



ALBANY MED Health System

SARATOGA HOSPITAL

2025

Benefits **Decision Guide**

GET READY TO ENROLL



WELCOME TO YOUR 2025 Benefits Guide

Expanding our resources as one system, the Albany Med Health System is bringing more specialized care to more communities. As our region’s largest and only locally governed health care system, we aim to serve our patients with excellence—and that includes you, our valued colleagues.

As a reminder, the Tier 1 Albany Health System Network continues to provide no-cost or low-cost access to providers from:

- **Saratoga Hospital**
- **Albany Medical Center**
- **Glens Falls Hospital**
- **Columbia Memorial Health**
- **Visiting Nurses Association**
- **Other selected facilities**

This reflects the strength of our System and the people, like you, who make us the provider of choice in our region.

For benefits questions, contact
benefits@saratogahospital.org.

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Eligibility

You are eligible for most benefits if you are a part-time or full-time employee budgeted at a minimum of 36 hours for 12-hour employees, and 37.5 hours for all other employees, per pay period. (If eligibility is different, it is noted in each benefits section of this *Benefits Guide*, or refer to the specific plan documents.) **Full Time** is defined as regularly scheduled to work 75 hours or more per pay period (72 hours for 12-hour shift employees). **Part Time** is defined as regularly scheduled to work 37.5 hours or more per pay period (36 hours for 12-hour shift employees). Coverage is available for dependent children until the end of the month in which they turn age 26. Coverage is available for domestic partners with approved documentation and affidavits.

Enrollment

For most health and welfare benefits (medical, dental, vision, and FSAs) you must enroll within 31 days of your date of hire or qualifying status change, or during the Open Enrollment period. Open Enrollment is your annual opportunity to make changes to your benefit plans and coverage unless you experience a qualifying status change such as marriage, divorce, or the birth of a child during the year.

When you enroll, you will be automatically enrolled in pre-tax benefit deductions for most benefits. Those wishing to have benefit deductions withheld on a post-tax basis need to complete a 2025 Post-Tax Deduction Request form, available by going to www.saratogahospital.org and clicking on **For Employees**. The form must be completed, signed, and returned to Human Resources. Once pre-tax deductions are taken, no changes can be made to post-tax deductions.



Medical Plan

You have two choices for medical coverage:

- Premier Access Plus \$500
- Premier Access \$1,000

Both plans have two tiers of coverage—the Albany Med Health System Network and CDPHP In-Network. Your out-of-pocket costs are less when you receive care within the Albany Med Health System Network (no cost, in many cases!). Preventive care is covered at 100%. Both plans limit the amount you will pay in a single calendar year with out-of-pocket maximums. Once you reach the maximum, the plans pay 100% of the allowable expenses for the remainder of the calendar year.

Please note, the Albany Med Health System Network incorporates providers across the entire Albany Med Health System. You have access to providers from:

- **Saratoga Hospital**
- **Albany Medical Center**
- **Glens Falls Hospital**
- **Columbia Memorial Health**
- **Visiting Nurses Association**
- **Other selected facilities**

In many cases, you will have no out-of-pocket costs when you visit providers in the Albany Med Health System Network!

Premier Access Plus \$500

The Premier Access Plus \$500 Plan costs more than the Premier Access \$1,000 Plan on a per-paycheck basis. Annual deductibles and out-of-pocket maximums are lower in some cases for care received in the CDPHP In-Network compared to the Premier Access \$1,000 Plan.

Premier Access \$1,000

The Premier Access \$1,000 Plan costs less than the Premier Access Plus \$500 Plan on a per-paycheck basis. Annual deductibles and out-of-pocket maximums are higher in some cases for care received in the CDPHP In-Network compared to the Premier Access Plus \$500 Plan.

Find a Provider

The **Find a Doc** tool located on the homepage of www.cdphp.com can help you search for providers based on network, name, and/or specialty. To find a provider within the AMHS, search the network “Albany Med Health System for Saratoga Hospital Employees.” For CDPHP In-Network, search the “EPO National Network.”



