

RETIREE HEALTH PREMIUMS FOR 2016 (If You Retired After December 31, 2011)

The tables below show the monthly premium for each medical plan option available to you. Your monthly premium will be determined by (1) the plan you elect, (2) whether you cover your spouse or same-sex domestic partner and/or your eligible dependent child(ren) and (3) your age and your spouse's age.

Covered Individual	Medical Plan Option	Monthly Premium Under Age 65	Monthly Premium Age 65 and Older
Columbia Retiree	Choice Plus 80	\$662	N/A
	Choice Plus 90	\$788	N/A
	Choice Plus 100	\$1,029	\$521
	Indemnity Plan	N/A	\$444
	Aetna Medicare Advantage Plan (PPO)	N/A	\$301
	UnitedHealthcare Group (HMO)	N/A	\$250
Spouse/Same-Sex Domestic Partner or Medicare Eligible Dependent	Choice Plus 80	\$806	N/A
	Choice Plus 90	\$910	N/A
	Choice Plus 100	\$1,242	\$557
	Indemnity Plan	N/A	\$480
	Aetna Medicare Advantage Plan (PPO)	N/A	\$337
	UnitedHealthcare Group (HMO)	N/A	\$286
Child(ren)	Choice Plus 80	\$367	N/A
	Choice Plus 90	\$423	N/A
	Choice Plus 100	\$562	N/A

How do I determine my monthly premium?

- Select a medical plan.
- Determine who you are covering — yourself, your spouse/same-sex domestic partner and/or your eligible dependent child(ren).
- Monthly Premiums are based on your age and your spouse's age (if covered).
- Add the monthly premiums for you, your spouse/partner and child(ren).

N/A = Not Available

Example

You are age 66 and retired. Your spouse is age 66 and you have no eligible dependent children.

If you elect the Indemnity Plan, your monthly premium is calculated as follows:

	Example	Your Selection
Columbia University Retiree	\$444	
Covered Spouse/Same-Sex Domestic Partner/Medicare Eligible Child(ren), if applicable	\$480	
Dependent Child(ren), if applicable	\$0	
Total Monthly Premium	\$924	