2019 Benefits Highlights
Postdoctoral Fellows
Effective January 1, 2019
Welcome to Columbia

Columbia University offers medical and dental benefits to full-time Postdoctoral Clinical Fellows and Postdoctoral Research Fellows to help you and your eligible dependents stay healthy.

Choosing Your Coverage and Completing the Attestation Form

Your 2019 elections will be in effect from January 1 or your date of hire (whichever is later) until December 31, 2019. Unless you have a Qualified Life Status Change, you will not have another opportunity to change your benefits coverage until the annual Benefits Open Enrollment held each fall.

How to Enroll and Complete the Attestation Form

Step 1  Go to https://humanresources.columbia.edu/ and click on the CUBES logo to access the CU Benefits Enrollment System. You will be asked to enter your UNI and password, and then confirm your access using multi-factor authentication (DUO). If you do not know your UNI or password, go to http://uni.columbia.edu.

For further assistance with DUO or your UNI and password, please contact the CUIT Service Desk: 212-854-1919 or email askcuit@columbia.edu.

Step 2  Select “Get Started” to begin the election process. Then, review your personal information and complete the Attestation Form. Follow the prompts to review and complete your benefits enrollment. Please be sure to “CHECKOUT” to finish the enrollment process and review your Benefits Details page.

Step 3 Carefully review your Benefits Details page before exiting CUBES. If you see a problem or want to make a change, simply go back into the online system and modify your election. You must print and provide a copy of this page to your department administrator for billing purposes.

If you have questions, contact the Columbia Benefits Service Center: 212-851-7000 or hrbenefits@columbia.edu

If you are a new Postdoctoral Fellow, you must enroll for benefits within 31 days of your appointment date.

Columbia University Postdoctoral Fellow Health Benefits Policy

Columbia University requires all full-time Postdoctoral Clinical and Research Fellows to carry health insurance, either through the University or through a comparable non-University health plan. All Postdoctoral Research and Clinical Fellows need to acknowledge and commit to complying with the policy’s medical insurance coverage requirements by confirming you have elected Columbia medical coverage (via the attestation form on CUBES or attesting that you have a comparable non-University health plan).

Benefits Glossary

To learn more about the benefits terms used throughout this Guide, go to https://humanresources.columbia.edu/benefits and click on “Glossary.”

Enroll in your benefits on CUBES, Columbia University’s benefits enrollment system.
Who Is Eligible for Benefits

When you log in to CUBES, you will see the benefits options you are eligible for, as well as the monthly cost and the benefits effective date. Eligibility begins upon your date of hire.

<table>
<thead>
<tr>
<th>Benefits Eligibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eligible for:</td>
</tr>
<tr>
<td>Full-Time Postdoctoral Clinical Fellows and Postdoctoral Research Fellows not receiving Salary</td>
</tr>
<tr>
<td>• UnitedHealthcare Choice Plus 80 Medical, Vision and Prescription Drug Benefits</td>
</tr>
<tr>
<td>• Aetna Columbia Dental Benefits</td>
</tr>
<tr>
<td>• Basic Life Insurance of $50,000</td>
</tr>
<tr>
<td>• Tuition Exemption Benefits for the American Language Program</td>
</tr>
<tr>
<td>• Employee Assistance Program (EAP)</td>
</tr>
</tbody>
</table>

Eligible Dependents
For medical, vision and dental benefits, your dependents—your spouse or same-sex domestic partner and your eligible children—can be covered if you verify that they meet the following requirements:

• Legal spouse
• Same-sex domestic partner
• Legally dependent children, including adopted children

For more details on dependent eligibility, go to [https://humanresources.columbia.edu/dependent-eligibility](https://humanresources.columbia.edu/dependent-eligibility).

Ineligible Postdoctoral Fellows
Part-Time Postdoctoral Fellows are not eligible for coverage under Columbia University benefits.
Who You Can Cover for Medical (including Vision) and Dental
You do not have to cover the same eligible dependents for the medical and dental plans. For each plan, you have the choice of covering:

- Yourself only;
- Yourself and your spouse or eligible same-sex domestic partner;
- Yourself and a child or children; or
- Family: you, your spouse or eligible same-sex domestic partner, plus child(ren).

Making Changes to Dependent Eligibility
To add or make a change in dependent eligibility:

Go to https://humanresources.columbia.edu/ and click on the CUBES logo. Then, log in with your UNI and password to make changes to the status of your dependents (through a Qualified Life Status Change).

If you have any questions, contact the Columbia Benefits Service Center at 212-851-7000 or at hrbenefits@columbia.edu.

When your dependent is no longer eligible, it is your responsibility to report this change to the Columbia Benefits Service Center within 31 days of the change.

Both Eligible for Coverage Through the University?
If you and your spouse or same-sex domestic partner are both eligible for coverage through the University, you must choose your coverage in one of the following ways:

- One spouse or same-sex domestic partner makes the choice for the entire family, including eligible dependent children, if any. In this case, the other spouse or same-sex domestic partner must select “No Coverage.”
- Each spouse or same-sex domestic partner can make his or her own choice. In this case, all eligible dependent children must be covered by one spouse or same-sex domestic partner or the other.
Proof of Dependent Eligibility
Columbia University is responsible for ensuring that only eligible expenses are paid from its plans. This requirement is consistent with IRS regulations that govern the operation of a qualified benefits plan.

Verifying Dependent Eligibility
If you are adding a dependent spouse, same-sex domestic partner or child(ren) to your coverage, you are required to provide documentation before the dependent’s coverage is effective. If you are not able to provide proof that your dependent is eligible for coverage, your dependent’s coverage will not be activated.

- To add your dependent at the time you enroll in your own benefits, or due to a Qualified Life Status Change, follow the instructions on CUBES. The system will take you to the “Dependent Verification” page and you can upload your documentation.