Medical Plan Comparison

	Premier Access Plus \$500		Premier Access \$1,000	
	Albany Med Health System Network ¹	CDPHP/Express Scripts Network ¹	Albany Med Health System Network ¹	CDPHP/Express Scripts Network ¹
Deductible¹ Individual/Family	\$0/\$0	\$500/\$1,000	\$0/\$0	\$1,000/\$2,000
Out-of-Pocket Maximum¹ Individual/Family	\$1,000/\$2,000	\$3,000/\$6,000	\$1,000/\$2,000	\$4,000/\$8,000
PCP²	\$0 copayment	\$30 copayment	\$0 copayment	\$30 copayment
Specialist²	\$0 copayment	\$50 copayment	\$0 copayment	\$60 copayment
Urgent Care	\$0 copayment	\$50 copayment	\$0 copayment	\$75 copayment
Emergency Room	\$200 copayment	\$200 copayment	\$200 copayment	\$200 copayment
Inpatient	\$0 copayment	20% after deductible	\$0 copayment	20% after deductible
Outpatient	\$0 copayment	20% after deductible	\$0 copayment	20% after deductible
High-End Radiology	\$0 copayment	20% after deductible	\$0 copayment	20% after deductible
Physical, Occupational, and Speech Therapy	\$0 copayment	\$50 copayment	\$0 copayment	\$60 copayment
Durable Medical Equipment³	10%	20% after deductible	10%	20% after deductible
Mental Health/Substance Use				
Inpatient	\$0 copayment	20% after deductible	\$0 copayment	20% after deductible
Outpatient	\$0 copayment	20% after deductible	\$0 copayment	20% after deductible
Office Visit	\$0 copayment	\$25 copayment	\$0 copayment	\$25 copayment

¹ Each tier has its own embedded deductible and out-of-pocket maximum; expenses do not cross-accumulate between tiers. For care received within the Albany Med Health System Network, medical and prescription drug expenses count toward that specific deductible and out-of-pocket maximum. For care received In-Network through CDPHP/Express Scripts, medical and prescription drug expenses count toward that deductible and out-of-pocket maximum.

² PCP & Specialist non-preventive office visits.

³ Excluding diabetic pump supplies and prosthetic devices; prior authorization required for rented items and items in excess of \$1,000.

Preventive Care Is 100% Covered

You pay nothing for preventive care (no deductibles or copayments), like annual physicals and vaccinations when you visit in-network providers.



Medical Plan Comparison (cont.)

	Premier Access Plus \$500		Premier Access \$1,000	
	Albany Med Health System Network	CDPHP/Express Scripts In-Network	Albany Med Health System Network	CDPHP/Express Scripts In-Network
Prescription Drug Coverage				
Retail 30-Day Supply				
Generics	\$10	\$20	\$10	\$20
Preferred Brands	\$50	\$100	\$50	\$100
Non-Preferred Brands	\$75	\$150	\$75	\$150
Specialty	\$100 or if eligible for Copay Assistance, assisted by PillarRx	\$200 or if eligible for Copay Assistance, assisted by PillarRx	\$100 or if eligible for Copay Assistance, assisted by PillarRx	\$200 or if eligible for Copay Assistance, assisted by PillarRx
90-Day Supply				
Generics	\$25	\$50	\$25	\$50
Preferred Brands	\$125	\$250	\$125	\$250
Non-Preferred Brands	\$187.50	\$375	\$187.50	\$375

Prescription Drug Benefits

The Prescription Drug Plan is administered by Express Scripts. Prescription drugs are not subject to a deductible, regardless of whether they are filled at the Albany Med Specialty/Outpatient Pharmacy, the Glens Falls Hospital Outpatient Pharmacy, or at an Express Scripts network pharmacy.

To access a **Price a Med** tool to see the cost of your medication, or to see a **Benefit Overview**, please visit www.Express-Scripts.com/TheSaratogaHospital or call 800-869-7731.

Specialty Medications

Certain specialty medications are provided through the IPC Copay Assistance Program administered by PillarRx, which means they could be available at low or no cost to you. If you or a covered dependent is using a program-eligible medication, you will receive a letter or phone call from PillarRx about how to enroll in the program.

Weight Loss Medications

In order to fill specific weight-loss medications in 2025, employees enrolled in the medical plan will need to follow certain requirements. Please look for additional information in coming months.



