



# Benefits in Brief For 2005

For full-time faculty  
and officers of the  
University

*Includes faculty members,  
UDA members, and officers of  
administration, the libraries,  
and research*





# contents

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*Benefits in Brief* is a Columbia Human Resources publication. This publication only highlights your benefits for calendar year 2005. Full details regarding coverage, eligibility, and any limitations can be found in the official plan documents, which are available from your local HR office or from the plan provider.

If there are any discrepancies between the information in this publication and the plan documents, the plan documents will always govern. Exceptions to any plans or eligibility requirements may not be granted without the consent of the Office of the Vice President for Human Resources. Columbia University reserves the right to change or terminate these plans at any time.

This publication is in no way intended to imply a contract of employment.



## COLUMBIA<sup>250</sup>

*Alma Mater*, completed in 1903 and located on the steps in front of Low Library, was designed by renowned sculptor Daniel Chester French to be simultaneously regal and welcoming, a symbol of Columbia's 250-year tradition of openness and high achievement. Examine her closely and you'll find an owl, representing wisdom, hidden amidst her robes.

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# Welcome to Columbia University

This brochure summarizes the benefits available to all full-time faculty and officers of research, administration and the libraries. More details about your benefits and how they work can be found in the formal documents and contracts that govern the benefit plans.

# important facts

## Columbia's Benefits Program

Columbia University provides its faculty and officers with a comprehensive package of benefits. The University's benefits program allows you to create a program suited to your needs and those of your family.

## Eligible Dependents

You can cover your eligible dependents under the University's medical and dental plans. Your eligible dependents include:

- your legal spouse
- your same-sex domestic partner
- your or your spouse's or same-sex domestic partner's unmarried dependent children, including adopted children, foster children and stepchildren. They are eligible:
  - until the end of the calendar year in which they turn age 19;
  - over the age of 19 as long as they remain full-time students—coverage ends at the end of the month in which they cease to be a full-time student (i.e., graduate) or the end of the calendar year in which they turn age 26, whichever is earlier;
  - at any age if they have a physical or mental disability, provided that when they were diagnosed they were covered dependents and it was prior to the end of the calendar year in which they turned age 19.

When you enroll dependents, you must provide the appropriate evidence of the relationship: a marriage certificate, birth certificate, proof of adoption, proof of full-time student status, or evidence of partnership (i.e. two pieces of documentation that show shared financial responsibility). Documentation in a non-English language must be translated and notarized prior to submission to Human Resources.

Coverage for your dependents takes effect at the same time as your coverage, at date of birth, or the first of the month following enrollment (as applicable).

## Benefits Effective Date

Your Benefits Effective Date is determined by the following rules:

- If you are hired on the first calendar day of a given month (not simply the first business day), your benefits go into effect on your hire date.
- If you are hired after the first calendar day of a given month, your benefits go into effect on the first calendar day of the following month.
- If you have medical or dental coverage under a prior plan in your name (e.g., COBRA), you are not asked to simultaneously pay for Columbia coverage. Your Columbia medical or dental benefits go into effect on the first calendar day of the month following the termination of your prior coverage. You must provide proof of the prior coverage, and you must still enroll within 90 days of your hire date (60 days if you enroll in an HMO).

Your responsibility for premiums or payments begins on your Benefits Effective Date, regardless of when you actually enroll. ***This means that if you wait to enroll, you may have several months of payments withheld from one paycheck.***

## Enrollment Deadlines

You must enroll by the following deadlines:

### Within 30 Days

Within 30 days of your hire date, you must enroll in:

- life insurance
- long-term disability (LTD) insurance
- the USA and T/PRP programs.

### Within 60 Days

Within 60 days of your hire date, you must enroll in:

- HMO medical coverage
- long-term care (LTC) insurance.

### Within 90 Days

Within 90 days of your hire date, you must enroll in:

- Point-of-Service (POS) or Modified Indemnity medical coverage
- dental coverage.

If you do not enroll by the above deadlines, you will not be able to enroll in your benefits until the next Open Enrollment period in Fall 2005 (to take effect January 1, 2006), unless you have a qualified life status change (see facing page).

## Taxation of Same-Sex Domestic Partner Benefits

Under IRS regulations, medical and dental benefits provided to same-sex domestic partners and their children are taxable to the employee. Therefore, although you will see pre-tax medical and dental premiums for your total coverage, you will also see a taxable portion of your contribution and a taxable portion of the University's contribution listed, and taxes will be deducted.

# important facts

## Changing Your Benefits

Medical and dental premiums are taken from your pay on a pre-tax basis, as allowed by Section 125 of the Internal Revenue Code. Because the Internal Revenue Service (IRS) very closely monitors pre-tax contributions, there are rules which Columbia must follow when processing changes in your benefit enrollments.

### Life Status Change

You may make certain changes to your benefits only within 31 days of a life status change.

A life status change is a difference in your job or family status that the IRS defines as justifying a change in your medical, dental, USA, T/PRP, life insurance, or LTD elections during the plan year (January 1 – December 31). Qualified changes in job or family status include:

- marriage, divorce, legal separation, annulment, or the beginning or end of a same-sex domestic partnership
- a change in the number of dependents either through birth, death, adoption, or placement for adoption
- your spouse's, same-sex domestic partner's, or dependent's employment or termination of employment
- a change in your or your spouse's or same-sex domestic partner's or your dependent's employment status, including a switch from full-time to part-time status or vice versa, a strike or lockout, or the beginning or end of an unpaid leave of absence
- a significant change in your or your spouse's or same-sex domestic partner's medical coverage under your spouse's or same-sex domestic partner's employer's plan

- your spouse or same-sex domestic partner or dependent satisfying or failing to satisfy a health plan's coverage requirements due to age, student status, or similar circumstances
- a change in your, your spouse's, same-sex domestic partner's, or dependent's residence or work site
- a permanent change in the way you commute to work (T/PRP only).

You are required to submit proof of a life status change to your local Human Resources office.

**Please Note:** *Even with a qualified life status change, you may only make changes to your benefit elections that are consistent with that change.*

### Benefits Open Enrollment

Once each year, during the Fall Open Enrollment period, you have the opportunity to review your needs for the year ahead and change your elections for the following benefits:

- medical and dental coverage.
- contributions to the University Spending Accounts (medical/dental and dependent day care). **Note:** *You must re-enroll each year during Open Enrollment.*
- participation in the Transit and Parking Reimbursement Program. **Note:** *You must re-enroll each year during Open Enrollment.*
- long-term disability and life insurance coverage.
- your investment carrier under the Retirement Plan.

**Note:** *Changes made during Open Enrollment become effective on January 1.*

### Tax-Deferred Annuities

Outside of Open Enrollment, you can change your Tax-Deferred Annuity (TDA) investment carrier and/or your contribution level to the TDA program twice a year.

### Your Investment Choices

You may change your investments within TIAA/CREF, Vanguard or Calvert for your Retirement or TDA account at any time during the year (see page 5 for contact information).

## Key Terms

### Net Pay

Net pay is the amount of money left in your paycheck after all applicable taxes and deductions have been withheld.

### Pre-Tax Contributions

Pre-tax contributions are deducted from your pay before Social Security and federal income taxes, as well as most state and local income taxes, are withheld. When you use pre-tax dollars to pay for benefits, your taxable income is reduced and you pay less in taxes.

### After-Tax Contributions

After-tax contributions—for such programs as life, LTD and long-term care insurance—are deducted from your paycheck *after* all applicable taxes have been withheld.

# Whom to Contact/Where to Go

When you have a question about your benefits, knowing the right place to contact can save you time and effort. These pages indicate which questions Human Resources can answer and which you should take directly to a vendor.

# hr contacts

## To Enroll in, Change, or Terminate Your Benefits

You should contact your local Columbia Human Resources office for questions about enrolling in, changing, or terminating the following benefits:

- Medical Coverage
- Dental Coverage
- Life Insurance
- Long-Term Disability
- Retirement Plan and Tax-Deferred Annuities
- Transit/Parking Reimbursement Program (T/PRP)
- Tuition Exemption, College Tuition Scholarships (CTS) and Primary Tuition Scholarships (PTS)
- University Spending Accounts
- Adoption Assistance

Your local Human Resources office can also answer questions about your leave-of-absence or COBRA benefits.

## To Discuss Retiree Coverage or Planning for Retirement from the University

You should contact Benefits and Compensation at the Morningside location of Human Resources to set up an individual appointment.

## Local Human Resources Offices

### Morningside (and Nevis)

Benefits and Compensation  
1901 Interchurch, MC 7705  
475 Riverside Drive  
New York, NY 10115  
(212) 870-3074  
hrfss@columbia.edu

### Medical Center

Human Resources  
112 Black Building  
650 W. 168th Street  
New York, NY 10032  
(212) 305-3819

### Harlem Hospital

Columbia Affiliation HR  
506 Lenox Avenue, Room 6208  
New York, NY 10029  
(212) 939-1720

### Lamont-Doherty

Office of Human Resources  
Administration Bldg., Room 205  
Palisades, NY 10964  
(845) 365-8840

## The Human Resources Web Site

Let your mouse do the walking and save yourself a trip or a phone call. Click on the "Benefits" link on the Human Resource home page at [www.hr.columbia.edu/hr/](http://www.hr.columbia.edu/hr/) to find the following resources:

- Your own current benefits enrollment
- Links to health plan web sites and participating provider lists
- General information about Columbia benefits, including the following booklets:
  - *Benefits in Brief*
  - *Tuition Exemption for Officers*
  - *College Tuition Scholarship Program (CTS)*
  - *Primary Tuition Scholarship Program (PTS)*
  - *Medical University Spending Account (USA) Reimbursement Guide*
  - *Retirement Benefits in Brief*
  - *Child Care Assistance at Columbia*
  - *Health Care Coverage Through COBRA*
- Summary Plan Descriptions
- All Columbia University Human Resources forms, plus health plan claim forms

# vendor **contacts**

## For Medical or Dental Plan Services or Assistance

For any problems with your medical or dental plan, to resolve claim issues (see box below), to request new ID cards, or to look up providers online, you should contact the plans directly.

**Aetna HMO**  
1-800-323-9930  
[www.aetna.com](http://www.aetna.com)

**CIGNA Modified Indemnity**  
1-800-CIGNA24  
[www.cigna.com/healthcare](http://www.cigna.com/healthcare)

**CIGNA POS**  
1-800-CIGNA24  
[www.cigna.com/healthcare](http://www.cigna.com/healthcare)

**HIP HMO**  
1-800-HIP-TALK  
[www.hipusa.com](http://www.hipusa.com)

**Oxford POS**  
1-800-760-4566  
[www.oxhp.com](http://www.oxhp.com)

**Medco Health**  
1-800-230-0508  
[www.medcohealth.com](http://www.medcohealth.com)

**Medco Health**  
*(for pharmacists who require additional information only)*  
1-800-922-1557

**Columbia Dental Plan**  
(212) 305-0763  
[www.columbiadentalplan.com](http://www.columbiadentalplan.com)

## To Enroll in Long-Term Care Insurance

To enroll in Long-Term Care Insurance or for more information about the plan, call John Hancock directly at 1-800-964-3039 or visit their web site at <http://columbia.jhancock.com> (username: columbia; password: mybenefit) and request an enrollment kit. You'll need to complete the appropriate forms and return them to John Hancock for approval.

## For Retirement Plan and Tax-Deferred Annuity Fund Information or to Move Money Within a Carrier

To discuss your investment funds or your account balances, or to move money from one fund to another within the same carrier, contact the carrier directly. You can switch funds within a carrier as many times as you choose.

**TIAA-CREF**  
1-800-842-2776  
[www.tiaa-cref.org](http://www.tiaa-cref.org)

**The Vanguard Group**  
1-800-523-1188  
[www.vanguard.com](http://www.vanguard.com)

**The Calvert Group**  
1-800-368-2745  
[www.calvertgroup.com](http://www.calvertgroup.com)

## To File for Spending Account or Transit/Parking Reimbursements

University Spending Account (USA) and Transit/Parking Reimbursement Program (T/PRP) claims are handled through Employee Benefit Plan Administration, Inc. (EBPA). Each time you have an eligible expense, you should submit a claim form along with the receipt for the expense to EBPA. Forms are available from your local Human Resources office or through the Columbia Human Resources web site.

