



### Domestic Partnership

#### Tax Implications:

- Enrolling an eligible domestic partner (or a eligible domestic partner's child) can affect your taxable income. Because these family members aren't your federal tax dependents or legal spouse, the IRS considers UC's contribution to medical, dental, and vision coverage "imputed income."
- Imputed income is subject to federal and California State income taxes, Social Security and Medicare taxes, and any other required payroll tax.

### When Coverage Ends / Continuation of Benefits

Your insurance will remain in effect for the duration of your appointment to a UCSD training program. Once your training ends with UC San Diego Health System, your coverage will cease on the last day of the month in which your contract expires.

You have the option of continuing your coverage through COBRA by paying for your premiums.

For more information on COBRA continuation of your benefits, please go to:

[http://meded.ucsd.edu/index.cfm/gme/house\\_officer/house\\_officer\\_benefits/insurance\\_benefits/cobra/](http://meded.ucsd.edu/index.cfm/gme/house_officer/house_officer_benefits/insurance_benefits/cobra/)

### Carrier Contact Information

Provider	Member Services	Website
Anthem Blue Cross		
Medical HMO	800-227-3613 Group Name: UCSD Medical Center Group Number: 57J13A	www.anthem.com/ca
Medical PPO	800-888-8288 Group Name: UCSD Medical Center Group Number: 1230CA	www.anthem.com/ca
Dental DPPO	877-567-1804 Group Name: UCSD Medical Center Group Number: 182415	www.anthem.com/ca
Vision Service Plan	800-877-7195 Group Name: Regents University of California Group Number: 12170630-0003-0003	www.vsp.com
Standard	800-547-9515	www.standard.com
Basic Life/AD&D	Group Name: UCSD Medical Center	
Long Term Disability (LTD)	Group Number: 643159A (Life/AD&D) 643159B (LTD)	

*This is a brief description of benefits offered by UC San Diego Health Systems. Not all plan provisions, limitations and exclusions are included in this publication. In the event of any conflict between the information contained in this publication and the plan provisions, the Plan Documents and insurance contracts will govern. Copies of these documents are available at [http://meded.ucsd.edu/gme/housestaff/housestaff\\_benefits/housestaff-benefits/](http://meded.ucsd.edu/gme/housestaff/housestaff_benefits/housestaff-benefits/). UC San Diego Health System reserves the right to change benefits at any time.*



## Office of Graduate Medical Education



# 2017 - 2018 Benefit Summary

## What's Inside?

Eligibility

Medical

Dental

Vision

Life/AD&D

Long Term Disability (LTD)

Carrier Contact Information

### Enrollment is easy!

- Go to: <https://benefits.plansource.com>
- User Name: First initial of your first name, up to the first six characters of your last name, and the last four of your SSN. For example: If your name is Jane Anderson and the last four numbers of your SSN is 1234, your user name would be janders1234.
- Password: Initial password is your birthdate in YYYYMMDD format. For example: If your birthdate is August 14, 1962, your password would be 19620814. Once you have entered your initial password, you will be prompted to set up a new permanent password.

### Need Help?

For help in using the online enrollment system, contact GME at [GMEbenefits@ucsd.edu](mailto:GMEbenefits@ucsd.edu).

## Overview of Benefits

This booklet contains an easy to read overview of your benefits in effect as of July 1, 2017. It is not intended to be a legal document. Please read this carefully. More details are available in the summary plan description for each plan.

## Eligibility

You are eligible for medical, dental, vision, life/AD&D insurance, and long-term disability coverage if you are a fulltime employee. You may enroll your spouse (or domestic partner) and dependent children in the health plans you elect.

## Make Changes to Your Benefit Elections

Once you make your health care elections, you may not change them until the next annual open enrollment period unless you experience a qualifying event. Some examples would include:

- Legal marital or domestic partner status including marriage, death of spouse/domestic partner, divorce, legal separation, or annulment;
- Number of dependents including birth, adoption, placement for adoption or death of a dependent;
- Employment status including termination or commencement of employment by the employee, spouse or dependent;
- Work schedule including a reduction or increase in hours of employment by the employee, spouse or dependent, including a switch between part-time and full-time, or commencement or return from an unpaid leave of absence;
- Change in your residence or worksite, which causes a loss or gain in coverage for the employee, spouse or dependent.
- Loss of coverage through Medicaid/Children's Health Insurance Program (CHIP) due to ineligibility;
- Become eligible for a state's premium assistance program under Medicaid or CHIP

All changes in family status must be submitted to Human Resources within 30 days of the qualifying event, or in the case of eligibility changes due to Medicaid/CHIP, changes must be submitted within 60 days of the event.