You can also provide your documentation by sending a secure fax to 844-301-7225. If you do not have access to scan documents and send them via email or fax, call the Columbia Benefits Service Center.

<table>
<thead>
<tr>
<th>Type</th>
<th>Documentation*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spouse</td>
<td>Copy of civil/legal marriage certificate</td>
</tr>
<tr>
<td>Same-Sex Domestic Partner</td>
<td>Two of any of the following:</td>
</tr>
<tr>
<td></td>
<td>• Joint lease or mortgage</td>
</tr>
<tr>
<td></td>
<td>• Joint ownership of property</td>
</tr>
<tr>
<td></td>
<td>• Joint bank account statement</td>
</tr>
<tr>
<td></td>
<td>• Designation of the partner as primary beneficiary in your will or designation</td>
</tr>
<tr>
<td></td>
<td>of the partner as beneficiary for your life insurance or retirement benefits</td>
</tr>
<tr>
<td></td>
<td>• Assignment of power of attorney to your partner</td>
</tr>
<tr>
<td>Child</td>
<td>One of the following:</td>
</tr>
<tr>
<td></td>
<td>• Child’s birth certificate</td>
</tr>
<tr>
<td></td>
<td>• Adoption certificate/court order</td>
</tr>
</tbody>
</table>

*If your document is in a foreign language, please submit a copy of the original document, as well as an official English translation. The document must be translated by someone other than yourself or your family member.

Important: For security reasons, please remove all Social Security Numbers from paperwork—you should enter Social Security Numbers directly into CUBES when first adding your dependents.

Remember: You must enroll for benefits within 31 days following your appointment.

Under the Patient Protection and Affordable Care Act (ACA), the IRS requires all employers to collect the Social Security Number for all employees and their dependents covered by our benefits plans. Social Security Numbers are required to add a dependent to your coverage. If you have dependents who do not have Social Security Numbers, please call the Columbia Benefits Service Center.

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Making Changes to Your Benefits

Qualified Life Status Changes
The IRS restricts when you can add coverage for a dependent or make changes to your benefits elections during the year.

After new hire enrollment, or after annual Benefits Open Enrollment, you will only be able to change most benefits for the remainder of the calendar year if you experience a Qualified Life Status Change.

If you experience a Qualified Life Status Change, go to CUBES within 31 days of the event. The benefits changes must comply with IRS regulations and be consistent with the nature of your Qualified Life Status Change. In addition, you must provide proper documentation for your change, such as a birth certificate, marriage certificate or divorce decree. If you need assistance, please contact the Columbia Benefits Service Center.

Examples of a Qualified Life Status Change
Qualified Life Status Changes include marriage, divorce, birth, adoption and loss of eligibility for coverage.

For a full list of Qualified Life Status Change examples, go to https://humanresources.columbia.edu/benefits and click on “Making Changes to Your Benefits.”
Overview of the Choice Plus 80 Medical Plan

Columbia University offers the Choice Plus 80 plan through UnitedHealthcare (UHC). The Plan covers in-network preventive care, such as annual physicals, immunizations and well-baby visits, at 100% with no deductible. To learn more about preventive care, go to https://humanresources.columbia.edu/preventive-care. The Choice Plus 80 plan also includes coverage for out-of-network services. If you enroll in the medical plan, you will be automatically enrolled in prescription drug and vision coverage.

The Choice Plus 80 plan covers only medically-necessary services and supplies for the purpose of preventing, diagnosing or treating an acute sickness, injury, mental illness, substance abuse or symptoms. For more details on the medical plan, review the Summary Plan Description (SPD) and Summary of Benefits and Coverage (SBC). To view both documents go to https://humanresources.columbia.edu/ and click on the Forms & Documents icon.

• **Contributions:** The amount you pay toward the cost of your medical, vision and prescription drug coverage. Your contributions do not accumulate toward your deductible or out-of-pocket maximum.

• **Copay:** The amount you pay directly to the medical service provider at the time of service. The copay for the Choice Plus 80 plan is $30 for in-network providers. Your in-network copays accumulate toward your in-network out-of-pocket maximum. Copays do not accumulate toward your deductible.

• **Deductible:** The amount you must pay each year before the Plan begins to pay for non-preventive expenses. The deductible for the Choice Plus 80 plan is $600 for in-network providers.* Your in-network deductible accumulates toward your in-network out-of-pocket maximum.

• **Coinsurance:** Once you reach your deductible, coinsurance is the amount the Plan will cover of your remaining eligible in-network medical expenses. You are responsible for directly paying the remaining balance, until you reach the out-of-pocket maximum. The amount you pay in coinsurance will vary by your usage of medical services.

• **Out-of-Pocket Maximum:** The most you will be responsible for paying out of your own pocket each year for covered medical services. Once you reach your in-network out-of-pocket maximum, the Plan will pay 100% of remaining in-network covered medical expenses for the year.

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Tax Implications

If any portion of your health insurance is paid by your fellowship allowance, training grant expense account, department or Principal Investigator, it is considered imputed income under IRS regulations and will be included as taxable income on your W-2 or 1099-MISC Form.

*The deductible for J-1 visa holders is $500.
Your Medical Plan

Here is a summary of the Choice Plus 80 plan provisions. For detailed information, go to [https://humanresources.columbia.edu/](https://humanresources.columbia.edu/) and click on the Forms & Documents icon to review the SBC and SPD.