**EBPA**  
Reimbursement Account  
P.O. Box 1140  
Exeter, NH 03833-1140  
1-800-258-7298

## To File for Tuition Scholarship Reimbursements

Please refer to the separate College Tuition Scholarship (CTS) and Primary Tuition Scholarship (PTS) brochures available from your local Human Resources office and on the web under the "Benefits" link at [www.hr.columbia.edu/hr/](http://www.hr.columbia.edu/hr/)

## To Appeal Claim Decisions

Under ERISA, you have certain rights to question or appeal medical claim decisions.

To exercise these appeal rights, you should directly contact the vendors listed above. While Columbia Human Resources is dedicated to ensuring that you receive your ERISA entitlements, you and/or your provider must initiate this appeal and respond directly to the medical vendor.

# Health Insurance Portability & Accountability Act

With the growth of information technology, the protection of private medical information has become a national concern. Congress addressed these concerns with the Health Insurance Portability and Accountability Act of 1996 (HIPAA), whose privacy provisions, applicable to all health plan providers, went into effect on April 14, 2003.

# hipaa



## Disclosure Limitations

The Columbia University Health Plan—which includes CIGNA POS, Oxford POS, CIGNA Modified Indemnity, CIGNA International, Medco Rx, the Columbia Dental Plans, Aetna HMO, HIP HMO and Medical University Spending Accounts—has always maintained the strictest privacy and confidentiality standards in the use and handling of your health insurance information.

Under HIPAA, health plan providers and designated Columbia Human Resources employees can only disclose your protected health information for a limited number of purposes:

- To make or obtain payments
- To conduct health care operations
- To recommend treatment alternatives
- To provide information about health-related benefits and services
- To communicate with an individual—that is, a friend or family member—involved in your care or the payment for your care (if authorized by you)
- To comply with a federal, state or local legal requirement
- To comply with a court order or administrative proceeding
- To conduct health oversight activities
- To counter serious threats to your health or safety
- For law-enforcement purposes
- For specified government functions
- For worker's compensation

Otherwise, neither the health plan providers nor Columbia Human Resources can disclose information about your or your dependents' health insurance, vision insurance, dental insurance, prescription drug coverage or USA-medical plan enrollment with anyone other than the covered individual. This includes:

- Other offices of the University, as well as employees in Columbia Human Resources not involved in health plan administration
- Spouses or other family members not directly involved in your care or the payment for your care (unless authorized by you)

## Your Rights

Your rights regarding your health information include:

- The right to request restrictions beyond those outlined above
- The right to receive confidential communications (for example) at only a specified phone number or e-mail address
- The right to inspect and copy your private health information
- The right to amend your private health information
- The right to an accounting of instances when your private health information has been disclosed
- The right to a paper copy of the *Notice of Columbia University Health Plan's Privacy Practices*, sent to all Columbia employees on April 14, 2003, distributed to all subsequent new hires, and available on the web under "Benefits" at [www.hr.columbia.edu/hr/](http://www.hr.columbia.edu/hr/)

## Privacy Officer

To exercise your HIPAA rights under Columbia health plans, please contact Columbia's designated privacy officer at:

Privacy Officer  
Columbia University Human Resources  
1901 Interchurch Center, MC 7705  
475 Riverside Drive  
New York, NY 10115  
E-mail: [hrprivoff@columbia.edu](mailto:hrprivoff@columbia.edu)

## Authorization Forms

For HIPAA authorization forms, please visit your local HR office or the Columbia HR web site in the "Forms Library" at [www.hr.columbia.edu/hr/](http://www.hr.columbia.edu/hr/)

# Prescription Drug Coverage

In order to provide officers with affordable prescription drug coverage that is consistent across health plans, Columbia has joined with other universities to offer Medco prescription drug coverage.

# prescriptions

## A New Prescription Drug Plan

In 2002, Columbia joined with several other universities—including Cornell, Princeton, and Boston University—to form the Preferred University Rx Purchasing Coalition or PURPC (pronounced “purpose”).

PURPC has hired Medco Health to provide prescription drug services to its members. Because this plan is separate from existing medical plans, you will access your benefit through a special Medco prescription drug card. *Your medical plan does not include a prescription drug benefit.*

With purchasing power greater than that of any one university, PURPC enables Columbia to control health costs in the most rapidly growing area—prescription drugs—and limit future increases to you.

Note that while all employees of the participating universities are part of the same Medco Health plan, Columbia plan information and finances, as well as your protected health information, will not be shared with other PURPC members.

## Advantages of the Medco Health Prescription Drug Plan

- National network of participating pharmacies, including all of the large chains (see partial list at right)
- 24 hour/7 day toll-free access to customer service representatives and your prescription information
- Web-based information available to members regarding enrollment, current prescriptions and alternative treatments
- Refill capabilities available on-line or via a toll-free call, through a state-of-the-art, fully automated “home delivery” (mail-order) processing center

## Partial List of Participating Pharmacy Chains

CVS Pharmacy  
Costco  
Duane Reade  
Eckerd Drug  
Food Town  
Jewel-Osco  
Kmart  
Kohl’s Pharmacy  
Kroger Pharmacy  
Osco Drug  
Pathmark Pharmacy  
Publix Pharmacy  
Rite Aid  
Safeway  
Sam’s Club  
Save Mart  
Shoprite  
Target  
Walmart  
Walgreens

For a searchable database of additional chains or individual participating pharmacies in your area, visit the web at [www.medcohealth.com](http://www.medcohealth.com) or call, toll-free, 1-800-230-0508.

## Prescription Drug Benefit

### Copayments

retail pharmacy (30-day supply)	\$5 generic; \$15 brand name
home delivery (90-day supply)	\$10 generic; \$30 brand name

### Infertility Coverage

oral and injectable medication	Same as above, up to \$15,000 lifetime cap
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# Medical Coverage

# medical

## Medical Coverage

You can select your medical coverage from among a number of plans. Each of the plans offer comprehensive care — including coverage for emergency care, hospitalization, surgery, office visits, prescription drugs, and mental health and substance abuse treatment. Two major differences among the plans are:

- how you access care — that is, which providers and hospitals are available to you; and
- how much you pay for your care.

The chart on pages 10 and 11 identifies the plans available to you and highlights the benefits provided under each plan.

### Selecting Your Coverage Level

You may enroll for medical coverage at one of the following coverage levels:

- yourself only
- yourself and spouse or yourself and same-sex domestic partner
- yourself and a child or children
- family (including your unmarried dependent children, your legal spouse/same-sex domestic partner, and your spouse's or same-sex domestic partner's unmarried dependent children).

### Waiving Coverage

If you decide to waive coverage, you'll receive a \$65 monthly credit, which you can take as salary or apply to your Medical/Dental University Spending Account. Proof of other coverage (including your name and the effective dates) must be provided to your local Human Resources office.

## How the Plans Work

### Point-of-Service (POS) Plans

This option lets you choose between providers, hospitals, and facilities in the plan (in-network) or providers that are not part of the plan (out-of-network). To receive in-network benefits, you must choose a Primary Care Provider (PCP) who is responsible for coordinating your care. When you use in-network providers, you'll pay a fixed fee (copay), and there are no claim forms to file. If you use out-of-network providers and facilities, you'll need to file a claim form and meet a yearly deductible. You may also need to precertify care with the plan. After meeting your deductible, the plan pays a percentage of your covered reasonable and customary medical expenses, up to an out-of-pocket maximum, after which the plan pays 100 percent of covered reasonable and customary medical expenses.

### Health Maintenance Organization (HMO)

To receive benefits from an HMO, you must receive all of your care from the HMO's network of providers, hospitals, and facilities. As with a POS Plan, when you enroll, you must choose one of the HMO providers as a Primary Care Provider (PCP). The PCP will coordinate your care and refer you to other providers in the network as needed. You'll pay a fixed fee (copay) when you go to an HMO provider. In general, care received outside the network, with the exception of emergencies, is not covered.

### Modified Indemnity Plan

With this plan, you can use any provider or hospital anytime and anywhere. However, the annual deductibles for this plan are \$3,000 (individual) and \$6,000 (family), so it's possible not to receive any reimburse-

ment under this plan if you don't have a large amount of medical expenses. You must file a claim form for every provider or hospital visit. After you meet your deductible, the plan pays 100 percent of your covered reasonable and customary medical expenses.

## Key Terms

### In-Network Care

You are charged less for care provided through a plan's own network of PCPs (see below) and specialists. For care to be in-network, it must be recommended by an in-network PCP (i.e., a referral to an in-network hospital by an out-of-network PCP does *not* count as in-network).

### Out-of-Network Care

You are charged more for care which is provided outside of a plan's own network of PCPs (see below) and specialists. This includes in-network specialists when the referral is from an out-of-network PCP.

### Primary Care Provider (PCP)

A Primary Care Provider (PCP) coordinates all your care through an HMO or POS plan. In general, a PCP is an internist, family or general practitioner, nurse practitioner or pediatrician.

### Reasonable and Customary (R&C) Limit

The reasonable and customary (R&C) limit for care is based on the typical charge made by most providers for similar care in a geographic area. If the charge for care exceeds the R&C limit, you may be responsible for the amount above the limit.

# medical



## Selecting a Provider

If you elect a POS plan, you must select a Primary Care Physician (PCP) in order to receive in-network benefits. If you elect an HMO plan, you must select a PCP to receive services.

You can access provider listings for all plans in the "Benefits" section on the Columbia Human Resources web site at [www.hr.columbia.edu/hr/](http://www.hr.columbia.edu/hr/)

## POS Networks

### **Columbia Presbyterian Physician Network (CPPN)**

CPPN is a network of providers at the Columbia Presbyterian Medical Center available only to Columbia employees. CPPN providers are available under both CIGNA POS and Oxford POS.

You can find a listing of these providers in separate printed directories available from your local Human Resources office or in the "Benefits" section of the Columbia Human Resources web site at [www.hr.columbia/hr/](http://www.hr.columbia/hr/)

### **Oxford POS Network**

Oxford POS offers in-network services in the tri-state area only. Routine or preventive services received outside of the covered service area are treated as out-of-network.

## CIGNA POS Networks

### **Seamless Network**

CIGNA's own network (as listed on their web site) consisting of providers in the tri-state area.

### **Networks in Other States**

There are limited networks available through CIGNA POS for individuals who live/work outside of the tri-state area. Currently these include networks in Pennsylvania (Philadelphia), Arizona and Massachusetts.

The need for additional networks is periodically reviewed, but we cannot guarantee that they can or will be added. Please contact Benefits and Compensation, at the Morningside HR location, to discuss additional network needs.

### **"Guesting" Services**

For dependent children who attend schools or universities outside of the tri-state area, CIGNA offers the ability, when a network is available, to be treated "in-network" for services in those areas only. (Tri-state services received would then be considered "out-of-network.") Please contact CIGNA directly to discuss "guesting" services.

