

A woman in a white lab coat is looking through a microscope in a laboratory setting. The image is overlaid with a blue and yellow color scheme and a pattern of thin, parallel lines. The text "MEDICAL INSURANCE" is prominently displayed in the center.

MEDICAL INSURANCE

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 who acts as your gatekeeper for all of your care.

If you enroll through the GPA hosted PSBP website, Health Net will automatically assign you to a PCP.

If you enroll through At Your Service Online (AYSO), the UC sponsored enrollment service, you will be able to choose your own PCP using a link to the Health Net provider directory.

You will learn of whether you may enroll through AYSO or through the GPA PSBP website when you click on 'Enrollment' on the GPA PSBP website by answering a series of questions.

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).

PDS MONTHLY CONTRIBUTIONS

FOR THE HMO MEDICAL PLAN

Effective January 1, 2018: All PDS will make the following monthly contribution if enrolled in the Medical HMO Plan:

COVERAGE TYPE	MONTHLY CONTRIBUTION
Postdoc Only	\$10.78
Postdoc + Spouse or Domestic Partner	\$38.81
Postdoc + Child(ren)	\$18.86
Postdoc + Spouse + Child(ren)	\$49.32

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.

The In-Network benefit coverage (deductible, coinsurance, etc.) will be greater than the Out-of-Network benefit coverage.

PDS MONTHLY CONTRIBUTIONS

FOR THE PPO MEDICAL PLAN

Effective January 1, 2018: The PDS will make the following monthly contribution if enrolled in the Medical PPO Plan:

COVERAGE TYPE	MONTHLY CONTRIBUTION
Postdoc Only	\$20.00
Postdoc + Spouse or Domestic Partner	\$40.00
Postdoc + Child(ren)	\$40.00
Postdoc + Spouse + Child(ren)	\$60.00

PSBP Medical PPO Plan

Health Net of California

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:

(Does not include deductible)

ANNUAL DEDUCTIBLE:

Individual

Family

LIFETIME MAXIMUM:

HEALTH NET PPO (IN-NETWORK) POSTDOCTORAL SCHOLAR PAYS

\$20 Copay

\$250 Copay then 20%

\$0 Copay

\$250 Copay then 20%

\$10 Copay

\$25 Copay

\$35 Copay

20%

No Charge

\$1,500 Individual

\$4,500 Family

None

None

Unlimited

HEALTH NET PPO (OUT OF NETWORK)* POSTDOCTORAL SCHOLAR PAYS

40%

\$250 Copay then 40%

40%

\$250 Copay then 40%

50% + \$10 Copay

50% + \$25 Copay

50% + \$35 Copay

20%

40%

\$1,500 Individual

\$4,500 Family

\$200

\$600

Unlimited

*Out of Network reimbursement based on limited fee schedule.