

OPEN ENROLLMENT – PLAN YEAR 2023 November 1st – NOVEMBER 15th, 2022

EFFECTIVE JANUARY 1, 2023



Review of Benefit & Plan Designs

Explanation of Open Enrollment Process

Q & A

POSTDOCTORAL RESEARCHER BENEFIT PROGRAM

The University of Chicago has partnered with Gallagher Benefit Services to administer the Postdoctoral Researcher Benefit Program (PRBP).

University of Chicago PRBP is available to all Postdoctoral Researchers. Visiting scholars (Postdoc Indicator 910xxx) whose stay at the campus is longer than 30 days, are also eligible.

The PRBP is a package of benefits designed to closely match the benefits offered to the University of Chicago faculty & staff.

For 2023, you will see an increase to your medical plan rates and contributions

YOU MAY VIEW THE BENEFITS AND RATES AT: https://clients.garnett-powers.com/pd/uchicago/ click on "View Insurance Benefits and Rates"



POSTDOCTORAL RESEARCHER BENEFIT PROGRAM

What is Open Enrollment?

All University of Chicago Postdoctoral Researchers/Visiting Scholars have the option of the following during the Open Enrollment period

From November 1st - November 15th, 2022:

- Change Medical Plans
- Change Dental Plans
- Join the benefit program if you previously waived OR waive out if needed
- Add eligible dependents

You are automatically enrolled in the University Paid Short & Long Term disability plans as well as Basic Life and AD&D effective your job start date.

Qualifying Life Events

Qualifying life events allow you to make changes to your insurance outside of your period of initial eligibility and the annual open enrollment period.

Qualifying events include, but are not limited to:

- Marriage
- Divorce
- Birth of Child
- Adoption of a Child
- Entrance into the United States
- Loss of prior coverage

Please note: Documented proof of the qualifying event will be required

Benefits offered through the Postdoctoral Researcher Benefit Program

PLAN NAME	INSURANCE TYPE	COMPANY
НМО	Medical	Blue Cross BlueShield of Illinois
PPO	Medical	Blue Cross BlueShield of Illinois
Network Max PPO	Dental	MetLife
Choice PPO	Dental	MetLife
Voluntary Vision	Vision	VSP
Life and AD&D	Life	The Standard
Voluntary Life	Life	The Standard
STD & LTD	Disability	The Standard

There are no changes to any of the plans or benefits



Medical Insurance



BlueCross BlueShield of Illinois

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".



There is no Out-of-Network benefit (except in the case of an emergency).

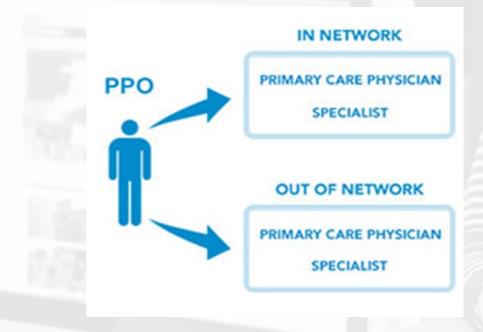
BCBSIL HMO MEDICAL PLAN

	НМО	
Core Benefits	In - Network	
Core benefits	Postdoc Pays	
Deductible	N	
Single/Family	None	
Out of Pocket Max	¢1 E00 / ¢2 000	
Single/Family	\$1,500 / \$3,000	
Office Visit	\$15 / \$25 Copay	
Wellness Visit	No Charge	
Inpatient Hospital	\$250 per admission	
Outpatient Surgery	No Charge	
Emergency Room	\$75 Copay (waived if admitted)	
	\$8 Tier 1	
Rx	\$20 Tier 2	
	\$35 Tier 3	
	63	

For more detailed plan design information go to: <u>https://clients.garnett-</u> powers.com/pd/uchicago/

POSTDOCTORAL RESEARCHER BENEFIT PROGRAM

What is a PPO plan?