Medical and Prescription Drug Plan Rates (Bi-weekly – 26 pay periods)

	Full-Time Hospital Contribution	Full-Time Employee Contribution	Part-Time Hospital Contribution	Part-Time Employee Contribution
Premier Access Plus \$500				
Employee	\$531.79	\$61.95	\$496.04	\$97.70
Employee Plus Child(ren)	\$850.93	\$217.81	\$729.58	\$339.15
Employee Plus Spouse/ Domestic Partner (DP)	\$951.36	\$266.04	\$827.82	\$389.58
Family	\$1,168.25	\$375.46	\$921.14	\$622.56
Premier Access \$1,000				
Employee	\$531.78	\$46.53	\$502.39	\$75.92
Employee Plus Child(ren)	\$877.76	\$163.21	\$778.03	\$262.94
Employee Plus Spouse/ Domestic Partner (DP)	\$976.41	\$209.36	\$874.37	\$311.40
Family	\$1,204.94	\$294.73	\$1,001.18	\$498.49



Dental Plan

Good dental care is important to your overall health. The Comprehensive Dental Plan offered through Delta Dental provides cleanings and x-rays twice per year, as well as additional coverage for fillings, extractions, orthodontia, implants, and more. Out-of-pocket costs can be reduced by using a PPO or Premier Provider. Use the “Find a Dentist” link at www.deltadentalins.com.

Dental Plan Benefits

	In-Network Coverage
Individual Deductible	\$25
Family Deductible	\$75
Preventive and Diagnostic Services	100%
Basic Services / Endodontics / Periodontics	80%
Major Services / Prosthodontics / Orthodontia	50%
Annual Plan Year Maximum	\$1,500
Orthodontia Lifetime Maximum	\$1,500

Dental Plan Rates (Bi-weekly – 26 pay periods)

	Full-Time Hospital Contribution	Full-Time Employee Contribution	Part-Time Hospital Contribution	Part-Time Employee Contribution
Individual	\$16.96	\$5.49	\$12.31	\$9.80
2-Person	\$25.08	\$13.72	\$17.64	\$20.96
Family	\$35.80	\$19.58	\$25.18	\$29.93



Vision Plan

The Comprehensive Vision Plan available through Davis Vision offers an annual eye exam (\$10 copayment for in-network providers), and allowances for frames, lenses, contact lenses, and more as outlined below. Retail providers like Costco, Target, Warby Parker, Pearle Vision, and Lens Crafters are in network!*

Vision Plan Benefits	In-Network Coverage
Exam (with dilation as necessary)	\$10 Copay
Frames	\$0 Copay; \$150 allowance
STANDARD PLASTIC LENSES	
Single Vision, Bifocal, or Trifocal	\$10 Copay
Standard Progressive Lens	\$0
Deluxe Progressive	\$40
Premium Progressive	\$90
Platinum Progressive	\$125
Lenticular	\$10
CONTACT LENSES	
Conventional or Disposable	\$10 copay; \$150 allowance
Medically Necessary	Covered in full
ADDITIONAL SERVICES	
Retinal Imaging	\$39
FREQUENCY	
Examination, Lenses or Contact Lenses	Once every 12 months
Frames	Once every 24 months

* Retail providers are subject to change. An up-to-date list will be available starting January 1, 2025 when you create an account at www.davisvision.com/members.

Vision Plan Rates (Bi-weekly – 26 pay periods)

	Full- and Part-Time Employee Contribution
Individual	\$4.39
2-Person	\$7.90
Family	\$12.29



Flexible Spending Accounts (FSAs)

Flexible Spending Accounts are a great way to reduce your tax liability for certain expected expenses:

- **Healthcare Flexible Spending Account (HFSA):** Allows you to set aside up to \$3,300 per year (per annual IRS guidelines), on a pre-tax basis to pay for eligible health care expenses not covered by other benefits programs for you and your family. The HFSA offers a debit card (good for three years) for ease of use and less claim paperwork. **Please keep your receipts for purchases made with your debit card.**
- **Dependent Care Flexible Spending Account (DCFSA):** Allows your household to set aside up to \$5,000 each year (per annual IRS guidelines) on a pre-tax basis to help pay for eligible dependent day care expenses.