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Choice Plus 80</th>
<th>Choice Plus 80</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>In-Network</td>
<td>Out-of-Network*</td>
</tr>
<tr>
<td>Annual Deductible</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual</td>
<td>$600 per person**</td>
<td>$850 per person</td>
</tr>
<tr>
<td>Family</td>
<td>$850 per person</td>
<td></td>
</tr>
<tr>
<td>Coinsurance</td>
<td>80% after deductible</td>
<td>60% after deductible</td>
</tr>
<tr>
<td>Out-of-pocket Maximum</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual</td>
<td>$3,750</td>
<td>$5,250</td>
</tr>
<tr>
<td>Family</td>
<td>$7,500</td>
<td>$10,500</td>
</tr>
<tr>
<td>Preventive Care</td>
<td>100%</td>
<td>Not covered</td>
</tr>
<tr>
<td>Physician Office Visits, including specialists</td>
<td>$30 copay</td>
<td>60% after deductible</td>
</tr>
<tr>
<td>Laboratory/Radiology Services, including services rendered in a physician’s office</td>
<td>80% after deductible</td>
<td>60% after deductible</td>
</tr>
<tr>
<td>Inpatient Hospital Care</td>
<td>80% after deductible</td>
<td>60% after deductible; Precertification required</td>
</tr>
<tr>
<td>Outpatient Hospital Care</td>
<td>80% after deductible</td>
<td>60% after deductible; Precertification required</td>
</tr>
<tr>
<td>Mental Health and Substance Abuse – Inpatient care</td>
<td>80% after deductible</td>
<td>60% after deductible; Precertification required</td>
</tr>
<tr>
<td>Mental Health and Substance Abuse – Outpatient programs</td>
<td>$30 copay</td>
<td>70% after deductible for facility-based care including intensive outpatient programs; Precertification required</td>
</tr>
<tr>
<td>Mental Health and Substance Abuse – Outpatient counseling</td>
<td>$30 copay</td>
<td>70% after deductible</td>
</tr>
<tr>
<td>Emergency Room</td>
<td>$150 copay (waived if admitted)</td>
<td>$150 copay (waived if admitted)</td>
</tr>
<tr>
<td>Basic and Comprehensive Infertility Treatment</td>
<td>Unlimited benefit for diagnosis and basic medical treatment, including artificial insemination</td>
<td></td>
</tr>
<tr>
<td>Advanced Infertility Treatment</td>
<td>$30,000 lifetime maximum for advanced treatments and Assisted Reproductive Technology including IVF, GIFT and ZIFT</td>
<td></td>
</tr>
<tr>
<td>Prescription Drug coverage with OptumRx</td>
<td>Retail (30 days)</td>
<td>Mail-order (90 days)</td>
</tr>
<tr>
<td></td>
<td>• Generic: $10 copay</td>
<td>• Generic: $15 copay</td>
</tr>
<tr>
<td></td>
<td>• Single-source: $25 copay</td>
<td>• Single-source: $50 copay</td>
</tr>
<tr>
<td></td>
<td>• Multi-source: $45 copay</td>
<td>• Multi-source: $90 copay</td>
</tr>
</tbody>
</table>

* Out-of-network reimbursement is indexed to 190% of the Medicare Maximum Allowable Charge (MAC), including expenses in excess of the out-of-network out-of-pocket maximum.

** To meet the requirements of the U.S. Department of State, J-1 Visa holders will have a $500 per person deductible applied.

Remember: In the Choice Plus 80 plan, in-network deductible, coinsurance and medical and prescription copays accumulate toward the in-network out-of-pocket maximum. In addition, out-of-network out-of-pocket eligible expenses accumulate toward the in-network out-of-pocket maximum.

Important Notes: UHC’s Choice network is a national provider network and does not require a primary care physician or referrals to see specialists. UHC requires precertification for some services. If you use an in-network provider, your participating network physician or hospital generally handles the precertification process. However, it is your responsibility to confirm that your provider has obtained the necessary authorizations from UHC. If you see a provider who is out-of-network, you are responsible for obtaining precertification for most services except routine office visits.
Vision Coverage
All Postdoctoral Fellows and their covered dependents who participate in Columbia’s medical plan are covered by a vision benefit.

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Choice Plus 80</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Routine Eye Exams</strong></td>
<td><strong>Benefits apply both In-Network and Out-of-Network</strong></td>
</tr>
<tr>
<td>Adults:</td>
<td>One exam every 12 months with a $10 copay.</td>
</tr>
<tr>
<td>Children*:</td>
<td>One exam every 12 months with a $10 copay.</td>
</tr>
<tr>
<td><strong>Lenses</strong></td>
<td><strong>Every 24 months, $20 allowance for single lenses, $30 for bifocal, $40 for trifocal or $75 for lenticular.</strong></td>
</tr>
<tr>
<td>Adults:</td>
<td><strong>Lenses covered in full every 12 months. More frequently if medically necessary.</strong></td>
</tr>
<tr>
<td>Children*:</td>
<td><strong>Frames</strong></td>
</tr>
<tr>
<td>Adults:</td>
<td><strong>$30 allowance every 24 months.</strong></td>
</tr>
<tr>
<td>Children*:</td>
<td><strong>Up to $100 covered in full every 12 months. More frequently if medically necessary. Cost above $100 covered at 60%.</strong></td>
</tr>
<tr>
<td><strong>Contact Lenses</strong></td>
<td><strong>$75 allowance every 24 months.</strong></td>
</tr>
<tr>
<td>Adults:</td>
<td><strong>Single purchase of a pair of contact lenses or 1 box of contact lenses per eye covered at 100% every 12 months.</strong></td>
</tr>
<tr>
<td>Children*:</td>
<td><strong>ID Card</strong></td>
</tr>
</tbody>
</table>

You do not need a vision ID card to use your benefits. Your vision ID number is the same ID that is on your UHC ID card. However, if you would like one, you may print one from the Vision website. Go to myuhc.com and select “Vision” from the “Coverage & Benefits” tab, then click “Vision Benefit highlights” and you will be taken to the UHC Vision website.

