

# Northwestern University Postdoctoral Benefit Program

Frequently Asked Questions (FAQs)

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Question	Answer
	General Insurance Questions
I am on a J Visa, does this plan meet the Department of State insurance requirements?	Yes, your insurance plan meets the following criteria established by the U.S. Department of State and Northwestern University:  \$100,000 USD per accident & illness in medical coverage  Deductible cannot exceed \$500 per accident or illness  Co-insurance cannot exceed 20% in-network and 40% out-of-network  Medical evacuation coverage must be at least \$50,000 USD  Repatriation coverage must be at least \$25,000 USD  Out of pocket expenses now to exceed \$9,000 per year  Coverage for inpatient and outpatient care for both sickness and illness  Coverage for pre-existing conditions (no exclusions and no waiting period)  Coverage for mental health, prescription drugs, and pregnancy  Policy must not unreasonably exclude coverage for perils inherent to the activities of the program in which the exchange visitor participates
What is the difference between a Broker and the Insurance Carrier? What network am I in?	Gallagher is the broker; we represent your best interests by helping you find the right plan for you and your family, help you understand the process, make plan changes, answer questions about your invoices, obtain your documents, and find a provider.  United Healthcare is the insurance company and network; this is the group of doctors and hospitals in a contract to provide discounted services. They are also responsible for providing the insurance coverage, paying claims, and maintaining the network.
What is the difference between In-Network and Out-of-Network?	The network is a group of doctors and hospitals in a contract. Going to a provider outside the network will usually result in higher costs. Always check the <a href="Find A Provider database">Find A Provider database</a> prior to seeking care to ensure you are staying in the UnitedHealthcare network.
Is the PBP Affordable Care Act (ACA) compliant?	Yes, these plans are Affordable Care Act (ACA) compliant.



Question	Answer
	Eligibility and When To Enroll
Who is eligible to participate in the Northwestern Postdoctoral Benefit Program (PBP)?	All employed, NRSA, Direct-Pay, and Employed postdoctoral trainees are eligible to enroll in the plans offered.  If you are a postdoctoral trainee that is eligible to participate in the plan, your eligible family member may also be participants. The following is a list of eligible family members:  Spouse  Natural or adopted child or children to age 26 (unless eligible to continue coverage because of disability) and unmarried  Stepchild to age 26 if unmarried, lives with the postdoctoral trainee, is supported by the postdoctoral trainee at more than 50%, and is claimed as a tax dependent by the postdoctoral trainee or spouse
When can I enroll?	Postdoctoral trainees can enroll themselves and/or their family members during the Period of Eligibility (PIE). The Period of Eligibility begins on the day the Postdoctoral trainee's appointment begins and/or they experience a Qualifying Event. The Period of Eligibility ends 31 calendar days after the postdoctoral trainee's appointment start date or the date of the Qualifying Event.
Do I have to wait for the Period of Eligibility (PIE) after I arrive to submit my enrollment form? Can I submit it prior to my arrival?	You must wait until after you have arrived on campus, have started working, and have access to the enrollment portal.
What is a Qualifying Event?	Examples of Qualifying Events include but are not limited to marriage, divorce, birth or adoption of a child, loss of prior coverage, relocation, arrival of a dependent from another country. When a Qualifying Event happens, you can add a spouse and/or dependent/s to your coverage, change plans, or add an FSA or LTD. A Qualifying Event allows you to make changes to your insurance coverage that otherwise you would only be allowed to change during the annual Open Enrollment.
When is Open Enrollment (OE)?	Open Enrollment (OE) typically happens around November every year. Changes made during Open Enrollment are reflected as of January 1 <sup>st</sup> of the next year. Open enrollment is the one time per year when you can make changes to your benefits, such as changing plans from an HMO to a PPO plan or adding a dependent. Otherwise, changes can only be made with proof of a Qualifying Event.
I just extended my stay, do I need to extend my insurance?	Postdoctoral benefits remain active until the university requests termination of coverage. If your appointment is extended, your insurance will automatically be extended. There is no need to reenroll in benefits.



