30% and plan pays 70%.
Major Services	After deductible is met, you pay 50% and plan pays 50%.	After deductible is met, you pay 50% and plan pays 50%.
Orthodontia	You pay 50% and plan pays 50% for dependent children up to age 19 (up to a maximum of \$1,500 per child).	You pay 50% and plan pays 50% for dependent children up to age 19 (up to a maximum of \$1,000 per child).
Annual Benefit Maximum	\$1,500 per person	\$1,000 per person

A Healthcare Flexible Spending Account (FSA) May Be Right for You

An FSA will save you money. All you do is put aside equal amounts each pay period, before income taxes and Social Security contributions are taken out, to pay for eligible health care expenses. Covered expenses include annual deductibles, coinsurance amounts, prescription co-pays, eyeglasses or contact lenses, laser surgery to correct vision impairment, over-the-counter drugs (only if prescribed by a doctor) and numerous other supplies and services.

Here are the key features of the FSA:

- It's easy to use. The amounts you are responsible for under our medical and dental coverage are automatically considered for reimbursement from the FSA.
- You can use your FSA to pay health care expenses for yourself and your eligible dependents (those you claim an exemption for on your federal income tax return).
- You can deposit between \$100 and the maximum permitted each year under tax regulations per year in the FSA. In your first year of eligibility a prorated maximum applies. The maximum amount you can elect when you first become eligible is displayed when you enroll on HR Access.
- You make a new FSA election each year, and careful planning helps save you money. If you do not use all of the money in your FSA for expenses incurred during each enrollment year, federal law requires that you forfeit the unused balance.
- If you are also enrolled for medical plan coverage, you will receive a Health Care Spending Card[®]. Once you activate the card, you will be able to use it for prescription co-pays at a participating retail pharmacy or the plan's mail order pharmacy. You can also use it for eligible over-the-counter items at drugstore.com or at many of the merchants who accept MasterCard[®]. If you are enrolled in the EPO, the Health Care Spending Card[®] can also be used for office visit co-pays. The card can also be used for Virtual Visit and Convenience Care co-pays under the EPO or PPO.
- General information about covered expenses can be found on www.myuhc.com. For a complete list of eligible expenses covered with the FSA, see IRS Publication 502 "Medical and Dental Expenses," available by visiting www.irs.treas.gov or by calling (800) 829-3676.

FINANCIAL SECURITY PROGRAMS

401(k) Plan

The Barnes & Noble Education 401(k) Plan offers participating employees several key advantages that make it easy to save for the future.

- You can save from 1% to 75% of your before-tax earnings each pay period, up to annual IRS limits, through convenient payroll deductions.
- Barnes & Noble Education matches your contributions dollar for dollar up to 4% of your earnings per pay period. (If you contribute less than 4%, a smaller company matching contribution is made.)
- Company matching contributions are immediately vested. They're all yours as soon as they are made!
- You can invest your contributions and the company matching contributions in a wide range of funds providing access to a variety of asset types and investment approaches.

You become eligible to participate in our 401(k) plan if you are at least age 18 and you complete 1,000 hours of service in any 12-month period. Once eligible, you'll receive more information about how to enroll from Fidelity Investments.

If you participated in a 401(k) plan at your previous employer, you can roll over the eligible portion of that account into the Barnes & Noble Education 401(k) Plan immediately—just contact the HR Service Center to start the process.

If You Are Unable to Come to Work

SICK DAYS AND DISABILITY PROGRAMS

If an illness or disability keeps you from coming to work, you may benefit from paid sick days and disability coverage.

Paid Sick Leave

In general, you are eligible for up to three paid sick days after completing six months of continuous service as a full-time employee. You are eligible for up to six paid sick days in each subsequent anniversary year. We also allow you to carry over up to six unused sick days, for a maximum of 12 sick days in any given anniversary year.

In states or localities with laws that provide for more generous sick pay benefits than described above, the state or local law will govern. For more information, please speak to your manager or contact the HR Service Center.