## Medical

UCSD Medical Center offers medical coverage through the following plans:

- Anthem Blue Cross HMO, *a health maintenance organization*
- Anthem Blue Cross PPO, *a preferred provider organization*

Medical eligible dependents include children to age 26.

Please note that initial enrollment and enrollment changes to your health benefits are your responsibility. It is not an automatic process. Once enrolled, your benefits will automatically continue until the termination of your training.

*NOTE: If you select the HMO plan, you will be required to choose a PCP (primary care physician) from within the Anthem Blue Cross HMO network. The PPO plan provides the greatest flexibility as a PCP is not required, but you do achieve a higher level of benefits when choosing a provider within the Anthem Blue Cross PPO network.*

	Anthem HMO	Anthem Blue Cross PPO		
		Tier 1 (UCSD/CHSD)	Tier 2 (PPO Providers)	Tier 3 (Non-PPO)
PCP/Specialist Office Visit	\$10 / \$30 copay	\$15 copay	\$15 copay	60%
Preventative Care Services	No copay	No copay	No copay	No copay
Annual Deductible (Individual/Family)	None	None	\$250/\$500	
Annual Out-of-Pocket Maximum (Individual/Family)	\$2,000/\$4,000	N/A	\$1,000/\$2,000	\$2,000/\$4,000
<b>Inpatient Hospital Service</b>				
Semi-Private Room & Board	\$250 copay	\$250 copay	80%	60%
Pre-Authorization of Services Required	Varies	Varies	Varies	Varies
X-ray & Lab (non-advanced)	No copay	No copay	80%	60%
Emergency Room	\$100 copay	\$100 copay	80% after \$100 copay	80% after \$100 copay
Urgent Care	\$15 copay	\$15 copay	\$15 copay	60%
<b>Prescription Drug Benefits – Preferred Generics<sup>1</sup></b>				
<i>Retail<sup>2</sup>– 30 days</i>				
Tier 1	\$10 copay	\$10 copay	\$10 copay	\$10 copay + 50%
Tier 2	\$20 copay	\$20 copay	\$20 copay	\$20 copay + 50%
Tier 3	\$40 copay	\$40 copay	\$40 copay	\$40 copay + 50%
Tier 4		30%, up to \$250		
<i>Mail Order – 90 days</i>				
Tier 1 (90 day supply)	\$25 copay	\$25 copay	\$25 copay	Not covered
Tier 2 (90 day supply)	\$60 copay	\$60 copay	\$60 copay	Not covered
Tier 3 (90 day supply)	\$120 copay	\$120 copay	\$120 copay	Not covered
Tier 4 (30-day supply)		30%, up to \$250		

<sup>1</sup> Failure to purchase a generic drug will result in the member paying the difference in cost between generic and brand, plus generic copay, but not more than 50% of the plan's cost for the drug.

<sup>2</sup> For non-participating pharmacy, copay plus 50% of maximum amount allowed and costs in excess of the maximum amount

## Dental

UC San Diego Health System offers a Dental PPO (DPPPO) through Anthem. You may enroll your spouse (or domestic partner) and dependent children in the dental plan you elect. Eligible dependents include children to age 26.

Anthem Dental DPPPO		
	In-Network	Out-of-Network
Annual Deductible / Individual	\$50	\$50
Annual Deductible / Family	\$150	\$150
Waived for Preventive	Yes	
Annual Plan Maximum	\$1,000	
Reasonable & Customary Percentile	N/A	90 <sup>th</sup>
Covered Dental Services		
Diagnostic & Preventative Services	100%	80%
Basic Services	80%	60%
Major Services	50%	40%
Orthodontia Services	Not covered	

## Vision

Vision benefits are provided through Vision Service Plan (VSP). Coverage is available for dependents (spouse, domestic partner, children under age 18 and/or children over 18 who are full-time students).

