### CDPHP® HMO Plan Benefit Summary

**Plan Code:** HA35L15  
**Presented For:** Skidmore College  
**Group ID:** 10007625  
**Date Prepared:** 8/21/2014  
**Effective Date:** 1/1/2015  
**Metal Tier:** N/A

<table>
<thead>
<tr>
<th>Deductible</th>
<th>In-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A Single / N/A Family</td>
<td></td>
</tr>
</tbody>
</table>

| Coinsurance | Not Applicable |

#### Office Visits

- **PCP**  
  $25 Copayment  
- **Specialist**  
  $40 Copayment

| Coinsurance Maximum | $6,600 Single / $13,200 Family |

| Annual Benefit Maximum | Unlimited |

#### Physician Services

- **PCP Office Visits for illness, injury or second opinion**  
  $25 Copayment  
- **Specialist Office Visits for illness, injury or second opinion**  
  $40 Copayment  
- **Physician Visits during inpatient stay when billed separately from the facility**  
  Covered in Full  
- **Well Baby and Child Care including immunizations and inoculations**  
  Covered in Full  
- **Annual Adult Exam**  
  Covered in Full  
- **Annual Gynecological Exam**  
  Covered in Full

#### Hospital Services

- **Inpatient Hospital (semi-private room, anesthesia, X-Ray, lab tests, etc)**  
  $240 Copayment  
- **Outpatient Surgery**  
  $75 Copayment

#### Diagnostic Testing*

- **Outpatient Hospital Laboratory Services:**  
  * Copayment waived if provider is a designated laboratory.  
  $40 Copayment  
- **Outpatient Hospital Radiology Services:**  
  * Copayment waived if provider is a preferred center.  
  $40 Copayment  
- **Office Based Laboratory Services:**  
  * Copayment waived if provider is a designated laboratory.  
  $40 Copayment  
- **Office Based Radiology Services:**  
  * Copayment waived if provider is a preferred center.  
  $40 Copayment  
- **Mammogram**  
  Covered in Full  
- **Cytology Screening**  
  Covered in Full  
- **Prostate Cancer Screening**  
  Covered in Full

#### Maternity

- **Physician Services when billed separately from the facility**  
  Covered in Full  
- **Inpatient Hospital Services**  
  $240 Copayment  
- **Newborn Nursery**  
  Covered in Full

#### Emergency Care

- **Worldwide Emergency Room Care**  
  $75 Copayment  
- **Ambulance**  
  $75 Copayment

#### Urgent Care

- **Nonparticipating urgent care facility services within the CDPHP UBI service area are not covered**  
  $35 Copayment

#### Physical Therapy

- **Physical Therapy**  
  $40 Copayment (30 visits per benefit period)

#### Speech Therapy

- **Speech Therapy**  
  $40 Copayment (20 visits per benefit period)

#### Occupational Therapy

- **Occupational Therapy**  
  $40 Copayment (30 visits per benefit period)

#### Chiropractic Benefits

- **Chiropractic Benefits**  
  $40 Copayment
This Summary of Benefits is intended to provide a general outline of coverage. In the event of any conflict between this document and the member's Certificate and any applicable Rider(s) issued by CDPHP, the Certificate and Rider(s) will be the controlling documents.

CDPHP gives you access to more than 12,000 participating practitioners and providers, including most of the local hospitals, and a variety of value-added services to help you and your family stay healthy. If you have a question or wish to receive additional information, please contact the CDPHP marketing department at (518) 641-5000 or 1-800-993-7299 or visit our Web site at www.cdphp.com.

*Please visit our Web site at www.cdphp.com or contact CDPHP HMO member services at (518) 641-3700 or 1-800-777-2273 to identify designated laboratories and preferred radiology sites.

All benefits of this plan are subject to coordination of benefits. This summary is designed to highlight benefits of the plan being offered and does not detail all benefits, limitations, or exclusions. It is not a contract and may be subject to change. For more detailed information, a membership Certificate is available for your review upon request.

Please Note. All non-emergency services must be provided by a Capital District Physician's Health Plan, Inc. (CDPHP) Participating Physician/provider (including hospital admissions) unless otherwise preauthorized by CDPHP.

<table>
<thead>
<tr>
<th>In-Network</th>
<th>Home Health Care</th>
<th>Covered in Full</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>Skilled Nursing Facility</td>
<td>$240 Copayment (45 days per benefit period)</td>
</tr>
<tr>
<td></td>
<td>Prosthetic Appliances and Durable Medical Equipment</td>
<td>50% Coinsurance</td>
</tr>
</tbody>
</table>

**Diabetic Services**

- Insulin and oral Medication - up to a 30 day supply: $15 Copayment
- Diabetic Supplies (needles and syringes) - up to a 30 day supply: $15 Copayment
- Glucometers: $15 Copayment
- Diabetic DME: $15 Copayment

**Mental Health Services**

- Outpatient services: $25 Copayment
- Inpatient services: $240 Copayment

**Chemical Abuse and Dependency Services**

- Outpatient services: $25 Copayment
- Inpatient services: $240 Copayment
- Inpatient Rehabilitation Services: $240 Copayment

**Dependent Coverage**

- Covered to Age 26

**Life Points Participation**

- Participating
Your employer has chosen the following rider(s) to modify the Plan under which you would be covered as a CDPHP Member.

<table>
<thead>
<tr>
<th>Domestic Partnership</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rider Name: ELG12</td>
</tr>
<tr>
<td>Description: Provides coverage for an eligible same or opposite sex domestic partner and his or her eligible dependent children.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Pharmacy Coverage</th>
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</thead>
<tbody>
<tr>
<td>Rider Name: HMRXL7A15</td>
</tr>
<tr>
<td>Description: Prescription drug benefit as follows. $10 copayment for 30-day supply of covered Tier 1 drugs. $25 copayment for 30-day supply of covered Tier 2 drugs. $40 copayment for 30-day supply of Tier 3 drugs. Mail order, 2.5 copayments for a 90-day supply. Prescriptions must be written by a duly licensed health care provider and filled at a participating pharmacy, unless otherwise authorized in advance by CDPHP. Specialty drugs are not eligible for the mail order program and require preauthorization to be obtained through CDPHP's participating specialty vendors.</td>
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