COLUMBIA UNIVERSITY GROUP BENEFIT PLAN
COVID-19 PANDEMIC
SUMMARY OF MATERIAL MODIFICATION

This Summary of Material Modification ("SMM") describes important changes being made to the Columbia University Group Benefit Plan, as amended and restated effective January 1, 2020 (the "Columbia Welfare Plan"). This SMM updates information currently contained in the Summary Plan Descriptions ("SPDs") for the Columbia Welfare Plan. Please keep this notice with the rest of your Columbia Welfare Plan documents.

Suspension of Cost-Sharing for COVID-19 Testing, Related Visits and Vaccines

The Plan is temporarily suspending cost-sharing (deductibles, coinsurance and copayments) under all medical plan options for COVID-19 testing, antibody testing to determine whether you were previously infected with COVID-19, related office visits (including virtual and telehealth visits), urgent care and emergency room visits where the test is ordered or administered; as well as FSA approved COVID-19 vaccines. Consistent with IRS guidance, this temporary suspension of cost-sharing does not impact Health Savings Account (HSA) eligibility for individuals enrolled in a high deductible health plan (HDHP) option under the Plan.

Effective Date: February 2, 2020 (COVID Testing), April 10, 2020 (Antibody Testing), December 18, 2020 (COVID Vaccines)
End Date: This temporary suspension of cost-sharing will continue during the COVID-19 public health emergency (but at least through July 19, 2021).

Suspension of Cost-Sharing for Virtual Visits

The Plan is temporarily suspending cost-sharing (deductibles, coinsurance and copayments) under all medical plan options for both COVID-19 and non-COVID-19 virtual visits through AmWell, Doctor on Demand, and Teladoc. This temporary suspension of cost-sharing related to COVID-19 does not impact Health Savings Account (HSA) eligibility for individuals enrolled in a high deductible health plan (HDHP) option

Effective Date: March 18, 2020
End Date: September 30, 2020 (Non-COVID-19 Visits); July 19, 2021 (COVID-19 Visits)

Suspension of Cost-Sharing for Behavioral Health Virtual Visits

The Plan is temporarily suspending cost-sharing (deductibles, coinsurance and copayments) for any virtual outpatient behavioral health visit (including applied behavioral analysis therapy), whether provided in-network or out-of-network. This temporary suspension of cost-sharing does not impact Health Savings Account (HSA) eligibility for individuals enrolled in a high deductible health plan (HDHP) option.
Expansion of Virtual Setting to Non-Telehealth Providers

Effective March 31, 2020, the Columbia Welfare Plan will provide coverage for virtual visits with all network and non-network providers who have the ability and are willing to see patients virtually. Unless the visit relates to COVID-19 testing, the Plan’s typical cost-sharing and deductibles apply. **In-Network and non-network cost share waiver for COVID-19 related visits are effective through July 19, 2021.**

Please note that standard UnitedHealth care non-network programs apply. Coverage for out-of-network services is capped at 190% of the Medicare Maximum Allowable Charge. CARES Act provision 3202 requires plans to reimburse providers at the contract rate negotiated before the COVID-19 emergency, or, if there is no contract, a cash price posted by the provider as listed on a public internet website, or the plan may negotiate a rate with the provider for less than the cash price. Where UnitedHealth care has an out-of-network program in place, the price may be negotiated based on the rule.

Members who receive billing for out-of-network COVID-19 related services should contact the Columbia University Benefits Service Center at (212) 851-7000 for claims assistance.

Early Refill Program

In light of the COVID-19 pandemic, we realize that Plan participants may face challenges in obtaining prescription drug refills. As such, OptumRx (the Plan’s pharmacy benefit manager) has implemented the “Refill-too-Soon” policy. The policy includes the following:

- Participants may obtain an early one-time refill of their prescription medications if they have refills remaining on file at a participating retail or mail-order pharmacy
- The refill obtained will stay consistent with the standard days’ supply previously filled by the member as allowed by their plan (e.g., 30 for retail or 90 for mail order supply).

Prior Authorization Extension

Most prior authorizations that were set to expire on or before May 1, 2020 were extended. Prior authorizations for most chronic medications will be extended for 90 days. This policy does not extend to drugs with significant abuse potential (i.e., opioids) or those that are generally dosed for finite durations or intermittently (i.e., hepatitis agents, fertility agents). For more
information on whether you are required to obtain a new prior authorization if yours has expired, contact OptumRx at (800)-232-9357.

Effective Date: March 19, 2020
End Date: May 1, 2020

**Chronic Medical Fills Expanded to 90 days**

If you are taking a chronic specialty medication, Optum Specialty Pharmacy will offer a one-time, 90-day supply of key chronic specialty medications.

Effective Date: March 23, 2020
End Date: June 1, 2020

**Non-Network Pharmacy Exception**

OptumRx will permit participants to fill drugs through a non-network pharmacy one time only, if the following conditions are met:

- A non-network pharmacy has stock of a covered prescription medication that is in short supply at a network pharmacy,
- A non-network pharmacy is in closer proximity than a network pharmacy to a participant’s residence, as reported by the participant, or
- A non-network pharmacy has capability to mail/deliver to the participant’s home that is not provided by a network pharmacy.

