



CASE WESTERN RESERVE
UNIVERSITY EST. 1826

Postdoctoral Benefit Program



2024 CWRU Postdoc Benefits Guide



Table of Contents

Benefits and Eligibility.....	3
The Open Enrollment Process.....	4
Benefit Program Website Resources.....	5
Important Medical Plan Information.....	6
Rates and Contributions.....	7
Medical Plan Options.....	8
Aetna Navigator.....	9
Dental Plan.....	10
Vision Plan.....	11
Life and AD&D Plan.....	12
Employee Assistance Program (EAP).....	13
Information Sources.....	14

Gallagher Benefit Services (GBS) is pleased to offer the Case Western Reserve University Postdoctoral Benefits Program (PBP). The PBP is a comprehensive package of benefits designed to closely match the benefits offered to the Case Western Reserve University Faculty and Staff.



BENEFITS



Medical Insurance: Aetna HNO & POS (OAMC)



Vision Insurance: EyeMed PPO



Dental Insurance: MetLife PPO



Life Insurance: The Standard



Employee Assistance Program: Impact Solutions

Eligibility for Newly Appointed Postdocs

All newly appointed Postdoctoral Scholars are eligible for this benefit program as of their appointment start date. Benefits will be effective (retroactively if necessary) beginning your first day as a Case Western postdoc.

If you do not enroll yourself or your eligible dependents within the 31-day initial period of eligibility, neither you nor your dependents will be eligible for enrollment in these plans until the next open enrollment period for the following plan year, unless there is a qualifying event (i.e. loss of prior coverage, marriage, birth of a child, etc.). Your 31-day initial period of eligibility begins on your Appointment Start Date shown in Section 2 of the Enrollment Form.

Benefit Bundle

The medical, dental, vision and life insurance plans, as well as the Employee Assistance Program, are bundled together as a comprehensive package. Postdocs are not permitted to enroll in a specific plan, such as the medical plan, without enrolling in the others.

OPEN ENROLLMENT

What is Open Enrollment?

Open Enrollment is an annual period of time where you are able to make changes to your coverage that you are not permitted to make throughout the rest of the year, unless you experience a qualifying event such as marriage, birth of a child, etc.

The Open Enrollment Period for this year is **November 6 - 17, 2023**.

Changes will take effect January 1, 2024.

Changes For Plan Year 2024

- There are no changes to the benefits on any lines of coverage.
- The medical rates have increased by 5%; all other rates are remaining the same.
- Change to the postdoc monthly contributions

Making Open Enrollment Changes

- To make your plan changes, visit the Gallagher Benefits web site at <https://clients.garnett-powers.com/pd/case/> and click on **Click Here to Make OE Changes**, under the **Important Dates** section on the right side of the screen.
- You will now be viewing your Open Enrollment Form, through which you may do the following:
 1. If you are currently enrolled in the OAMC/POS medical plan, you may switch to the HNO medical plan and vice versa. Please note: the HNO plan is only available to postdocs residing and accessing care in Ohio.
 2. Enroll yourself and/or your eligible dependents if you previously waived.
- Once the enrollment form is complete, please confirm that you have read and understand the COBRA Initial Notification, Health Insurance Marketplace Notice, and Insurance Carrier Privacy Notice, then click *Submit and Create Printable Enrollment Form*. Remember to print a copy for your records.



If you are not changing your current enrollment status, no action is necessary.





WEBSITE RESOURCES

Medical Insurance Provider Directories

For your convenience, you may begin accessing a list of providers directly from the GBS web site via the **Find a Provider** section. To find an HNO or OAMC/POS provider when you wish to access service, simply follow the applicable instructions in the **Find a Provider** section of the website.

Benefit Summaries

This booklet contains benefit “snapshots” of the plans offered through the program, listing the core benefits that are most commonly utilized. There are however more detailed plan documents, including full benefit summaries, available on the website. When visiting the site, click on the **Documents Library** link in the navigation bar. This section of the website contains benefit summaries for all plans offered through the Postdoctoral Benefits Program.

2024 Monthly Rates & Contributions

This information can be found on the website under the **Insurance Benefits and Rates** section of the website, as well as page 7 of this booklet.

