

# Skidmore College EPO Medical Plan

## Summary of Benefits

Service Category

In-Network Coverage

Limits and Exclusions

Annual deductible per contract year - \$3,667 (individual) - \$5,421 (family) - 2023-2024. Plan ID: 117778809. O. 23-12a56CqC93 (438CqC9345313 1496 137801CfC3345 1368 1410 1278)

Service Category	In-Network Coverage	Limits and Exclusions
Mental Health (In-Patient) Outpatient		
Mental Health (Outpatient)		
Substance Abuse Treatment (In-Patient)		
Substance Abuse Treatment (Outpatient)		
Maternity (Prenatal Care)		
Maternity (Physician Delivery)		