

**Hobart and William Smith Colleges**  
**Faculty/Administrative Benefit Eligible**  
**Health - Dental - Vision**  
**2024 Premium Rates**

<b>Health Plan Premiums</b>	<b>2024 Monthly Premium</b>	<b>Colleges' Monthly Contribution</b>	<b>Employee Monthly Contribution</b>	<b>Employee Biweekly Deduction (24)</b>
<b>Excellus Blue PPO</b>				
Employee Only	754.99	717.24	37.75	<b>18.88</b>
Employee + Spouse/DP*	1,577.76	1,104.43	473.33	<b>236.67</b>
Employee + Child(ren)	1,404.16	982.91	421.25	<b>210.63</b>
Employee + Family	2,234.53	1,564.17	670.36	<b>335.18</b>
Family with Spouse or DP* Employed at HWS	2,234.53	1,787.63	446.90	<b>223.45</b>
<b>Dental Insurance</b>				
<b>Guardian Dental PPO Low</b>				
Employee Only	\$ 15.04	7.52	7.52	<b>3.76</b>
Two Person	\$ 34.24	17.12	17.12	<b>8.56</b>
Family	\$ 52.61	26.30	26.31	<b>13.15</b>
<b>Guardian Dental PPO High</b>				
Employee Only	\$ 39.26	19.63	19.63	<b>9.82</b>
Two Person	\$ 89.58	44.79	44.79	<b>22.39</b>
Family	\$ 130.79	65.39	65.40	<b>32.70</b>
<b>Vision Insurance</b>				
<b>Guardian Davis Vision Network</b>				
Employee Only	\$ 6.01	3.01	3.00	<b>1.50</b>
Employee + Spouse/DP*	\$ 11.38	5.69	5.69	<b>2.85</b>
Employee + Child(ren)	\$ 11.98	5.99	5.99	<b>3.00</b>
Employee + Family	\$ 17.62	8.81	8.81	<b>4.41</b>
<b>Guardian VSP Vision Network</b>				
Employee Only	\$ 8.03	4.02	4.01	<b>2.01</b>
Employee + Spouse/DP*	\$ 15.21	7.61	7.60	<b>3.80</b>
Employee + Child(ren)	\$ 16.01	8.01	8.00	<b>4.00</b>
Employee + Family	\$ 23.55	11.78	11.77	<b>5.89</b>

**\*DP is Domestic Partner**