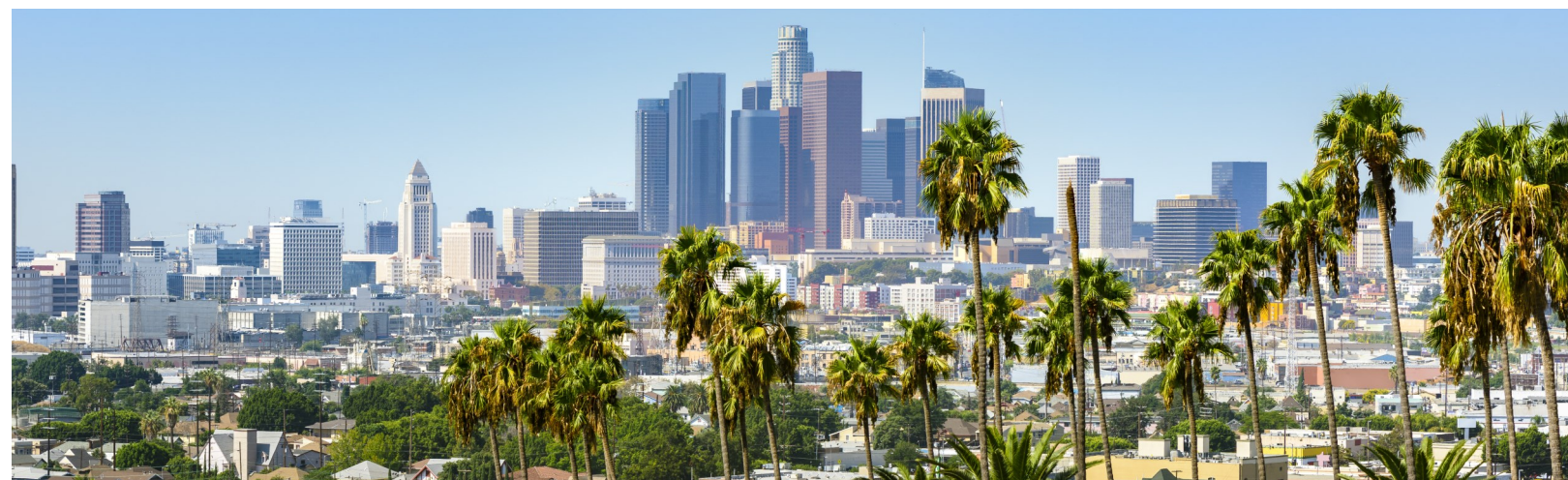




USC University of
Southern California

Postdoctoral Scholar
Benefit Program

2026 | 2027 Plan Year
Open Enrollment Guide

Gallagher Benefit Services (GBS) is pleased to offer the University of Southern California Postdoctoral Scholar Benefit Program (PSBP). The PSBP is a comprehensive package of benefits designed to closely match the benefits offered to the University of Southern California Faculty and Staff.

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BENEFITS



Medical Insurance: Aetna HMO & POS (OAMC)



Vision Insurance: EyeMed PPO



Dental Insurance: Delta HMO | Principal POS



Life Insurance: The Standard



Disability Insurance:

The Hartford Short-Term Disability (STD)*

The Hartford Long-Term Disability (LTD)

* Job codes 098203 & 098219 only

* Employed Postdocs enroll in faculty STD

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 USC Postdoc.

Enrollment is NOT automatic. If you do not enroll yourself and your eligible dependents (if applicable) 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.

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 will be 9/14/2026—9/25/2026. Changes made during Open Enrollment will take effect 10/1/2026.**

Changes For Plan Year 2026 | 2027 (10/1/2026—9/30/2027)

In an effort to curb the increasing cost of the program's medical insurance, both the HMO and POS medical plans will have the following changes implemented:

- The annual out-of-pocket maximum will change from \$1,000 individual / \$3,000 family to \$2,000 individual / \$6,000 family
- There will now be an annual deductible of \$250 individual / \$750 family
- The cost of the HMO plan will increase 9.98% and the cost of the POS plan will increase 11.38%