## Plans

### **Aetna HMO**

1-800-323-9930  
[www.aetna.com](http://www.aetna.com)

### **CIGNA Modified Indemnity**

1-800-CIGNA24  
[www.cigna.com/healthcare](http://www.cigna.com/healthcare)

### **CIGNA POS**

1-800-CIGNA24  
[www.cigna.com/healthcare](http://www.cigna.com/healthcare)

### **HIP HMO**

1-800-HIP-TALK  
[www.hipusa.com](http://www.hipusa.com)

### **Oxford POS**

1-800-760-4566  
[www.oxhp.com](http://www.oxhp.com)

## Comparison of Medical Plans

	<b>CIGNA POS In-Network</b>	<b>Out-of-Network</b>	<b>Oxford POS Plan In-Network</b>	<b>Out-of-Network</b>	<b>CI</b>
<b>Provider Services</b>					
preventive care	100% (no copay)	not covered	100% (no copay)	not covered	no
office visit for illness or injury	\$10 copay	80% after deductible	\$10 copay	80% after deductible	10
<b>Hospital</b>					
inpatient	\$150 per admission	80% after deductible**	\$50 per day copay; maximum \$250 per admission	80% after deductible**	10
emergency room	\$50 copay (waived if admitted)***	\$50 copay (waived if admitted)***	\$50 copay (waived if admitted)***	\$50 copay (waived if admitted)***	10
outpatient (non-surgical)	100%	80% after deductible**	100%	80% after deductible**	10
outpatient surgery	100%	80% after deductible**	100%	80% after deductible**	10
<b>Behavioral Health</b>					
inpatient mental health	\$150 per admission** (up to 60 days per year†)	80% after deductible** (up to 60 days per year†)	\$50 per day copay**; maximum \$250 per admission (up to 60 days per year†)	80% after deductible** (up to 60 days per year†)	10 (u
outpatient mental health	\$10 copay, for up to 10 visits**; \$25 copay for visits 11 to 60** (maximum 60 visits per year); Group therapy: \$10 copay, no visit limit	50% after deductible up to a maximum of 20 visits per year (individual and group therapy combined)	\$10 copay, for up to 10 visits**; \$25 copay for visits 11 to 60** (maximum 60 visits per year)	not covered	no co th 60
inpatient substance abuse	same as inpatient mental health** †	same as inpatient mental health** †	same as inpatient mental health** †	same as inpatient mental health** †	10 (u
outpatient substance abuse	same as outpatient mental health**	same as outpatient mental health	same as outpatient mental health**	not covered	10 (u
<b>Durable Medical Equipment</b>					
durable medical equipment	covered	covered	covered	covered	co
<b>Child Dental for children under 12</b>					
prophylaxis	not covered	not covered	100% (no copay); limit one per year	100% (no copay); limit one per year	no
<b>Infertility Treatment†††</b>					
ART, IVF, GIFT, ZIFT	covered up to \$5,000 per year	covered up to \$5,000 per year	covered up to \$5,000 per year	covered up to \$5,000 per year	co \$5

## Out-of-Pocket Expenses

deductible	none	salary-based (see chart below)	none	salary-based (see chart below)	\$3
coinsurance (% paid by plan)	100% after copay	80%‡	100% after copay	80%‡	10
out-of-pocket limit	not applicable	salary-based (see chart below)	not applicable	salary-based (see chart below)	\$3

### Deductibles for POS Plan Out-of-Network Benefits

<b>Annual Benefits Salary</b>	<b>Annual Deductible</b>	
	<b>Individual</b>	<b>Family</b>
less than \$30,000	\$250	\$750
\$30,000–39,999	\$300	\$900
\$40,000–59,999	\$475	\$1,425
\$60,000–74,999	\$675	\$2,025
\$75,000 or more	\$750	\$2,250

### Out-of-Pocket Limits for POS Plan Out-of-Network Benefits (Includes Deductible)

<b>Annual Benefits Salary</b>	<b>Annual Deductible</b>	
	<b>Individual</b>	<b>Family</b>
less than \$30,000	\$1,000	\$2,000
\$30,000–39,999	\$1,200	\$2,400
\$40,000–59,999	\$1,900	\$3,800
\$60,000–74,999	\$2,700	\$5,400
\$75,000 or more	\$3,000	\$6,000

	<b>CIGNA Modified Indemnity Plan</b>	<b>HIP HMO</b>	<b>AETNA HMO*</b>	
	not covered	\$10 copay	\$10 copay; \$15 after hours	
	100% after deductible	\$10 copay	\$10 copay	
**	100% after deductible	\$200 copay per admission	\$240 copay per admission	
***	100% after deductible	\$25 copay	\$35 copay	
**	100% after deductible	\$10 copay	\$15 copay	
**	100% after deductible	covered	\$75 copay in New York, \$100 copay in other areas	
**	100% after deductible (up to 60 days per year)	\$200 copay, up to 30 days	\$240 copay, up to 35 days	* Benefits are listed for NY State benefit levels only. Some variations may occur due to limitations in other states.
	not covered unless following 15 consecutive days of inpatient care, then 100% after deductible (up to 60 visits per year)	100% up to 60 visits	\$25 copay, up to 20 visits per year	** Precertification required, subject to managed care guidelines.
	100% after deductible (up to 60 visits per year)	\$200 copay up to 30 days rehab and additional 7 days detox	\$240 copay for detox	*** In the case of an emergency, the health plan must be notified within 48 hours.
	100% after deductible (up to 60 visits per year)	\$10 copay, up to 60 visits per year	\$15 copay (rehab limited to 60 visits per year)	
	covered	covered	covered	+ Combined 60-day maximum for inpatient mental health and inpatient substance abuse care.
	not covered	oral exam: \$5 copay every 6 mos.; cleaning: \$10 copay every 6 mos <sup>++</sup>	not covered	
	covered up to \$5,000 per year	2 cycles covered up to \$5,000 per year	covered with no limitation	++ Must use network provider.
				+++ State requirements vary by plan.
	\$3,000 single; \$6,000 per family	none	none	
	100% <sup>‡</sup>	100% after copay	100% after copay	+ For all reasonable and customary costs.
	\$3,000 single; \$6,000 per family	not applicable	not applicable	

## Key Terms

### Deductible

A deductible is the amount of covered expenses that you pay before a plan begins paying any benefits.

### Out-of-Pocket Limit

The out-of-pocket limit is the maximum amount of covered expenses that you must pay in a calendar year. Once you have met your out-of-pocket limit, the plan pays 100 percent of covered reasonable and customary medical expenses.

Out-of-Pocket Expenses at a Glance	You Pay	Plan Pays
up to your deductible	All of the costs	None of the costs
up to your out-of-pocket limit	Some of the costs	Some of the costs
	None of the costs	All of the costs

**Your Contribution for Medical Coverage:** Your pre-tax contribution for medical coverage is based on three factors: (1) the plan you select, (2) the level of coverage you select, and (3) your Annual Benefits Salary. Your Annual Benefits Salary is calculated once a year in December (or on your hire date if you are new), and is the greater of (a) your benefits-eligible salary or (b) your year-to-date Columbia income, including certain approved additional and private practice compensation, as of December 31 of the prior year.

# medical

## 2005 Monthly Pre-Tax Contributions for Medical Coverage

<b>Annual Benefits Salary</b>	<b>Yourself Only</b>	<b>Yourself &amp; Spouse or Same Sex Domestic Partner</b>	<b>Yourself &amp; Child or Children</b>	<b>Family</b>
<b>Below \$35,000</b>				
CIGNA POS and CIGNA International	\$15.00	\$140.00	\$48.00	\$178.00
Oxford POS Plan	32.00	182.00	86.00	238.00
CIGNA Modified Indemnity Plan	55.00	224.00	124.00	298.00
Aetna HMO	30.00	206.00	85.00	266.00
HIP HMO	21.00	191.00	64.00	235.00
<b>\$35,000 to \$39,999</b>				
CIGNA POS and CIGNA International	\$27.00	\$170.00	\$63.00	\$208.00
Oxford POS Plan	47.00	212.00	101.00	268.00
CIGNA Modified Indemnity Plan	67.00	254.00	139.00	328.00
Aetna HMO	46.00	238.00	102.00	300.00
HIP HMO	37.00	224.00	80.00	268.00
<b>\$40,000 to \$44,999</b>				
CIGNA POS and CIGNA International	\$42.00	\$200.00	\$78.00	\$238.00
Oxford POS Plan	62.00	242.00	116.00	298.00
CIGNA Modified Indemnity Plan	82.00	284.00	154.00	358.00
Aetna HMO	62.00	271.00	118.00	333.00
HIP HMO	53.00	256.00	97.00	301.00
<b>\$45,000 to \$59,999</b>				
CIGNA POS and CIGNA International	\$57.00	\$230.00	\$108.00	\$268.00
Oxford POS Plan	77.00	272.00	146.00	328.00
CIGNA Modified Indemnity Plan	97.00	314.00	184.00	388.00
Aetna HMO	79.00	301.00	151.00	360.00
HIP HMO	69.00	289.00	129.00	332.00
<b>\$60,000 to \$99,999</b>				
CIGNA POS and CIGNA International	\$61.00	\$246.00	\$116.00	\$287.00
Oxford POS Plan	82.00	290.00	156.00	350.00
CIGNA Modified Indemnity Plan	101.00	330.00	192.00	407.00
Aetna HMO	82.00	302.00	156.00	361.00
HIP HMO	73.00	290.00	138.00	333.00
<b>\$100,000 to \$174,999</b>				
CIGNA POS and CIGNA International	\$62.00	\$251.00	\$118.00	\$292.00
Oxford POS Plan	83.00	295.00	158.00	355.00
CIGNA Modified Indemnity Plan	102.00	335.00	194.00	412.00
Aetna HMO	83.00	306.00	159.00	365.00
HIP HMO	74.00	291.00	140.00	336.00
<b>\$175,000 and Above</b>				
CIGNA POS and CIGNA International	\$63.00	\$255.00	\$120.00	\$297.00
Oxford POS Plan	84.00	299.00	160.00	360.00
CIGNA Modified Indemnity Plan	103.00	339.00	196.00	417.00
Aetna HMO	84.00	311.00	161.00	371.00
HIP HMO	75.00	292.00	142.00	342.00

**Emergency Services vs. Emergency Medical Expenses While Traveling Internationally:** Should you travel on University business and need to be evacuated or transported to a medical facility, these services are provided through Business Travel Accident Insurance (see page 31). All expenses for medical services outside of the United States should be submitted to your medical plan carrier, as described on this page.

# international medical

## For All Officers Who Travel Internationally for Short Periods of Time

While traveling internationally, you continue to be covered by your medical plan for emergency care services, but you will be unable to use your medical or prescription drug cards to pay for these medical expenses. You must pay the expenses out of pocket and submit claim forms to your carrier for currency conversion (if applicable) and reimbursement to you. Medical plans cannot make payments to foreign providers.

### Plan Contact Numbers for International Travelers

Carriers' normal toll-free numbers are not accessible internationally. Should you or a medical provider need to contact your health plan to authorize or coordinate care, please contact your local HR office for a direct-dial number for your health insurance carrier.

### Evacuation and Repatriation

See page 31 for details.

## Only For Officers of the Law School Who Reside in Budapest, Hungary

If you reside in Budapest, Hungary, your health coverage is through a separate international CIGNA plan. A short summary of the plan is listed below. You receive complete plan details when you enroll.

To enroll, contact your Departmental Administrator.

### Plan Details of CIGNA International Health Coverage

Monthly Contribution	see page 12
Deductible	\$200 individual; \$600 per family
Out-of-Pocket Maximum	\$1,000 individual; \$3,000 per family
Coinsurance	80% after deductible
Hospital Room & Board	hospital's average semi-private charge per day of confinement
Pregnancy	80% after deductible
Private Duty Nursing	80% after deductible
In-Hospital Mental Illness/Substance Abuse	80% after deductible up to a lifetime maximum of 60 days
Out-Patient Mental Illness/Substance Abuse	50% coinsurance to a maximum of 15 visits per calendar year and a lifetime maximum of 80 visits
Skilled Nursing	80% after deductible up to a maximum of 60 days per calendar year (includes extended and convalescent care)
Hospice Care Services	80% after deductible up to a lifetime maximum of \$10,000 and limited to 3 bereavement sessions per lifetime
Home Health Care	80% after deductible up to a maximum of 40 visits per calendar year
Chiropractic Services	80% after deductible up to a \$750 calendar year maximum
Temporomandibular Joint Disorder (TMJ)	80% after deductible up to a \$1,000 lifetime maximum
Routine Nursery	80% after deductible including room and board, physician charges and circumcision for males prior to discharge
Papanicolaou Screening Test	80% after deductible for one test per calendar year for all eligible females over age 18
Prostate Cancer Screening	80% after deductible for one test per calendar year for all eligible males over age 50

### Other Benefits\*

Group Term Life Insurance	\$25,000 flat benefit
Group Accidental Death and Dismemberment Insurance	\$25,000 maximum flat benefit (amount varies depending on injury; see plan for details)

\* If the insured is age 65 or older, but under age 70, Life and AD&D amounts are reduced to 65% of the scheduled amount. These amounts are reduced to 50% for insureds age 70 and older.

# Adoption Assistance Program

# adoption



## About the Adoption Assistance Program

Because the University's health plans cover the medical expenses associated with childbirth, but not the often substantial costs incurred by adoptive parents, Columbia has introduced the Adoption Assistance Program. An eligible officer can request a reimbursement of up to \$5,000 per adoption for qualified expenses incurred on or after the officer's first day of full-time employment. The reimbursement appears in your paycheck.

For the simultaneous adoption of two children, the maximum reimbursement is \$10,000 for the combined expenses. If both you and your spouse/same-sex domestic partner are Columbia officers or non-union support staff members, you are together eligible for a maximum \$5,000 reimbursement per adoption (\$10,000 for a simultaneous adoption of two children).