Question	Answer
	Enrollment
Is it mandatory to enroll in one of these plans? Can I opt out of (waive) medical coverage from the PBP?	Postdoctoral trainees may opt out of health insurance coverage under the PBP if the postdoctoral trainee is enrolled in an alternate medical plan that offers comparable coverage, at least meeting the Department of State and Northwestern's J1 requirements. You can begin the waiver process on the <a href="Begin Enrollment page">Begin Enrollment page</a> by creating a login account.
How do I enroll? Is it automatic?	No, you are not automatically enrolled. It is a 2-step process, <u>step-by-step instructions can be found here</u> . There is one step for the Health, Dental, Vision, and Life Insurance and a separate step for the Flexible Spending (healthcare FSA or dependent care FSA) and Long-Term Disability (LTD). To enroll in the medical insurance, click the <u>Begin Enrollment page</u> , create a login account, the fill out the enrollment form.
When does my coverage begin?	It is important to understand that, as long as you submit your enrollment within your PIE, you are covered beginning day 1 of your appointment, even if your enrollment has not yet been submitted or processed. This applies to dependents that you enroll within your PIE as well.
Can my dependents and I be on different plans (HMO and PPO) while on the same plan?	No, everyone must be on the same plan type.
Can I enroll only my dependents on the plan and exclude myself?	No, you must be enrolled in order for your dependents to be covered.
What is the Tobacco Surcharge?	Postdoctoral trainees must attest to their tobacco use in the Northwestern myHR Self Service center. Tobacco users and those who do not attest will be charged \$50 per month from their paycheck.
What happens after I submit the enrollment form?	After your enrollment is sent to Gallagher for processing, please allow up to 5-10 business days in order for your enrollment to be processed. You will receive a confirmation email when your enrollment is complete. ID cards are sent directly from the insurance company and will arrive within 2 weeks via mail after the enrollment is complete.



Question	Answer	
Г	Making Changes To Your Plan or Contact Information	
When is open enrollment?	Open Enrollment (OE) typically happens around November every year. Changes made during Open Enrollment are reflected as of January 1 <sup>st</sup> of the next year. Open enrollment is the one time per year when you can make changes to your benefits, such as changing plans from an HMO to a PPO plan or adding a dependent. Otherwise, changes can only be made with proof of a Qualifying Event.	
What is a Qualifying Event?	Examples of Qualifying Events include but are not limited to marriage, divorce, birth or adoption of a child, loss of prior coverage, relocation, arrival of a dependent from another country. When a Qualifying Event happens, you can add a spouse and/or dependent/s to your coverage, change plans, or add an FSA or LTD. A Qualifying Event allows you to make changes to your insurance coverage that otherwise you would only be allowed to change during the annual Open Enrollment.	
Can I switch my plan elections after I enroll?	You may only switch plans on the PBP if you are still within your Period of Eligibility, you have a Qualifying Event, or during Open Enrollment.	
My spouse or dependents arrived in the United States after I did, can I still add them to my plan?	Yes, each family member receives their own Period of Eligibility starting on the date they arrived in the United States. In order to enroll your eligible family member, you must login to your enrollment record <a href="here">here</a> and submit your spouse or child's information and benefit elections.	
I got married or had a baby; how and when can I enroll my spouse or dependent?	You have 30 days from the date of your marriage or birth/adoption of your child to submit the enrollment request. In order to enroll your spouse or child, you must login to your enrollment record <a href="here">here</a> and submit your spouse or child's information and benefit elections. A copy of the marriage or birth certificate will also be required at the time of enrollment.  Additional information for newborns:  Newborns are temporarily enrolled under the mother for the first 30 days so that the post-natal claims filed immediately after birth can be processed, however you still must submit a formal request to enroll the child through <a href="Begin Enrollment">Begin Enrollment</a> to ensure the child has coverage past those first 30 days.	
What documents are needed for dependent verification when adding someone to my plan after initial enrollment?	See the <u>list of acceptable documents for dependent verification</u> . Due to requirements of the Affordable Care Act, Social Security Numbers (SSNs) are needed for dependents covered on one of Northwestern's medical plans.	
I just moved to a new address, what do I need to do?	Ask your administrator at Northwestern to update your address in the Northwestern HR system. The updated information will be sent to Gallagher and flagged for processing. We will then process the address update with the applicable insurance carriers.	



