



THE UNIVERSITY OF  
**CHICAGO**

**Postdoctoral Researcher  
Benefit Program**

**Medical Insurance**

**PROVIDED BY**



**BlueCross BlueShield  
of Illinois**

**Disclaimer:** This benefit plan information shown in this benefits plan overview is illustrative only. To the extent the benefit plan information summarized herein differs from the underlying plan details specified in the insurance documents that govern the terms and conditions of the plans of insurance ; the underlying insurance documents will govern in all cases.

# What is an HMO plan?

Under the HMO model, the member must choose a Primary Care Physician (PCP) contracted with the HMO plan at the time of enrollment (provider directory links are available on the GBS website). Each family member can have a different PCP. Your PCP becomes your healthcare “gatekeeper”.

You are allowed to change your PCP once a month if you are not satisfied with your current choice.

If the member is in need of treatment from a Specialist or is in need of an In-Patient or Out-Patient procedure, he/she must obtain a referral from their PCP prior to any type of consultation or treatment. 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).

# Postdoctoral Researcher Benefit Program

## BCBSIL HMO MEDICAL PLAN

### MEDICAL BENEFITS

### In-Network (Scholar Pays)

**PHYSICIAN OFFICE VISIT**  
**SPECIALIST OFFICE VISIT**  
**HOSPITALIZATION:**

\$15 Copay  
\$25 Copay

**Inpatient**  
**Outpatient**  
**Maternity**

\$250 Copay per admission  
\$0  
\$250 Copay per admission

**PRESCRIPTION DRUGS:**

**Tier 1**  
**Tier 2**  
**Tier 3**

\$10 Copay  
\$30 Copay  
\$50 Copay  
\$100 Copay (waived if admitted)  
\$0

**EMERGENCY ROOM VISITS**  
**ROUTINE PHYSICAL EXAM**  
**MENTAL HEALTH**

**Outpatient**  
**Inpatient**

\$10 Copay  
\$250 Copay per admission  
\$1,500 Individual  
\$3,000 Family

**ANNUAL MAXIMUM OUT OF POCKET**

**DEDUCTIBLE:**

**Individual**  
**Family**

N/A  
N/A

**LIFETIME MAXIMUM**

Unlimited

# What is a PPO plan?

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

The In-Network benefits will be greater than the Out-of-Network benefits.

At the time of service, the member has the ability to seek care from a Specialist, without having to obtain a referral from a PCP.

The contractual agreement between the PPO plan and the Provider is on a “discounted fee for service” basis. This means that the provider who participates in the network has agreed to provide their service on an agreed upon, discounted fee. The Provider who is not in the network will not agree to that discounted fee and will typically charge a “Reasonable and Customary” fee.

