What is an HMO Plan?

One of the main components of an HMO that distinguishes the model from other types of plans is the Primary Care Physician (PCP) who acts as your gatekeeper for all of your care.

You can choose a PCP for each family member, or change the PCP assigned to you by calling Health Net.

If you or a family member is in need of treatment from a Specialist or is in need of an In-Patient or Out-Patient procedure, you must obtain a referral from the PCP prior to any type of consultation or treatment (except in the case of an emergency). If the referral is not obtained, no benefits will be paid.

There is no Out-of-Network benefit (except in the case of an emergency).
Effective January 1, 2021: All PDS will make the following monthly contribution if enrolled in the Medical HMO Plan:

<table>
<thead>
<tr>
<th>COVERAGE TYPE</th>
<th>MONTHLY CONTRIBUTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Postdoc Only</td>
<td>$12.01</td>
</tr>
<tr>
<td>Postdoc + Spouse or Domestic Partner</td>
<td>$43.23</td>
</tr>
<tr>
<td>Postdoc + Child(ren)</td>
<td>$21.02</td>
</tr>
<tr>
<td>Postdoc + Spouse + Child(ren)</td>
<td>$54.94</td>
</tr>
</tbody>
</table>
PSBP Medical HMO Plan
Health Net of California (In-Network)

MEDICAL BENEFITS

PHYSICIAN OFFICE VISIT:

HOSPITALIZATION:
- Inpatient
- Outpatient
- Pregnancy

RETAIL PRESCRIPTION DRUGS:
- Generic
- Brand Name
- Non-Formulary

EMERGENCY ROOM VISITS:

ROUTINE PHYSICAL EXAM:

ANNUAL MAXIMUM OUT OF POCKET:
- Individual
- Family

ANNUAL DEDUCTIBLE:
- Individual
- Family

LIFETIME MAXIMUM:

HEALTH NET HMO
POSTDOCTORAL SCHOLAR PAYS

$10 Copay
No Charge
No Charge
No Charge
$10 Copay
$20 Copay
$35 Copay
$35 Copay (waived if admitted)
No Charge

$1,500
$4,500

None
None
Unlimited
What is a PPO Plan?

When covered under a PPO plan, there is no need to be assigned a Primary Care Physician.

There is an In-Network and Out-of-Network component.

You have the flexibility to see a doctor without a referral either in-network or out-of-network.

The PPO plan offers more flexibility in physician access than the HMO plan. As a result, the out-of-pocket costs tend to be higher.

When seeking services, Postdoctoral Scholars will almost always pay less In-Network (deductible, coinsurance, etc.) than Out-of-Network.
Effective January 1, 2021: The PDS will make the following monthly contribution if enrolled in the Medical PPO Plan:

<table>
<thead>
<tr>
<th>COVERAGE TYPE</th>
<th>MONTHLY CONTRIBUTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Postdoc Only</td>
<td>$20.00</td>
</tr>
<tr>
<td>Postdoc + Spouse or Domestic Partner</td>
<td>$40.00</td>
</tr>
<tr>
<td>Postdoc + Child(ren)</td>
<td>$40.00</td>
</tr>
<tr>
<td>Postdoc + Spouse + Child(ren)</td>
<td>$60.00</td>
</tr>
</tbody>
</table>
## PSBP Medical PPO Plan

### Health Net of California

### MEDICAL BENEFITS

<table>
<thead>
<tr>
<th>Physician Office Visit:</th>
<th>Health Net PPO (In-Network)</th>
<th>Health Net PPO (Out of Network)*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Postdoctoral Scholar Pays</td>
<td>$20 Copay</td>
<td>$250 Copay then 20%</td>
</tr>
</tbody>
</table>

### Hospitalization:

- **Inpatient**
  - $250 Copay then 20%
- **Outpatient**
  - $0 Copay
- **Pregnancy**
  - $250 Copay then 20%

### Retail Prescription Drugs:

- **Generic**
  - $10 Copay
- **Brand Name**
  - $25 Copay
- **Non-Formulary**
  - $35 Copay

### Emergency Room Visits:

- 20%

### Routine Physical Exam:

- No Charge

### Annual Maximum Out of Pocket:

- $1,500 Individual
- $4,500 Family

### Annual Deductible:

- None

### Lifetime Maximum:

- Unlimited

*Out of Network reimbursement based on limited fee schedule.*