Question	Answer
	Benefits and Coverage
What type of medical plans are offered?	You can choose from a Health Maintenance Organization (HMO) or a Preferred Provider Organization (PPO) option.
What is the difference between an HMO and PPO?	A <b>Health Maintenance Organization (HMO)</b> requires the member to choose a Primary Care Physician (PCP) within the HMO network. The PCP becomes your gatekeeper and who you visit for any healthcare needs, including your annual wellness exam. If you need to see a specialist, you must visit your Primary Care Physician to get a referral first. HMOs are cheaper per month and have lower costs when visiting the doctor as long as they are within the HMO network.  A <b>Preferred Provider Organization (PPO)</b> does not require you to choose a Primary Care Physician (PCP), you can choose any doctor in the PPO network and change them as often as you'd like. If you need to see a specialist, you do not need to get a referral first. PPOs are more expensive per month, and you have a broader choice of doctors to choose from.
What is covered under each plan?	To learn what benefits are offered and what is covered, please see the <u>Insurance Benefits &amp; Rates page</u> for an overview or the <u>Documents Library</u> for more detailed plan specifics.
Are preventive services such as annual physical exams or immunizations covered?	An annual wellness exam (preventative care) is covered at no charge, including free Primary Care Physician (PCP) visits for kids. More detailed information about preventative immunizations can be found in the plan certificates in the <a href="Documents Library">Documents Library</a> .
Are annual vision or dentist visits covered?	Yes, every 12 months you can get your vision exam; there is a \$10 copay. Every 6 months you can get your teeth cleaned; there is a \$5 copay for the HMO plan and a \$50 deductible on the PPO plan.
I just got my enrollment confirmation email, when do I get my ID cards?	You can expect to receive your medical ID cards and dental ID cards in 7-10 business days after your enrollment confirmation email. You will not get a vision card, but one can be downloaded online.
Is telemedicine included in the benefits?	Yes, <u>UnitedHealthcare offers free 24/7 phone or virtual appointments</u> for common ailments like cough/cold, the flu, migraines, allergies, sinus infections, rashes/skin problems, bronchitis, etc. Talk to a licensed physician in minutes and even get a prescription if necessary.



Question	Answer
Benefits and Coverage (continued)	
I am enrolled in the HMO and will be traveling away from the area, will my family and I be covered?	If you are enrolled on the HMO plan and traveling outside your HMO service area (your resident state), you and your family will only be covered if it is a Medical Emergency. If the insurance carrier does not deem the situation to be a medical emergency (immediate danger to your life and/or a limb), your insurance claim could be denied. If you need to see an urgent care, please contact UnitedHealthcare about preauthorization prior to visiting the urgent care.
Does the insurance cover me if I travel outside of the United States?	The plan does cover you when outside of the country, but you may need to pay for the services at the time you seek care, then file a claim to get reimbursed from UnitedHealthcare once you get home.
Where can I see my claims (bills)?	Claims can be found in <a href="myUHC">myUHC</a> or download the UnitedHealthcare app. You can see what was billed, your digital ID cards, find a provider, what was covered, and what you owe on the Explanation of Benefits (EOB). You will be billed from, and must pay, the doctor or hospital directly. You do not pay UnitedHealthcare or Gallagher for medical bills.
What happens if I receive a bill that seems too high?	You can reach out to Gallagher or UnitedHealthcare to ask questions about the claim amount or status.
What if I went to the doctor and paid out of pocket, how do I get reimbursed?	You can go to the myUHC portal and download a Claims Form.



	Question	Answer
	Prescriptions	
Are prescriptions cove	ered?	Yes, your plan helps cover some of the costs of prescriptions, but the actual amount covered will depend on the plan you choose.
Can I order my prescri	ptions through the mail?	Yes, you can either have your doctor submit the prescriptions to Optum Rx, or you can sign up by going to myUHC or on the UnitedHealthcare app.