## Who is Eligible?

Full-time, benefits-eligible officers who are in the process of adopting, or have recently adopted, a child can apply for reimbursement under the Adoption Assistance Program. The adopted child must be under the age of 18 at the time a qualified expense is paid or incurred and may not be the child of the employee's spouse or domestic partner.

If you leave the University, you remain eligible for reimbursement of expenses incurred while you were employed at Columbia, though you must submit your claim within 30 days of your employment end date.

## What Can Be Reimbursed?

"Qualified adoption expenses" are reasonable and necessary adoption fees, court costs, attorney fees, and other expenses directly related to, and whose principle purpose is for, the legal adoption of an eligible child (whether or not the adoption is finalized). These may include:

- public or private adoption agency fees permitted or required under the law of the state having jurisdiction over the adoption
- legal and court fees
- fees for medical and hospital services provided to the child (not otherwise covered by insurance)
- traveling expenses associated with the adoption, including transportation, meals, and lodging
- immigration, child's immunization, and translation fees
- temporary foster care charges provided before placement of the eligible child in the employee's home.

Qualified expenses do not include:

- any expenses that violate state or federal law
- the costs of carrying out any surrogate parenting arrangement
- expenses for the adoption of your spouse's or same-sex domestic partner's child
- costs paid using funds received from any federal, state, or local program
- expenses allowed as a credit or deduction under any other federal income tax rule
- expenses already paid or reimbursed by another employer or other party.

## Applying for Reimbursement

If you would like to apply for reimbursement, please first call the Benefits Office at (212) 870-3074 to discuss your situation. Application forms themselves are available from your Human Resources office and on the web in the "Forms Library" at [www.hr.columbia.edu/hr/](http://www.hr.columbia.edu/hr/)

When you have completed and signed the form, call the Benefits Office again to make an appointment to review the form and related policy information. Acceptable documentation of eligible expenses consists of original itemized bills accompanied by receipts or canceled checks, along with paperwork that demonstrates that a legal adoption is underway or has been finalized or terminated.

You must submit an application for reimbursement within six months of the date an adoption becomes final or the process is terminated.

## Is This Benefit Taxable?

The University will provide the reimbursement in your paycheck without withholding any federal, state, or city taxes. In accordance with IRS requirements, however, FICA and Medicare taxes will be withheld.

You should discuss your tax liability with a tax advisor, as the Economic Growth and Tax Reconciliation Act of 2001 provides adoption-related tax exemptions for some income levels but not for others. More information is available from the Internal Revenue Service in IRS Publication 968, "Tax Benefits for Adoption," available on the web at [www.irs.gov/pub/irs-pdf/p968.pdf](http://www.irs.gov/pub/irs-pdf/p968.pdf)

# Dental Coverage

The Columbia Dental Plan and Columbia Dental Plan Plus offer services provided by a network of faculty and alumni from the Columbia University School of Dental and Oral Surgery who have agreed to charge discounted rates and fees. Both plans are convenient to use, with network offices throughout the metropolitan area. When you go to a participating network dentist, there are no pre-authorizations, claim forms, exclusions, limitations for pre-existing conditions, or deductibles. However, you are not covered for care by a dentist outside the network.

# dental



## Columbia Dental Plan Phone: (212) 305-0763

You must receive care from a dentist listed in the provider directory or a designated facility (see list at right). Under this plan, you receive:

- One free preventive care visit per year for each individual covered
- Free fluoride treatment for children age 12 and under
- 25 percent off the discounted fees for all other services, including:
  - general dental care
  - orthodontics
  - prosthodontics
  - oral surgery (extractions)
  - endodontics (root canal)
  - periodontics (gum treatment)
  - pediatric dentistry
  - emergency dental care.

Call (212) 305-0763 or your local HR office to get a directory of participating dentists.

## Columbia Dental Plan Plus Phone: (212) 305-0763

You must receive care at a designated facility (see list at right) or from a designated Columbia Dental Plan Plus dentist. When you do, preventive and restorative procedures are covered at 100 percent, with all other procedures covered at 50 percent. There is a \$1,250 annual maximum benefit per person. After you reach the annual maximum, you pay 75 percent of the cost for additional covered services.

The services covered at 100 percent are:

- clinical exam/treatment plan
- oral cancer examination
- fluoride treatments
- oral hygiene instruction
- study models
- consultations
- prophylaxis (cleaning)
- all X-rays
- sealants
- amalgams (silver fillings)
- composites (white fillings)
- installation of space maintainer(s)
- nonsurgical periodontal therapy
- injection of antibiotic drugs
- repair or recementing of crowns, inlays, bridgework, or dentures

- relining dentures
- nonsurgical extractions.

There is a lifetime maximum of \$1,250 per person for orthodontia.

If you receive care from a network dentist other than a Plus dentist, you receive the benefits offered in the Columbia Dental Plan.

Call (212) 305-0763 to request a directory of Plus participating dentists.

## Designated Dental Plan Facilities

**Columbia Dental Morningside Associates**  
1244 Amsterdam Avenue  
(near 121st Street)  
New York, NY 10027  
(212) 961-1266

**Columbia Dental North 128 Fort Washington Avenue**  
(near 165th Street)  
Suite 1J  
New York, NY 10032  
(212) 928-1000

**Columbia-Presbyterian Eastside Dental Faculty Practice**  
16 East 60th Street  
New York, NY 10021  
(212) 326-8520

**Columbia Dental Associates**  
630 West 168th Street  
New York, NY 10032  
(212) 305-8618

See the provider directory for other Dental Plan Plus facilities.

## 2005 Monthly Pre-Tax Dental Contributions

	<i>Columbia Dental Plan</i>	<i>Columbia Dental Plan Plus</i>
Yourself only	\$13	\$39
You plus one	Not available	\$72
Family	\$28	\$99

## Information Online

For more information about these plans, please visit the web site at [www.columbiadentalplan.com](http://www.columbiadentalplan.com)

# University Spending Accounts (USAs)

The University Spending Account (USA) program lets you set aside money from each paycheck on a pre-tax basis to cover certain medical and dental expenses (not otherwise covered by health insurance) and dependent day care expenses.

**Remember:** You must enroll within 30 days of your hire date to take advantage of this tax-deferred plan.

You Must  
Re-Enroll  
Each Year!

## medical/dental USAs

### About Medical/Dental USAs

Money that you set aside in a Medical/Dental USA can be used for certain health care expenses for which your medical or dental plan does not reimburse you. Generally, if the IRS considers the expense eligible for a medical tax deduction, it will qualify as an expense that can be covered with tax-free money from your USA. For more details, please refer to IRS Publication 502, available on the web at [www.irs.gov/pub/irs-pdf/p502.pdf](http://www.irs.gov/pub/irs-pdf/p502.pdf)

### Who Can Be Covered

Only you can participate, but you may be reimbursed for expenses incurred by anyone you declare as a dependent on your federal income tax return.

### What Can Be Reimbursed

You can be reimbursed for health care expenses that would qualify as tax deductions on your federal tax return. This includes your out-of-pocket expenses for services covered by any medical or dental plan such as:

- deductibles and copayments for hospital, medical, dental, vision or auditory services
- hospital, medical, and dental expenses that exceed the maximum plan benefit
- copayments for prescription drugs.

It also includes other expenses that your health plans do not reimburse, including travel costs associated with medical care, contact lenses, hearing aids, and certain over-the-counter items. **Note:** To be reimbursed for over-the-counter items, you must provide a proof of purchase. For some items, you must additionally provide a signed statement from your provider confirming the medical necessity of the item.

Please refer to the list of IRS-approved eligible expenses available at all Human Resources offices and on the web at [www.hr.columbia.edu/hr/](http://www.hr.columbia.edu/hr/) under "Benefits."

### Is A Medical/Dental USA Right For You?

If the amount of your total medical expenses is less than 7.5 percent of the adjusted gross income that you report on your federal income tax return, then a Medical/Dental USA could be beneficial to you.

If you itemize on your federal tax return and your medical expenses are greater than 7.5 percent of your adjusted gross income, you may be better off deducting your expenses directly from your income tax and forgoing a USA.

As with any tax-deferral plan, you may wish to consult with your personal tax advisor to determine the best plan for you.

### USAs: General Considerations and Procedures

#### How Much Should You Set Aside?

The minimum amount you can set aside annually in each account is \$120. The maximum is \$5,000 for each account.

Whatever amount you contribute, you must use all of your 2005 contribution by December 31, 2005. The IRS requires that any money remaining in your USA at the end of the calendar year be forfeited. Therefore, be sure to carefully estimate what your health care expenses will be for 2005.

#### Filing Claims for Reimbursement

Claims are processed by Employee Benefit Plan Administration, Inc. (EBPA). Each time you have an eligible expense, you should submit a claim form along with the receipt for the expense to EBPA.

(The minimum amount you can claim for reimbursement is \$25 per submission.) Copies of the USA Reimbursement Request Form are available from your local Human Resources office or and on the web in the "Forms Library" at [www.hr.columbia.edu/hr/](http://www.hr.columbia.edu/hr/)

Note that if you terminate employment, you may only submit claims for expenses incurred on or before your termination date.

Your completed claim form should be sent to:

**EBPA**  
Reimbursement Account  
P.O. Box 1140  
Exeter, N.H. 03833-1140

If you have a question about your claim, you should contact EBPA at 1-800-258-7298.

**Direct Deposit:** You can arrange to have your reimbursements deposited directly into the bank account of your choice. Please contact EBPA for this convenient service.

### Important Filing Deadlines for USAs and T/PRP Accounts

#### 2004 Claims

You have until March 31, 2005 to submit claims for expenses incurred in 2004.

#### 2005 Claims

You have until March 31, 2006 to submit claims for expenses incurred in 2005.



# dependent day care **USA**s

## About the Dependent Day Care USA

The Dependent Day Care USA enables you to set aside money on a pre-tax basis that you can use to cover certain costs associated with providing your dependent(s) with day care while you and your spouse are at work.

## Who Can Be Covered?

Only you can participate, but you may be reimbursed for expenses incurred on behalf of:

- any dependent child under age 13 (that is, up to and including their 13th birthday)
- any other dependent—including a parent, spouse or spouse's child—who is physically or mentally unable to care for themselves. Under federal regulations, expenses incurred by or on behalf of domestic partners and their children cannot be reimbursed under this plan (unless they are legal tax dependents).

## What Can Be Reimbursed?

You can be reimbursed for expenses for which the primary purpose is to assure your dependents' well-being and safety. You *cannot* be reimbursed for the expense of providing education, food or clothing.

If you are married, you can be reimbursed for dependent day care only if your spouse works outside of the home, is looking for work outside of the home, is a full-time student for at least five months during the year, or is incapable of self-care.

IRS-approved allowable expenses include:

- the cost of having a person come to your home to care for your eligible dependents, and the taxes you may pay on that person's wages

- the cost of dependent care given outside your home, such as in someone else's home, or in a child or adult day care center
- nursery school or kindergarten expenses (*but not grade-school tuition expenses*)
- the cost of after-school programs or summer day camp (*overnight camps are not considered reimbursable expenses*).

**Reimbursement claims must be accompanied by the provider's name and Social Security/tax I.D. number.**

## Is The Dependent Day Care USA Right For You?

The only way to know for sure if the Dependent Day Care USA is right for you is to compare the tax savings you get from the USA to the tax credit you're eligible for on your federal income tax return (see Profile at right).

To determine your tax credit, take the government's eligible expense allowance (\$3,000 for one dependent, \$6,000 for more than one) and multiply it by the following percentage:

Adjusted gross income	Percentage
\$15,000 or less	35
\$15,001-\$17,000	34
\$17,001-\$19,000	33
\$19,001-\$21,000	32
\$21,001-\$23,000	31
\$23,001-\$25,000	30
\$25,001-\$27,000	29
\$27,001-\$29,000	28
\$29,001-\$31,000	27
\$31,001-\$33,000	26
\$33,001-\$35,000	25
\$35,001-\$37,000	24
\$37,001-\$39,000	23
\$39,001-\$41,000	22
\$41,001-\$43,000	21
\$43,001 or more	20

## Dependent Day Care Profile

This profile is based on 2004 tax rates and assumes you are married, file jointly, claim two exemptions, do not itemize deductions, and have no other source(s) of income.

In the following example, a married couple has two children and an annual household income of \$60,000. The couple incurs \$5,000 each year in dependent day care costs.