You have until March 15 of the following plan year to use your FSA funds, so please plan carefully.

For 2025 Open Enrollment Only:

You can increase coverage up to the guaranteed issue amounts without proof of good health.

Life Insurance

Life insurance is an important financial safeguard for you and your loved ones.

- **Employer-Paid Life Insurance:** All full-time active employees working at least 36 hours weekly and all full-time active providers working at least 30 hours weekly (as defined by the Employment Agreement) are eligible. This benefit is automatically provided by The Hartford Insurance Company for those that are eligible, and is equal to your base annual salary up to a maximum benefit of \$500,000.
- **Voluntary Supplemental Life Insurance:** You can purchase additional term insurance through The Hartford Insurance Company equal to five times your base annual salary up to a maximum of \$1,000,000. If you enroll within 31 days of date of your hire or status change, no evidence of insurability/proof of good health is required up to the guaranteed issue amount of \$250,000.
- **Spouse Life Insurance:** You can purchase life insurance for your spouse or domestic partner, up to a maximum of \$200,000. If you enroll within 31 days of your hire or status change, no evidence/proof of good health is required up to the guaranteed issue amount of \$50,000. (The Hartford requires a Domestic Partner Affidavit.)
- **Child Life Insurance:** You can purchase life insurance for your children with a benefit of \$10,000 for each child you cover.

Employee Assistance Program (EAP)

The Adirondack EAP is an employer-paid benefit, providing free, and confidential support services designed to help you and your immediate family members with any issues, concerns or problems affecting your lives. EAP crisis counselors are available 24 hours a day, seven days a week. Call 518-793-9768.

Adirondack EAP has launched a new resource for Saratoga Hospital employees. Please visit www.mylifeexpert.com (access code SaraHosp) to access thousands of up-to-date resources including topic-related articles, videos, calculators, interactive activities, assessments, webinars on topics such as child care, education, aging, healthcare, health and wellness, legal, financial, career, and everyday living.



Disability Benefits

Experiencing a disabling injury or an extended illness that keeps you out of work can be life-changing. Disability insurance is designed to replace a portion of your income for financial protection if this situation arises.

New York State Disability Benefits Law (NYS DBL)

This statutory benefit is coordinated through The Hartford Insurance Company and provides a benefit of 50% of the employee's average weekly wage up to a maximum of \$170 per week (following a one week waiting period) for a period of up to 26 weeks for any non-work-related injury or illness (including disability due to pregnancy). Benefits begin on the 8th calendar day. All New York state employees are eligible.

Voluntary Short Term Disability Insurance

This voluntary benefit, offered through The Hartford Insurance Company, provides a weekly payment of 50% of an employee's average weekly wage, following a one week waiting period, up to a maximum benefit of \$3,000 per week (inclusive of what is paid under New York State Disability Coverage – not additive).

All full-time and part-time active employees who are not 12-hour shift employees working at least 18.75 hours weekly, and all full-time and part-time active employees who are 12-hour shift employees working at least 18 hours weekly are eligible. Remote employees working in another state may apply for Voluntary Short Term Disability benefits.

Employer Paid Long Term Disability Insurance

If eligible, you will automatically receive this benefit through The Hartford Insurance Company if you are unable to work due to illness or injury for an extended period. This benefit provides 60% of your monthly salary, up to a maximum benefit of \$10,000, an elimination period (90 days for employees with NYS DBL only and 180 days for employees enrolled in Voluntary Short Term Disability Insurance).

All full-time active salaried employees working at least 36 hours weekly and active salaried Providers who work at least 18 hours weekly (as defined by the Employment Agreement) are eligible.

Voluntary Long Term Disability Insurance

This voluntary benefit, offered through The Hartford Insurance Company, offers a choice of a monthly benefit which replaces 40%, 50%, or 60% of your average monthly wage. The elected amount, up to a maximum benefit of \$10,000 per month, will be provided if you are eligible following a 180-day waiting period.