* Child is defined as a member less than age 19.
** Available for either frames and lenses or contact lenses.

Note: Provider might require payment in full at the time of service. The patient then submits a claim to UHC for reimbursement.

To search for a vision provider, log in to www.myuhc.com and click “Coverage & Benefits,” “Vision,” then “Vision Benefit Highlights” and “Find a Provider.”
Choice Plus 80 Plan

With the Choice Plus 80 medical plan, you have the flexibility to use in-network or out-of-network providers each time you seek care. However, you can minimize your out-of-pocket expenses by using in-network providers.

**In-Network Coverage:** When you use UHC network providers, you pay a $30 copay for physician office visits (including specialists and urgent care). Preventive care is covered at 100% with no deductible for in-network services. The deductible, coinsurance and all medical and prescription drug copays accumulate toward your annual out-of-pocket maximum.

Other than preventive care and copays, for most in-network medical services you must meet an annual deductible of $600* per member before the Choice Plus 80 plan pays the coinsurance of 80% of the negotiated fee; you are responsible for the remaining 20% of the coinsurance. After you reach the in-network out-of-pocket maximum of $3,750 for an individual and $7,500 for a family, the Plan pays 100% of covered in-network medical charges and prescription drug copays for the remainder of the calendar year.

Whenever you are having diagnostic or preventive tests, be sure to ask your physician if he/she is referring you to a provider who is in-network.

* To meet the requirements of the U.S. Department of State, J-1 Visa holders will have a $500 per person deductible applied.

Out-of-Network Coverage

Most out-of-network services are covered at 60%** after the annual deductible of $850 per member. Out-of-network expenses are always handled the same way, as outlined below:

- You are responsible for obtaining precertifications from UHC before most non-office visit treatment begins (unless it is an emergency). If you do not request precertification before having inpatient or outpatient surgery and/or certain treatment, you will be subject to a $500 penalty. If you are having trouble finding providers and/or services in the network, please call UHC at 800-232-9357. In an emergency, if you or your covered dependent is admitted to a non-network hospital, you must contact UHC within 48 hours of admission or you will be subject to a $500 penalty.
- Before the Plan starts to pay for out-of-network services, you must meet your out-of-network deductible.
- Then the Plan pays coinsurance of 60% of remaining covered charges up to a maximum of 190% of the Medicare Maximum Allowable Charge (MAC).
- If you reach the out-of-network out-of-pocket maximum, the Plan will pay 190% of the Medicare MAC.

**Note:** Your eligible out-of-network expenses can be used to satisfy the in-network deductible and in-network out-of-pocket maximum in the Choice Plus 80 plan.

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Travel Vaccination Coverage

If you are traveling out of the country, travel vaccinations will be covered under the medical plan (deductible and coinsurance will apply).

Preventive Care

To learn more about preventive care, go to https://humanresources.columbia.edu/preventive-care.

Medical & Prescription Drug ID Cards

If you newly enroll in medical benefits, you will receive a UHC ID card. This card will include member information for medical, vision and prescription drug coverage. It takes approximately three weeks for new enrollees to receive an ID card. If you need a temporary ID card sooner, go to www.myuhc.com two weeks after you complete your benefits enrollment to download and print your temporary card.

**Note:** 70% for outpatient mental health and substance abuse services.
Medicare Maximum Allowable Charge (MAC)

Out-of-network services for all medical plans are indexed to 190% of the Medicare MAC. Most services are covered at 60% of 190% of the Medicare MAC, except for mental health and substance use disorder outpatient counseling and outpatient programs, which are covered at 70% of 190% of the Medicare MAC. You are solely responsible for charges in excess of 190% of the Medicare MAC.

Here's an example: Your out-of-network physician charges you $200 for an office visit. 190% of the Medicare MAC is $100. Therefore, $100 is the basis for out-of-network reimbursement.

- If you have not met the out-of-network annual deductible, you will be responsible to pay the full $200. Only $100 will apply to your deductible.
- If you have already met the out-of-network annual deductible, the Plan will pay coinsurance of 60% of $100, or $60. Your share of the coinsurance is 40%, or $40. You are also responsible for the charges above 190% of Medicare MAC, so your total responsibility is $140.
- If you have met the out-of-network annual out-of-pocket maximum, the Plan will pay 190% of the Medicare MAC, or $100. You are responsible for the remaining balance.

Learn More

You can find out your reimbursement amount for out-of-network services before you seek treatment by first asking your physician for the medical “procedure code” along with the associated fee. Then, call UHC’s Member Services at 800-232-9357 to request an estimate of their reimbursement.
Prescription Drug Coverage

When you enroll in the Columbia medical plan, you are automatically enrolled in Columbia University’s Prescription Drug Plan. OptumRx administers the Prescription Drug benefits plan for the University.

Using Your Prescription Drug Benefit
After you enroll in medical benefits, you will receive a UHC ID card which includes your medical and prescription drug plan information.

Prescription Drug Costs
The cost of your prescriptions depends on a number of factors, including whether you buy your medication through a retail pharmacy or through the mail-order program and whether the drug is a single-source or multi-source drug.

Retail
You will need to present your UHC ID card at the pharmacy the first time you fill a prescription. You can have up to a 30-day supply of your prescription when filled at a retail pharmacy.

- In New York, New Jersey and certain other states, the pharmacy is required by law to substitute a brand name drug with a generic. Your copay will be $10. If the cost of the generic drug is less than $10, you will only pay the cost of the drug.

- If your physician prescribes the brand-name drug instead of the generic, then you will pay the highest copay, $45. Your physician must request the pharmacist “Dispense as Written” to receive the brand-name drug.

- If no generic is available for your prescription, then your drug is a single-source prescription. Your copay will be $25.