Question	Answer
Voluntary Dental & Vision Insurance	
Where can I find detailed information about the dental and vision plans?	To learn what benefits are offered and what is covered, please see the <u>Insurance Benefits &amp; Rates page</u> for an overview or the <u>Documents Library</u> for more detailed specifics.
What options do I have for the dental plan?	Guardian Dental offers Health Maintenance Organization (HMO) or Preferred Provider Organizations (PPO) options.
What options do I have for the vision plan?	EyeMed offers a Preferred Provider Organizations (PPO) plan.
How can I find a dentist or eye doctor?	You can find a dentist or eye doctor by visiting the <u>Find a Provider</u> page on the <u>Northwestern Postdoctoral Benefit Program Portal</u> .
Are annual vision or dentist visits covered?	Yes, every 12 months you can get your vision exam; there is a \$10 copay. Every 6 months you can get your teeth cleaned; there is a \$5 copay for the HMO plan and a a\$50 deductible on the PPO plan.



Question	Answer	
	Seeking Care	
	Telemedicine: Cough/cold, flu, bronchitis, rashes, allergies, sinus infection, etc. Free! Doctors available 24/7 for phone or video consults.	
	<b>Walk-In Clinic:</b> Cough/cold, flu, urinary tract infections, allergies, sinus infection, minor cuts and scrapes, bronchitis, rash, etc. Affordable, usually only \$100-250. Can be seen by a doctor quickly and they are open late nights and weekends, but not 24/7.	
Where should I seek care?	<b>Urgent Care:</b> Cough/cold, flu, urinary tract infections, allergies, sinus infection, minor cuts and scrapes, bronchitis, rash, etc. Affordable, usually only \$100-250.Can be seen by a doctor quickly and they are open late nights and weekends, but not 24/7.	
	Primary Care Physician: Annual wellness visits, physicals, or minor issues like a cough, flu, minor pain, or to get a referral to see a specialist.	
	Specialist: Specific ailments or issues like arthritis, gastrointestinal issues, ear nose and throat (ENT), dermatology, heart conditions, etc.	
	<b>Emergency Room:</b> Should be reserved for loss of life or limb, car accident, severe burns, head trauma, heart attack, stroke, severe lacerations, etc. Open 24/7 but they are triaged, so you could wait longer for a less severe injury/illness. Much more costly than urgent cares or walk-in clinics.	
How do I find a provider?	Doctor, Clinic, Vision, or Dental: You can find a medical, dental, or vision provider by visiting the Find a Provider page.  Telemedicine: UnitedHealthcare offers free 24/7 phone or virtual appointments, talk to a licensed physician in minutes and even get a prescription if necessary.	
What should I bring to my appointment?	When you visit the doctor, urgent care, walk-in clinic, or hospital, bring your medical ID card and a form of ID.	
I need to see my doctor but haven't been officially enrolled yet, what should I do?	You will not have a subscriber ID from the insurance carrier until your entire enrollment process has been completed. If you are unsure if your enrollment process has been completed, please call Gallagher at 844-315-4550 and we can check on the status. In the absence of the ID card and subscriber ID, you may ask the provider to wait to submit a claim for payment until you receive your medical ID card. The second option is to pay for the medical services in full and submit a medical claim form later for reimbursement according to the provisions of your plan.	
How do I remember which urgent care or hospital to go to?	As a tip, once you know where you will be living, work, or going to school, use the <u>Find a Provider</u> page to look up the 2 closest urgent cares, walk-in clinics, and an emergency room. Program them in your phone's Maps app so in case you or a family member has a medical issue, you already know where to go and don't need to spend time looking it up.	