Short-Term Disability

Short-term disability, which Barnes & Noble Education provides to full-time employees, protects your income during an illness or disability for up to five months. For hourly employees, coverage starts when you have been employed continuously in an eligible position for six months. Eligibility for exempt employees starts from date of hire.

Plan payments begin on the sixth consecutive workday of absence due to disability for hourly employees. Benefit payments for exempt employees and hourly managers are equal to 100% of salary. Benefits for all other hourly employees are equal

to 60% of average weekly earnings. Benefits can continue for up to 22 weeks, as long as you remain disabled.

Barnes & Noble Education's short-term disability benefits are reduced by the amount you receive through state-mandated benefits. Also, some states have their own rules regarding eligibility for short-term disability benefits:

- If you work in California, Hawaii, New Jersey or Rhode Island, you must file for disability benefits with the state.
- If you work in New York, state-mandated benefits may apply after four weeks of full-time or part-time employment and may continue for up to 26 weeks. Contact the Benefits department for assistance.

Long-Term Disability

The long-term disability (LTD) plan provides protection against the financial burden resulting from a disability lasting longer than five consecutive months.

Full-time employees earning at least \$10,000 a year can elect long-term disability coverage through the Barnes & Noble Education plan. You become eligible for coverage after 60 days of continuous eligible service. If you become totally disabled for more than five months, the LTD plan



pays up to 60% of covered earnings to a maximum benefit of \$10,000 per month.

LTD payments are reduced by the amount you receive from any other disability benefits from Barnes & Noble, Social Security, Workers' Compensation or any other source.

As a new plan member, please note the plan requires a 12-month waiting period before coverage goes into effect for a pre-existing condition (any sickness or injury that you consulted a doctor for or received treatment for, including prescribed medications) during the three months before your plan coverage becomes effective.

Life and Accident Insurance

Full-time employees become eligible for life insurance coverage upon completing 60 days of continuous eligible service.

As soon as you become eligible, you are automatically enrolled in company-paid life insurance coverage equal to your annual salary, up to a maximum of \$250,000.

You can buy supplemental life insurance equal to one, two, or three times your annual salary, up to a maximum of \$750,000. (Supplemental life insurance above \$300,000 is subject to insurance company approval.)

Coverage for Your Family

When you become eligible for life insurance coverage, you can also enroll your eligible family members. These include your spouse or domestic partner and children from birth up to age 26.

You can choose coverage of \$10,000, \$20,000 or \$30,000 for your spouse, civil union partner, or domestic partner. And you can make a separate

election of \$5,000 or \$10,000 of coverage for your eligible children.

Accidental Death & Dismemberment Coverage

Participants in the company-paid life insurance plan automatically receive accidental death and dismemberment (AD&D) coverage equal to the amount of their life insurance. AD&D coverage provides protection if you are severely injured or die as a result of an accident.

Business Travel Accident Insurance

Full-time employees are automatically covered by business travel accident insurance equal to three times their annual salary, up to a maximum of \$250,000. This plan provides protection if you are involved in an accident while on business-related travel.

Important!

Your long-term disability and life insurance enrollment decisions call for careful consideration. If you want to enroll after your eligibility date, it may be necessary for you to provide information on your health status to the plan's insurance company. The insurance carrier has the right to approve or decline your application for coverage. (See page 11 for information on changing your elections during the annual enrollment period or if your family status changes.)

How to Enroll for Coverage

As a newly eligible employee in the Barnes & Noble Education benefit programs, you will want to make an election for each plan offered. As a full-time employee you must make your enrollment elections during your first 60 days of eligible service to have medical, dental, supplemental or family life insurance and long-term disability coverage, and to participate in the Health Care FSA on your eligibility date.