Mail-Order
Mail-order copays are for up to a 90-day supply. If you take medication on a regular basis for conditions such as high blood pressure or asthma, the mail-order option will be less expensive than the retail option.

After you have enrolled in the OptumRx mail-order program, you can refill prescriptions easily, either online or over the phone.

Specialty Medications
Specialty medications must be purchased via mail-order from BriovaRx, an OptumRx specialty pharmacy. BriovaRx will mail your prescription to you at the address of your choice. For your privacy, the package is delivered in a non-labeled box. Call 855-427-4682 to speak to a patient care representative. Typically, you will receive a 30-day supply of the prescription at the retail pharmacy copay. Note: If you use a pharmacy other than BriovaRx, you will be subject to the full cost of the medication instead of copays.

Learn More
To find participating pharmacies or enroll in the OptumRx mail-order program, log in to www.myuhc.com and click “Manage Your Prescriptions,” then “Go to OptumRx.” You may also call 800-232-9357 for assistance.
Copays

All prescription drugs are subject to a copay, and that copay accumulates towards your out-of-pocket maximum for your medical plan. Once you reach the annual out-of-pocket maximum, the Plan pays 100% of the cost of prescription drugs.

### Prescription Drug Copays

<table>
<thead>
<tr>
<th>Retail Pharmacy (up to 30-day supply)</th>
<th>Mail-order (up to 90-day supply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• $10 generic</td>
<td>• $15 generic</td>
</tr>
<tr>
<td>• $25 single-source</td>
<td>• $50 single-source</td>
</tr>
<tr>
<td>• $45 multi-source</td>
<td>• $90 multi-source</td>
</tr>
</tbody>
</table>

**Is a Drug “Single-Source” or “Multi-Source”?**

- If no generic is available, it is a single-source drug.
- If both a generic and brand name prescription are available, it is a multi-source drug.

To find out if a drug is single-source or multi-source, ask your pharmacist or contact OptumRx at 800-232-9357 or [www.myuhc.com](http://www.myuhc.com). Keep in mind that your prescription may move from single-source to multi-source during the year due to periodic reviews or if the U.S. Food and Drug Administration (FDA) approves a generic equivalent drug.
Cost of Coverage: Your Contributions

Contributions are the amount you pay toward the cost of your medical, vision and prescription drug (“Rx”) coverage. Under the Columbia University Postdoctoral Research and Clinical Fellow Health Benefits Policy, Postdoctoral Fellows may enroll in the UnitedHealthcare (UHC) Choice Plus 80 plan at the fixed, University rate of $36 per month regardless of the coverage level.

<table>
<thead>
<tr>
<th>2019 Monthly Contributions for Medical &amp; Rx Coverage (Full-Time)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yourself Only</td>
</tr>
<tr>
<td>$36</td>
</tr>
</tbody>
</table>

Billing Information

After your elections have been processed, EBPA, our third party billing administrator, will send billing statements (also called coupons) for your medical and/or dental contributions through the end of the calendar year to your home mailing address. You are responsible for remitting payment to EBPA promptly, as instructed on the coupons.

**Note:** Your contribution is $36 per month, with your fellowship allowance or training grant expense account and departmental or other unrestricted funds available to the Principal Investigator covering the remainder of the cost. Up to 75% of your fellowship or training grant may be used by your department or PI to pay for the departmental/PI share of the costs.

The Internal Revenue Code requires that contributions made by your department or your grant for medical and/or dental coverage are included as taxable income for you. Imputed income means you pay taxes on the cost or value of the benefits. Imputed income will be reported annually on your 1099, or quarterly on your paychecks if you have W-2 earnings.

**Important**

If payment is not received by the stated deadline, your benefits will be terminated due to non-payment.
Aetna Columbia Dental Plan

The Aetna Columbia Dental Plan provides you with the flexibility to see Columbia University College of Dental Medicine faculty and alumni, called the Columbia Preferred Dental Network, along with the national Aetna PPO network of dentists, all under one comprehensive program. You may also see a dentist outside of the network, although your costs will be significantly higher whenever you use out-of-network dentists.

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Columbia Preferred Dental Network</th>
<th>Aetna Dental Network</th>
<th>Out-of-Network*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preventive Care</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Includes routine cleanings, routine exams and X-rays</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Basic Restorative Care</td>
<td>100%</td>
<td>80%</td>
<td>80%</td>
</tr>
<tr>
<td>Includes fillings and extractions</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Major Restorative Care</td>
<td>60%</td>
<td>50%</td>
<td>50%</td>
</tr>
<tr>
<td>Includes crowns, root canals, bridges and dentures</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Orthodontia for Adults &amp; Children</td>
<td>50%</td>
<td>50%</td>
<td>50%</td>
</tr>
<tr>
<td>Annual Deductible (per person)</td>
<td>none</td>
<td>$25</td>
<td>$25</td>
</tr>
<tr>
<td>Annual Maximum Benefit (per person)</td>
<td>$1,500</td>
<td>$1,250</td>
<td>$1,250</td>
</tr>
<tr>
<td>Orthodontic Lifetime Maximum (per person)</td>
<td>$1,500</td>
<td>$1,250</td>
<td>$1,250</td>
</tr>
</tbody>
</table>

* The percentage paid by Aetna Dental is limited to the network-negotiated fees. This means if you use an out-of-network dentist, your reimbursement will be based on the network fees for the services provided. For example, if your dentist bills you $800 for a crown but the network-negotiated fee is $400, you will be reimbursed for 50% of $400 (the network-negotiated fee) totaling $200. You are responsible for paying the balance of $600 to your out-of-network dentist.