POSTDOCTORAL RESEARCHER BENEFIT PROGRAM

BCBSIL PPO MEDICAL PLAN

	PPO		
Core Benefits	In - Network	Out-of-Network	
	Postdoc Pays	Postdoc Pays	
Deductible			
Single/Family	\$250 / \$600	\$5,000 / \$10,000	
Out of Pocket Max			
Single/Family	\$2,000 / \$4,000	\$10,000 / \$20,000	
Office Visit	20%*	50%*	
Wellness Visit	No Charge	50%*	
Inpatient Hospital	20%*	\$300 Copay + 50%*	
Outpatient Surgery	20%*	50%*	
Emergency Room	\$75 Copay (waived if admitted		
	\$8 Tier 1	\$8 + 25% Tier 1	
Rx	\$20 Tier 2	\$20 + 25% Tier 2	
	\$35 Tier 3	\$35 + 25% Tier 3	
*After deductible has been me			

For more detailed plan design information go to: <u>https://clients.garnett-</u> powers.com/pd/uchicago/

POSTDOCTORAL RESEARCHER BENEFIT PROGRAM

Which Plan is right for you?

HMO

- Must select a primary care physician to be gatekeeper of all your medical care
- Need authorization from primary care physician to see a specialist
- Restricted to medical group that your PCP belongs to
- Fixed co-pay each time you visit your Doctor (provider)

PPO

- Access to UC medical center
- More in-network providers across the US
- Flexibility to schedule appointments with Specialists directly
- Calendar year deductible of \$ 250 per person, after that is satisfied you pay a percentage for each Doctor visit. There is an out of pocket limit per calendar year.

Summaries of Benefits and Coverage

The PPACA requires that you be notified that the Summaries of Benefits and Coverage for your medical plans will be available on the GBS website as of November 1st.

The Summaries of Benefits and Coverage follow the recommended guidelines of PPACA in a standardized format to make them easier to read and comprehend to better serve you in making your plan selections.

You may request a paper copy at no charge by calling the toll-free number on your new ID card.

You may also print a copy directly from the GBS website.

POSTDOCTORAL RESEARCHER BENEFIT PROGRAM

University of Chicago Postdoctoral Scholars HMOI: Blue Cross and Blue Shield of Illinois Coverage Period: 01/01/2017 – 12/31/2017 Summary of Benefits and Coverage: What this Plan Covers & What it Costs Coverage for: ALL | Plan Type: HMO

This is only a summary. If you want more detail about your coverage and costs, you can get the complete terms in the policy or plan by calling 1-800-892-2803 or at https://policy-srv.box.com/s/syvb0xajz9haackds94fzt1i9duq239c

Important Questions	Answers	Why this Matters:
What is the overall <u>deductible</u> ?	\$0	See the chart starting on page 2 for your costs for services this plan covers.
Are there other <u>deductibles</u> for specific services?	No.	You don't have to meet <u>deductibles</u> for specific services, but see the chart starting on page 2 for other costs for services this plan covers.
Is there an <u>out-of-</u> pocket limit on my expenses?	Yes. \$1,500 Individual/ \$3,000 Family. Prescription drug expense limit: \$5,100 Individual/ \$10,200 Family.	The <u>out-of-pocket limit</u> is the most you could pay during a coverage period (usually one year) for your share of the cost of covered services. This limit helps you plan for health care expenses.
What is not included in the out-of-pocket limit?	Premiums, balanced-billed charges, and health care this plan doesn't cover.	Even though you pay these expenses, they don't count toward the <u>out-of-pocket</u> <u>limit</u> .
Does this plan use a network of providers?	Yes. Visit <u>www.hcbsil.com</u> or call 1-800-892-2803 for a list of Participating providers.	If you use an in-network doctor or other health care <u>provider</u> , this plan will pay some or all of the costs of covered services. Be aware, your in-network doctor or hospital may use an out-of-network <u>provider</u> for some services. Plans use the term in-network, preferred, or participating for <u>provider</u> s in their <u>network</u> . See the chart starting on page 2 for how this plan pays different kinds of <u>providers</u> .
Do I need a referral to see a <u>specialist</u> ?	Yes.	This plan will pay some or all of the costs to see a <u>specialist</u> for covered services but only if you have the plan's permission before you see the <u>specialist</u> .
Are there services this plan doesn't cover?	Yes.	Some of the services this plan doesn't cover are listed on page 5. See your policy or plan document for additional information about <u>excluded services</u> .