MEDICAL PLAN INFORMATION

Summaries of Benefits and Coverage (SBCs)

Choosing a health coverage option is an important decision. To help you make an informed choice, the plans each feature a Summary of Benefits and Coverage (SBC). The SBC summarizes important information about your medical insurance options in a standard format to help you compare plans more easily. These documents are accessible through the **Plan Documents Library**.

HNO vs. OAMC/POS Medical Plan

HNO

- This plan offers a broad spectrum of benefit coverage with a higher degree of managed care.
- Under the Health Network Only (HNO) model, the member may choose to see any doctor within the network.
- A Primary Care Physician (PCP) is not required under the HNO, unlike a Health Maintenance Organization (HMO) model which requires a PCP.
- If you need to see a specialist, no referral is required.
- The network is smaller than that of the POS (OAMC) plan and is limited to Ohio. Additionally, there is no Out-of-Network benefit.
- In the event of a life/limb-threatening emergency, the member should dial 911 and all medical care will be covered as per the plan contract. Once the patient is stabilized, the HNO may require that the patient be transferred to an *In-Network* facility.

OAMC/POS

- The OAMC/POS plan offers much more flexibility and choice than the HNO plan because there is an 'In-Network' and 'Out-of-Network' choice at the time you seek service from a provider.
- The Aetna OAMC/POS plan offers you the choice of choosing a Primary Care Physician (PCP) if you so desire. You are not obligated to choose one.
- The In-Network benefits (deductible, coinsurance, etc.) 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.





2024 RATES AND CONTRIBUTIONS

Tier	Total Monthly Cost	Paid by Postdoc
Aetna Open Access Managed Choice/Point of Service (OAMC/POS)		
Postdoc	\$719.56	\$0
Postdoc + 1	\$1,435.35	\$715.79
Postdoc + Family	\$2,163.87	\$1,444.31
Aetna Health Network Only (HNO)		
Postdoc	\$609.31	\$0
Postdoc + 1	\$1,214.84	\$495.28
Postdoc + Family	\$1,833.14	\$1,113.58
Aetna OAMC/POS – Paid Direct Postdocs*		
Postdoc	\$719.56	\$719.56
Postdoc + 1	\$1,435.35	\$1,435.35
Postdoc + Family	\$2,163.87	\$2,163.87
Aetna HNO – Paid Direct Postdocs*		
Postdoc	\$609.31	\$609.31
Postdoc + 1	\$1,214.84	\$1,214.84
Postdoc + Family	\$1,833.14	\$1,833.14

*Paid direct postdocs pay all costs from their funding source or out of pocket.

All plans are bundled to include Medical, Dental, Vision, Life/AD&D, and Employee Assistance Program.

MEDICAL PLAN OPTIONS

				
	HNO		POS (OAMC)	
	In - Network		In - Network	Out-of-Network
Core Benefits	Postdoc Pays		Postdoc Pays	Postdoc Pays
Deductible Single/Family	\$500 / \$1,000		\$500 / \$1,000	\$1,000 / \$2,000
Out of Pocket Max Single/Family	\$1,000 / \$2,000		\$3,500 / \$7,000	\$7,000 / \$14,000
Office Visit	\$15 Copay		\$10/\$30 Copay	30%*
Wellness Visit	No Charge		No Charge	30%*
Inpatient Hospital	No Charge*		10%*	30%*
Outpatient Surgery	No Charge*		10%*	30%*
Emergency Room	\$100 Copay (waived if admitted)		\$200 Copay (waived if admitted)	
Rx	\$10 Tier 1		\$15 Tier 1	\$15 Tier 1
	\$30 Tier 2		\$30 Tier 2	\$30 Tier 2
	\$60 Tier 3		\$60 Tier 3	\$60 Tier 3

*After deductible has been met

Aetna Navigator: Online Member Portal

Using Aetna Navigator, you may perform a variety of functions such as changing your PCP, printing ID cards, or checking the status of a claim.

