

# **UC Postdoc Benefits Plan**

Berkeley Spouses, Partners and Parents Association  
Networking Meeting  
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# Open Enrollment Period

This is an opportunity to enroll or make changes

Typically October – November

Log into <http://atyourserviceonline.ucop.edu>

Changes include:

Enrolling/opting-out of plan

Adding/removing dependents

Changing plans

Can also make changes at a **Qualifying Life Event** (e.g., marriage, birth or adoption of a child). Typically 1 month is allowed to sign up or make changes.

# Postdoctoral Scholar Benefit Plan (PSBP) Options

## Medical Plan Choices:

Health Net HMO or Health Net PPO

## Dental Plan Choices:

Health Net DHMO or Principal EPO/PPO

## Optional coverage:

Vision Plan (Health Net/EyeMed PPO)

Voluntary Long Term Disability Coverage

## Automatically enrolled

Short Term Disability

Life Insurance and AD&D \$50,000

# Open Enrollment Choices: Medical: HMO

## Medical HMO (HealthNet)

- You must have a primary care physician (PCP)
  - You can change your PCP as often as once a month by logging into the Health Net website
- If you need to see a Specialist, you need a referral from your PCP (not for emergencies)
- Physician office visit co-pay: \$10 (often collected before service)
- Many common procedures are covered with no additional charges beyond \$10 co-pay
- Visit HealthNet site to find doctors in your **Network** – except for emergencies, you can only see in-network doctors.
- **New for 2016: No co-pay for preventative care and contraception for ACA compliance**

# Open Enrollment Choices:

## Medical: PPO

### Medical PPO (HealthNet)

- Do not need to be assigned a PCP – can see a wider array of doctors without a referral
- Physician office visit co-pay: \$20
- There is an In-Network rate (generally 20% of costs - doctors agreed to contractual discount) and Out-Of-Network rate (generally 40% of cost)
- More flexibility in providers, but out-of-pocket costs tend to be higher for most procedures
- **New for 2016: No co-pay for preventative care and contraception**

# Health Insurance Rates

	<u>Total Monthly Premium</u>	<u>UC Contribution for Postdoc</u>	<u>Postdoc Contribution</u>
<b>Medical HMO - Health Net, Group Number 66700A</b>			
Postdoc only	\$500.92	\$490.90	\$ 10.02
Postdoc + child(ren)	\$876.69	\$859.16	\$ 17.53
Postdoc + partner	\$1,202.31	\$1,166.24	\$ 36.07
Postdoc + partner + child(ren)	\$1,527.92	\$1,482.08	\$ 45.84
<b>Medical PPO - Health Net, Group Number N2982A</b>			
Postdoc only	\$521.63	\$501.63	\$ 20.00
Postdoc + child(ren)	\$912.87	\$872.87	\$ 40.00
Postdoc + partner	\$1,251.90	\$1,211.90	\$ 40.00
Postdoc + partner + child(ren)	\$1,590.99	\$1,530.99	\$ 60.00

How to find more details:

<https://www.google.com>

Google Garnett Powers Postdoc

Or the current address is:

<https://clients.garnett-powers.com/pd/uc/>

Using HealthNet to find a doctor, view claims, etc.

<https://www.healthnet.com/>



# Dental: HMO

## Dental HMO (HealthNet):

- You will be assigned a primary care dentist, others by referral only
- [www.yourdentalplan.com/healthnet](http://www.yourdentalplan.com/healthnet)

### DENTAL BENEFITS

#### DEDUCTIBLE:

#### DIAGNOSTIC AND PREVENTATIVE CARE:

Routine Oral Exams  
Routine Teeth Cleanings  
Routine X-Rays

#### BASIC PROCEDURES:

Fillings  
Oral Surgery  
Endodontics  
Periodontics

#### MAJOR PROCEDURES:

Crowns

#### ORTHODONTICS:

Comprehensive Treatment- Child  
Comprehensive Treatment- Adult

#### ANNUAL MAXIMUM:

### Health Net DHMO

#### POSTDOCTORAL SCHOLAR PAYS

None

No charge  
No charge  
No charge

Varies up to \$80 copay  
Varies up to \$175 copay  
Varies up to \$200 copay  
Varies up to \$300 copay

Varies up to \$200 copay

\$1,950 copay plus start-up fees and retention  
\$2,250 copay plus start-up fees and retention

Unlimited

# Dental: EPO/PPO

## Dental EPO and PPO (Principal):

- Preventative covered at 100%, basic at 90% and major at 50-60%
- Out-of-Network: higher costs (basic at 80% and major at 50%)
- EPO option: lower costs due to a restricted provider network
- Calendar year max: \$1700 (note—dental work can exceed this easily)
- Out of Network increases cost, but some is covered.