# Postdoctoral Researcher Benefit Program

## BCBSIL PPO MEDICAL PLAN

### MEDICAL BENEFITS

### IN-NETWORK Scholar Pays

### OUT-OF-NETWORK Scholar Pays

**PHYSICIAN OFFICE VISIT**  
**SPECIALIST OFFICE VISIT**  
**HOSPITALIZATION:**

20%\*  
20%\*

50%\*  
50%\*

**Inpatient**  
**Outpatient**  
**Pregnancy**

20%\*  
20%\*  
20%\*

\$300 Copay | 50%\*  
50%\*  
\$300 Copay | 50%\*

**PRESCRIPTION DRUGS:**

**Tier 1**  
**Tier 2**  
**Tier 3**

\$10 Copay  
\$30 Copay  
\$50 Copay

\$10 Copay | 25%  
\$30 Copay | 25%  
\$50 Copay | 25%

**EMERGENCY ROOM VISITS**  
**ROUTINE PHYSICAL EXAM**  
**MENTAL HEALTH**

\$100 Copay plus 20%  
\$0

\$100 Copay plus 20%  
50%\*

**Outpatient**  
**Inpatient**

20%\*  
20%\*

50%\*  
\$300 Copay | 50%\*

**ANNUAL MAXIMUM OUT OF POCKET**

\$2,500 Individual  
\$5,000 Family

\$10,000 Individual  
\$20,000 Family

**DEDUCTIBLE:**

**Individual**  
**Family**

\$250  
\$600

\$5,000  
\$10,000 Unlimited

**LIFETIME MAXIMUM**

Unlimited

\* Subject to Deductible

# University of Chicago Medical Center (UCMC)

- ✓ If you desire to seek your services from a physician located in the **University of Chicago Medical Center**, you will need to choose the **PPO** medical as your health plan.
- ✓ **The UCMC is not a provider in the HMO network**

# Medical Plan Comparison Chart

	BCBSIL HMO	BCBSIL PPO
	HMO (Network Only)	Network / Non-Network
In-Network Deductible (Single/Family)	None	\$250 / \$600
Out-of-Network Deductible (Single/Family)	None	\$5,000 / \$10,000
In-Network Out-of-Pocket Maximum (Single/Family)	\$1,500 / \$3,000	\$2,500 / \$5,000
Prescription drug expense limit	\$5,100/ \$10,200	\$4,600/ \$9,200
Out-of-Network Out-of-Pocket Maximum (Single/Family)	N/A	\$10,000/ \$20,000
Office Visit Copay (PCP/Specialist)	\$15 / \$25 copay	20%
Co-Insurance Amount (In-Network/Out-of-Network)	N/A	20%* / 50%*
Hospital	\$250 copay per admission	20%* / 50%*
Outpatient Surgery	No charge	20%*
Emergency Room	\$100 Copay	\$100 copay/visit plus 20%
Urgent Care	\$15 Copay	20%
Retail Rx Copays	\$10 / \$30/ \$50	\$10 / \$30/ \$50

# Emergency Services

- ✓ The hospital emergency room is to be used only if the situation is life threatening.
- ✓ The Immediate (Urgent) Care Center should be used as often as possible to avoid additional charges.
- ✓ The Immediate Care Center is open 24 hours and is available to treat most non-life threatening emergencies, as broken bones (not multiple fractures), wounds not bleeding profusely, fevers and flu symptoms.

Medical Plan	Urgent Care	Emergency Room
<b>BCBSIL HMO Plan</b>	\$15 copay*	\$100 copay**
<b>BCBSIL PPO Plan</b>	20%	\$100 copay/visit plus 20% **

\*Must be affiliated with the member's assigned medical group or referral is required.

\*\*Copay waived if admitted.



# Wellness Programs

## **BlueAccess**

This is an online member portal. Once you have your member ID, you may register for access to this site. You may view your medical visits and claims status, print temporary ID cards, and gain access to other important informational sources.

## **Special Beginnings**

This program provides valuable info for expectant mothers, providing resources and tools dedicated to the health of mother and baby. A 24 hour, toll free number staffed by maternity nurses is also available.

## **LiveOn Health Portal**

This is an online health resource providing information and tools designed to help you maintain your health (Replacing Personal Health Manager).

## **24/7 Nurseline**

The 24/7 Nurseline is staffed by registered nurses who are available 24 hours a day, 7 days a week. Nurses guide members to the appropriate level of care for their health issue, answer general health questions and direct members to an audio library of more than 300 health topics available in English and Spanish

# Wellness Programs

## LIVE ON HEALTH PORTAL

### **OnMyTime**

Self directed courses that allow you to work at your own pace to reach your health goals. Information on nutrition, fitness, weight management, tobacco cessation and stress.

### **OnMyWay**

Health Assessment. A personal wellness report is provided upon completion of the health assessment. Your answers help tailor the Liveon portal with programs that can help you reach your goals.

### **Life Points Program**

Earn points by taking part in wellness activities. Points can be redeemed in an online shopping mall.

### **Fitness Program**

8,000 participating gyms with unlimited access. Month to month memberships. Bonus Life Points for weekly visits.