<table>
<thead>
<tr>
<th>2019 Monthly Contributions for Dental</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yourself</td>
</tr>
<tr>
<td>You Plus One</td>
</tr>
<tr>
<td>Family</td>
</tr>
</tbody>
</table>
Using the Columbia Preferred Dental Network

When you use a dentist who participates in the Columbia University network, you receive a greater benefit for services. To locate a Columbia Preferred dentist, go to https://humanresources.columbia.edu/benefits and click on “Vendor Contacts.” Columbia Preferred dentists are located throughout the tristate area of New York, New Jersey and Connecticut.

Columbia Preferred dentists accept reimbursement for services covered at 100% as payment in full. You are not responsible for paying any fees that exceed the network-negotiated fees. You also do not have to submit any claim forms when you use a network participating dentist.

Columbia Preferred Dental Plan Facilities

cidentalassociates.columbia.edu

Columbia Dental Associates
Morningside Associates
1244 Amsterdam Avenue
(near 121st Street)
New York, NY 10027
212-961-1266
and
430 West 116th Street
New York, NY 10027
212-662-4887

Columbia Dental Associates
Medical Center Practice
Bard Haven Towers
100 Haven Avenue
New York, NY 10032
212-342-0107

Columbia-Presbyterian
Eastside Dental Faculty Practice
Columbia Doctors Midtown
51 West 51st Street
Suite 350
New York, NY 10019
212-326-8520

Columbia Oral & Maxillofacial
Surgery
Vanderbilt Clinic
622 West 168th Street
7th Floor
New York, NY 10032
212-305-4552

Using the Aetna Dental Network

If you see an Aetna-participating dentist, you will not be billed for any fees that exceed the Aetna negotiated amount. To locate an Aetna participating dentist, go to https://humanresources.columbia.edu/benefits and click on “Vendor Contacts.”

Dental ID Cards

Aetna will not mail you an ID card after you enroll. Instead, they will mail you a letter confirming your enrollment. When you go to the dentist, you can show the office a copy of that letter, or tell the office your name, date of birth and member ID# (or your Social Security Number). If you prefer to have an ID card, sign up on Aetna’s member website at www.aetna.com to print out a card for you and your dependents.
Term Life Insurance

Life Insurance can provide valuable financial protection. Columbia offers a Basic Term Life Insurance plan to help meet your needs. This plan is insured and administrated by Cigna.

Basic Term Life Insurance Plan

The Basic Term Life Insurance plan is provided by Columbia University at no cost to you. You will automatically receive Basic Term Life Insurance of $50,000.

The Basic Term Life Insurance plan pays a lump sum benefit to your beneficiary in the event of your death while you are a Postdoctoral Fellow at the University.

The Plan can also pay a living benefit. If you become terminally ill, you may elect to have the Plan pay out a benefit while you are still living. Any amount you receive will reduce the benefit paid to your beneficiary.
Tuition Benefit

Columbia University offers tuition exemption to support your education.

Tuition Exemption for Postdoctoral Fellows

The Tuition Exemption Program pays for one course per term, up to a maximum of two courses per academic year, in the American Language Program. All sessions during the Summer Term count as one term. This is not a reimbursement or remission program; your tuition is simply exempt. You are eligible for this benefit immediately; there is no waiting period. The Tuition Exemption Benefit does not pay for other courses, nor for any courses taken by spouses, same-sex domestic partners or children.

See policy for details of your benefits coverage at https://humanresources.columbia.edu/tuition.

To Review Your Eligibility and Print Your Tuition Exemption Form

Log in to CUBES and select “Tuition.” On the Tuition Programs page, under Within Columbia University, select “Tuition Exemption – For Yourself.”
Getting the Most Out of Your Benefits

The University provides a wide variety of wellness programs, tools and resources to support your ongoing health and welfare.

Well-being Resources

There is nothing more important than your health. Wellness programs inspire you to care about your health and to make time in your busy schedule to focus on you. These programs can help you choose the right activities to meet your goals and to stay motivated so that you stay on track. To help you find your path to good health, Columbia University offers wellness resources to help you to eat right, exercise more, stop smoking or just relax.

The following programs are provided at no cost to you if you are enrolled in a Columbia-provided medical plan.

UHC Online Portal

Visit www.myuhc.com to review your health plan information, find providers, budgeting tools, helpful wellness tips and more. Download the Health4Me™ app to take this resource on the go. See page 23 for more details.

Virtual Visits

Get online access to virtual physicians 24/7 through your mobile phone, tablet or computer. Speak with a physician in real-time to obtain a diagnosis or a prescription drug, if necessary. To learn more, go to https://humanresources.columbia.edu/benefits and click on the “Virtual Visits” icon.

Wellness Coaching

UHC’s personal wellness coaching provides easy online access to tools, support and guidance to help you reach your health goals. This service is included as part of your benefits plan, at no additional cost to you, and offers programs to assist you with eating better, getting fit, reducing stress and sleeping better. Participants can get tailored support from a personal coach via secure email or a live chat. There are also a host of online courses and programs available at your fingertips, such as Stress Less, Sleep Well and Eat Smart.

NurseLine

Speak with a registered nurse 24/7 to help you choose appropriate medical care, understand a new diagnosis, explore treatment options and more. To connect to a nurse, call 800-232-9357.
Women’s Health Programs

• Maternity Support Program. This program helps ensure you and your baby receive the best care from pregnancy through the first few months of the baby’s life.

• Fertility Solutions. If you are one of the millions of people dealing with infertility, this program can help through education and guidance. Experienced fertility nurses offer support and guidance throughout the fertility process.

• Neonatal Resource Services. If your baby is born preterm or with a serious health problem, this program provides a dedicated team of nurse case managers, social workers and other services.

To learn more about these resources, go to https://humanresources.columbia.edu/well-being.