Emergency Room vs. Urgent Care

Medical Plan	Urgent Care	Emergency Room
BCBSIL HMO Plan	\$15 copay*	\$75 copay**
BCBSIL PPO Plan	20%	\$75 copay/visit plus 20% **

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

**Copay waived if admitted.

- HMO members will need to consult with their designated PCP to see if a same-day appointment is available . If not, the PCP office will refer you to an in-network urgent care center
- PPO members can go directly to the nearest in-network urgent care center.

Wellness Programs

BlueAccess (BAM)

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).

More info on wellness programs may be found at: <u>https://clients.garnett-powers.com/pd/uchicago/</u>

POSTDOCTORAL RESEARCHER BENEFIT PROGRAM

Wellness Programs

LIVEON 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.

Dental Insurance



DENTAL PPO **Network Access NETWORK ACCESS In-Network Out-of-Network OPTION Postdoc Pays Core Benefits** Annual Deductible (indiv/fam) \$0 \$75 / \$225 Annual Benefit Maximums \$5,000 PREVENTIVE/DIAGNOSTIC 0% 30% of UCR* Routine Exam Teeth Cleanings (Prophylaxis) 0% 30% of UCR* 0% 30% of UCR* X-rays **BASIC PROCEDURES** 60% of UCR* Fillings 20% 60% of UCR* Endodontics 20% Periodontics 20% 60% of UCR* Oral Surgery 20% 60% of UCR* MAJOR PROCEDURES 50% 70% of UCR* Crowns

*After deductible has been met

70% of UCR*

60%*

(\$1,500 lifetime max)

50%

50%

(\$1,500 lifetime max)

POSTDOCTORAL RESEARCHER BENEFIT PROGRAM

Dentures ORTHODONTIA

Child Only

DENTAL PPO CHOICE OPTION

	Choice Plan	
	In-Network	Out-of-Network
Core Benefits	Postdoc Pays	
Annual Deductible (indiv/fam)	\$60	/ \$180
Annual Benefit Maximums	\$1,500	
PREVENTIVE/DIAGNOSTIC		
Routine Exam	0%	20% of UCR
Teeth Cleanings (Prophylaxis)	0%	20% of UCR
X-rays	0%	20% of UCR
BASIC PROCEDURES		
Fillings	20%*	20% of UCR*
Endodontics	20%*	20% of UCR*
Periodontics	20%*	20% of UCR*
Oral Surgery	20%*	20% of UCR*
MAJOR PROCEDURES		
Crowns	50%*	50% of UCR*
Dentures	50%*	50% of UCR*
ORTHODONTIA	50%*	50%*
Child Only	(\$1,000 lifetime max)	(\$1,000 lifetime max)
	*After	deductible has been met

Choice Plan

POSTDOCTORAL RESEARCHER BENEFIT PROGRAM

- MetLife will not send out physical cards as it is not necessary to access care with your card.
- I would encourage you to register on MyBenefits to have full access of your benefits through MetLife.
- MetLife Mobile App
- When accessing care with an in-network dentist, you will provide the dental office your social security number to verify eligibility
- If you do not have a social security number at the time we enroll you, we will enroll you using a pseudo SSN comprised of your UChicago ID (8 digits with a preceding zero)





VOLUNTARY VISION PLAN

	In-Network	Out-of-Network
Core Benefits	Postdoc Pays	
Vision Examinations	\$0 Copay	\$45 Allowance
	Every 12 Months	
Corrective Lenses	\$20 Copay	\$30 - \$65 Allowance
Conventional Contact Lenses*	\$130 Allowance	\$105 Allowance
Medically Necessary Contact Lenses	\$0 Copay	\$210 Allowance
	Every 12 Months	
Frames	\$150 Allowance + 20%	\$70 Allowance
	off remaining balance	
	Every 24 Months	
	* Materials entry in lieur of corrective langes	

*Materials only. In lieu of corrective lenses.

POSTDOCTORAL RESEARCHER BENEFIT PROGRAM





Postdoctoral Researcher Benefit Program Short Term Disability

- ✓ The plan will pay 60% of the first \$1,000 weekly pre-disability earnings.
- ✓ The maximum weekly benefit is \$600 per week.
- ✓ The minimum benefit is \$15.00.
- The benefit waiting period is 15 days for disability caused by an accidental injury and 15 days for disability caused by sickness or pregnancy.
- The maximum benefit period is 90 days.
- The plan covers non-occupational disability only.
- This benefit is provided to you at no cost by the University!