To Register, simply visit: <https://member.aetna.com/MbrSelfReg/welcome.do>

- Select the 'Social Security Number' registration option
- Enter your SSN, or your CWRU employee ID number with two preceding zeros
- Fill out all personal information

Once you register for Aetna Navigator, you can immediately access the full benefits and features of the site. To take a guided tour of Aetna Navigator's many features, visit: <https://kvgo.com/aetna-pm/welcome-aetna-navigator>

Aetna Navigator

Your members-only website

Sign-up is quick — but the extras keep coming

Home base for health and benefits

After you enroll in an Aetna health benefits or insurance plan this year, there are some nice tools, programs and perks waiting for you.

And the only way to get to them? Sign up for your member website at **aetna.com**. It's the one place to look after your benefits and your health.

Tools, programs and perks

But there's more to it than just managing benefits. Your member website also opens the door to extras that come with your coverage.

Handy health info

Health Decision Support. This library of online programs can help make complex medical terms easier to understand. You'll find a variety of topics from lower back pain to bariatric surgery to diabetes. They can help you:

- Understand your specific health condition
- Learn about your treatment options
- Make the right decision for you

Link to health information. Just visit the Healthwise® Knowledgebase for information on thousands of health topics in English and Spanish. You can find out about asthma, pregnancy, heart disease and other conditions.

Help for healthier days

Want to make a difference in your well-being in just a few minutes? Just fill out the health assessment.

This assessment asks questions about your health history and habits. It helps you learn about your health risks, as well as steps to head them off.

And you'll also learn about helpful programs and resources that are all about you.

Taking care of business

First things first. Your member website is hands-down the best place for handling benefits business. Log in to:

- See who's covered under the plan
- View your claims
- Find network docs who accept your plan
- Get digital ID cards
- Check balances in a health savings account or health fund

While you're logged in, you can email or chat with Member Services, too.

Keep an eye on costs

Use the Member Payment Estimator tool to compare and estimate costs* for medical services at up to 10 different network doctors or facilities at once. This tool includes more than 650 medical services people commonly use, like:

- Office visits
- Maternity services
- X-rays, MRIs, CT scans and other lab services

You'll find a series of tools to check costs in your area. And the quality of care, too.

Find what you need — wherever, whenever

The Aetna Mobile app puts our most popular online features at your fingertips. It's available for Android™ and iPhone® mobile devices. Visit **aetna.com/mobile**.

WHEN AND WHERE TO ACCESS CARE

Type of Provider	Scenario	Type of Illness or In-
Primary Care Physician (PCP)	Annual wellness exams, or moderate pain you need diagnosed	General checkup, moderate pain of unknown origin, etc.
Specialist	Experiencing pain specific to a particular region of the body (i.e. muscular, gastrointestinal, ocular, bone/joint, skin, ears/nose/throat, etc.)	Ulcers, rash, digestive problems, vision problems, elevated levels, etc.
Hospital	Having an inpatient or outpatient procedure performed, in a critical state	Delivering a baby, major/minor surgery, recovery, monitoring, etc.
Walk-in Clinic	Treatment of unscheduled, non-emergency illnesses/injuries and certain immunizations	Vaccination, mild cold/flu, minor cuts/abrasions, etc.
Urgent Care (Alternative to ER)	Treatment of most non-life threatening emergencies	Broken bones (not multiple fractures), minor wounds (not bleeding profusely), mild fever, flu, acute sinusitis, etc.
Emergency Room (ER)	Treatment of all life/limb-threatening emergencies	Severe head trauma, multiple/compound fractures, heavy bleeding, elevated fever, severe burns, seizures, poison, etc.



URGENT CARE

The Urgent Care Center should be used as often as possible to avoid additional charges.

- The Urgent Care Center is available to treat most non-life threatening emergencies, as broken bones (not multiple fractures), wounds not bleeding profusely, fevers and flu symptoms. Please note that most urgent cares are not 24 hours or open Saturday/Sunday.
- The hospital emergency room is to be used only if the situation is limb or life threatening.
- The Urgent Care Center should be used as often as possible to avoid additional charges.
- The copay is less:
 - HNO Plan - \$100 copay for emergency room versus \$35 copay for urgent care.
 - OAMC/POS Plan - \$200 copay for emergency room versus \$75 copay for urgent care.