In this case, it makes more sense to use the Dependent Day Care USA, since it saves the couple \$1,132 versus the \$1,000 tax credit.

### Tax Credit Option

Based on \$5,000 in day care expenses and a 20 percent tax credit (allowed for adjusted gross incomes of more than \$43,000), the result is:

	\$5,000.00
	X 0.20
Tax credit	\$1,000.00

### USA Option

A. tax on \$60,000 (gross income)	\$9,560.00
B. tax on \$55,000 (gross minus \$5,000 day care)	- 8,428.00
C. tax savings (A minus B)	\$1,132.00

# Transit/Parking Reimbursement Program (T/PRP)

T/PRP accounts allow you to set aside pre-tax dollars to pay for eligible commuting expenses. **Remember:** You must enroll within 30 days of your hire date. **Effective Date:** Your T/PRP benefit is effective on the first of the month following the date you enroll, not on your benefits effective date. **NEW: Unused 2004 balances will no longer be refunded to you as cash, but will be rolled over into active 2005 accounts.**

## transit



### T/PRP Overview

The T/PRP consists of two accounts: a transit account and a parking account. The T/PRP accounts allow you to contribute pre-tax dollars to one or both accounts to pay for certain eligible transit and parking expenses. By contributing on a pre-tax basis, you save money on FICA taxes and on federal and local (and possibly state) income taxes.

#### Other Limits

Under IRS regulations, if you do not use the entire amount you allocated for the month, it cannot be carried over to the following month. For example, you may set aside \$100 per month in your T/PRP account to cover your commuting expenses. If you take the month of July as vacation, however, you cannot apply its \$100 to your August expenses.

At the end of a calendar year, you may have an unused balance in your account. This money automatically rolls over into your account for the following year. (The money is not transferred until after the March 31 deadline for filing reimbursement claims for expenses incurred during the previous year.)

For example, if your expenses are \$100 less in 2004 than you anticipated, the unclaimed \$100 will be placed in your 2005 T/PRP account after April 1, 2005.

#### Changes During the Year

You cannot make changes during the year unless you have a change in your work location or your home residence, or if you permanently change the way you commute. A letter stating your change of address or new mode of transportation is required within 31 days of your life status change.

### Transit: What's Covered?

IRS-approved eligible transit expenses include:

- Public Transit. Commuting expenses on any public transit commuter system, including:
  - New York City Transit Authority (NYCTA) buses and subways
  - Long Island Railroad (LIRR)
  - Metro North Commuter Railroad (MNCRR)
  - New Jersey Transit (NJT)
  - Staten Island Rapid Transit (SIRT)
  - Port Authority Trans-Hudson Corp. (PATH)
  - Commuter and suburban express bus services
  - Amtrak®
  - Certain ferry and registered van pool services.

### What's Not Covered?

The following expenses are not covered under the T/PRP:

- transit expenses of your family members
- amounts exceeding the maximum allowable monthly limit
- taxi and limo services
- airfare
- bridge, tunnel, and highway tolls, including E-Z Pass.

### How Much Can You Contribute?

You may contribute:

- any amount from \$10 up to \$100 per month to the transit account

### Reimbursement Process

#### The MBI Debit Card

If you enroll for a transit account for 2005, you will receive an "MBI Debit Card." This card allows you to pay for your transit expenses through any vendor that sells commuter tickets or Metrocards (and accepts Mastercard).

You do not need to submit claim forms to be reimbursed for your monthly transit election. Instead, you use the debit card to pay for your transportation, and the card automatically deducts the expense from your T/PRP account.

For example, if you elect a \$70 transit account, you receive a debit card that allows you to charge \$70 worth of transit expenses each calendar month in 2005. **Remember:** Your balance does not carry over from month to month.

#### Paper Claims

You may choose to continue to submit paper claim forms for reimbursement. Copies of the *T/PRP Reimbursement Form*, available from your local Human Resources office or on the web in the "Forms Library" at [www.hr.columbia.edu/hr/](http://www.hr.columbia.edu/hr/), should be sent to:

#### EBPA

Reimbursement Account  
P.O. Box 1140  
Exeter, N.H. 03833-1140

If you have a question about your claim, you should contact EBPA at 1-800-258-7298.

**Direct Deposit:** You can arrange to have your reimbursements deposited directly into the bank account of your choice. Please contact EBPA for this convenient service.

**NEW FOR 2005:**

- **A new monthly limit: \$195!**

# parking

You Must  
Re-Enroll  
Each Year!



## Parking: What's Covered?

IRS-approved eligible parking expenses include:

- Parking. Cost of parking at any:
  - commercial parking lot near your work location
  - location where you board mass transit — e.g., parking at a train station.

If you pay to park at locations where you board mass transit, you can participate in both the transit and parking accounts concurrently, up to the maximum of each account.

## What's Not Covered?

The following expenses are not covered under the T/PRP:

- parking expenses of your family members
- amounts exceeding the maximum allowable monthly limit
- parking at or near your residence
- free parking

## How Much Can You Contribute?

You may contribute:

- any amount from \$10 up to \$195 per month to the parking account.

## Reimbursement Process

Eligible expenses are reimbursed upon submission of a claim form. The minimum amount you can claim for reimbursement is \$10 in a given month. Copies of the *T/PRP Reimbursement Form* are available from your local Human Resources office or on the web in the "Forms Library" at [www.hr.columbia.edu/hr/](http://www.hr.columbia.edu/hr/)

Your completed claim form (along with your receipts or other proof you have paid your parking expense) should be sent to:

**EBPA**  
Reimbursement Account  
P.O. Box 1140  
Exeter, N.H. 03833-1140

If you have a question about your claim, you should contact EBPA at 1-800-258-7298.

**Direct Deposit:** *You can arrange to have your reimbursements deposited directly into the bank account of your choice. Please contact EBPA for this convenient service.*

## Columbia Parking

If you are a commuter and park in a University-owned lot or at Presbyterian Hospital, you are already paying for parking through a pre-tax deduction. Therefore, you should not sign up for a T/PRP parking account — unless you also commute to a non-University owned lot, in which case your T/PRP deduction plus your monthly University parking bill cannot exceed the \$195 monthly maximum.

## Important Filing Deadlines for USAs and T/PRP Accounts

### 2004 Claims

You have until March 31, 2005 to submit claims for expenses incurred in 2004.

### 2005 Claims

You have until March 31, 2006 to submit claims for expenses incurred in 2005.

# life insurance

## Group Term Life Insurance

Financial security for your loved ones when you die is an important consideration. As you think about life insurance alternatives, you may want to consider enrolling in group term life insurance through the University. You may enroll when you are first hired or during the annual Open Enrollment period.

If you choose to purchase life insurance through the University, the cost of coverage is conveniently deducted from your pay on an after-tax basis.

In the event of your death, your beneficiary or beneficiaries receive a lump-sum payment equal to the amount of your coverage.

However, should you be diagnosed with a terminal illness, you may apply for an accelerated benefit. Any amount paid under this provision would reduce the benefit paid to your beneficiary or beneficiaries at the time of your death. For additional information about this feature, please contact your local HR office.

## Coverage Levels and Costs

You may elect coverage in the amount of one, two, three, four, five, or six times your annual base salary (as calculated on January 1 each year and rounded up to a multiple of \$1,000). The maximum coverage allowed is \$1,000,000.

You pay a monthly group rate premium per \$1,000 of coverage based on your current age, as shown in the accompanying chart.

Although your coverage level is determined on January 1 each year, when you reach a significant birthday during the year (e.g., 25, 30, 35), you move to a new contribution level. Your premiums increase the paycheck following your birthday.

## Cost of Coverage

<b>Age at paycheck</b>	<b>Monthly cost per \$1,000</b>
less than 25	0.05
25 to 29	0.06
30 to 34	0.08
35 to 39	0.09
40 to 44	0.10
45 to 49	0.15
50 to 54	0.23
55 to 59	0.42
60 to 64	0.51
65 to 69	0.70
70 to 74	1.00
75 and older	1.17

## Example

An employee, age 41, with an annual base salary of \$60,000, elects a life insurance option of three times annual salary (\$180,000). The monthly premium cost is calculated as follows:

\$180.00	(amount of life insurance divided by 1,000)
X 0.10	(from rate table, age 41)
\$18.00	total monthly cost

## Waiver of Premium

In the event that you become disabled, you may apply for a "waiver of premium," which means that your life insurance continues at no cost to you provided that you meet the plan's definition of long-term disability and became disabled before age 60.

For additional information, contact your local HR office.

## Evidence of Insurability

If you are a new hire and you select a coverage level in excess of three times your salary or in excess of \$500,000, you will also need to complete an Evidence of Insurability form and be approved by the insurance company.

If you wish to increase the level of your coverage during Open Enrollment, you will need to complete an Evidence of Insurability form and submit it to Human Resources.

Your current level of coverage will remain in effect, and your new coverage level will become effective only after we have received approval from the insurance company.

# Long-Term Care Insurance

Long-term care insurance helps protect you and your family from the costs associated with nursing home or adult care services. **NEW for 2005: Increased daily maximum benefit amounts!**

# long-term care

Long-term care insurance provides financial security in the event you are unable to care for yourself and need long-term care. Since traditional medical plans and Medicare don't cover most long-term care expenses, long-term care insurance picks up where the other plans leave off and offers valuable financial protection.

## Who is Eligible?

You, your spouse, your same-sex domestic partner, your parents, or your parents-in-law may apply individually for this coverage. You do not need to apply or be approved for coverage in order for your family members to apply.

## Coverage

You can elect a daily maximum benefit (DMB) of \$115, \$230, \$345, or \$465. Depending on the type of care received, the covered individual will receive up to a certain percentage of the daily benefit elected, subject to the lifetime maximum benefit:

- nursing home or alternative care facility: 100% of DMB
- home health care or adult day care services: 60% of DMB
- informal care (i.e. light housekeeping, shopping), up to 30-day annual maximum: 25% of DMB.

In addition, your long-term care insurance is portable. If you leave the University, you can maintain your insurance while paying the same premium as other University employees.

## Your Cost

Your cost for coverage is based on the plan you choose and your age when you first enroll. The younger you are when you enroll, the lower your cost. For rate information, please contact John Hancock, the insurer of the Columbia University Long-Term Care Insurance Plan (see below).

The cost of coverage for you and your spouse or same-sex domestic partner is conveniently deducted from your paycheck. For parents or parents-in-law, the cost of coverage can be automatically deducted from their bank account or billed directly by John Hancock.

## Evidence of Insurability

You do not need to provide Evidence of Insurability if you elect long-term care insurance coverage within 60 days of when you first become eligible. If you decide to elect coverage at a later date, you'll need to provide Evidence of Insurability and must be approved by the insurance company.

If your spouse or same-sex domestic partner enrolls within 60 days of when you first become eligible, they may complete a shortened enrollment form. Parents and parents-in-law, and anyone who enrolls after the 60-day period, are required to provide Evidence of Insurability and must be approved by the insurance company.

## How to Enroll

To enroll in the Long-Term Care Insurance Plan, or for more information, call John Hancock directly at 1-800-964-3039 or log on to their web site at <http://columbia.jhancock.com> (username: columbia; password: mybenefit) and request an enrollment kit. You'll need to complete the appropriate forms and return them to John Hancock for approval.

## Some Facts About Long-Term Care

- The younger you are when you first buy long-term care coverage, the lower your premium will be over time.
- This coverage begins to pay benefits 90 days after it is determined that the insured is either cognitively impaired or cannot perform two out of six activities of daily living (bathing, dressing, eating, toileting, moving from chair to bed, and maintaining continence).
- Once you elect the long-term care benefit, your coverage is guaranteed as long as you continue to pay your premium. If you stop paying your premium after three years of being enrolled in the plan, you'll still be eligible to receive a reduced benefit.
- The maximum the plan will pay during your lifetime while covered under the plan is 1,825 x the daily maximum benefit.
- If you die before age 65, while covered under the plan, your beneficiary will receive a benefit equal to your premium payments, less any benefits received.
- After age 65, your death benefit under the plan will be reduced by 20% each year until age 70.
- You are able to keep this coverage even if you leave the University.

# Retirement Planning

The Retirement Plan and the supplemental Tax-Deferred Annuity (TDA) Plan, in addition to your Social Security, are meant to provide a major source of income during your retirement.

# retirement

## Retirement Plan Participation

Once you are eligible, Columbia University makes monthly contributions to an account on your behalf. The contributions are based on your age, salary, and years of eligible service (see the table below), and do not require contributions by you.

