2027 Benefits Summary

Hamilton

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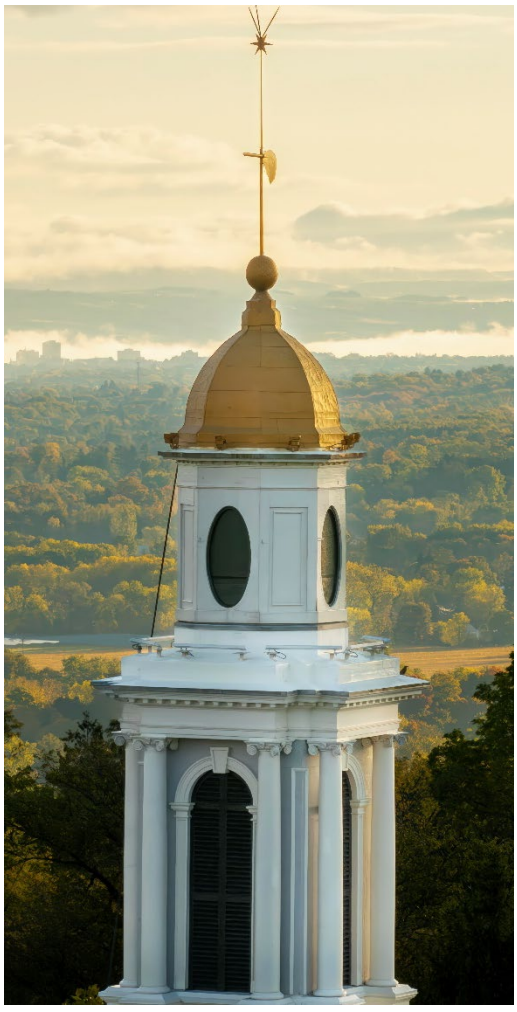

Hamilton employees take great pride in the important mission they uphold—an enduring devotion to the intellectual and personal development of students. The College appreciates the ongoing commitment of its faculty and staff and is pleased to offer a benefits program as part of an employee's total compensation that includes:

- A wide range of competitive benefit plans to accommodate your personal needs and protect you and your family from financial hardship;
- Tuition benefits for you, your spouse/partner and dependent children;
- Generous time off programs to help you balance your work and family life;
- Access to fitness facilities, fitness classes and a wellness program;
- Access to one of the finest small college libraries in the nation.

ABOUT THIS BENEFITS SUMMARY

This Benefits Summary describes the highlights of our benefits in non-technical language. Specific rights to benefits under the plan are governed solely, and in every respect, by the official plan documents and not the information contained within this Benefits Summary.

If there is any discrepancy between the description of the programs as contained in this Benefits Summary and the official plan documents, the language of the official plan documents shall prevail as accurate. Any of the benefits may be modified in the future to meet Internal Revenue Service rules or otherwise as decided by Hamilton College.

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2027 BENEFITS

Eligibility
Regular employees working half-time or more are eligible for benefits. Specific details are in the employee handbook.

Dependent Coverage
Dependents eligible for medical/dental /vision coverage are spouses/domestic partners, and children to age 26.

Medical Benefits

Hamilton College is pleased to offer medical insurance through Excellus BlueCross BlueShield (BCBS) and pharmacy coverage through OptumRx. The Excellus BCBS BluePPO Plan is a comprehensive medical plan that gives employees the flexibility to receive the care they want from the provider they want, without the need to select a primary care physician or to obtain referrals for service. The BluePPO Plan is a network-based program that features an in-network and out-of-network component which offers you a high level of flexibility when seeking covered medical services. The in-network component allows you to choose any provider from the BlueCard® program and provides a higher level of benefits. The out-of-network component of the plan provides you with the ability to see any physician of your choice, but at a greater cost.

Benefit Description	Excellus BlueCross BlueShield PPO Plan	
	In-Network	Out-of-Network[1]
Annual Deductible – Individual/Family	$350/$1,050	$1,250/$3,750
Annual Out-of-Pocket Max. – Individual/Family[2]	$2,000/$6,000	$4,000/$10,000
Lifetime Maximum	Unlimited	Unlimited
PCP or Specialist Office Visits (including Office Surgery)	$25/$40 copay	70% after deductible
Telemedicine (call or videoconference)	Covered 100%	Not Covered
Preventive Care Adult Physicals (one per year) Well-Child Care Services[3] Routine GYN Exam/Pap Test, Mammogram	 Covered 100% Covered 100% Covered 100%	 70% after deductible Covered 100% 70% after deductible
Diagnostic Imaging, X-ray, CAT, MRI[7] Physician's Office or Outpatient Setting	$40 copay	70% after deductible
Diagnostic Laboratory and Pathology Physician's Office or Outpatient Setting	Covered 100%	70% after deductible
Radiation Therapy and Chemotherapy	90% after deductible	70% after deductible
Maternity Care Physician Pre/Postnatal Care Office Visits Hospital Services (Facility/Physician)	 Covered 100% 90% after deductible	 70% after deductible 70% after deductible
Emergency Care Urgent Care Center Emergency Room Ambulance	 $25 copay $250 copay[4] $200 copay	 70% after deductible $250 copay[4] $200 copay
Inpatient Hospital Stays[5,6]	90% after deductible	70% after deductible
Outpatient Surgery (Hospital/Facility)	90% after deductible	70% after deductible
Physical/Occupational/Speech Therapy[8] Physician's Office or Outpatient Setting	$25 copay	70% after deductible
Chiropractic Benefit	$25 copay	70% after deductible
Prescription Drugs	**Provided by OptumRx**	
Retail – up to a 30 day supply Formulary Generic/Preferred/Non-Preferred Mail Order – up to a 90 day supply / 90-day Retail CVS Pharmacy Pharmacy Annual Out-of-Pocket Max. – Individual/Family	$0 generics for children to age 19 $0 HCR Preventive/$25 Diabetic Supplies $10/$35/$60 copay $10/$70/$120 copay $2,000/$6,000	 Not Covered Not Covered Not Applicable