Question	Answer
	Seeking Care (continued)
Do I need a Primary Care Physician (PCP)?	If you are on the PPO plan, no, you do not need to establish a Primary Care Physician; although you can if you want to. If you are sick or need to be seen by a doctor, you can just schedule with any In-Network provider. If you are on the HMO plan, yes, you need to choose a Primary Care Physician.
Can I change my PCP?	Yes, you can change your Primary Care Physician (PCP) up to once per month if you are not satisfied with your choice.
How do I change my Primary Care Physician (PCP) or Primary Care Dentist (PCD)?	To change your PCP, go to your myUHC portal or call their Member Services at 855-828-7715 (HMO plan) or 866-633-2446 (PPO plan).  To change your PCD, contact Guardian at 866-302-4542. Oftentimes, the new dentist will not see you until you have showed up in their patient roster. Unfortunately, they only receive the updated patient rosters once a month (around the 10th), but there is a way around this. Ask the Guardian rep to "fax or email your eligibility to the dental office." This will essentially be written proof that you have been assigned to their practice and should satisfy the dental office and allow you to make an appointment. If you call before the 15th of the month, you will be eligible to visit your new Doctor or Dentist on the 1st of the following month.
Do I need a referral to see a Specialist?	If you are on the PPO plan, no, you can call the specialist directly and schedule an appointment. If you are on the HMO plan, yes, you would need to see your PCP first to get a referral to a specialist.
I am on the HMO, do I need a referral to see an OB/GYN?	OBGYN's do not require a referral, you may simply choose any OB/GYN in the same medical group as your Primary Care Physician (PCP) and contact their office directly to make an appointment. Ask your PCP's office for assistance contacting OB/GYNs within your medical group if necessary.
How can I find an In-Network mental health provider?	Visit the <u>Find a Provider</u> page or contact UnitedHealthcare Member Services at 855-828-7715 (HMO plan) or 866-633-2446 (PPO plan) for assistance with locating a mental health provider near you and scheduling an appointment.



Question	Answer	
Basic Life Insurance, Accid	Basic Life Insurance, Accidental Death & Dismemberment, Voluntary Supplemental Life, and Disability	
Where can I find more information about the Basic Life, AD&D, Voluntary Supplemental Life, and Disability?	To learn what benefits are offered and what is covered, please see the <u>Insurance Benefits &amp; Rates page</u> for an overview or the <u>Documents Library</u> for more detailed specifics.	
How do I enroll in the Basic Life and AD&D plan?	Enrollment happens automatically when your other benefits are processed. This is a University-paid benefit.	
How do I enroll in the Voluntary Supplemental Life for myself and/or dependents?	This is done at the initial time of your enrollment in your benefits or during Open Enrollment annually. You can refer to the Northwestern Postdoc Benefits Guide found in the Documents Library.	
How do I enroll in the Short-Term and/or Long-Term Disability?	Employed Postdocs: Extended Sick Time (EST) and Long-Term Disability (LTD) is administered through the Northwestern Human Resources department.  NRSA and Direct Pay Postdocs: Eligible for Short (STD) and/or Long-Term Disability (LTD) and this is managed through Gallagher through The Standard.	
Can I enroll my spouse or eligible family members under the PBP in a life insurance policy?	Yes. To sign up for the life insurance, dependents can be signed up at the time of initial enrollment. Details can be found in the <u>Northwestern Postdoc</u> <u>Benefits Guide found in the Documents Library</u> .	
What disability insurance options are available?	Long-Term Disability: Enrollment in the Long-Term Disability happens automatically for all postdoctoral trainees when your other benefits are processed. This is a University-paid benefit.  Short-Term Disability: Employed Postdocs have access to Extended Sick Time (EST) in lieu of Short-Term Disability, while NRSA and Direct-Pay Postdocs have access to a traditional Short-Term Disability plan through The Standard.	
How do I designate my life insurance beneficiaries?	There is a section on the <u>enrollment form</u> to designate life insurance beneficiaries. You can make changes to these beneficiaries at any time, but we encourage you to make those selections upon initial enrollment.	
In the event that I pass away, what is the benefit amount that my beneficiaries receive?	In the event of your death, your beneficiary(ies) will receive a combined total benefit of \$50,000. An additional \$50,000 will be paid in the event that the death was accidental. Additional life insurance coverage can be purchased on a voluntary basis. Further details regarding additional, voluntary life insurance can be found <a href="here">here</a> .	