Enrollment through HR Access is easy. Log on to <https://hraccess.bn-corp.com> and choose “Benefit Enrollments” to get started. As you complete your elections under each plan, be sure to click “Update Elections” to register your decision. During your enrollment session, you’ll be able to view a summary of your benefit elections, which includes the amount that will be deducted from your earnings.

HR Access makes it easy to provide the information needed to enroll dependents. To add dependents to your medical or dental coverage, simply enter the name, birth date and Social Security Number of each dependent you want to add to your coverage.

During your first 60 days of eligible service you can submit and revise your elections at any time. The elections on record as of your eligibility date will be accepted as your final elections, and you will

automatically be considered to have waived participation in any plan where you made no election. After that point, you can adjust your coverage elections during the next annual enrollment period or if you have a qualifying family status change.

GETTING STARTED ON HR ACCESS

If you are a new user, here’s what you need to know to get started.

- Your user identification is always your employee number.
- Your initial password is 15 characters, made up of:

The letters “Pa” (upper case “P” and lower case “a”);

Your 5-digit home Zip Code;

The month and day of your birth (two digits for each); and

The last four digits of your Social Security Number.

- You’ll be asked to select your own personal password before using any of the services available on HR Access.

Have questions about HR Access? Call the HR Service Center at (800) 799-5335, Monday through Friday, from 8:00 a.m. to 5:30 p.m. Eastern Time.

If you have already logged on to HR Access online, but do not recall your password, click on “Forgot Your Password?” and follow the prompts to regain the ability to log on to HR Access.



After Enrolling

If you've enrolled for medical plan coverage, you will receive a medical plan ID card from UnitedHealthcare and separate welcome kit from UnitedHealthcare containing detailed information about the medical benefits and how to use them. You will also receive a prescription drug ID card from Caremark, along with information about the prescription drug program. The ID cards will show the different, unique identification numbers you'll need when using the medical or prescription portions of our coverage.

An ID card is not needed for either the dental plan or the vision benefit. You will also receive a welcome kit describing the dental plan program.

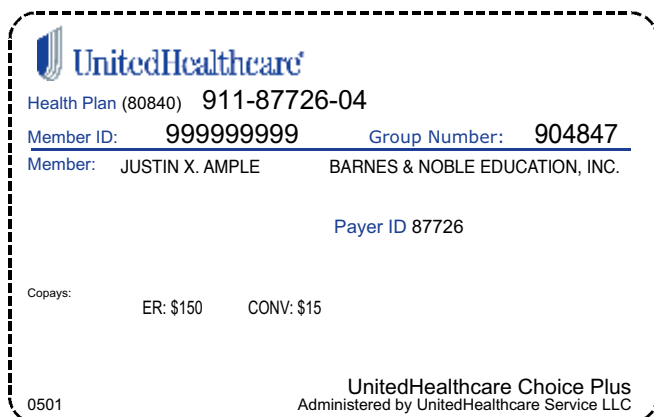
Employees enrolling in the FSA who are also enrolled for medical plan coverage will receive a Health Care Spending Card® from UnitedHealthcare.

You can also find general medical and FSA claim forms on UnitedHealthcare's www.myuhc.com website. For a dental claim form, visit www.metlife.com/mybenefits.

Changing Benefit Elections

Many of the enrollment decisions you make now can be adjusted during the annual enrollment period or when your family status changes. During the annual enrollment period, full-time employees can make the following elections through HR Access:

- Change your medical and dental elections, or enroll for coverage;
- Elect to participate in the Health Care FSA;
- Increase your supplemental life insurance coverage election by one multiple of salary;



The image shows a medical plan ID card for Justin X. Ample. The card is enclosed in a dashed border and contains the following information:

- UnitedHealthcare logo
- Health Plan (80840) 911-87726-04
- Member ID: 999999999 Group Number: 904847
- Member: JUSTIN X. AMPLE BARNES & NOBLE EDUCATION, INC.
- Payer ID 87726
- Copays: ER: \$150 CONV: \$15
- 0501
- UnitedHealthcare Choice Plus
Administered by UnitedHealthcare Service LLC



- Enroll your spouse or domestic partner for \$10,000 in life insurance coverage, or increase their coverage by one level; and
- Elect life insurance coverage for your eligible children.