[1]Out-of-Network Coinsurance percentages apply to Excellus' schedule of Allowable Charges. Balance billing may apply.
[2]In-Network Annual Out-of-Pocket Maximum includes deductibles, coinsurance and copays for medical services. Out-of-Network Max includes deductibles and coinsurance only. Separate Out-of-Pocket Maximums apply for prescription drugs.
[3]Well-Child Services are provided according to Health Care Reform Guidelines.
[4]The Emergency Room copay is waived if you are admitted to the hospital.
[5]Inpatient Hospital Services include surgery, anesthesiology, radiology, laboratory and doctor visits/consultations.
[6]Precertification applies.
[7]Precertification applies to MRI, PET & CAT scans.
[8]45 visits per calendar year.

HAMILTON COLLEGE

Dental Benefits

Hamilton College offers a comprehensive dental benefit available through Guardian. You can obtain services from any dentist or specialist within the Guardian network, or you can visit any provider of your choice outside of the plan's network. Guardian network dentists have agreed not to charge more than the PPO schedule of allowable charges. Therefore, you will pay only the applicable deductibles and/or coinsurance until you reach the Annual Benefit Maximum. Out-of-network claims will be paid on the basis of 90% Usual, Customary & Reasonable (UCR) charges. Members will pay the applicable deductibles and/or coinsurance as well as any provider charges in excess of the 90% UCR charges.

Benefit Description	Guardian Dental PPO Plan	
	In-Network	Out-of-Network
Annual Deductible[1] **Family Limit** **Waived For**	$50 per Person per Calendar Year 3 per Family Type 1 - Preventative	
Annual Benefit Maximum[1]	$1,000 per Calendar Year plus Maximum Rollover	
Allowances	Guardian PPO Schedule	90% UCR
Type 1 Services – Preventative **Includes routine exams, cleanings, fluoride treatments (to age 19) and sealants (to age 16)**	100%	100%
Type 2 Services – Basic **Includes x-rays, restorative amalgams, restorative composites, denture repair, simple/complex extractions and anesthesia**	80%	80%
Type 3 Services – Major **Includes inlays, onlays, crowns, crown repairs, endodontics, periodontics and prosthodontics**	50%	50%
Annual Maximum Rollover[1, 2]	$250 Rollover Amount $350 Rollover Amount (In-Network Claims Only) $1,000 Per Member Limit	
Dependent Age Limits	To age 26	

[1] Per member enrolled in the plan.

[2] Applies if member files dental claims each year and does not exceed $500 in claims in a year.

Vision Benefits

A voluntary vision benefit provided through Guardian, utilizing the Vision Service Plan (VSP) network, can be elected to cover yourself and your eligible family members. This plan allows you to receive a complete eye examination and materials (if needed).

You can choose to receive care from a VSP participating provider (in-network) or from any doctor of your choosing (out-of-network). If you decide to see an out-of-network provider, you will receive a lesser benefit and typically pay more out-of-pocket.

Benefit Description	Guardian Vision Plan	
	In-Network	Out-of-Network
Network & Allowances	Vision Service Plan (VSP)	Fee Schedule
Service Intervals **Eye Exam** **Lenses** **Frames** **Contacts** **(in lieu of glasses)**	Calendar year Calendar year Every other calendar year Calendar year	
Eye Exam	Covered in full after $10 Copay	Up to $65 after $10 Copay
Lenses (per pair) **Single Vision** **Lined Bifocal** **Lined Trifocal** **Lenticular**	Covered in full after $25 copay[1] Covered in full after $25 copay[1] Covered in full after $25 copay[1] Covered in full after $25 copay[1]	Up to $50 after $25 copay[1] Up to $75 after $25 copay[1] Up to $100 after $25 copay[1] Up to $126 after $25 copay[1]
Frames	Covered up to $130 & 20% off balance	Up to $75
Contact Lenses (in lieu of glasses)	$130 max (Copay waived)	$130 max (Copay waived)
Additional Discounts	Available In-Network ONLY[2] 20% off any additional pairs of glasses purchased within 12 months of the exam 20% off the amount exceeding the copay and allowance on frames purchased 15% off providers' professional services for prescription contact lenses 20-25% discounts on lens options	
Dependent Age Limits	To age 26	

[1] This Copay only applies once to the purchase of lenses and frames.

