



Benefits for 2011

Information
Sessions
Fall 2010

9/21/2010



Today's Discussion

- Open Enrollment
- Health Care Reform
- Changes to Benefits for 2011
- Task Force on Fringe Benefits



Benefits Open Enrollment

- October 25 – November 12
- Benefit Expos
 - CUMC, Morningside, Lamont
 - First two weeks of Benefits Open Enrollment
 - New Health Promotion: “Know Your Numbers”
 - Blood pressure, HDL/LDL, triglycerides, glucose, etc.
- Benefit Presentations
 - CUMC, Morningside, Lamont
 - Large departments/schools



Health Care Reform - 2011

- Dependent Coverage to Age 26
 - Children may have coverage up until the end of the month in which they turn age 26
- Over the Counter Drugs & Supplies
 - No longer eligible expenses under Health Care Flexible Spending Account (FSA) unless prescribed by a physician
- No lifetime and annual dollar limits for “essential benefits” but these are yet to be defined
- Reporting of Healthcare Plan Value on your W-2 has been deferred to 2012



What's New for 2011

- Proof of dependent eligibility required
 - Adding dependents
 - During Open Enrollment
 - Life Event (marriage, new born, adoption)
- Fax/scan proper documents to Benefits Service Center for approval



Overview of Medical Benefits Changes for 2011

	Aetna, CIGNA and UHC POS 90 In-Network	Aetna, CIGNA and UHC POS 90 Out-of-Network	CIGNA and UHC POS 100 In-Network	CIGNA and UHC POS 100 Out-of-Network	CIGNA Indemnity (no network)
Office Visit Co-pay	\$20	N/A	\$20	N/A	N/A
Deductible*	\$150/\$300	\$575/\$1,725	None	\$575/\$1,725	\$3,500/\$7,000
Coinsurance	90% after deductible	70% after deductible	None	70% after deductible	100% after deductible
Out of Pocket Maximum**	\$1,000/\$2,000	\$3,500/\$7,000	N/A	\$3,500/\$7,000	N/A
Emergency Room Co-pay	\$100	\$100	\$100	\$100	N/A
Hospital Co-pay	N/A	N/A	\$250	N/A	N/A
Preventive Care Office Visit	100% covered	Not Covered	100% covered	Not Covered	Not Covered

*amounts provided are for individual/family

** Out-of-Network and Indemnity coverage apply Reasonable and Customary limits where available.



Prescription Drug Benefits

	2010	2011
Retail (30 day supply)		
• Generic	\$ 10 Copay	\$ 10 Copay
• Brand	\$ 20 Copay	\$ 25 Copay Single-Source Brand (product not available in generic)
		\$ 45 Copay Multi-Source Brand* (choice between generic and brand available)
Mail Order (90 day supply)		
• Generic	\$ 15 Copay	\$ 15 Copay
• Brand	\$ 40 Copay	\$ 50 Copay Single Source Brand
		\$ 90 Copay Multi-Source Brand*

*If doctor determines generic cannot be used by patient, the brand will be covered at the “brand level” copay of \$25



Health Care FSA

- Increase health care FSA limit from \$5,000 to \$10,000 annually.
 - Applies to Officers only
 - Offsets increases to out-of-network costs
 - Use it or lose it – plan carefully