Making Changes to Your Enrollment

- To make your plan changes during the Open Enrollment period, visit the Gallagher Benefit Services (GBS) web site at <https://clients.garnett-powers.com/pd/usc/> 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 Open Enrollment Changes**.
- Once you are viewing your online Open Enrollment form, you may do the following:
 1. If you are currently enrolled in the POS (OAMC) medical plan or POS dental plan, you may switch to the HMO medical and/or dental plan and vice versa. **Please note: the HMO plans are only available to postdocs residing and accessing care in California.**
 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. While it is required that you select a Primary Care Physician (PCP) for the HMO plan, you do not need to choose a PCP for the POS (OAMC) plan. To find an HMO PCP, or a 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 **Plan Documents Library** navigational tile. This section of the website contains benefit summaries for all plans offered through the PSBP.

2026 | 2027 Monthly Rates & Contributions

This information can be found on the website under the **View Insurance Benefits and Rates** section, as well as page 12 of this booklet.

MEDICAL PLAN INFORMATION

Summaries of Benefits and Coverage (SBCs)

Choosing a health plan is an important decision. To help you make an informed choice, the medical plan options 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**.

HMO vs. POS (OAMC) Medical Plan

HMO

- This plan offers a broad spectrum of benefit coverage with a higher degree of managed care.
- Under the Health Maintenance Organization (HMO) model, you must choose a Primary Care Physician (PCP) within the network. You can change your PCP up to once a month.
- The Primary Care Physician (PCP) will be your first point of contact when accessing care, acting as your “healthcare gatekeeper.”
- If you need to see a specialist, a referral from your PCP is required.
- The network is smaller than that of the POS (OAMC) plan and is limited to California. 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 HMO may require that the patient be transferred to an In-Network facility.
- HMO premiums, as well as the out of pocket expenses (i.e. deductible, co-payments, etc.) tend to be lower than the POS (OAMC) plan option.

POS (OAMC)

- The POS (OAMC) plan offers much more flexibility and choice than the HMO plan because there is an ‘In-Network’ and ‘Out-of-Network’ choice at the time you seek service from a provider.
- The Aetna POS (OAMC) plan offers you the choice of choosing a Primary Care Physician (PCP) if you so desire, however you are not obligated to choose one.
- The In-Network benefits (coinsurance, copayments, etc.) will be richer 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.



MEDICAL PLAN OPTIONS

		
	HMO	POS (OAMC)
	In - Network	In - Network Out - of - Network
Core Benefits	Postdoc Pays	Postdoc Pays
Deductible Single/Family	\$250 / \$750 Eff. 10/1/2026	\$250 / \$750 Eff. 10/1/2026
Out of Pocket Max Single/Family	\$2,000 / \$6,000 Eff. 10/1/2026	\$2,000 / \$6,000 Eff. 10/1/2026 \$10,000 / \$30,000
Office Visit	\$20 Copay	\$10 Copay 50%
Wellness Visit	No Charge	No Charge 50%
Inpatient Hospital	\$250 Copay	10% \$500 Copay + 40%
Outpatient Surgery	\$100 Copay	10% 50%
Emergency Room	\$100 Copay (waived if admitted)	\$100 Copay + 10% (copay waived if admitted)
Rx	\$10 Tier 1 \$20 Tier 2 50% (\$100 max) Tier 3	\$10 Tier 1 \$10 + 50% Tier 1 \$25 Tier 2 \$25 + 50% Tier 2 50% Tier 3 50% Tier 3

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 the first 9 digits your USC ID, instead of your actual Social Security Number
- Fill out all personal information

Once you register for Aetna Navigator, you can immediately access the full benefits and features of the site.