[2] Discounts are applied to the Usual and Customary charges for such services.

Flexible Spending Accounts (FSAs)

Hamilton College lets you redirect a portion of your pay through payroll deduction into Flexible Spending Accounts (FSAs) administered by Inspira Financial. The money that goes into an FSA is deducted from your pay on a pre-tax basis (before Federal, Social Security and some state taxes are calculated). Because you do not pay these taxes on money that goes into an FSA, you decrease your taxable income and potentially increase your spendable income.

Health Care FSA

You may deposit up to the IRS Maximum allowable into a Health Care FSA which provides you with the ability to save money on a pre-tax basis for any IRS-allowed health expenses not covered by your health care coverage. These expenses include, but are not limited to, deductibles, copayments, coinsurance payments, routine physicals, uninsured dental expenses, vision care expenses (e.g. eyeglasses or contact lenses), hearing care expenses (e.g. a hearing exam or a hearing aid) and orthodontia expenses. Note: You may also use your Health FSA to pay for over-the-counter medications (such as allergy & sinus, cough, cold & flu, digestive aids and pain relief).

Dependent Care FSA

You may deposit up to $7,500 ($3,750 if you are married and filing individually) into a Dependent Care FSA. Eligible expenses include payments to day care centers, preschool costs (up to, but not including kindergarten), after school care and elder care.

Hamilton College Benefits Summary (continued)

Benefit[1]	Faculty	Exempt Staff	Nonexempt Staff
Life/AD&D Insurance • **Basic (provided by College)** • **Supplemental (purchased by employee)**	Coverage amount equals 100% of basic annual earnings. Coverage amount can be elected to equal 150% or 300% of basic annual earnings.		
Short-Term Disability	Coverage replaces your salary for a maximum of six months. Nonexempt Staff are required to exhaust all their accrued sick time.		
Group Total Disability (Long-Term)	Eligible after one year of service. Benefit pays 60% of your monthly wage base.		
Basic Retirement Plan	Beginning on the first of the month after the completion of one year of service, the College will contribute the equivalent of 10% of an eligible employee's earnings to a 403(b) account with TIAA.		
Voluntary Retirement Plan	Employees may make voluntary, pretax or after-tax (Roth), contributions to a 403(b) account with TIAA, beginning at date of hire.		
Vacation **(prorated for less than full-time employees)**	N/A	22 days per year, prorated for first year	Vacation accrues weekly based on length of service starting at 10 days per year up to 20 days per year
Holidays	The College recognizes nine holidays including two at Thanksgiving and two at Christmas.		
Personal Days	N/A		Three days per academic year
Sick Leave Days	N/A		Paid sick time accrues weekly based on date of hire and employment status.
Workers' Compensation	Insurance that provides partial income replacement and coverage of medical costs for illness or injury arising directly out of employment with the College.		
Bereavement Leave/Pay	Employees are eligible for up to three days off for the death of family members.		
New York State Paid Family Leave (PFL)	Refer to Faculty Handbook	Paid Family Leave provides eligible staff employees with partially paid, job-protected leave for certain qualifying circumstances.	
Parental Paid Family Leave	Refer to Faculty Handbook	Concurrent with New York State Paid Family Leave (PFL), the College will provide up to 4 weeks of leave at full pay to eligible employees to bond with their new child resulting from childbirth, adoption or foster care.	
Tuition Benefits • **Employee** • **Spouse/Partner** • **Dependents**	Employees may take one course per semester at Hamilton, tuition-free. Employees taking job-related courses at other institutions, tuition at 50% or 100%, as applicable. Spouses/partners may take courses on a full- or part-time basis at Hamilton, tuition-free. Employees with three years of service are eligible for tuition grants for dependent children.		
Employee Assistance Program (EAP)	Provided by BRiDGES Employee Assistance Program. Offers a comprehensive resource for you and your family members to help bring balance between your work responsibilities and your personal life.		
Emergency Loan	N/A		Eligible to apply for short-term, interest-free loans for emergency purposes after one year
Business Travel Accident Insurance	While traveling on College business, employees are covered under the College's Business Travel Accident policy. Security, medical, and concierge services are provided.		
Use of College Facilities	Employees and household family members may use the Burke Library and athletic facilities.		
Clinton Early Learning Center **(Child Care)**	Employees receive preference for placing dependents in the Clinton Early Learning Center, a private, not-for-profit organization that is run independently of the College.		
Moving Expenses	An allowance is available based upon the distance of the move.		N/A
College Housing	The College has a limited number of rental properties available on campus that are available to employees. Additional information is available by calling Auxiliary Services at 1-315-859-4125.		

[1]Benefits for half-time or more employees are pro-rated based on their regular work schedule.