Vision Service Plan (VSP)		
Benefit Frequency	In-Network	Out-of-Network
Eye Exam	12 months	12 months
Lenses	12 months	12 months
Frames	24 months	24 months
Contacts (in lieu of frames/lenses)	12 months	12 months
<b>Copays and Allowances</b>		
Eye Exam Copay	\$10 copay	\$10 copay
Materials (Lenses/Frames) Copay	\$25 copay	\$25 copay
Exams	100% after copay	\$50 allowance
<b>Lenses:</b>		
Single	100% after copay	\$50 allowance
Bifocal	100% after copay	\$75 allowance
Trifocal	100% after copay	\$100 allowance
Frames	Up to \$130 retail	\$70 allowance
<b>Contacts:</b>		
Medically Necessary (with auth.)	100%	\$210 allowance
Elective (in lieu of frames/lenses)	\$130 allowance	\$105 allowance

## Life/AD&D/LTD

UC San Diego Health System provides group term life/AD&D and long-term disability (LTD) coverage through Standard Insurance Company. These benefits are available to all active residents or clinical fellows, enrolled in the Graduate Medical Education Training program, and regularly working 20 hours a week. You are automatically enrolled in these benefits.

Your life/AD&D benefit is \$50,000.

If you become totally disabled, after 30 days of total disability, the LTD plan pays up to 60% of the first \$5,000 of your pre-disability earnings, reduced by other disability income you receive. The maximum monthly LTD benefit is \$3,000, before reduction of other disability income.

## COBRA (Continuation of Coverage)

COBRA legislation requires employers to continue group health and dental for a maximum of 18 months to employees and their covered dependents who would lose their group insurance coverage at the time of termination of appointment/employment.

For more information, visit:

[http://meded.ucsd.edu/index.cfm/gme/house\\_officer/house\\_officer\\_benefits/insurance\\_benefits/cobra/](http://meded.ucsd.edu/index.cfm/gme/house_officer/house_officer_benefits/insurance_benefits/cobra/)

## Valuable Anthem Blue Cross Tools & Services

The HealthyExtensions program (also known as SpecialOffers<sup>SM</sup>) offers health and well-being topics relevant to your lifestyle. Stay healthy with HealthyExtensions, which tells you about discounts from independent vendors and practitioners. To take advantage of these discounts, simply show your ID card when purchasing items or inform the product or service provider that you are a member.

## Discounted Products & Services

The Online Pharmacy offers drugstore.com, an online discount program for non-prescription items.

Enjoy better Fitness and Nutrition with discounts on health club memberships and safe and rapid weight loss programs, as well as rehabilitation and exercise products.

## Health and Wellness Practitioners

Receive special discounts offered by Massage Therapists and Registered Dietitians.

## For More Information

Visit <http://www.anthem.com/ca/>. Click on *360° Health* and then *Health Extras* for a list of selected health and wellness vendors.

## PPO Valuable Tools & Services

As a PPO member, you have access to additional services, tools and products, including:

- Future Moms is a pregnancy program that provides mothers-to-be with access to specialist obstetrical and neonatal nurses who can answer any questions or concerns regarding the member's pregnancy and newborn.
- 24/7 NurseLine is a free service. If you have health care questions, call 24/7 NurseLine. Registered nurses will answer your questions confidentially, 24 hours a day, seven days a week. 24/7 NurseLine nurses can also connect you to an audio library that contains a wealth of health care information.

## For More Information

Call toll-free 866-664-5404 for more details and receive a free informational package offering discounts. Or, visit <http://www.anthem.com/ca/> and click on *360° Health*.

## Annual Reminders

On an annual basis, it is important to review the following:

- Dependent coverage – should you add/remove dependents from any of your benefit plans? (You may not be able to do so after Open Enrollment unless you have a qualifying status change.)
- Beneficiary designations – are your beneficiary designations for basic life/AD&D current and up-to-date?
- Personal information – have you kept Human Resources informed of any changes (address, marital status, etc.) that have occurred?