COLUMBIA UNIVERSITY
HR Benefits

2027 Medical Plan Comparison Chart for Grandfathered Retired Officers Over Age 65

BENEFIT	UHC Indemnity Plan	UHC Choice Plus 100	
	No Network*	**In-Network***	**Out-of-Network ***
Annual Deductible Individual Family	 $250 $500	 $200 per person	 $850 per person
Coinsurance/Plan Pays	80% of Medicare Allowable Amount after deductible	100% of Medicare Allowable Amount after deductible	60% of Medicare Allowable Amount after deductible
Annual Out-of-pocket Maximum Individual Family	 $1,250 (includes deductible) $2,500 (includes deductible)	 $4,750 (includes deductible) $9,500 (includes deductible)	 $5,250 (includes deductible) $10,500 (includes deductible)
Preventive Care	Not covered	100%	Not covered
Physician Office Visits	80% of Medicare Allowable Amount after deductible	100% of the Medicare Allowable amount after a $30 copay	60% of Medicare Allowable Amount after deductible
Emergency Room	80% of Medicare Allowable Amount after deductible	100% of the Medicare Allowable Amount after **a $175** copay (Waived if admitted)	100% of the Medicare Allowable Amount after a $150 copay (Waived if admitted)
Inpatient Hospital*	**Facility**: 100% of Medicare Allowable Amount after deductible **Inpatient Services**: 80% of Medicare Allowable Amount after deductible	**Facility**: 100% of the Medicare Allowable Amount after a $500 copay per admission **Inpatient Services**: 100% of the Medicare Allowable Amount after deductible	60% of Medicare Allowable Amount after deductible
Outpatient Care*	Facility: 100% of Medicare Allowable Amount after deductible	100% of the Medicare Allowable Amount after a $150 copay (including lab and radiology)**	60% of Medicare Allowable Amount after deductible
Outpatient Services*	Surgeon's fee, Non-surgical, Laboratory/Radiology including pre-admission testing: 80% of Medicare Allowable Amount after deductible	100% of the Medicare Allowable Amount after a $150 copay (including lab and radiology)**	60% of Medicare Allowable Amount after deductible
Mental Health and Substance Abuse – Inpatient care*	100% of Medicare Allowable Amount after deductible	**Facility**:100% of the Medicare Allowable Amount after a $500 copay per Admission **Inpatient Services:** 100% of the Medicare Allowable Amount after the deductible	60% of Medicare Allowable Amount after deductible
Mental Health and Substance Abuse – Outpatient programs*	80% of Medicare Allowable Amount after deductible	100% of the Medicare Allowable amount after a $30 copay	70% of Medicare Allowable Amount after deductible for facility-based care including intensive outpatient programs
Mental Health and Substance Abuse – Outpatient counseling*	80% of Medicare Allowable Amount after deductible	100% of the Medicare Allowable amount after a $30 copay	70% of Medicare Allowable Amount after deductible
Vision Care	None	None	None
Hearing Care	None	None	None
Laboratory/Radiology	80% of Medicare Allowable Amount after deductible	100% of Medicare Allowable Amount	60% of Medicare Allowable Amount after deductible
Prescription Drug Coverage (from OptumRx)	Retail (30-day supply) • Generic: $10 copay • Single-source: **$30 copay** • Multi-source: **$50 copay**	Mail-order (90-day supply) • Generic: $15 copay • Single-source: **$60 copay** • Multi-source: **$100 copay**	

Effective January 1, 2027, all specialty medications, including non-diabetic GLP will be covered at a Tier III copay. Eligible specialty medications will be processed through PillarRX with a 30% coinsurance, offset by the manufacturer discount.

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*Medicare is your primary coverage and generally, controls when precertification is necessary. If you use a provider that participates in Medicare, your doctor or hospital generally takes care of precertifications with Medicare. Medicare's payment is subtracted from the Medicare Allowable Amount and the Indemnity's Plan provision is applied to the difference to determine the payment by the Plan.
** No copay for Lab and Radiology at designated New York Presbyterian (NYP) locations. Go to humanresources.columbia.edu/documents and search "New York-Presbyterian (NYP) Outpatient Laboratory Locations" for the list. The Choice Plus 100 Plan uses the Non-Duplication approach to coordinate with Medicare.