Question	Answer	
Additional Wellness Programs		
Employee Assistance Programs (EAP)	EAPs short-term counseling, text therapy, addiction navigation, support groups, cognitive behavioral therapy, legal and financial consultations, identity theft recovery assistance, and more. You can also get referrals for care for issues such as depression, anxiety and panic attack, substance use, attention deficit (ADHD/ADD), autism, bipolar, eating disorders. Both options are available to postdoctoral trainees and their household members 24/7 and provide free support services (up to 3 free counseling sessions per incident, per year). Confidential and private sessions which will not be shared with your employer.  SupportLinc is Northwestern's Employee Assistance Program provider and can be reached 24/7 at 888-881-5462.  UnitedHealthcare Employee Assistance Program can be reached 24/7 at 1-888-887-4114.	
LegalEASE (Employee Postdocs only)	<u>LegalEASE</u> offers support for home buying/selling, debt consolidation, contracts, , traffic matters, license suspensions, wills, estate planning, adoption, divorce, name changes, power of attorney. Enrollment is done through the Northwestern myHR portal during Open Enrollment.	
24/7 Nurseline	Registered nurses can help answer your questions and decide what your next step should be to seek care. They can help answer questions about anything from asthma, back pain, cuts, burns, high fever, sore throat, diabetes, baby's nonstop crying, and much more. Add this number to your contacts in your phone: 855-828-7715 (HMO plan) or 866-633-2446 (PPO plan)	
UHC Rewards (rewards program)	Earn up to \$1,000 in rewards for activities like connecting a tracker, taking a health survey, getting an annual checkup, or getting a biometric screening.	
Care Cash (pre-loaded debit card)	Care Cash helps pay for eligible medical expenses from flu shots to urgent care visits. The card comes loaded with \$200 for individuals or \$500 for families. See more information about <a href="Care Cash">Care Cash in the Northwestern Postdoctoral Benefit Program Portal here</a> .	
Real Appeal (weight management)	Free weight management program to help you set achievable nutrition, exercise, and weight loss goals. Join at enroll.realappeal.com	
Calm app (mindfulness)	The Calm app provides tools to support your mental health and well-being. There is typically a membership fee for the app, but UHC members can sign up for no cost.	
One Pass Select (gym workouts)	Help reach your fitness goals by creating workout plans; choose a membership that's right for you. You can use your UHC Rewards to pay for the membership.	
Quit For Life (tobacco cessation)	Get the tools needed to stop using tobacco products.	



Question	Answer
Flexible Spending Accounts: Healthcare FSA and Dependent Care FSA	
Where can I find more information about the Healthcare FSA or Dependent Care FSA?	To learn more about the FSA programs and how to enroll, please see <u>Healthcare FSA or Dependent Care FSA links on the left side of the Northwestern PBP portal</u> .

Question	Answer
	Monthly Invoicing and Taxes
What are the monthly rates?	There are different rates for Direct Pay Postdocs, NRSA Postdocs, and Employed Postdocs. See the rates on the <u>Insurance Rates Benefits and Rates page</u> .
How are the premiums collected from the Postdocs?	Postdocs will have their contributions (if applicable) deducted from their stipends automatically via NU's internal process on a monthly basis. See the monthly rates here.
Can GBS bill my department?	Yes, Gallagher can bill your department if you are a Direct Pay Postdoc. You would need to coordinate with your department to see if they would be able to pay the monthly invoice. If they will cover it, please have the department contact Gallagher at <a href="mailto:UniversityServices.GBS.nupfbp@aig.com">UniversityServices.GBS.nupfbp@aig.com</a>
Will I get any type of tax forms so I can file my U.S. tax returns?	Yes, the only tax forms will come from the medical insurance carrier UnitedHealthcare. UHC will mail out the Form 1095-B to your address of record around February or March.