Live and Work Well

The behavioral health website provides confidential help and resources when coping with grief and loss, managing relationship difficulties and dealing with anxiety, stress and depression. You can also access online resources to help you reach your health goals such as eating right or reducing stress, and even get guidance from a coach via phone, secure email or live chat. Log in to www.myuhc.com and click on “Coverage & Benefits.” Then select “Mental Health” and “Mental Health and Substance Abuse benefit highlights” to learn more.

Digital Health Website

You can use this service if you own or want to purchase a fitness tracker (such as a Fitbit). The Rally Digital Health service lets you take a health survey, sign up for health challenges and health missions—and much more.

Employee Assistance Program

The Employee Assistance Program (EAP) is a network of services to help you and your household members cope with issues that you experience in everyday life. The EAP, provided by Humana, also offers short-term confidential counseling, wellness resources and different tools to help you be successful in the workplace. You do not have to be covered by a Columbia University medical plan to take advantage of the EAP. You, and members of your household, can receive assistance with a wide variety of services, including:

• Confidential 24/7 counseling and referral services:
  • Short-term counseling of up to three sessions per topic (e.g., stress, anxiety or relationship issues)
  • Phones answered by licensed Master’s or Ph.D.-level mental health and substance abuse professionals and, if needed, referral to a network of more than 20,000 counselors available nationwide

• Legal and financial services:
  • Free 30-minute consultations with Humana-affiliated attorneys or financial counselors
  • Free 30-minute consultations with Humana-affiliated mediators
  • 25% discount on additional legal, tax preparation and mediation services
  • Do-it-yourself document preparation with hundreds of state-specific, fillable legal forms, including wills, living wills, powers of attorney, etc.

Free to You

Columbia University assumes all costs for initial assessment and confidential counseling sessions through the EAP for up to three counseling sessions per subject. If additional assistance is necessary, the counselor will give you referrals, taking into account your preferences, medical plan and financial circumstances.
• ID Theft Emergency Response Kit:
  • 60-minute consultation with an expert fraud-resolution specialist
  • 25% discount on additional services
• Improving Your Financial Wellness webpage with articles, podcasts, webinars and other tools to help you deal with common financial issues
• Adult/Elder Care research and referral services
• Life Coach, a personalized program to help you achieve lifestyle goals. Meet with a coach by phone, email or online chat
• Convenience Services, research and referrals for every day needs (e.g., travel arrangements, pet care, movers and restaurant recommendations)

Additional online services include: Text4Baby, the Spendless Discount Program and CaringBridge.

For 24/7 free, confidential help and support, call 888-673-1153 or go to www.humana.com/eap (Username: Columbia; Password: eap).

Work/Life Programs
Columbia University’s Office of Work/Life fosters the well-being of the Columbia community and its people in their pursuit of meaningful and productive academic, personal and work lives.

Programs and services:
• Affiliated Child Care Centers are independent centers, located on or near Columbia campuses, which provide quality child care for Columbia families.
• Affinity Mortgage Lending Program includes preferred lenders that can help you refinance your current mortgage, consolidate debt or purchase a new home.
• Backup Care is for the care of adults or children when normal care arrangements are interrupted or when short-term care is required but you still need to attend work. Coverage is available 24/7, nationwide and in some international locations. (Please visit Work/Life website for eligibility requirements.)
• Breastfeeding Support Program includes private lactation rooms equipped with hospital-grade breast pumps, on all Columbia campuses. Breast pump attachments are available for purchase below retail cost. Breastfeeding workshops are also offered each semester.
• Housing Information and Referral Service provides individual consultation and information resources for renting or purchasing apartments or homes in the New York metropolitan area.
• School and Child Care Search Service assists families exploring child care and school options, including public, parochial, independent and special needs schools.
• Wellness Program includes initiatives to support physical activity, nutrition, weight management, stress reduction and more.

Work/Life Workshops and Other Events
Look for emails announcing upcoming Work/Life workshops and other events across the University. For more details on programs, services and events, go to http://worklife.columbia.edu or email worklife@columbia.edu.
Health Advocate

Free 24/7 services, available through Health Advocate, can help you, your spouse, dependent children, parents and parents-in-law resolve healthcare issues and health insurance challenges.

How a Health Advocate Can Help

• Find the right doctors, hospitals and other healthcare providers.
• Explain complex medical conditions; research and locate the latest treatments.
• Coordinate care and schedule follow-up visits; facilitate second opinions; transfer X-rays and medical records.
• Arrange specialized treatments and tests; answer questions about results, treatment options and prescribed medications.
• Work with insurance companies to clarify benefits including copays; help facilitate access to appropriate care.
• Locate eldercare services including assisted living and adult day care; address other issues facing parents and parents-in-law.
• Offer personal contact with nurses to support treatment decisions.
• Resolve insurance claims; negotiate billing.

Special Help for Seniors

• Transition retirees to a new health plan.
• Enroll in Medicare; dependents under 65.
• Clarify Medicare Parts A, B, D and supplemental plans.
• Locate eldercare services that fall outside traditional healthcare coverage.
• Assist with the transition from the traditional insurance to Medical HMO.

To learn more about Health Advocate, go to https://humanresources.columbia.edu/well-being or call 866-799-2725.
Emergency Travel Assistance
When you are covered under the University’s Basic Term Life Insurance Plan (from Cigna), you and your eligible dependents are also covered for emergency travel assistance (“Cigna Secure Travel”*) when traveling 100+ miles from home or when traveling in a foreign country for trips up to 180 days. Travel can be either personal or work-related. This assistance can be for situations as serious as needing to be evacuated from a foreign country to something as simple as information on visas. This program can help you with travel emergencies both in the U.S. and internationally.

