

# Compare your Health Insurance to the 2022-23 Columbia University Student Health Insurance Plan

Email: [shsinsurance@cumc.columbia.edu](mailto:shsinsurance@cumc.columbia.edu)

Phone: 212-305-3206

COMPARABLE COVERAGE CHECKLIST	Columbia University Student Plan	Your Plan
Type of plan: Individual / Family	Individual*	
Annual premium	\$4,189	
Annual in-network deductible	\$0	
Co-payments for on-campus Office Visits including Urgent Care	\$0	
Co-payments for off-campus Office Visits	\$30	
Co-payments for off-campus Urgent Care Centers	\$60	
Co-insurance applied to services after deductible is met	10%	
Annual in-network out-of-pocket maximum	\$3,000	
Routine and emergency care <i>provided in the New York City area</i> (or local area where student will be residing and studying for the academic year)	Yes	Yes / No
Treatment for pre-existing conditions (with no waiting periods or exclusions)	Yes	Yes / No
<ul style="list-style-type: none"> <li>• Outpatient care (ambulatory patient services)</li> </ul>	Yes	Yes / No
<ul style="list-style-type: none"> <li>• Emergency room services</li> </ul>	Yes	Yes / No
<ul style="list-style-type: none"> <li>• Hospitalization (treatment for inpatient care)</li> </ul>	Yes	Yes / No
<ul style="list-style-type: none"> <li>• Maternity and newborn care</li> </ul>	Yes	Yes / No
<ul style="list-style-type: none"> <li>• Mental health and addiction treatment</li> </ul>	Yes	Yes / No
<ul style="list-style-type: none"> <li>• Prescription drugs</li> </ul>	Yes	Yes / No
<ul style="list-style-type: none"> <li>• Rehabilitative services</li> </ul>	Yes	Yes / No
<ul style="list-style-type: none"> <li>• Laboratory services</li> </ul>	Yes	Yes / No
<ul style="list-style-type: none"> <li>• Preventive services, wellness services, and chronic disease treatment</li> </ul>	Yes	Yes / No
<ul style="list-style-type: none"> <li>• Pediatric services</li> </ul>	Yes	Yes / No
<b>Other covered benefits:</b>		
Preventive services at Student Health on Haven at no additional charge	Yes	Yes / No
Elective termination of pregnancy	Yes	Yes / No
Wisdom teeth extractions	Yes	Yes / No
Gender affirming benefits coverage (including surgery)	Yes	Yes / No
Worldwide travel assistance service	Yes	Yes / No
On campus, in-person support to enrolled students	Yes	<b>No</b>

*This checklist is provided for reference purposes only. Students enrolled in a comparable alternate insurance plan may request a waiver from the Columbia University Student Health Insurance plan during the annual open enrollment period. For details about the Columbia University Student Health Insurance Plan, including the waiver criteria, please visit the [Student Health on Haven website](#).*

*For a detailed list of benefits please review the Benefit Comparison Grid.*

*\*Students may enroll dependents onto the Columbia University Plan to provide family coverage.*