Eligibility for this benefit begins on the first of the month following three months of employment or an eligible status change (or following company underwriting approval) for full-time employees budgeted at 72 hours or more per pay period. Salaried employees should take note that this voluntary benefit does not provide additional benefits above the Employer Paid Long Term Disability benefit. If you enroll within 31 days from your date of hire or status change, an application or personal health information is not required.



Other Voluntary Insurance

If you or a covered family member experience an accident, critical illness, or hospitalization, there are three types of insurance provided through AFLAC that are designed to supplement medical coverage. Please contact Warren Weil at 518-321-1168 to enroll.

Accident Insurance

If you or your family member experience a specific accidental injury.

Hospital Advantage Insurance

If you or your family member experience a stay in a hospital or other covered services, including physician visits, medical imaging, ambulance transportation, and more.

Cancer Indemnity and Critical Care Plan

If you or a family member are diagnosed with cancer or another covered critical illness.

Additional benefits you can purchase include:

- **Identity Protection and Credit Wellness Plan:** Experian offers identity protection and credit wellness tools with two plan options: Individual and Family.
- **Whole Life Insurance:** Life Insurance protection is available through New York Life Insurance Company.
- **Legal Plan:** The MetLife Legal Plan offers eligible employees an opportunity for affordable legal assistance involving court appearances, document review and preparation, wills, and family and real estate matters at a low bi-weekly cost. Once enrolled, the employee must remain in the plan for the entire plan (calendar) year and may only opt out (or opt in) during Open Enrollment. The Plan also offers legal help to your parents. Services available to parents and parents-in-law include complex wills, healthcare proxies, living wills, reviews of personal legal documents, nursing home agreements, powers of attorney, and prescription plans. See the plan summary for more information.
- **Nationwide Pet Insurance:** Protection for your furry friends is available for preventive care, common illnesses, accidents, surgeries, and more.
- **Discounted Auto and Home Insurance:** Offered through Liberty Mutual Insurance Company, this insurance is available at group rates for all employees. Payroll deduction is available for benefits-eligible employees.

Important Notice:

Hospital Care Indemnity Insurance is a fixed indemnity policy, not health insurance. See [page 17](#) for more information.



403(b) Retirement Plan

All employees are automatically enrolled in the 403(b) retirement plan on a pre-tax basis for 2% of your gross compensation within one to two paychecks after being hired. You have the option to continue contributing on a pre-tax basis, change to Roth contributions, or opt-out.

Contribution limits are set by the Internal Revenue Service (IRS) and subject to change each year. In 2024, employees may contribute up to \$23,000. If you're age 50 or older, you can make an additional annual \$7,500 catch-up contribution. Maximums are determined by the IRS. (2025 IRS limits have not been set at the time of publication.)

An employee of any employment status who works a minimum of 975 hours during the payroll calendar year may be eligible for a contribution made by Saratoga Hospital. **These employer deposits are discretionary and paid once annually. The Hospital contributes an amount equal to 2.75% of each participant's eligible annual compensation, as well as an additional match amount for those employees who defer into the plan, which is based on the employee's eligible years of service.**

To maximize the amount an employee receives from the hospital, employees must contribute at least 2% of pay.

You can change bi-weekly contributions, designate beneficiaries, adjust investment allocations, or opt-out of automatic features by registering for an online account at www.transamerica.com/portal/home or by calling Transamerica at 800-755-5801.

Shift Differentials

Certain positions are eligible for shift differentials:

- **Evening shift:*** 12%
- **Night shift:*** 20%
- **Weekend:** 10%
- **In Charge:** \$1.00 per hour
- **On Call:** \$3.00 per hour

* The differential is paid if you work a minimum of 4 hours on an evening or night shift

Time Off

You're encouraged to take time away from work to enjoy your family and friends, rest, and recharge.

Paid Time Off (CLT and CAT)

Eligible employees accrue time each pay period in two separate banks: Combined Leave Time (CLT) and Catastrophic Sick Time (CAT). CLT is used for all vacation, sick, personal time and holidays. CAT is used for extended illnesses or injury and is intended to supplement disability or Workers' Compensation benefits. Time is accrued based on hours worked up to a maximum each pay period. The maximum accrual increases over time based on an employee's length of service.