In-Network Urgent Care Centers close to CWRU campus:

Urgent Care Center	Address	Hours
Cleveland Urgent Care LLC	1956 E. 79 th St, CLE 44103 (216) 431-3733	8am-8pm Monday – Friday; 9am-5pm Saturday-Sunday
Concentra Health Services	5500 S. Marginal Rd., CLE 44103 (216) 426-9020	8am-5pm Monday-Friday
DBA Medgroup	13916 Cedar Road, Univ Hts 44118 (216) 381-9000	8am-4pm Mon/Wed/Fri; 8am - 8pm Tues/Thurs; 9am-4pm Saturday
UH Suburban Urgent Care	1611 South Green Road Suite 63, S. Euclid 44121 (216) 237-5012	8am - 5pm Monday-Friday; Closed Saturday/Sunday



WALK IN CLINICS

It is not an alternative for the emergency room or the outpatient department of a hospital.

- The Walk-In Clinic is an in-network, free-standing health care facility that is an alternative to a physician's office for treatment of unscheduled, non-emergency illnesses and injuries and administration of certain immunizations.
- It is generally found in a retail location as CVS.
- The "in-network" copays are:
Aetna HNO Plan - \$15
Aetna OAMC/POS Plan - \$10

The lists of "in-network" Walk-In Clinics are different for the two plans offered to CWRU postdocs. Please see a full list on the CWRU Postdoc Benefits portal – Documents Library. The closest include:

Walk-In Clinic - HNO	Address
MinuteClinic – In CVS Pharmacy (4.37 mi)	14440 Cedar Rd, CLE 44121 (866) 389-2727
MinuteClinic – In CVS Pharmacy (5.68 mi)	1443 Richmond Rd, Lyndhurst 44124 (866) 389-2727
MinuteClinic – In CVS Pharmacy (7.2 mi)	28100 Chagrin Blvd, Woodmere 44122 (866) 389-2727
MinuteClinic – In CVS Pharmacy (8.62 mi)	11706 Clifton Blvd, Lakewood 44107 (866) 389-2727
Walk-In Clinic – OAMC/POS	Address
Cleveland Clinic (0.86 mi)	9500 Euclid Ave, CLE 44195 (216) 444-2273
Cleveland Clinic (1.74 mi)	13944 Euclid Ave, CLE 44112 (216) 444-2273
MinuteClinic – In CVS Pharmacy (4.37 mi)	14440 Cedar Rd, CLE 44121 (866) 389-2727
Cleveland Clinic (4.47 mi)	315 Euclid Ave, CLE 44114 (216) 444-2273



EMERGENCY ROOMS

Hospital emergency rooms should be utilized in life and limb threatening situations.

- Please note that the plan does not cover non-emergent use of emergency facilities
- Examples of emergent situations include chest pains, shortness of breath, fainting/change in mental state, severe burns, deep lacerations, etc.
- When in doubt, please call 911 — what matters most is that you get to the emergency room quickly and safely.
- The emergency room copays are:
 - HNO—\$100 copay/visit, deductible doesn't apply
 - OAMC/POS —\$200 copay/visit, deductible doesn't apply
- Emergency transportation (ambulance)
 - HNO—0% coinsurance
 - OAMC/POS—10% coinsurance
- There are 4 emergency rooms within 5 miles of the campus

- University Hospitals Cleveland Medical Center—0.1 miles
- Cleveland Clinic Main Campus—0.8 miles
- Select Specialty Hospital - Cleveland Fairhill—1.5 miles
- UH Ahuja Medical Center- Suburban Health—5 miles

DENTAL PLAN



	PPO	
	In-Network	Out-of-Network UCR
Core Benefits	Postdoc Pays	
Annual Deductible	None	\$50 / \$150*
Annual Benefit Maximums	\$1,250	\$750
<u>PREVENTIVE/DIAGNOSTIC</u>		
Oral Exam	0%	30%
Prophylaxis	0%	30%
X-rays	0%	30%
<u>BASIC PROCEDURES</u>		
Fillings	20%	40%
Endodontics	20%	40%
Periodontics	20%	40%
Oral Surgery	20%	40%
<u>MAJOR PROCEDURES</u>		
Crowns	40%	60%
Bridgework	40%	60%
Dentures	40%	60%
Orthodontia (child only)	50% (\$1,250 lifetime max)	

*Deductible waived for preventive

Accessing Care Out-of-Network

It's important to understand that anytime you access the out-of-network benefit on the dental PPO plan, you will pay substantially more out-of-pocket. That is due to there not being any contractual agreement between the insurance carrier and the dental provider to offer services at a discounted rate.