Postdoctoral Researcher Benefit Program Long Term Disability

- The Benefit Waiting Period is 90 days of disability. This program starts when the Short-Term Disability ends.
- ✓ The plan will pay 60% of the first \$4,167 of your monthly pre-disability earnings.
- The maximum monthly benefit is \$2,500. This benefit is reduced by deductible income such as workers' compensation.
- ✓ Once approved, benefits are payable each month while you are disabled, up to age 65.
- ✓ This benefit is provided to you at no cost by the University!



PROVIDED BY

The**Standard**®

Postdoctoral Researcher Benefit Program Life Insurance and Accidental Death & Dismemberment (AD&D) Plan

The plan pays \$50,000 in the event of a death.

An additional benefit of \$50,000 is paid for AD&D if the death is due to an accident.

Postdoctoral Researchers holding J-1 Visa status will have the medical evacuation and repatriation of mortal remains coverage necessary to fulfill the visa requirements included in their Life and AD&D policy. In addition, family members holding J-2 Visa status will also be covered for this benefit even if the Postdoctoral Researcher waives Medical or Dental coverage.

This benefit is provided to you at no cost by the University!

The Open Enrollment Process

In order to make changes to your enrollment for Plan Year 2023 please follow these steps. Please note that all changes made to your current enrollment will take effect **January 1, 2023**:

Visit the Gallagher Benefit Services web site at <u>https://clients.garnett-powers.com/pd/uchicago/</u> and click the **LOGIN** link in the top right corner.

Login as a **RETURNING USER**. Utilize the **Forgot User ID or Password** link if necessary.

Once you have logged in, click on Make OE Changes.

Once you are viewing your online Open Enrollment form, you may do the following:

- Waive any plans you do not wish to continue for the 2023 plan year.
- Change medical plan from HMO to PPO, select a dental plan or opt into vision
- Enroll yourself and/or your eligible dependents in plans you previously waived.

The Open Enrollment Process

Once you access the Open Enrollment Form, you may make the changes mentioned earlier regarding **switching to another plan**.

Please check all plans in which you wish to be enrolled for Plan Year 2023.

Please update your Life Insurance beneficiary information.

If you choose the Medical HMO, you must choose a Primary Care Physician for all enrolling family members. Provider Directory links are available on the GBS web site. Please enter the 3-digit Medical Group number, as well as the 9-digit Primary Care Physician number for yourself and all enrolling family members.

The Open Enrollment Process

An electronic version of the enrollment form will be submitted to the Gallagher Benefit Services' secure website for enrollment & billing purposes.

An e-mail will be sent no later than **December 15th** confirming your new enrollment status. Please make sure the e-mail address that appears on your enrollment form is correct.

ID cards will be mailed to your home directly from the Insurance Carriers regarding any plan changes you make (BlueCross BlueShield Medical).

ID cards are not required to access dental services or to use your vision coverage

All Postdoctoral Researchers and Visiting Scholars will be enrolled in Short term disability, Long term disability, Life Insurance and Accidental Death & Dismemberment plans.

If you are not making any changes to your enrollment, you do not need to take any action.

Visiting Scholar Requirements

(POSTDOC INDICATOR 910XXX)

If a Visiting Scholar holding J1 Visa status chooses to waive out of the plan, they must fax/e-mail proof of coverage (i.e. a copy of their insurance policy) to Gallagher Benefit Services to verify that their coverage satisfies the J1 Visa requirements.

Minimum J1 Visa Requirements are:

- \$100,000 per accident/illness in medical coverage
- An annual deductible of no more than \$500
- Copayments that do not exceed 25%
- Waiting period of no more than 6 months for pre-existing coverage

All Visiting Scholars will be automatically enrolled in the University sponsored Basic Life and AD&D plan which includes the Medical Evacuation and Repatriation of Mortal Remains coverage required by their J1 Visa (includes J2 dependents).

POSTDOCTORAL RESEARCHER BENEFIT PROGRAM

Information Sources

For general inquiries and customer service regarding enrollment, benefit questions and ID cards, you should contact:

Gallagher Benefit Services



Toll Free: 1 (800) 261-7109 | Email: UniversityServices.GBS.prbp@ajg.com

https://clients.garnett-powers.com/pd/uchicago/

POSTDOCTORAL RESEARCHER BENEFIT PROGRAM