Holidays

Saratoga Hospital observes specified national holidays in a manner consistent with the requirements of our 24 hour a day, seven days a week commitment to our patients. The obligation to work on holidays is shared among the individual department. Some departments are able to close, or reduce staffing, on recognized holidays as follows:

- New Year's Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Christmas Day



Leaves of Absence

There are leaves of absence available for certain situations.

Personal and/or Educational Leave of Absence

All employees who have completed their six-month introductory period may request a personal leave of absence of up to 30 days.

Bereavement Leave

If you are a benefits-eligible employee, you may take up to five days of paid time off within seven calendar days following the death of certain family members.

New York State Paid Family Leave (PFL)

New York State legislation outlines the details of this statutory benefit, which is administered through The Hartford Life Insurance Company. It provides a benefit of 67% of an employee's weekly wage up to a maximum amount of \$1,177.32 in 2025. Rates and limits are based on the current New York State average weekly wage which is announced annually. This benefit provides up to 12 weeks of paid leave for employees. This leave can be used for:

- **Bonding with a new child** after birth, adoption, or foster care placement. Adoption/foster care leave can be taken before the event if necessary.
- **Care of a family member** (does not have to live in NY) with a serious health condition. A family member is defined as child, parent, grandparent, grandchild, spouse, or domestic partner. In addition, stepchildren, parents, siblings, and grandparents are included.
- **Qualifying military exigency**

A waiver of this benefit is possible for employees who would not meet the eligibility test. However, should an employee meet the eligibility test, the waiver is void and deductions may go back to original date of hire. Waiver forms are available on SaraNet. Additional information is available on the New York State website paidfamilyleave.ny.gov/ or through HR.

To waive this benefit, a completed form is required.

Covered employees become eligible to take New York State PFL once they meet the minimum time-worked requirements:

- **Full-time employees:** Employees who work a regular schedule of 20 or more hours per week are eligible after 26 consecutive weeks of employment.
- **Part-time employees:** Employees who work a regular schedule of less than 20 hours per week are eligible after working 175 days, which do not need to be consecutive.

Remote employees living and working in another state are not eligible for New York State PFL benefits.

New York State Paid Sick Leave (PSL)

Employees may request up to 56 hours per calendar year of job-protected leave for specific personal and/or family qualifying events or medical reasons under the New York State PSL program. Payment is based on employee's regular rate of pay. All employees, regardless of status, are eligible to accrue PSL starting at the date of hire. Employees in a benefits-eligible position accrue PSL within their current accruals and cumulative CLT. Non-benefits-eligible employees accrue time in a separate bank equal to one hour of PSL per 30 hours worked.

This leave can be used for:

- Mental or physical illness, injury, or health condition of an employee or an employee's covered family member. A family member is defined as an employee's child, spouse, domestic partner, parent sibling, grandchild, or grandparent; and the child or parent of an employee's spouse or domestic partner.
- For the diagnosis, care, or treatment of a mental or physical illness, injury, or health condition; or need for medical diagnosis or preventive care.
- Absences from work when an employee or eligible family member has been the victim of domestic violence, a family offense, sexual offense, stalking, or human trafficking.

Additional information is available on the New York State website <https://www.ny.gov/new-york-paid-sick-leave/new-york-paid-sick-leave> or contact benefits@saratogahospital.org for more information.

Family Medical Leave Act (FMLA)

Eligible employees can receive up to 12 weeks of leave in a rolling backward twelve-month period for:

- Their own serious health condition that makes them unable to perform their job
- To care for a spouse, parent, or child with a serious health condition
- To care for the employee's child after birth or placement for adoption or foster care
- For incapacity due to pregnancy, prenatal care, or child birth
- Because of a qualifying exigency as a result of your spouse, son, daughter, or parents being on active duty, or called to active duty in support of a contingency operation
- Because you are the spouse, son, daughter, parent, or next of kin of a covered service member with a serious injury or illness

You're eligible if you have worked for Saratoga Hospital for at least 12 months, and have worked at least 1,250 hours in the immediately preceding 12 months of the need for leave.

Workers' Compensation

This statutory benefit is coordinated through PMA Insurance and provides a benefit of two-thirds of the employee's average weekly wage up to a maximum of \$1,171.46 per week (July 1, 2024–June 30, 2025) for absences due to a work related injury.