If you are a senior faculty member or senior officer (Morningside grade 14 and above, Health Sciences grade 106 and above), you participate in the Retirement Plan from the first day of the month coincident with or following your appointment with the University. See the box at right for the full list of officers who are immediately eligible.

If you are a junior faculty member or junior officer (Morningside grade 10–13, Health Sciences grades 103–105), you participate in the plan from the first day of the month coincident with or following the date you complete two years of service.

## Officers Immediately Eligible for Participation

Officers in the following positions are immediately eligible for participation in the University's retirement plan:

- Officer of Administration (grade 14 & up)
- Assistant Professor
- Associate Professor
- Associate & Coach (dual position) in Physical Education
- Associate Research Scholar
- Associate Research Scientist
- Clinical Professor of Law
- Associate Clinical Professor of Law
- Assistant Clinical Professor of Law
- Head Coach
- Librarian II, III, IV
- Professor; Research Associate
- Research Scholar
- Research Scientist
- Senior Research Scholar
- Senior Research Scientist
- Senior Staff Associate
- Visiting Professor as of 7/1/87
- Research Staff Associate (per old academic listings)

### Medical Center and Harlem Hospital Center:

- Officer of Administration (grade 106 & up)
- Assistant Clinical Professor
- Assistant Professor of Clinical (Dept)
- Associate Clinical Professor
- Clinical Professor
- Professor of Clinical (Dept.)
- Assistant Attendings
- Associate Professor of Clinical (Dept)

## Making Investment Elections

You must complete Columbia's Investment Direction Form, along with the application form from the investment carrier you select (see box on facing page), within 30 days of your eligibility. Otherwise, the University's contributions will be placed by default into a Vanguard Money Market account.

You may change your investment carrier once each year during the Open Enrollment period.

## University Contributions

Federal law limits the amount of salary that can be used to determine contributions in any calendar year to your Retirement Plan account. The annual limit for 2004 was \$205,000. This limit may increase in future years.

For periods beginning on or after July 1, 1994, the University's contribution will also include 15 percent of guaranteed additional income from clinical activities for officers at the Medical Center and 10 percent for UDA members at Harlem Hospital.

## Access

Because these accounts are meant for your retirement, you have no access to these funds while you are employed. When you retire, you'll have several options for receiving or investing the accrued University contributions.

## Retirement Plan Contributions

Once you are eligible (and have completed your enrollment forms), the University contributes to your selected Retirement Plan carrier every pay period, according to the following schedule of annual contributions.\*

Years of Service	Age	University Contribution
15+ years	55+	12.5 percent of your salary up to the Social Security wage base,† then 17.5 percent of your salary above the wage base
5+ years or tenured	40+	7.5 percent of your salary up to the Social Security wage base,† then 12.5 percent of your salary above the wage base
5+ years or tenured	less than 40	5 percent of your salary up to the Social Security wage base,† then 10 percent of your salary above the wage base
Less than 5 years and untenured	any age	5 percent of your salary up to the Social Security wage base,† then 10 percent of your salary above the wage base

\* If you were hired on or before June 30, 1993, other contribution formulas may have applied. Contact Faculty and Staff Services at (212) 870-3074 for more information.

† The 2004 Social Security wage base was \$87,900. It increases every January 1.

Remember that you have two opportunities any time during the year to change the amount of your TDA contributions or your investment carrier.

# tdas



## Your Supplemental Tax-Deferred Annuity (TDA)

A TDA lets you invest pre-tax money from every paycheck in an account designated for your retirement. When you retire, you can withdraw the money as needed or use the account balance to purchase an annuity that provides you with retirement income.

You may invest your TDA contributions with The Calvert Group, TIAA-CREF or The Vanguard Group (see below).

## How to Participate

You can begin participating at any time. Simply complete Columbia's Salary Reduction Agreement form and an application for the investment carrier(s) of your choice.

You can set aside a percentage of your income or a specific dollar amount on a pre-tax basis. The monthly minimum is \$25. The annual maximum in 2005 is \$14,000.

Officers over age 50 may contribute an additional \$4,000 in 2005.

For individuals with 15 or more years of service, additional contributions may be allowed. Please consult with Benefits and Compensation, in the Morningside HR office, for more information.

### Individual Limit Calculations

Once a year, usually in November, participants in the TDA program receive individual calculations of the maximums they can contribute in the following year. For additional information about your individual maximum, you may also contact TIAA-CREF at 1-800-842-2733.

**Important Note:** *It is your responsibility to stay within the IRS's legal yearly limit. The University is not aware of any contributions that you might have made through other employers during the calendar year.*

## Making Changes

You can change your investment carrier and/or your level of contributions twice a year.

### To Change Investment Carriers

Complete Columbia's *Salary Reduction Agreement* form and an application for the new investment carrier(s) of your choice. Please submit the form to your local Human Resources office.

### To Change Your Contribution Amount

Complete Columbia's *Salary Reduction Agreement* form. Please submit the form to your local Human Resources office. You have two opportunities, any time during the year, to adjust your election.

### To Move Money from One Fund to Another within the Same Carrier

Contact the carrier directly at the toll-free numbers listed on page 22. You can switch funds within a carrier as many times as you choose.

## Access

Because TDAs offer significant tax deferral advantages, the IRS places restrictions on access to these funds. If you withdraw TDA money prematurely (i.e., before age 59 1/2 and before termination of employment), you face severe tax penalties.

When you do begin to receive money in retirement or as a withdrawal, you will be taxed in that year for your distribution.

Loans and hardship withdrawals are available under certain conditions and certain plans. Please contact your local HR office for more information.

## Investment Carriers

You may invest the University Contribution and your own TDA contributions (see facing page) with The Calvert Group, TIAA-CREF or The Vanguard Group. Within these three carriers, there are over 65 investment choices available.

### TIAA-CREF

1-800-842-2776  
[www.tiaa-cref.org](http://www.tiaa-cref.org)

### The Vanguard Group

1-800-523-1188  
[www.vanguard.com](http://www.vanguard.com)

### The Calvert Group

1-800-368-2745  
[www.calvertgroup.com](http://www.calvertgroup.com)

# Tuition Programs

Columbia's devotion to academic achievement is expressed through several tuition benefit programs that make quality education affordable to its officers and their families. This includes scholarships to other institutions for primary-school-age and college-age children.

# tuition

## Tuition Exemption

### Officers

If you are in an undergraduate or graduate degree program at Columbia, Barnard, or Teachers College, the University pays your tuition for up to 15 points per term, with the following exception: if you are an officer of research or instruction in a professorial rank (or research equivalent), your tuition exemption covers only one course per term.

If you are not in a degree program, but take classes as a special student, your tuition exemption covers one course per term at Columbia. Non-degree courses at Barnard or Teachers College are not included.

(Postdoctoral research scientists/scholars are only eligible for one course per session in the American Language Program. Postdoctoral fellows are not eligible for tuition benefits.)

### Spouses and Same-Sex Domestic Partners

If your spouse or same-sex domestic partner takes undergraduate courses at Columbia (not Barnard), your benefit covers 100 percent of their tuition whether or not they are part of a degree program.

The amount of tuition covered for graduate programs or courses varies according to when you were hired:

- *Before July 1, 1987:* 100 percent.
- *Between July 1, 1987 and June 30, 1993:* 7 points per term.
- *After June 30, 1993:* None.

**Note:** Regardless of your date of hire, graduate tuition is not available for Columbia's Law School or Teachers College.

### Dependents

If your college-age child, or that of your spouse or same-sex domestic partner, is in an undergraduate program at Columbia or Barnard, your benefit covers 100 percent of their tuition, limited to eight

terms at Barnard. If they are not in a degree program, your benefit covers 100 percent of their undergraduate courses at Columbia or Barnard as long as they are a candidate in good standing at another college or need special preparation to enter college or graduate school.

The amount of tuition covered for graduate programs or courses varies according to when you were hired:

- *Before July 1, 1987:* 100 percent .
- *Between July 1, 1987 and June 30, 1993:* 50 percent.
- *After June 30, 1993:* None.

**Note:** Regardless of your date of hire, graduate tuition is not available for Columbia's Law School or Teachers College.

### Taxation

*Officers, spouses, and children of officers or spouses:* As of January 1, 2002, the value above \$5,250 per calendar year of tuition exemption for graduate courses—except those that are job-related or taken as part of an undergraduate degree program—is considered taxable income, and therefore Columbia will withhold taxes. Undergraduate courses are not considered taxable income unless they are taken as part of a graduate degree program.

For more information about job-related tax exemptions, see the *Job-Related Graduate Course Certification* booklet available from Human Resources or on the web under "Benefits" at [www.hr.columbia.edu/hr/](http://www.hr.columbia.edu/hr/)

*Same-sex domestic partners and their children:* The value of tuition exemption for courses, both undergraduate and graduate, is considered taxable income by the Federal Government, and therefore Columbia will withhold taxes from the Officer.

## Dependent Scholarships

### College

If your child, or that of your spouse or same-sex domestic partner, attends a college other than Columbia or Barnard,

a College Tuition Scholarship (CTS) pays for 50 percent of their undergraduate tuition (100 percent if both parents are eligible Columbia officers) for up to eight semesters or the equivalent.

For more information, see the *College Tuition Scholarship* brochure, available from Human Resources and on the web under "Benefits" at [www.hr.columbia.edu/hr/](http://www.hr.columbia.edu/hr/)

### Primary School

If you reside in New York City and your child, or that of your spouse or same-sex domestic partner, attends a private primary school within the five boroughs, a Primary Tuition Scholarship (PTS) pays a portion of their tuition. The amount varies with your family income, from 10 percent of tuition if your family earns \$60,000 or more to 35 percent if your family earns \$35,000 or less.

### The School at Columbia

The PTS program pays 50 percent of your child's tuition for grades K–6 at The School at Columbia University. (In Fall 2004, 50 percent of The School's tuition equaled \$11,550.)

If your child was enrolled as of Fall 2003 in a grade from K through 4 in one of the following schools—the Cathedral School, the Bank Street School for Children, or St. Hilda's and St. Hugh's School—they are also eligible for a PTS equaling 50 percent of their school's tuition up to a maximum of \$11,500. (This does not apply to students enrolled in K–4 for the first time after Fall 2003.)

As with all private schools, admission to The School is a separate process not related to the PTS program. For more information, contact the Admissions Office at (212) 851-4215 or visit The School's web site at <http://theschool.columbia.edu>

For more information, see the *Primary Tuition Scholarship* brochure, available from Human Resources and on the web under "Benefits" at [www.hr.columbia.edu/hr/](http://www.hr.columbia.edu/hr/)

# tuition



## Tuition Benefits at a Glance

### For You\*

	<i>Undergraduate Courses</i>	<i>Graduate Courses**</i>
<b>Degree Programs</b> at Columbia, Barnard, and Teachers College	15 points per term. Officers of instruction or research with a professorial rank or research equivalent are limited to one course per term	15 points per term. Officers of instruction or research with a professorial rank or research equivalent are limited to one course per term
<b>Non-Degree Courses</b> at Columbia only	One course per term	One course per term

### For Your Spouse/Same-Sex Domestic Partner†

	<i>Undergraduate Courses</i>	<i>Graduate Courses††</i>
<b>Degree Programs or Non-Degree Courses</b> at Columbia (except the Law School), <b>not</b> at Barnard or Teachers College	100% tuition exemption	Officer hired: <ul style="list-style-type: none"> <li>• <i>Before 7/1/1987</i>: 100% tuition</li> <li>• <i>7/1/1987–6/30/1993</i>: 7 points per term</li> <li>• <i>After 6/30/1993</i>: No benefit</li> </ul>

### For Your Children (or Those of Your Spouse/Same-Sex Domestic Partner)†

	<i>Undergraduate Courses</i>	<i>Graduate Courses††</i>
<b>Degree Programs</b> at Columbia (except Law School) and Barnard, <b>not</b> at Teachers College	100% tuition exemption	Officer hired: <ul style="list-style-type: none"> <li>• <i>Before 7/1/1987</i>: 100% tuition</li> <li>• <i>7/1/1987–6/30/1993</i>: 50% tuition</li> <li>• <i>After 6/30/1993</i>: No benefit</li> </ul>
<b>Non-Degree Courses</b> at Columbia (except Law School) and Barnard, <b>not</b> at Teachers College	100% tuition exemption if the student is a candidate in good standing at another college or needs special preparation to enter college or graduate school	Officer hired: <ul style="list-style-type: none"> <li>• <i>Before 7/1/1987</i>: 100% tuition</li> <li>• <i>7/1/1987–6/30/1993</i>: 50% tuition</li> <li>• <i>After 6/30/1993</i>: No benefit</li> </ul>

Colleges Other Than Columbia or Barnard See page 24

Primary Schools (NYC Private) See page 24

\* Postdoctoral research scientists/scholars are limited to one course per session in the American Language Program. Postdoctoral fellows are not eligible for tuition benefits.

