

Hobart and William Smith Colleges
Administrative Hourly Benefit Eligible
Health - Dental - Vision
2024 Premium Rates

Health Plan Premiums	2024 Monthly Premium	Colleges' Monthly Contribution	Employee Monthly Contribution	Employee Biweekly Deduction (24)
Excellus Blue PPO				
Employee Only	\$ 754.99	\$ 717.24	\$ 37.75	\$ 18.88
Employee + Spouse/DP*	\$ 1,577.76	\$ 1,498.87	\$ 78.89	\$ 39.45
Employee + Child(ren)	\$ 1,404.16	\$ 1,333.95	\$ 70.21	\$ 35.11
Employee + Family	\$ 2,234.53	\$ 2,122.81	\$ 111.72	\$ 55.86
Family with Spouse or DP* Employed at HWS	\$ 2,234.53	\$ 2,122.81	\$ 111.72	\$ 55.86
Dental Insurance				
Guardian Dental PPO Low				
Employee Only	\$ 15.04	\$ 7.52	\$ 7.52	\$ 3.76
Two Person	\$ 34.24	\$ 17.12	\$ 17.12	\$ 8.56
Family	\$ 52.61	\$ 26.30	\$ 26.31	\$ 13.15
Guardian Dental PPO High				
Employee Only	\$ 39.26	\$ 19.63	\$ 19.63	\$ 9.82
Two Person	\$ 89.58	\$ 44.79	\$ 44.79	\$ 22.39
Family	\$ 130.79	\$ 65.39	\$ 65.40	\$ 32.70
Vision Insurance				
Guardian Davis Vision Network				
Employee Only	\$ 6.01	\$ 3.01	\$ 3.00	\$ 1.50
Employee + Spouse/DP*	\$ 11.38	\$ 5.69	\$ 5.69	\$ 2.85
Employee + Child(ren)	\$ 11.98	\$ 5.99	\$ 5.99	\$ 3.00
Employee + Family	\$ 17.62	\$ 8.81	\$ 8.81	\$ 4.41
Guardian VSP Vision Network				
Employee Only	\$ 8.03	\$ 4.02	\$ 4.01	\$ 2.01
Employee + Spouse/DP*	\$ 15.21	\$ 7.61	\$ 7.60	\$ 3.80
Employee + Child(ren)	\$ 16.01	\$ 8.01	\$ 8.00	\$ 4.00
Employee + Family	\$ 23.55	\$ 11.78	\$ 11.77	\$ 5.89

***DP is Domestic Partner**