Additional Benefits

Saratoga Hospital provides a variety of other plans and programs to support employees:

Tuition Assistance

This program provides advance payment of tuition costs for eligible employees up to specified annual limits based on employee status.

Part-time employees receive up to \$1,500 and full-time employees receive up to \$3,000 per school year toward tuition costs only. Up to \$5,000 is available to employees seeking a Master's degree who have met the required criteria. You are obligated to repay tuition assistance if you withdraw from or fail a course, or leave the organization. See the policy for more information, including grade requirements.

College Discounts

- **Empire State College:** Discount for orientation fee when application is submitted and additional \$100 discount upon first term enrollment.
- **Excelsior College:** Reduced tuition and fees for you, your spouse, or domestic partner for undergraduate programs, except for the Nursing Program Associate Degree. 15% tuition reduction for graduate programs.
- **Russell Sage College:** Discount of up to 20% off tuition costs for graduate and evening program students.
- **Utica College:** 10% tuition reduction and a waived application fee for online Bachelor's, Master's, and Doctorate degree programs.

RN Scholarship Program

Financial support is available for selected candidates who are pursuing a Bachelor's or Master's degree in nursing through an accredited program including tuition, books, and educational fees. Employees will be required to continue employment (while attending school) in their current position or a similar position (PCA, ER Tech, ICCU Tech, Patient Care Tech, LPN, or CNA). Upon graduation, employees who receive scholarship funding will be expected to continue employment for a three-year period. Part-time and full-time employees with at least one year of continuous service and performance evaluations in the "meets expectations" category and above are eligible.

New York State 529 College Savings Program

All employees have the ability to set up a 529 account for college savings. This may be set up as a direct deposit feature in Ultipro. For more information, visit www.nysaves.org.

YMCA Subsidy

Part- and full-time employees are eligible for a YMCA subsidy. The hospital pays \$200 toward your membership cost to one YMCA: Saratoga Regional, Glens Falls, Greater Glensville branch of Capital District, or Southern Saratoga. Contact benefits@saratogahospital.org for more information.

Employee Discounts

A variety of area businesses offer Saratoga employees a discount, including:

- Verizon, Sprint, and AT&T
- Dell
- Sunmark, CapCom, and SEFCU
- BJ's Wholesale Club
- Regal or AMC movie theater
- The Great Escape, Water Safari

Additional information is available on the hospital's intranet site, SaraNet. Go to Employee Center > Benefits & Pay.

Alternatively, you may visit the **For Employees portal** on www.saratogahospital.org.

Please note that many of these benefits are governed by policies found in the Human Resources ADMIN III Policy Manual, available on SaraNet within the Policies menu. All employees are responsible for familiarizing themselves with these policies and conducting themselves accordingly.

Benefits Provider Contact Information

Medical

CDPHP

500 Patroon Creek Blvd.
Albany, NY 12206
518-641-3100
www.cdphp.com

Prescription Drug

Express Scripts

800-869-7731
www.Express-Scripts.com/
TheSaratogaHospital

Dental

Delta Dental

Delta Dental of New York
PO Box 2105
Mechanicsburg, PA, 17055
800-932-0783

Vision

Davis Vision

800-999-5431
www.davisvision.com/members

Flexible Spending Accounts (FSAs)

Lifetime Benefit Solutions

800-327-7130
Monday–Thursday: 8:00 AM– 5:00 PM;
Friday: 9:00 AM–5:00
[LBS.CustomerService@](mailto:LBS.CustomerService@lifetimebenefitsolutions.com)
lifetimebenefitsolutions.com

Employee

Assistance Program

Adirondack EAP

559 Glen Street
Glens Falls, NY 12801
518-793-9768
www.adkeap.com/
Mylifeexpert.com

Life and Disability Insurance

The Hartford Insurance Company

PO Box 14869
Lexington, KY 40512
888-301-5615

Whole Life Insurance

New York Life Insurance

Customer Service: 800-695-1272

Identity Protection and Credit Wellness Plan

Experian

Accident, Hospital Advantage, or Cancer Indemnity and Critical Care Insurance

AFLAC

Contact Warren Weil
at 518-321-1168 to enroll

403(b) Retirement Plan

Transamerica

1.800-755-5801
[www.transamerica.com/portal/](http://www.transamerica.com/portal/home)
home