When you seek services *in-network*, meaning, from providers listed in the PPO network, you are paying less for services since these providers have agreed to provide services per the provider network discounts outlined in their contracts with the insurance carriers. When you pay 40% for major services in-network when seeking services from a PPO dentist, you are paying 40% of a contracted, discounted rate.

Out-of-Network Example: The out-of-network dentist decides to charge \$1,000 for a porcelain crown on a molar. This dentist is not prohibited from charging what he/she feels can be charged for this service. Your percentage of cost out-of-network is 40% after the \$50 deductible, and usual, customary and reasonable (UCR) is considered \$800 for this service: You pay \$370

IN ADDITION, you owe the difference between the UCR amount and what the out-of-network dentist decided to charge you (\$1,000 - \$800), which is an additional \$200. **Total estimated cost out-of-network for the porcelain crown on a molar: \$570**

VISION PLAN



PPO		
In-Network		Out-of-Network
Core Benefits	Postdoc Pays	
Vision Examinations	\$10 Copay Every 12 Months	Up to \$35 Allowance
Corrective Lenses		
Single	\$25 Copay	Up to \$25 Allowance
Bifocal	\$25 Copay	Up to \$40 Allowance
Trifocal	\$25 Copay	Up to \$60 Allowance
Conventional Contact Lenses*	\$135 Allowance (additional 15% off balance over allowance)	Up to \$95 Allowance
Disposable Contact Lenses	\$135 Allowance (no additional discount on remaining balance)	Up to \$95 Allowance
Medically Necessary Contact Lenses	\$0 Copay	Up to \$200 Allowance
	Every 12 Months	
Frames	\$120 Allowance (additional 20% off balance over allowance)	Up to \$48 Allowance
	Every 12 Months	

*In lieu of corrective lenses, materials only

Additional Features

Eye Care Supplies: Receive 20% off retail price for eye care supplies like cleaning cloths and solutions purchased at network providers (not valid on doctor's services or contact lenses).

Laser Vision Correction: Save 15% off the retail price or 5% off the promotional price for LASIK or PRK procedures.

Replacement Contact Lens Purchases: Visit www.eyemedcontacts.com to order replacement contact lenses for shipment to your home at less than retail price.

Life & Accidental Death & Dismemberment Plan



Core Benefits	Life and AD&D
Basic Life	\$20,000
Accidental Death & Dismemberment	\$20,000

What is Life and AD&D Insurance?

Basic Life insurance helps provide financial protection by promising to pay a benefit in the event of an eligible member's covered death. Basic Accidental Death and Dismemberment (AD&D) insurance may provide an additional amount in the event of a covered death or dismemberment as a result of an accident.

Additional Features

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.

AD&D Airbag Benefit: Provides further protection in the event of a covered automobile accident for which an AD&D Seat Belt Benefit is Payable.

AD&D Family Benefits: Includes benefits for career adjustment, childcare, and higher education for eligible surviving family members.

Designating Your Beneficiary(ies)

A beneficiary is the person or people you would like your life insurance benefit to be paid to in the event of your passing. A contingent beneficiary is the person or people who you would like the benefit to be paid to in the event that all of your primary beneficiaries have predeceased the insured. Your beneficiary(ies) can and should be designated on your PBP enrollment form.



International Postdocs holding a J-1 Visa (and their J2 dependents) DO NOT need to purchase supplemental medical evacuation and repatriation coverage to meet J1 and J2 Visa requirements. The Life/AD&D plan satisfies these requirements, even if the postdoc waives the medical, dental and vision coverage.