This exception does not extend to specialty pharmacy.

Effective Date: April 13, 2020
End Date: July 11, 2020

**Healthcare FSA - Eligible Expenses**

Expenses incurred on or after March 27, 2020 for “over-the-counter” (OTC) drugs obtained without a doctor’s prescription and menstrual care products are considered an eligible medical expense that may be reimbursed under the Healthcare FSA. To the extent that you have incurred OTC drug and/or menstrual care product expenses prior to March 27, 2020 (but after December 31, 2019), these expenses will be considered eligible medical expenses to the extent permitted by IRS guidance.

**COVID-19 Special Enrollment Window for Healthcare and Dependent Care FSA**

Due to the COVID-19 pandemic and recent updates to IRS guidelines, Columbia will hold a Benefits Special Enrollment Period from July 27, 2020 to August 7, 2020, to allow you to make certain mid-year flexible spending plan changes.
Any changes made during the Special Enrollment period will be effective for benefit deductions commencing on or after August 7, 2020. It’s important to note that each case will be reviewed individually to ensure all requested benefit changes are compliant with the recent IRS regulatory guidelines and relief measures.

All flexible spending account election changes will be subject to the following guidelines:

- You may enroll in a FSA, or increase or decrease existing FSA coverage. If you are decreasing an existing election, it cannot be below the amount that you have already claimed or contributed from your paycheck (whichever is higher).
- Enrollment requests must be made in the form and manner described below by August 7, 2020 11:59pm (EDT).
- You must be eligible for benefits at the time of your request.
- This is a one-time Special Enrollment period. You will not be able to make additional changes during 2020 unless you experience a qualifying life event. Note a COVID-19 diagnosis is not a qualifying life event.

To change your contribution amount(s) or start contributing during the one-time special enrollment widow:

**Dependent Care FSA**

1. Between July 27, 2020, and August 7, 2020, log in to CUBES and confirm your access through multi-factor authentication (DUO).

2. Click “Get Started” under CHANGE MY FSA CONTRIBUTION; then “Select” in My Events; then “Change my FSA Elections” and follow the prompts to newly enroll in, increase or decrease your Dependent Care FSA.

3. Don’t forget to “Checkout”.

**Healthcare FSA**

If you wish to enroll in the Healthcare FSA, or increase your 2020 contribution:


2. Click “Get Started” under CHANGE MY FSA CONTRIBUTION; then “Select” in My Events; then “Change my FSA Elections” and follow the prompts to newly enroll in or increase your election for the Healthcare FSA.

3. Don’t forget to “Checkout”.
If you wish to decrease your 2020 contribution (the amount you elected for the year), you cannot go below the amount already reimbursed from your account and the amount deducted from your paycheck. Please contact the Columbia Benefits Service Center for assistance.

**Certain Deadline Extensions**

In accordance with regulatory agency guidelines, the following deadlines in the Plan and SPDs are tolled during the “Outbreak Period” beginning on March 1, 2020 and lasting until 60 days after the President declares the COVID-19 national emergency has ended (no earlier than 60 days after April 20, 2021):

- The 30-day (or, if applicable the 60-day) period to request a HIPAA special enrollment
- The 60-day period to elect COBRA coverage
- The due date for COBRA premium payments
- The date a COBRA qualified beneficiary must provide notice of a qualifying event or a disability determination
- The date a claimant is required to file a claim for plan benefits, including a claim for reimbursement from your 2019 healthcare FSA balance (2019 dependent care FSA reimbursement request must be submitted no later than September 30, 2020)
- The date the claimant is required to file an appeal of an adverse determination of a claim for benefits
- The date by which a claimant is required to file a request for an external review

**COVID-19 Related Relief:** Please note that you may be entitled to relief from some of the deadlines set forth in the Plan(s) and SPD(s) occurring during the COVID-19 national emergency. If you have concerns with respect to your coverage or meeting an applicable deadline under the Plan due to the national emergency concerning the COVID-19 outbreak, please contact the Plan Administrator at the contact information below to determine if an extension may be available to you.

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If you have any questions regarding this SMM, please contact the Plan Administrator at the following address and telephone number:

615 West 131st Street, 4th Floor  
New York, NY 10027  
(212) 851-7000

**This SMM constitutes a part of the SPD. Keep this SMM with your important Plan documents. This SMM is based on legal documents (such as plan documents and insurance contracts) currently in effect. As such, your rights are governed by the terms of these legal documents. Please refer to the relevant legal documents for complete information on your rights and obligations under the Plan. You may obtain a copy of any of the official legal documents from the Plan Administrator. While every effort has been made to give you correct and complete**
information about your benefits, in the event of any conflict or inconsistency between the SMM and the relevant legal documents, the terms of the legal documents will control.

Columbia University intends to continue the Plan benefits as described in this SMM and the SPD, but reserves the right, at its discretion, to change or even terminate all or any part of the Plan benefits offered at any time and in any manner to the extent permitted by law. As a result, this SMM is not a contract, nor is it a guarantee of your benefits.