Legal Plan

MetLife

800-821-6400
Monday–Friday, 8 AM–8 PM

Pet Insurance

Nationwide

800-944-9350

Auto and Home Insurance

Liberty Mutual

Kevin Simon, Lead Sales Representative
28 Corporate Dr., Suite 106
Clifton Park, NY 12065
518-243-1124, option 1



Important Benefit Notices

Official plan documents, including Summary Plan Descriptions (SPDs), Summary of Benefits and Coverage (SBCs), and Benefit Summaries can be found on the Intranet. You may also contact benefits@saratogahospital.org to obtain copies of these important documents.

Children's Health Insurance Program Notice

The Children's Health Insurance Program (CHIP) provides health coverage to eligible children, through both Medicaid and separate CHIP programs. CHIP is administered by states and funded jointly by states and the federal government to provide premium assistance.

HIPAA Notice of Privacy Practices

This notice describes how individual's health information is protected, rules for use, and disclosure as permitted under HIPAA.

HIPAA Special Enrollment Rights

This notice is being provided to help you understand your right to apply for group health coverage. Special enrollment is available in the following situations:

- Loss of Other Coverage
- Marriage, Birth or Adoption
- Medicaid or CHIP

Notice of Exchange

This notice provides some basic information about the new Marketplace and employment-based health coverage offered by Saratoga Hospital.

Woman's Health and Cancer Rights Act (WHCRA)

The health plan, as required by the Women's Health and Cancer Rights Act of 1998, provides coverage for reconstructive surgery following a mastectomy.

Medicare Part D Creditable Coverage Notice

Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO)

that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.

Saratoga Hospital has determined that the prescription drug coverage offered is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

Newborns' and Mothers' Health Protection Act (NMHPA)

The health plan may not restrict benefits for a hospital stay to less than 48 to 96 hours based on type of delivery as required by the law.

Genetic Information Non-Discrimination Act (GINA)

The Genetic Information Nondiscrimination Act of 2008 protects employees against discrimination based on their genetic information. Unless otherwise permitted, your employer may not request or require any genetic information from you or your family members.

Mental Health Parity and Addiction Equity Act (MHPAEA)

The Mental Health Parity and Addiction Act of 2008 generally requires group health plans and health insurance issuers to ensure that financial requirements (such as co-pays and deductibles) and treatment limitations (such as annual visit limits) applicable to mental health or substance use disorder benefits are no more restrictive than the predominant requirements or limitations applied to substantially all medical/surgical benefits.

Michelle's Law

When a dependent child loses student status for purposes of the group health plan coverage as a result of a medically necessary leave of absence from a post-secondary educational institution, the group health plan will continue to provide coverage during the leave of absence for up to one year, or until coverage would otherwise terminate under the group health plan, whichever is earlier.

Uniformed Services Employment & Reemployment Rights Act (USERRA)

The Uniformed and Services Employment and Re-Employment rights Act of 1994 (USERRA) sets requirements for continuation of health coverage and re-employment in regard to an Employee's military leave of absence. These requirements apply to medical and dental coverage for you and your Dependents. They do not apply to any Life, Short Term or Long Term Disability or Accidental Death & Dismemberment coverage you may have.

Hospital Indemnity Notice

This is a fixed indemnity plan, not health insurance. Since this policy does not have health insurance, it doesn't have to include most Federal consumer protections that apply to health insurance. If you are looking for comprehensive health insurance, visit [HealthCare.gov](https://www.healthcare.gov), call 800-318-2596 (TTY: 855-889-4325), or contact Saratoga Hospital.

This Summary of Material Modifications (SMM) describes the changes that affect your benefits plans and updates your plan descriptions. SMMs, together with the plan booklets, make up your official plan descriptions. We've made every attempt to ensure the accuracy of the information in this SMM. However, if there is any discrepancy between this and the insurance contracts, the insurance contracts will always govern.





ALBANY MED Health System

SARATOGA HOSPITAL