IMPACT SOLUTIONS

A program available to you and your family offering access to confidential, professional support, 24 hours a day, 365 days a year. All IMPACT counselors are qualified masters/doctoral level professionals.

Program Features



Live, Immediate Assistance

Call 24/7 **800-227-6007** toll-free for unlimited phone consultation with a mental health professional



Face to Face Counseling Services

5 complimentary face-to-face counseling sessions, per person, per occurrence



Legal Assistance

- 30 minute complimentary appointment
- General advice and guidance
- Discounts for most on-going legal services
- 24 hour emergency services; access to legal providers after-hours/weekends in the case of being arrested/jailed



Work/Life Consultation and Referral Services

- Childcare
- Eldercare
- Convenience services



Identity Theft Prevention and Recovery Services

Complimentary phone consultation with a Fraud Resolution Specialist



Financial Services

Complimentary consultation with financial counselors and educators



Comprehensive Work/Life Website

Mobile friendly, self service information on everyday living issues and concerns via:

- Articles, tip sheets and other resources
- Referral Locators including child, elder and pet care
- Self-assessments and surveys
- Savings Center with discounts on name brand items
- Do-it-yourself legal documents
- Financial calculators
- Free ID monitoring through the Financial Center



Telephonic Coaching Services

- Elder/Adult/Caregiver Support
- Nutrition
- Mindfulness

Accessing the IMPACT Solutions Website

1. Go to www.MyImpactSolution.com
2. Click **"Go to member login"** on the top right hand corner



3. Enter username: **cwrupostdoc**
4. Click **SIGN IN**

MEMBER LOGIN

Username*:

MANAGER LOGIN

Username*:

Password*:

HR LOGIN

Username*:

Password*:

Frequently Asked Questions

What happens when I call IMPACT for assistance?

Regardless of when you call (day or night), you will speak with a mental health professional who can provide you with the support and guidance to navigate your present situation. Authorizations for counseling and other resource referrals are coordinated by our Triage Counselors during normal business hours (Monday through Friday). They will identify a network provider that is suited to meet your needs, answer any questions you may have about the counseling process, and follow up to make sure your needs have been met and you do not need any further assistance.

Will anyone know when I use the program?

All services are confidential and governed by federal and state laws. Information will not be shared without your consent or as mandated by law. Using the program will not affect your job security or advancement and all organizational policies and procedures remain in effect.

Who pays for the program?

The IMPACT Employee Assistance & Work/Life Program is available to you **free of charge**.

Who is eligible for the program?

All Post Doctoral Scholars, spouse/partner, household members, dependents in and away from home, and parents/parents-in-law are eligible to use any of the IMPACT services.

Please note: EAP counseling services are intended for brief counseling interventions. Certain professional treatment services, such as medical care, psychiatric service, long-term counseling/psychotherapy or testing are not included in the EAP offerings. In the event that such services are needed, refer to your health care plan for an explanation of covered services.

INFORMATION SOURCES

Insurance Carrier Member Services

Aetna Medical.....	(877) 204-9186
MetLife Dental.....	(800) 275-4638
EyeMed Vision.....	(866) 723-0513
The Standard Basic Life/AD&D.....	(800) 628-8600
Impact Solutions Employee Assistance Program.....	(800) 227-6007

Gallagher Benefit Services (GBS)

Phone.....	(949) 317-5917
Email.....	UniversityServices.GBS.casebbp@ajg.com
Postdoctoral Insurance Plan Website.....	https://clients.garnett-powers.com/pd/case/

Your Dedicated Account Manager: Diana Fox

Diana Fox previously served as the Director of Postdoctoral Affairs at Case Western Reserve University. She has a deep knowledge of the unique needs of the postdoctoral community and desires to make health insurance and routine healthcare more accessible for postdoctoral researchers.

Please do not hesitate to reach out to Diana for assistance with any healthcare access/ health insurance questions.



NOTES

[illegible]



Gallagher

Insurance | Risk Management | Consulting

Gallagher Benefit Services

The benefits outlined on this guide are for comparative purposes only. In the event of a discrepancy between this guide and the actual plan documents, the provisions of the master policy will prevail.