PRINCIPAL EPO/PPO (IN-NETWORK) POSTDOCTORAL SCHOLAR PAYS	
<b>CALENDAR YEAR DEDUCTIBLE:</b>	None
<b>DIAGNOSTIC AND PREVENTATIVE CARE:</b>	
Routine Exams	No charge
Teeth Cleanings	No charge
Routine X-Rays	No charge
<b>BASIC PROCEDURES:</b>	
Fillings	10%
Endodontics	10%
Non-Surgical Periodontics	10%
Simple Oral Surgery	10%
<b>MAJOR PROCEDURES:</b>	
Crowns	EPO = 40% / PPO = 50%
Bridgework	EPO = 40% / PPO = 50%
Dentures	EPO = 40% / PPO = 50%
Complex Oral Surgery	EPO = 40% / PPO = 50%
<b>ORTHODONTIA (ADULT AND CHILD):</b>	
\$1,000 Lifetime Maximum	50%
<b>ANNUAL MAXIMUM:</b>	\$1,700 per person/ per calendar year

# Vision Plan

## EyeMed Vision plan

•A PPO-style vision insurance plan through Health Net

•All postdocs eligible to enroll self/family members.

**No premium to postdocs.**

•Note Frame costs often exceed \$120, and high index polycarbonate lenses cost more. (recommended for -3.0 diopters or more)

## VISION BENEFITS

### EXAM WITH DILATION AS NECESSARY:

### STANDARD PLASTIC LENSES:

Single Vision  
Bifocal  
Trifocal  
Lenticular

### FRAMES:

### LENS OPTIONS:

UV Coating  
Tint (solid and gradient)  
Standard Scratch Resistant  
Standard Progressive

### CONVENTIONAL CONTACT LENSES:

### FREQUENCY:

Examination  
Lenses or Contact Lenses  
Frame

## HEALTH NET PPO (IN-NETWORK) POSTDOCTORAL SCHOLAR PAYS

\$0 Copay

\$10 Copay

\$10 Copay

\$10 Copay

\$10 Copay

\$0 Copay, \$120 retail allowance for any frame, plus 20% off balance over allowance

\$15

\$15

\$15

\$45

\$105 allowance toward contacts, plus 15% discount off balance over allowance

Once Every 12 Months

Once Every 12 Months

Once Every 24 Months

BENEFIT DESCRIPTION	MEMBER COST
<b>LENS OPTIONS</b>	
UV coating	\$15
Tint (solid and gradient)	\$15
Standard scratch-resistance	\$15
Standard polycarbonate	\$40
Standard anti-reflective	\$45
Other add-ons and services	20% discount
<b>CONTACT LENSES (in lieu of eyeglass lenses)</b>	\$105 allowance



Left: High-index lenses can be much thinner and lighter, even in a strong prescription. (Image: Vision Consultants, Inc.) Right: The three basic types of eyeglass lenses: no correction (such as non-prescription sunglasses), farsighted lenses and nearsighted lenses.

# Dental and Vision Insurance Rates

	<u>Total Monthly Premium</u>	<u>UC Contribution for Postdoc</u>	<u>Postdoc Contribution</u>
<b>Dental POS - Principal, Group Number H12843</b>			
Postdoc only	\$23.97	\$23.97	\$ -
Postdoc + child(ren)	\$55.79	\$55.79	\$ -
Postdoc + partner	\$49.99	\$49.99	\$ -
Postdoc + partner + child(ren)	\$89.78	\$89.78	\$ -
<b>Dental DHMO - Health Net, Group Number Z0059A</b>			
Postdoc only	\$8.25	\$8.25	\$ -
Postdoc + child(ren)	\$15.66	\$15.66	\$ -
Postdoc + partner	\$14.84	\$14.84	\$ -
Postdoc + partner + child(ren)	\$23.08	\$23.08	\$ -
<b>Vision PPO - Health Net, Group Number Z0074A</b>			
Postdoc only	\$4.03	\$4.03	\$ -
Postdoc + child(ren)	\$7.50	\$7.50	\$ -
Postdoc + partner	\$6.73	\$6.73	\$ -
Postdoc + partner + child(ren)	\$11.48	\$11.48	\$ -