Question	Answer		
Term	Terminating Coverage, COBRA, and Leaves of Absence (LOA)		
Can I continue medical, dental, and vision coverage when my appointment ends? Do I have access to COBRA?	When your appointment terminates and you leave the university, you may continue your coverage for any of the PBP medical, dental and/or vision plans in which you and your family members are enrolled by electing COBRA Continuation Coverage. Find more information about the COBRA coverage.  COBRA, the Consolidated Omnibus Budget Reconciliation Act of 1985, offers coverage when you experience a qualifying event and you lose your coverage, such as termination of employment. When you elect COBRA coverage, you will pay for each plan in which you and your family members choose to be enrolled. Please keep in mind that if your appointment ends on the 2 <sup>nd</sup> day of the month or later, your PBP coverage continues until the end of that month, and your elected COBRA coverage would begin on the 1 <sup>st</sup> day of the month following your termination.  We receive a weekly file from Northwestern that advises us of postdoctoral trainee termination dates. Flexible Benefit Services, a third-party administrator, will then send you a COBRA Election Form which displays the plans that are available and their rates. That notice is sent to your last known address communicated to us through Northwestern's HR file feed.  In order to elect your coverage, you will complete the COBRA Election Notice and the carrier application and send it back to Flexible Benefit Services within 60 days of receipt. You will be billed by Flexible Benefit Services on a monthly basis for your elected coverage		
My Postdoc appointment is terminating and I am leaving my campus, when does my insurance coverage end?	Your insurance coverage ends on the last day of the month in which your appointment terminates, unless your appointment terminates on the 1 <sup>st</sup> day of the month. For instance, if your appointment ends on 11/8, your coverage will continue through 11/30. If your appointment ends 11/1, your coverage ends 11/1 as well.		
I am going on a Leave of Absence (LOA), does my medical coverage continue?	If you receive an approved leave of absence, with or without pay, medical coverage <i>may</i> be continued. Contact your Administrator at Northwestern for more information.		



Question	Answer	
Waivers / Opting Out		
What is a waiver? What happens if I have external health insurance and I wish to submit a waiver?	A waiver is when the postdoctoral trainee is already enrolled in an alternate medical plan that offers comparable coverage, at least meeting the Department of State and Northwestern's J1 requirements. This would exempt them from the requirement to purchase the Northwestern Postdoctoral Benefit Program plans.	
Is it mandatory to enroll in one of these plans? Can I opt out of medical coverage from the PBP?	Postdoctoral trainees may opt out of health insurance coverage under the PBP if the postdoctoral trainee is enrolled in an alternate medical plan that offers comparable coverage, at least meeting the Department of State and Northwestern's J1 requirements. You can begin the waiver process on the <a href="Begin Enrollment page">Begin Enrollment page</a> by creating a login account.	
I opted out of coverage from the PBP, can I enroll back in?	You may enroll back into the PBP if you are still within your PIE period, or else you will need to wait until Open Enrollment.	
How do I submit a waiver?	Waivers and the accompanying documentation must be submitted through the enrollment portal.	
What happens after I submit the waiver?	Your waiver is not officially approved upon submission. Gallagher will review your documents and either send you an approval confirmation email or send you an email requesting additional information.	
What requirements does my external coverage need to meet to qualify for a waiver?	Your insurance plan must meet the following criteria established by the U.S. Department of State and Northwestern University. <a href="https://doi.org/10.1007/journal.org/">Those waiver requirements can be found on Slide 3 of this document.</a>	
Do my documents need to be in English?	Yes, any external insurance documents you upload for review and approval must be in English. If they are not in English, please consult your insurance carrier.	



Question	Answer
	Contacts
How do I contact Gallagher about my enrollment, waiver, invoicing, coverage, or claims?	Phone: (844) 315-4550  Email: UniversityServices.GBS.nupfbp@ajg.com  Postdoctoral Benefit Program website: <a href="https://clients.garnett-powers.com/pd/northwesternu/">https://clients.garnett-powers.com/pd/northwesternu/</a>
What is the contact information for all the benefit companies?	UnitedHealthcare: 855-828-7715 (HMO plan) or 866-633-2446 (PPO plan) Guardian dental: 866-494-4542 (HMO plan) or 800-541-7846 (PPO plan) EyeMed vision: 866-723-0514 The Standard Basic Life and AD&D: 800-628-8600 The Hartford Extended Sick Time: 888/541/7283 UHC Employee Assistance Program (EAP): 24/7 at 1-888-887-4114 SupportLinc (Northwestern's Employee Assistance Program): 24/7 at 888-881-5462
Where should hospitals and doctors send claims?	Claims should be sent to UnitedHealthcare.
How do I contact UnitedHealthcare's telemedicine?	UnitedHealthcare offers free 24/7 phone or virtual appointments, talk to a licensed physician in minutes and even get a prescription if necessary.