The option to increase supplemental life insurance coverage or to elect life insurance coverage for eligible children is also available to eligible part-time staff during the annual enrollment period.

When your family status changes—for example you marry or divorce, have or adopt a child, or you or your spouse or domestic partner lose coverage under another medical plan—you may be able to:

- Change your medical and dental elections;
- Change your life insurance coverage elections; and
- Enroll new dependents for family life insurance.

You may cancel your flexible spending account only in the event of divorce or the death of your eligible dependent.

Changes in your coverage elections will be accepted if they are consistent with the status change and are requested within 31 days. Please contact the HR Service Center for assistance.

Merchandise Discounts

The Barnes & Noble Education employee discount is one of our best-loved benefits. Beginning when you have completed 30 hours of work, you will be eligible for discounts at our college bookstores. The discount covers books, NOOKs, NOOK accessories, music/DVDs and items in our café. And yes, these discounts are available to part-time, seasonal and temporary employees who have worked the required hours. Your spouse or domestic partner and eligible dependents may also participate in the savings, but you must accompany them at the time of purchase. Your discount is good at any Barnes & Noble College bookstore. For up-to-date information on the merchandise discounts you can receive, please refer to b&ncollege INSIDE, our company intranet. Just choose HR/Benefits on the home page, and then select “Discounts” to locate current policies.



LifeWorks Resource and Referral Service

The LifeWorks program is a free, confidential service available 24 hours a day, 7 days a week for assistance with issues of daily living, including emotional well-being, marital concerns, financial and legal matters, parenting and childcare, resources for seniors and the disabled, addiction and recovery, consumer matters and other everyday issues.

LifeWorks is staffed by trained, masters-level consultants to provide you with personal consultation and/or individual face-to-face referrals. You can call toll-free to speak with a professional LifeWorks consultant at (888) 456-1324 or visit LifeWorks.com (User ID is “bncollege”, Password is 9420) to find the help and resources you need.

LifeWorks is also available through a mobile app, formatted for easy navigation on your iPhone, Android, or BlackBerry. The app allows you to listen to podcasts and audio tracks, read articles and digital booklets and see what’s new in the monthly features.

Plus more!

As part of our benefits package, Barnes & Noble Education provides:

- Competitive vacation, holiday, and personal day benefits to full-time employees;
- Competitive vacation and holiday benefits to eligible part-time employees who work 20 or more hours per week; and;
- A transit program that allows full-time and eligible part-time staff to pay most commutation expenses on a before-tax basis. Contact WageWorks at (877) 924-3967 or www.wageworks.com to enroll.

Please refer to the Employee Handbook or the company portal for a description of these policies.

Affinity Federal Credit Union Membership

Barnes & Noble Education employees and their immediate family and household members are eligible for lifetime membership in the Affinity Federal Credit Union. By joining Affinity, you’ll have access to a full range of financial products and services such as no-fee checking and savings accounts, high-interest deposit accounts, home banking, free online bill pay, and loan products.

Visit www.affinityfcu.com to find an ATM/Branch locator, Frequently Asked Questions and a Membership Application. For additional questions, you may also contact Affinity’s Member Service Center at (800) 325-0808. Once your Affinity account is established, use HR Access to set up direct deposit of your pay to that account.

Questions? The HR Service Center is available to answer questions about our benefits. Call (800) 799 5335, Monday through Friday, 8 a.m. to 5:30 p.m., Eastern Time.

The Benefit Plan Summary is another resource available to you and contains a detailed description of each plan.

You may also use HR Access at <https://hraccess.bn-corp.com> to review your benefit elections, enroll in direct deposit, review or change your federal tax withholding elections, update your mailing address, and check your eligibility for paid time off benefits.