Contribution Increases

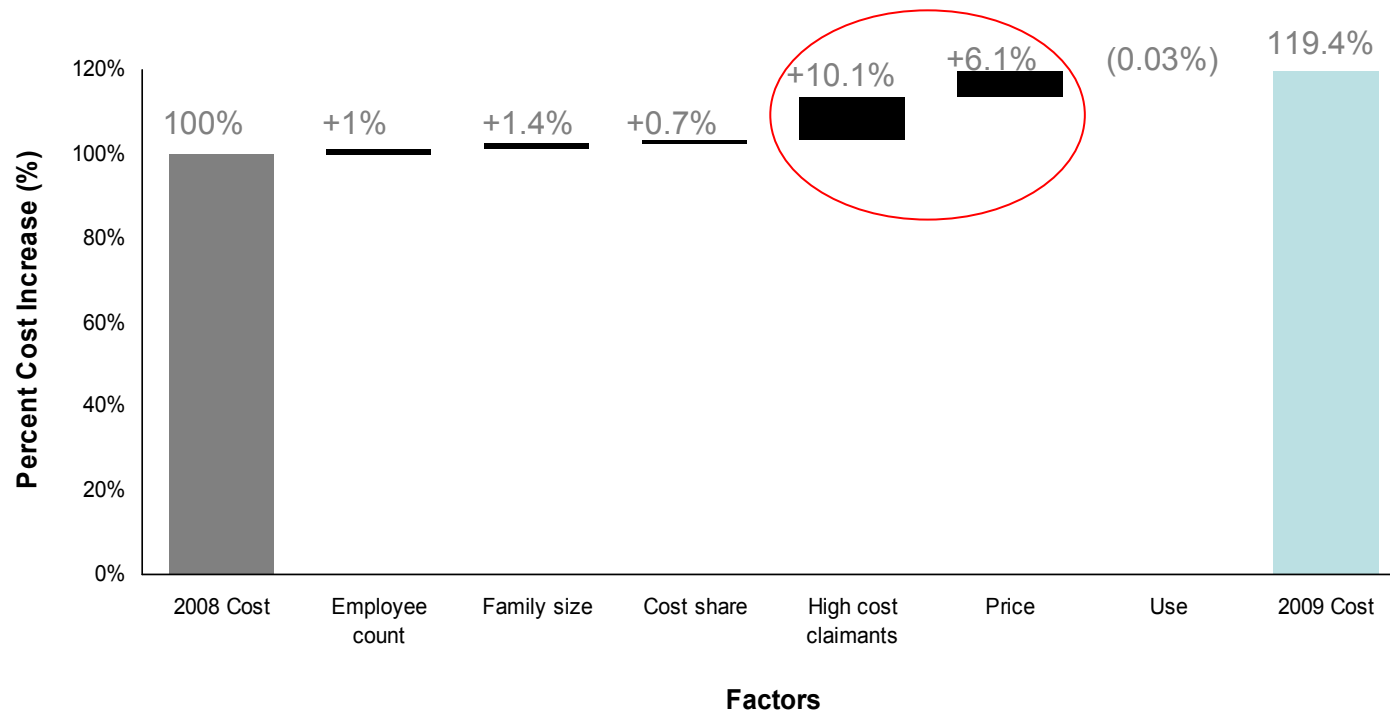
- CU continues to subsidize 78% of total cost for 2011 – on average.

POS Plan	2010 Monthly Contribution for Family coverage in \$80 - \$175k	% increase in salary tiers 1-4	% increase highest (5th) salary tier
Aetna 90	\$226	10%	10%
CIGNA 90	\$376	17%	17%
UHC 90	\$540	10%	10%
CIGNA 100	\$480	20%	26%
UHC 100	\$684	13%	19%