\*\* As of January 1, 2002, the value above \$5,250 of tuition exemption for graduate courses taken by the employee (*not* by spouses, same-sex domestic partners or dependents)—except those that are job-related or taken as part of an undergraduate program—is considered taxable income, and therefore Columbia will withhold taxes.

† The value of tuition exemption for your same-sex domestic partner and their children is considered taxable income by the Federal Government, and therefore Columbia will withhold taxes. This applies to both undergraduate and graduate courses.

†† Teachers College and Columbia University Law School courses are not included in this benefit. Officers of the Law School are also not entitled to the tuition benefit.

## Information Technology Program (ITP) Benefit for Officers

The Information Technology Program (ITP), formerly the Computer Technology and Applications Program, offered through the School of Continuing Education, is designed to prepare highly motivated adults for professional advancement in the information technology field. Students receive a certificate upon the successful completion of the program. Most take two courses per 15-week term—there are three terms in a year—and complete the program in four terms.

If you are admitted to the program, you may apply for a special tuition benefit that pays 75 percent of your tuition. Each term, this benefit is available to 15 additional eligible officers—that is, those who are eligible for graduate tuition benefits, have been on the payroll for at least six months as a full-time salaried officer, and have been accepted into the program by the School of Continuing Education.

For more information on the Information Technology Program, visit the Continuing Education web site at [www.ce.columbia.edu/](http://www.ce.columbia.edu/)

More information about the tuition benefit is on the web under “Benefits” at [www.hr.columbia.edu/hr/](http://www.hr.columbia.edu/hr/)

# Disability Income

Columbia's Salary Continuation Plan and Long-Term Disability (LTD) insurance provide you with the security of knowing that you'll be protected financially in the event you become ill or injured and cannot work.

# disability income

## Salary Continuation and LTD

You are automatically covered under the Salary Continuation Plan and the Basic Long-Term Disability (LTD) Plan at no cost to you. You may elect to purchase additional LTD coverage under the Optional Plan. You may enroll within 30 days of your hire date or during the annual open enrollment period each year.

### Basic Coverage

If you are unable to work due to certified illness or injury:

- under the Salary Continuation Plan, you receive 100 percent of your base salary (as calculated and "frozen" on January 1 of each year) for up to six months in any 12 month period.
- for the first six months following coverage under the Salary Continuation Plan, you receive a benefit of 66 2/3 percent of base salary, up to \$2,500 per month
- the monthly benefit then decreases to 60 percent of base salary, up to \$2,500 per month
- the duration of the benefit varies according to your age at the commencement of the disability.

## Optional LTD Coverage

If you want a higher level of LTD coverage (in addition to the University-provided Basic LTD coverage), you can elect the Optional Plan. Under this plan, you can receive up to \$15,000 per month. **Note:** *Because the actual amount you receive is a percentage of your pay, this coverage may not make sense for you if your annual base salary is under \$50,000.*

Also as part of the Optional Plan, you have the following benefits:

- University contributions to the Retirement Plan continue while you receive LTD benefits
- approved additional compensation is considered when your benefit is calculated
- after you receive 12 months of benefit payments, your monthly benefit increases by 3 percent each year to reflect cost of living increases
- you have the option of converting your coverage to an individual policy if you leave the University.

The cost of coverage is deducted from your pay on an after-tax basis. You'll pay a monthly contribution per \$100 of base salary. The cost of coverage is \$.22 per \$100 of monthly base salary (plus \$.52 per \$100 of any approved additional compensation). This plan covers only the first \$300,000 of your total salary.

## Evidence of Insurability

If you do not select Optional insurance coverage when you first become eligible and decide to elect it later during annual open enrollment, you'll need to complete an Evidence of Insurability form and be approved by the insurance company.

### Salary Continuation Plan Qualification

Once you have exhausted your six months of Salary Continuation, you must return to work for a period of 12 months before you are again eligible for disability payments under this plan.

## Disability Options

Your Options	What the Plan Pays	Cost of Coverage
Salary Continuation Plan	Full salary and benefits for up to six months of disability in any 12-month period.	Provided at no cost to you.
Long-Term Disability: Basic Coverage	Up to 66 2/3% of your base salary for six months, then your benefit decreases to 60% of your base salary (up to \$2,500 per month).	Provided at no cost to you. This plan provides protection of up to \$50,000 of your base salary.
Long-Term Disability: Optional Coverage	Same as basic coverage, but with a maximum benefit of \$15,000 per month. In addition, contributions to the Retirement Plan continue and there are annual cost-of-living increases after the first 12 months of LTD payments.	You pay for this coverage. The cost is \$.22 per \$100 of monthly base salary (plus \$.52 per \$100 of any approved additional compensation). This plan provides protection of up to \$300,000 of your base salary.

# Leaves of Absence for Officers of Administration

This section describes the University's leave policies for Officers of Administration. Officers of Instruction, the Libraries, and Research should consult the Faculty Handbook, available from the Office of the Provost and on the web at [www.columbia.edu/cu/vpaa/fhb/](http://www.columbia.edu/cu/vpaa/fhb/)

# leaves of absence

All full-time officers of administration are eligible for Medical, Personal, Infant Care, and Uniformed Services Leaves.

It is especially important, whenever you wish to take a leave of absence, that you have discussions with your departmental administrator, department chair, director, or dean as far in advance as possible. They will inform you of the proper procedures and provide you with any necessary forms.

## Medical Leaves and Disability

### **Salary Continuation and LTD Coverage**

Under the Salary Continuation Plan, the University grants medical leaves of absence with full salary to officers who cannot perform their responsibilities due to illness or injury. You may take up to six months of Salary Continuation in any 12-month period. **Note:** All sick days (including those taken during the 12 months before the Salary Continuation goes into effect) count toward your six months of Salary Continuation.

Your position is held for you during the Salary Continuation period.

You must provide documentation of your illness and you must also complete a New York State Disability Form (DB450). The University, at its own expense, may require an additional examination by a physician of its choosing.

The Salary Continuation period may be followed by Long-Term Disability (LTD) coverage, as described on page 26, if your application is approved by the University's insurance carrier.

### **Unpaid Medical Leaves**

If you have exhausted your Salary Continuation and are not approved for LTD, your department may also place you on an unpaid medical leave for up to six months if it is operationally feasible. During an unpaid leave, your position (or its equivalent within your department) is held open for your return.

You may also be placed on unpaid medical leave between the end of Salary Continuation and the commencement of LTD coverage, under certain circumstances:

- You may not be approved for LTD before the end of the Salary Continuation period. In this case, a period of unpaid leave may be granted in the interim. It is a good idea to apply for LTD well before the end of the six-month Salary Continuation period.
- LTD only begins after six months on leave for the approved disability. If you have used part of your six months of Salary Continuation for an unrelated illness or injury, LTD will be preceded by a period of unpaid leave.

### **Release**

After you have exhausted your Salary Continuation—or following whatever period of unpaid leave your department grants—your department may release you. You would have to reapply for an available position at the University.

Your release would not affect your eligibility for any pending LTD benefits.

### **Childbirth**

Disabilities arising from pregnancy and childbirth are treated like other non-occupational disabilities and are covered by Salary Continuation. A Medical Leave for childbirth is distinct from an unpaid Infant Care Leave (described on page 28).

### **Leaves at the University's Request**

The University, at its own expense, may also require you to undergo a medical examination by a physician of its choice if you contest the existence of a disability that prevents the performance of your duties. Should the physician confirm that you are disabled, the University reserves the right to relieve you of all responsibilities and place you on a paid medical leave, followed by either LTD coverage, an unpaid leave, or termination.

## **Return to Work and Workplace Accommodation**

The University may contact officers on disability leave to confirm that they are receiving proper benefits and that they have completed and filed all necessary forms, to obtain updates on the prospects of their return to work, or to determine whether they could return to work with accommodation.

An officer who has been medically cleared to return to active service after recovering from a disabling illness or injury should submit a letter from a physician stating that he or she is physically capable of returning to work. If special working arrangements are needed for the officer to return from the disability, the physician should also specify the nature of the accommodations required. The University may also have the individual examined by a physician of its choice before agreeing to the reinstatement.

An officer who feels that they require an accommodation in order to return to work should contact the Manager of the Return to Work Program, (212) 870-3464, who will work with the officer and the treating physician to determine whether an accommodation is necessary and, if so, what type of accommodation should be made.

Continued on page 28

## Leaves of Absence (cont'd.)

# leaves of absence

### Personal Leaves

For officers of administration and research, this is an unpaid leave granted for up to six months for a compelling personal need (e.g. family illness), subject to the approval of your department head or dean. Your position is held for you and arrangements can be made to continue to pay your benefits coverage.

### Infant Care Leaves

Biological mothers can receive up to six months of unpaid Infant Care Leave following the period of paid Medical Leave described above.

Fathers of newborn infants and newly adopting parents may also be granted a full or partial leave of absence for up to six months to care for their new child(ren). Same-sex domestic partners, either of women who give birth or of individuals who adopt one or more children, are also eligible for an Infant Care Leave.

Infant care leaves are subject to FMLA requirements and the approval of your department head or dean.

### Uniformed Services Leaves

If you serve in the Armed Forces, Army and Air National Guards, commissioned corps of the Public Health Service, or any other position designated by the President in time of war or emergency, you will be granted leaves for intermittent or active service.

You must provide written documentation to your department at least 2 weeks in advance of the scheduled training or service, specifying the reason and duration of the leave.

You are eligible for reinstatement following a period of service in the uniformed services, in accordance with the *Uniformed Services Employment and Reemployment Rights Act of 1994*. Upon reinstatement, your compensation, benefits, retirement eligibility, and

length of service will be calculated as if you had been continuously employed during the leave.

### Intermittent Service Leaves

If you are a member of the National Guard or a Reserve unit, you will be granted a paid Uniformed Services Leave not to exceed 15 regular work days in any calendar year. Travel time required for reporting to the place of duty is included in the 15-day allowance. Vacation or personal leave may be used for any training or service in excess of 15 work days subject to the approval of your department head or dean.

### Active Service Leaves

If you perform active military or national defense service, you will be granted an extended leave. This is normally an unpaid leave, but following the events of September 11, 2001 and the subsequent period of national emergency, the University enhanced the benefit:

- For up to six months, the University funds the difference between your military pay and your regular base pay prior to the leave
- For up to one year, the University extends your active-employee benefits and pays its regular share.

The University may periodically review and alter the policy as circumstances warrant. If you begin a leave under the current policy, however, you will receive the enhancements for the duration of your leave, subject to the stated time limits.

Cumulative uniformed services leave is limited to five years throughout employment at Columbia. Most types of service in the uniformed services counts toward this limit; however, active service during a war or declared national emergency or in support of a critical mission does not count toward the five-year limit.

### FMLA

Under the Family Medical Leave Act of 1993 (FMLA), you may be entitled to twelve weeks of unpaid leave per year to deal with (1) the birth, adoption, or foster placement of a child, (2) an officer's own illness, or (3) a serious illness of a spouse, child, or parent.

To be eligible under FMLA, you must have been employed and paid by the University for at least twelve months immediately preceding the commencement of the leave. In addition, you must have provided at least 1,250 hours of service during that twelve month period. Any compensated employment—regardless of title and including periods on the casual payroll—counts toward the 1,250 hours.

The 12 weeks of your FMLA entitlement are *not* added to your other leaves. Rather, your FMLA period runs concurrently with a Medical, Infant Care, or qualifying Personal Leave (FMLA only applies to those Personal Leaves taken for a reason recognized by the Act).

For example, if you take a 12-week paid Medical Leave, this will also exhaust your 12 weeks of FMLA. After an eight-week Medical Leave for pregnancy, on the other hand, four weeks of FMLA would remain to run concurrently with an Infant Care Leave.