Here is a summary of the range of services Cigna Secure Travel offers:

- Emergency medical evacuation
- 24-hour multi-lingual assistance
- Pre-trip planning services, including travel outside the U.S.
- Assistance locating and coordinating medical and prescription drug services
- Emergency transportation
- Travel assistance
- Assistance with lost or stolen items
- Repatriation of remains
- Emergency cash—Advance up to $1,500 with confirmation of reimbursement
- Personal security

The University also provides additional emergency assistance resources. If you are traveling outside the U.S. for official Columbia purposes, be sure to register in advance of your trip at globalsupport.columbia.edu.

What You Need to Know
In an emergency, you may call:
United States or Canada: 888-226-4567 and choose Option 1; all other locations, call collect: 202-331-7635

The toll-free customer service center is available 24/7, 365 days a year. Please reference Group Number 57 when you contact Cigna Secure Travel.

For more information, email Cigna Secure Travel at: cigna@gga-usa.com.

Important
Services are only covered if coordinated by Cigna Secure Travel.

Additional UHC Resources

Care Management and Outreach
If you participate in the Choice Plus 80 plan, you are eligible to participate in a care management program. This program will help you and/or your family members become more knowledgeable and active in managing a medical condition. Participation in the program is voluntary and there is no cost to participate. You will receive a call from a UHC representative to discuss your condition, and partner with you on your road to recovery (or managing your condition).

Health4Me
UHC’s Health4Me™ app provides instant access to your family’s critical health information—anytime and anywhere. Whether you want to find a physician near you, check the status of a claim or speak directly with a healthcare professional, Health4Me is your go-to resource. Key features allow you to check the status of deductible and out-of-pocket spending, as well as locate convenience clinics, urgent care facilities and emergency rooms.

* J-1 visa holders will be covered for Emergency Travel Assistance through American International Group, Inc.
## Contact Information

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Provider</th>
<th>Website/Email</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Dental</strong></td>
<td>Aetna Columbia Dental Plan</td>
<td><a href="http://www.aetna.com">www.aetna.com</a></td>
<td>800-773-9326</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Provider directory:</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td><a href="https://humanresources.columbia.edu/">https://humanresources.columbia.edu/</a></td>
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<tr>
<td></td>
<td></td>
<td>benefits-vendor-contacts</td>
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<tr>
<td></td>
<td></td>
<td>(click on Dental Providers)</td>
<td></td>
</tr>
<tr>
<td><strong>Employee Assistance Program (EAP)</strong></td>
<td>Humana</td>
<td><a href="http://www.humana.com/eap">www.humana.com/eap</a></td>
<td>888-673-1153</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Username: Columbia    Password: eap</td>
<td></td>
</tr>
<tr>
<td><strong>Health Advocacy</strong></td>
<td>Health Advocate</td>
<td>N/A</td>
<td>866-799-2725</td>
</tr>
<tr>
<td><strong>Identity Theft Assistance</strong></td>
<td>Humana</td>
<td><a href="http://www.humana.com/eap">www.humana.com/eap</a></td>
<td>888-673-1153</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Username: Columbia    Password: eap</td>
<td></td>
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<tr>
<td><strong>Life Insurance</strong></td>
<td>Cigna</td>
<td><a href="http://www.cigna.com">www.cigna.com</a></td>
<td>800-732-1603</td>
</tr>
<tr>
<td><strong>Medical</strong></td>
<td>UHC Medical</td>
<td><a href="http://columbia.welcometouhc.com">http://columbia.welcometouhc.com</a></td>
<td>800-232-9357</td>
</tr>
<tr>
<td></td>
<td>UHC Behavioral Health</td>
<td>Member Services: <a href="http://www.myuhc.com">www.myuhc.com</a></td>
<td></td>
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<tr>
<td><strong>Prescription Drug</strong></td>
<td>OptumRx</td>
<td><a href="http://www.myuhc.com">www.myuhc.com</a></td>
<td>800-232-9357</td>
</tr>
<tr>
<td><strong>Travel Assistance</strong></td>
<td>Cigna Secure Travel</td>
<td>Cigna Assistance Services</td>
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<td>Policy #FLY980017</td>
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<td>Group #57</td>
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<td>Cigna Assistance Services can be reached at</td>
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<td></td>
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<td><a href="mailto:cigna@gga-usa.com">cigna@gga-usa.com</a></td>
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<td>UnitedHealthcare Global (J-1 Visa Holders Only)</td>
<td>Global Intelligence Center</td>
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<td><a href="https://members.uhcglobal.com">https://members.uhcglobal.com</a></td>
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<td>Group #9061</td>
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<td></td>
<td>United Healthcare Global Travel Assistance can</td>
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<td>also be reached at <a href="mailto:Assistance@uhcglobal.com">Assistance@uhcglobal.com</a></td>
<td></td>
</tr>
<tr>
<td><strong>Vision</strong></td>
<td>UHC Vision</td>
<td><a href="http://www.myuhc.com">www.myuhc.com</a></td>
<td>800-638-3120</td>
</tr>
<tr>
<td><strong>Will Preparation</strong></td>
<td>Humana</td>
<td><a href="http://www.humana.com/eap">www.humana.com/eap</a></td>
<td>888-673-1153</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Username: Columbia    Password: eap</td>
<td></td>
</tr>
</tbody>
</table>

### Columbia Benefits Contacts

For all benefits-related questions, contact:

**Columbia Benefits Service Center**

Studebaker 4th Floor, MC 8703
622 West 132nd Street
New York, NY 10027
Phone: 212-851-7000
Secure fax: 212-851-7025
Email: hrbenefits@columbia.edu

For updates, forms, Tuition Exemption and information about other HR programs:

**Benefits website:**
https://humanresources.columbia.edu/benefits

**HR website:**
https://humanresources.columbia.edu

**List of Providers:**
https://humanresources.columbia.edu/benefits-vendor-contacts