Columbia's Cost Drivers

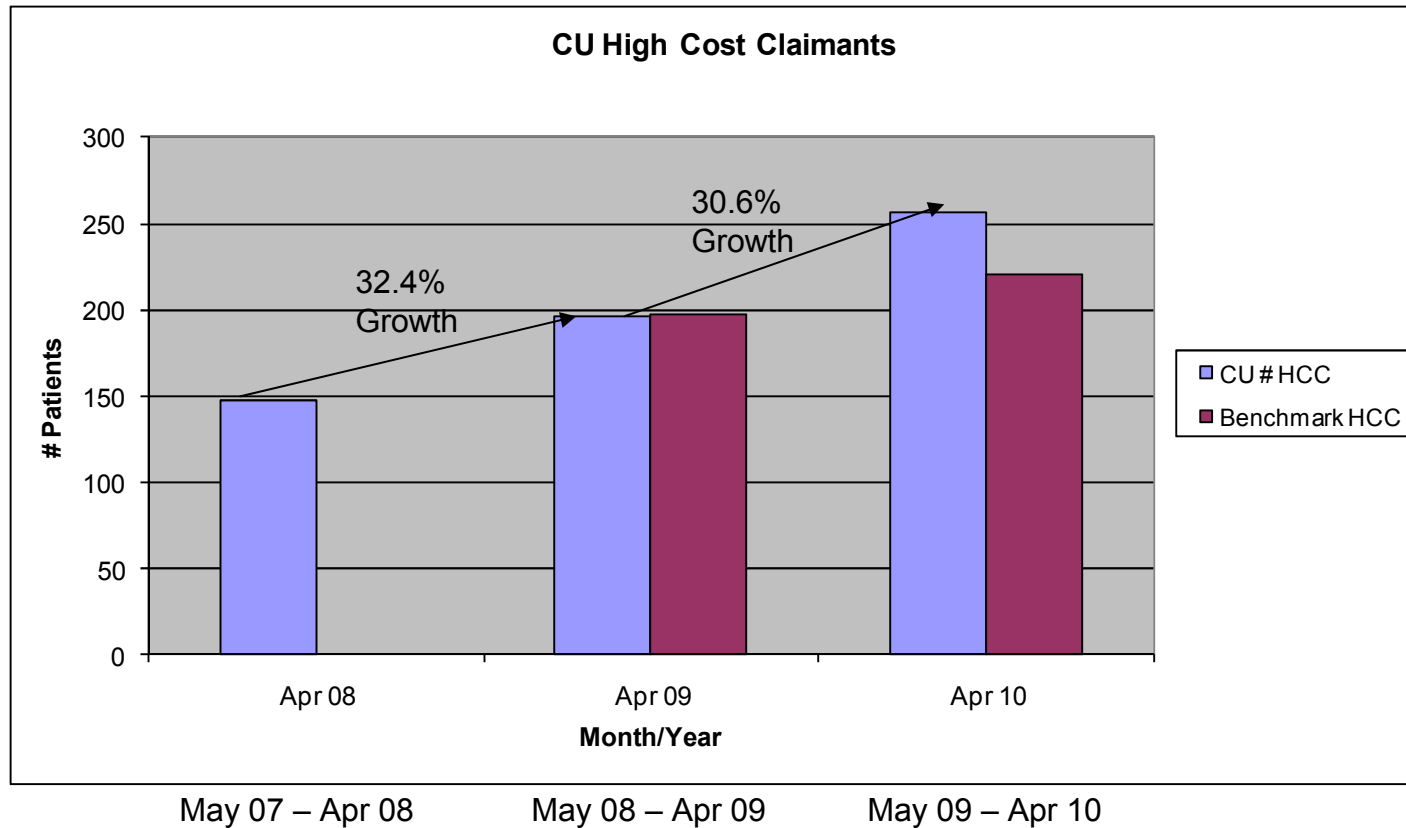
High Cost Claimants and Pricing



Source: Medstat database results for Columbia University medical and prescription claim information: Quarterly Review ending 4th Q 2009.



Increased Number of High Cost Claimants

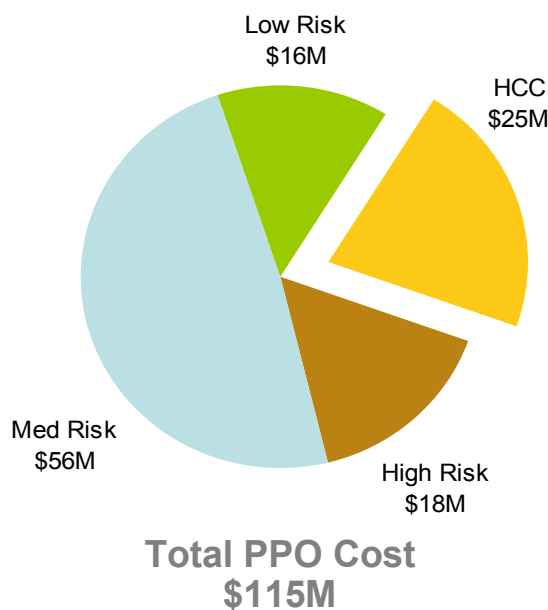


*High Cost Claimants are defined as patients with medical and Rx claims that exceed \$50k in a 12 month period



Cancer is the top condition of High Cost Claimants

**PPO Claim Costs 2009
by Risk Category
(\$M)**



**High Cost Claimant
Top 3 Episode Summary Groups, 2009**

• Cancer	\$6.2M
• Osteoarthritis	\$1.7M
• Coronary/Hypertension	\$1.5M



What can we do?

- Columbia has formed a task force to look at healthcare design and cost
- Employees and their family members can
 - Participate in care management programs
 - Use in-network whenever possible
 - Use the flexible spending account



Questions?