Paid Medical Leaves surpass FMLA requirements and are not affected by its provisions. FMLA affects unpaid leaves, however, because it requires that medical insurance premiums remain the same as for active officers. This means that you do not begin to pay the "Columbia share" for your insurance until after your 12 weeks of FMLA.

# benefits during leaves

## Your Benefits During a Leave of Absence

When you take a leave of absence, you may choose to continue or discontinue your benefits package, which includes medical (if you have not waived it), dental, life, and *optional* long-term disability insurance.

## Medical Coverage

- **Paid Leaves:** Your medical coverage continues at the same cost. The premiums continue to be deducted from your paycheck. If you are receiving a partial salary not sufficient to cover the premiums, you are billed by EBPA (see below).
- **Unpaid Leaves:** You may choose to continue your medical coverage, but at an increased cost. Normally, Columbia pays the greater share of your monthly premiums. During an unpaid leave, you pay this Columbia share instead; the University contributes the amount you usually pay.

There are two times when the Columbia share and your share don't "flip":

- If you are on an Active Service Leave, Columbia continues to pay its share for your benefits for up to one year (see page 28)
- If your leave is designated as an FMLA leave, whether paid or unpaid, Columbia continues to pay its share for 12 weeks.

- **Uniformed Services Leave:** If you go on a Uniformed Services Leave, you may also elect to continue your benefits at the COBRA rate (as required by Title X of the Consolidated Omnibus Reconciliation Act of 1985). For more information, see *Health Care Coverage Through COBRA*, available at your local Human Resources office. If you elect COBRA coverage, you are billed through Employee Benefit Plan Administration, Inc. (EBPA).

## Billing

If you do not receive a paycheck from which payments can be deducted, you are billed directly by Employee Benefit Plan Administration, Inc. (EBPA), the company we've designated to handle the billing and payment process for people on leave. EBPA will send officers on leave a payment coupon book every six months—you are in fact able to pay for up to six months of premiums at once. (Full details on how to pay are included with the coupon book.) Whichever schedule you choose, please note that failure to pay for a given month by the deadline specified in the coupon book can result in loss of coverage.

## Basic LTD Coverage

Whether you take a paid or unpaid leave, *basic* LTD coverage continues at no cost to you.

## Dental, Life, and Optional LTD Coverage

The cost to you of dental, life, and optional LTD benefits remains the same. Your payments are deducted if your paycheck is sufficient to cover the amount; if not, or if you are on an unpaid leave, you are billed directly by EBPA.

## Retirement Plan Contributions

During a paid leave of absence, you continue to receive contributions toward your University retirement plan. The contributions are based on the actual salary you receive while on leave. During an unpaid leave of absence, you do not receive contributions.

## Tax-Deferred Annuities

During a paid leave of absence, you may continue to make contributions to your Tax Deferred Annuity (TDA) whether or not you choose to continue your other benefits. Payments will be automatically deducted from your paycheck (if it is sufficient to cover the amount), unless you advise us to stop your deductions.

# Paid Time Off

The University provides a liberal vacation allowance for Officers and grants up to 14 regular and personal days each year.



# vacation & holidays

## Coverage

All officers (excluding Officers of Instruction on less than a 12-month academic calendar) are entitled to an annual paid vacation of 23 working days (28 after 20 years of service). These are earned from July 1 through June 30 at a rate of 2 days per completed month (2.34 days per month after 20 years of service). The total

allowance must be used by June 30 of the year following accrual. No more than 23 days (28 after 20 years) may be carried over each July 1.

Faculty member vacations are governed by the academic calendar.

Officers at Harlem Hospital Center observe eleven hospital holidays and three floating holidays (personal days).

Two personal days are earned at the Medical Center, one every six months.

All other locations earn three personal days each year, which may be used to observe religious holidays or for any other purpose. They are earned at the rate of one day for each four-month period worked, starting from date of employment.

## University Holidays and Personal Days

<b>Holiday</b>	<b>Date</b>	<b>Morningside Campus</b>	<b>Medical Center</b>	<b>Harlem Hospital</b>
New Year's*	--	--	--	--
Martin Luther King Jr.'s Birthday (Observed)	01/17/05	X	X	X
President's Day	02/21/05		X	X
Memorial Day (Observed)	05/30/05	X	X	X
Independence Day	07/04/05	X	X	X
Labor Day	09/05/05	X	X	X
Columbus Day (Observed)	10/10/05			X
Election Day	11/08/05	X	X	X
Veteran's Day	11/11/05			X
Thanksgiving Day	11/24/05	X	X	X
University Designated Holiday	11/25/05	X	X	
Christmas Day (Observed)	12/26/05	X	X	X
University Designated Holiday	12/27/05	X	X	
University Designated Holiday	12/29/05	X	X	
New Year's Day (Observed)**	12/30/05	X	X	X
<b>Total</b>		<b>11</b>	<b>12</b>	<b>11</b>
<b>Personal Days</b>				
Number		3	2	3

\* New Year's Day 2005 observed on December 31, 2004.

\*\* The observance of New Year's Day on December 30, 2005 is in lieu of a New Year's Day holiday in 2006.

## Business Travel and Working Internationally

# business travel

### **Business Travel Accident Insurance**

The University automatically provides you with Business Travel Accident Insurance at no cost to you when you travel on pre-approved University business anywhere in the world. Columbia pays the full cost of this benefit.

In the event of your death, serious injury, or disability as the direct result of an accident occurring while you travel on University business or on a University-sponsored trip, you and/or your beneficiary(ies) receive:

- An amount equal to six times your annual base salary, up to \$1,000,000 (the "principal sum"), in the case of your death
- A benefit up to one-quarter of the principal sum in the case of severe injury (depending on extent of the injury)
- A disability benefit equal to the principal sum less any other amount paid or payable under the Plan as a result of the same accident.

### **Additional Services for International Travelers**

AIG International Services provides additional assistance to those traveling on University business or a University-sponsored trip. If you are in the United States or Canada, you can contact AIG at (800) 626-2427. You can also call collect from anywhere else in the world by contacting an AT&T International Operator to place your call to Houston at (01-713) 267-2525.

For general information about the services offered, please contact Columbia Risk Management at (212) 854-9704.

### **Pre-Departure Services**

Pre-departure services can give you valuable information so there are no surprises after you leave home. You can get information on immunization requirements, appropriate medical exams and treatments, passport and visa requirements, weather and travel hazards.

### **Lost Baggage/Passport**

Losing important baggage or documents is extremely inconvenient. AIG provides immediate telephone advice to a traveler whose baggage has been lost or delayed by a carrier. This service also notifies the appropriate authorities of a traveler's lost passport and provides directions for replacement.

### **Insurance Coordination**

Filling out paperwork in a foreign country can be confusing. AIG can help you complete insurance and medical claims forms. In addition, this service can help you verify your insurance coverage and guarantee payment to a medical provider based on the confirmation of your insurance benefits on your credit card.

### **Evacuation and Repatriation**

If an unforeseen medical emergency requires you to be evacuated to a treatment facility, AIG can coordinate your emergency medical evacuation. If you should lose your life while traveling, AIG International Services can coordinate the repatriation of your remains.

### **Travel Medical Emergency Services**

This service helps you obtain local medical care, monitor the quality and cost of the hospital treatment, confirm travel medical expense insurance, guarantee payment to the provider of medical services using your financial resources, and arrange the payment of non-insured medical expenses.

Moreover, AIG can maintain contact between local and personal physicians; arrange shipment of prescription drugs, medical equipment, and prescription lenses; provide your medical records; and maintain daily contact between patient, family, employer and physicians.

### **Legal Assistance**

If you are in need of legal assistance, AIG International Services can arrange help from local attorneys, embassies, and consulates. Bail, cash advances, or guarantee of payment for your legal services can be arranged through your financial resources. Also, AIG International Services can keep a communication link between you, your family and Columbia.

### **Emergency Cash**

If you are caught in an emergency and need cash, AIG—in coordination with your finances—can provide cash through banks, consulates, hotels and Western Union.

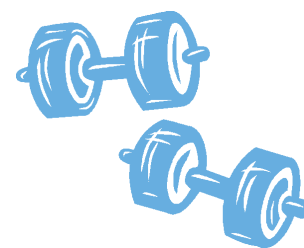
### **Travel Agency**

This 24-hour service can replace your lost or stolen airline ticket by arranging payment through your credit card. Pre-paid tickets can be delivered by mail courier or collected at an airline counter. In addition, hotel reservations can be arranged.

### **Advisory and More Information**

Please be aware that these policies do not apply if you knowingly travel to a war-torn country.

If you are concerned about the safety of a region, or need any other information concerning services available to you while traveling internationally, please contact Columbia Risk Management at (212) 854-9704.



# facilities & services

### Library Privileges

Library resources at the University include over 7.5 million volumes and are organized into a system of 22 libraries. Together, they represent one of the largest and most outstanding university collections in the country. You and your family enjoy user privileges at all of the libraries. Please contact (212) 854-2271 for more information.

### Physical Fitness Centers

The Marcellus Hartley Dodge Physical Fitness Center, on the Morningside Heights campus, includes the following facilities for your enjoyment: swimming pool, squash and racquetball courts, indoor running track, men's and women's saunas, and a multi-level strength and conditioning center. Tennis courts are located nearby. You may use these facilities for a modest locker room and towel charge, and family membership may be purchased. Please contact (212) 854-2548 for more information.

The Columbia Baker Field Tennis Center, with seven indoor and outdoor courts, is located at 575 West 218th Street. You and your family may purchase summer and winter memberships. Please contact (212) 942-7100 for more information.

At the Medical Center, the Bard Athletic Center offers a swimming pool, squash courts, gymnasium, exercise room with conditioning equipment, aerobics programs, lockers, showers, and saunas. Several membership plans are available. Please contact (212) 304-7010 for more information.



### Dining and Social Facilities

The Faculty House, on the Morningside Heights campus, offers its congenial lounges, dining rooms, and private rooms and services to all members of the University community at moderate costs. The House serves lunch, dinner, and cocktails Monday through Friday. Private rooms are available for meetings, parties, and banquets seven days a week. Please contact (212) 854-1200 for more information.

The Faculty Club at the Medical Center is located in the beautifully renovated old medical school library. It is open for lunch on weekdays and provides extensive catering services for all occasions. Please contact (212) 305-5652 for more information.

### Entertainment and Culture

You and your family may wish to take advantage of the many University-sponsored activities and programs in the arts and scholarly fields. Performances in music, dance, theater, and cinema, as well as special lectures and seminars are sponsored by the various schools and divisions of the University and its affiliates. The Kathryn Bache Miller Theater offers a full season of concerts in the fields of classical and contemporary music, jazz, literature and dance.

### University Publications

*The Record*, the University's newspaper, keeps you up to date on people and activities at Columbia. The various schools and divisions of the University publish numerous newspapers, magazines and journals, which you may also elect to receive, depending on your area of interest.

### Housing Resources

You may wish to inquire about University housing, since the University owns and manages a number of apartment buildings throughout the Morningside Heights and Health Sciences areas. Please contact (212) 854-9410 for more information.

#### **Housing Assistance**

Please visit the Human Resources web site at [www.hr.columbia.edu/hr/](http://www.hr.columbia.edu/hr/) for information regarding possible housing assistance options.

#### **Mortgage Assistance**

Columbia University has asked Cendant Mortgage to administer the University's mortgage assistance program. Through Cendant you may be eligible for discount mortgage rates and other low- or no-cost mortgage services. For additional information about Cendant's many advantages, please contact them at 1-800-848-9497 or visit their website at <http://ColumbiaUniv.CendantMortgage.com>



Columbia University Human Resources

Benefits and Compensation  
Interchurch Center, Room 1901  
475 Riverside Drive  
New York, NY 10115  
(212) 870-3074

E-Mail: [hrfss@columbia.edu](mailto:hrfss@columbia.edu)  
Web: [www.hr.columbia.edu/hr/](http://www.hr.columbia.edu/hr/)

Medical Center HR  
112 Black Building  
650 West 168th Street  
New York, NY 10032  
(212) 305-3819

Columbia Affiliation HR  
Harlem Hospital  
506 Lenox Ave., Rm. 6208  
New York, NY 10029  
(212) 939-1720

Lamont-Doherty  
Office of Human Resources  
Administration Bldg., Room 205  
Palisades, NY 10964  
(845) 365-8840

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