# Important tips for seeking care

- 1. Ask around for recommendations, or use Yelp or similar services if you want an idea of patient satisfaction (which is not correlated to health outcomes!)**
- 2. Ask if a doctor is accepting new patients—HealthNet’s database may not have up-to-date information.**
- 3. As a new patient, you must sign a form indicating that you will pay the remaining balance even if insurance does not cover it.**
- 4. You do not have to give medical providers your Social Security Number.**
- 5. Some drugs or procedures (e.g., MRI) require “prior authorization” from HealthNet before you can have them. There is a list on the HealthNet site.**
- 6. You can always call Health Net before service to ask if a provider or procedure is covered. You can’t usually determine the cost of the procedure before billing, so determining coverage is important to minimize the cost to you.**

# Short Term Disability Plan

- Automatically enrolled; no paid premium required

The plan will pay 70% of the first \$1,429 weekly pre-disability earnings.

The maximum weekly benefit is \$1,000 per week.

The minimum benefit is \$25.00.

The benefit waiting period is 0 days for disability caused by an accidental injury and 7 days for disability caused by sickness or pregnancy.

The maximum benefit period is 180 days.

The plan covers non-occupational disability only.

All Postdoctoral Scholars (Title Code 3252, 3253 and 3254) are automatically enrolled in the STD plan.

# Life Insurance and AD&D

- Automatically enrolled; no paid premium required
- You must enter in a beneficiary who receives the payout on At Your Service. <http://atyourserviceonline.ucop.edu>

The plan pays \$50,000 in the event of a death.

The plan pays an additional \$50,000 in the event of an Accidental Death.

AD&D Seat Belt Benefit – Up to \$10,000 is payable for death as a result of a car accident while wearing a seat belt.

Accelerated Benefit Provision – Allows eligible members who are terminally ill to receive an early allocation of up to 75% of their group life insurance benefit.

All Postdoctoral Scholars (Title Code 3252, 3253 and 3254) are automatically enrolled in the Life and AD&D insurance.



# Long Term Disability Plan

## Enroll at appointment

This benefit is voluntary and is paid 100% by the Postdoctoral Scholar.

The Benefit Waiting Period is 180 days of disability. This program starts when the Short Term Disability ends.

The plan will pay 60% of the first \$7,500 of your monthly pre-disability earnings.

The maximum monthly benefit is \$4,500. This benefit is reduced by deductible income such as workers' compensation.

Once approved, benefits are payable each month while you are disabled, up to age 65.

The monthly premium for the Long-Term Disability Insurance is \$8.55.

# Life and Disability Insurance Rates

	<u>Total Monthly Premium</u>	<u>UC Contribution for Postdoc</u>	<u>Postdoc Contribution</u>
<b>Life Insurance and AD&amp;D \$50,000 Standard Insurance, Group Number 643383</b>	\$3.05	\$3.05	\$ -
<b>Short-Term Disability Standard Insurance, Group Number 643383</b>	\$9.80	\$9.80	\$ -
<b>Long-Term Disability Standard Insurance, Group Number 643383</b>	\$8.55	\$0.00	\$ 8.55

# Supplemental Life Insurance

- Enroll during open enrollment
- Costs for the supplemental vary by coverage level and age

Life insurance coverage can help your family meet daily expenses, maintain their standard of living, pay off debt, secure your children's education, and more in the event of your death. AD&D insurance can provide you and your family with extra protection in the event of death or dismemberment as a result of a covered accident.

You may select an amount in increments of \$10,000 up to \$150,000 with guarantee issue, meaning that you do not have to answer any medical questions and, as long as you are eligible, you may purchase your desired amount. In the event of your death, the amount you choose would be paid to your designated beneficiary, or beneficiaries.

You may also purchase a dependent family benefit for \$5,000 inclusive of both life and AD&D insurance.