DENTAL PLAN OPTIONS



	HMO	POS		
	In-Network	EPO Network	PPO Network	Out-of-Network
Core Benefits	Postdoc Pays	Postdoc Pays		
Annual Deductible	None	None	\$50 per individual / \$150 per family	
Annual Benefit Maximums	Unlimited	\$1,500		
PREVENTIVE/DIAGNOSTIC				
Routine Exam	\$0	0%	0%	0% of UCR
Teeth Cleanings (Prophylaxis)	\$0	0%	0%	0% of UCR
X-rays	\$0	0%	0%	0% of UCR
BASIC PROCEDURES				
Fillings	Varies up to \$75 Copay	10%	20%*	20% of UCR*
Endodontics	Varies up to \$250 Copay	10%	20%*	20% of UCR*
Periodontics	Varies up to \$225 Copay	10%	20%*	20% of UCR*
Oral Surgery	Varies up to \$90 Copay	10%	20%*	20% of UCR*
MAJOR PROCEDURES				
Crowns	Varies up to \$240 Copay	40%	40%*	40% of UCR*
Dentures	Varies up to \$240 Copay	40%	40%*	40% of UCR*
ORTHODONTIA		Not Covered		
Child	\$1,700 Copay*			
Adult	\$1,900 Copay*			
IMPLANTS	Varies up to \$1,005 Copay	50% (\$1,000 Lifetime Maximum)		

*Does not include start-up and retention fees

*After deductible has been met

Accessing Care Out-of-Network Under the POS Plan

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**

VOLUNTARY VISION PLAN



Core Benefits	PPO	
	In-Network	Out-of-Network
	Postdoc Pays	EyeMed Provides
Vision Examinations	\$10 Copay Every 12 Months	\$30 Allowance
Corrective Lenses	\$0 Copay	\$25 - \$63 Allowance
Contact Lenses (materials only)*	\$130 Allowance + 15% off remaining balance Every 12 Months	\$104 Allowance
Frames	\$130 Allowance + 20% off remaining balance Every 24 Months	\$65 Allowance

*In lieu of corrective lenses, up to 4 boxes.

Additional Features

Eye Care Supplies: Receive 20% off retail price for eye care supplies like cleaning cloths and solutions purchased at in-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 AND AD&D PLAN



Core Benefits	Life and AD&D
Basic Life	\$10,000
Accidental Death & Dismemberment	\$10,000

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 PSBP enrollment form.



Please Note: 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.

DISABILITY PLANS



Core Benefits	Short-Term Disability (STD)
Benefit Amount	70% of your <i>pre-disability</i> earnings (\$1,500 per week maximum)
Benefit Waiting Period	Payable after 8 days of continued disability
Maximum Benefit Period	52 weeks



Core Benefits	Long-Term Disability (LTD)
Benefit Amount	66.67% of your <i>pre-disability</i> earnings (\$5,000 per month maximum)
Benefit Waiting Period	Payable after 365 days of continued disability
Maximum Benefit Period	Until member reaches Social Security Normal Retirement Age
Pre-existing Conditions	Ailments diagnosed/treated during the 3 months prior to enrollment will not be covered until the plan has been active for 12 months.

What is Short and Long-Term Disability Insurance?

- These plans, offered to you through The Hartford, provide you a way of protecting your income should you become disabled.
- Though many of us feel that we will never be disabled, 1 in 4 workers entering the work force today will become disabled before retiring (Social Security Administration Fact Sheet, 2024).
- It is important to have a vehicle to offer protection to your income, to allow you to meet your financial obligations when you are unable to work; Disability insurance does just that.



Please Note: The Short-Term Disability plan is only available to Fellows in job code 098203 and Fellowship Trainees in job code 098219. All postdocs in these two job codes will be automatically enrolled in this plan upon the submission of an enrollment form. If you are not appointed in one of these job codes, you may be eligible for the USC Faculty/Staff Short-Term Disability Plan (contact your administrator for more information).

RATES AND CONTRIBUTIONS

	Total Monthly Cost	Institutional Cost	Postdoc Cost
Medical HMO			
Postdoc	\$642.15	\$512.10	\$130.05
Postdoc + Spouse/Partner	\$1,342.06	\$1,070.27	\$271.79
Postdoc + Child(ren)	\$1,194.43	\$952.55	\$241.88
Family	\$1,900.77	\$1,515.81	\$384.96
Medical POS			
Postdoc	\$919.48	\$733.26	\$186.22
Postdoc + Spouse/Partner	\$1,921.75	\$1,532.54	\$389.21
Postdoc + Child(ren)	\$1,710.27	\$1,363.88	\$346.39
Family	\$2,721.72	\$2,170.48	\$551.24
Dental HMO			
Postdoc	\$17.76	\$11.87	\$5.89
Postdoc + Spouse/Partner	\$30.03	\$15.04	\$14.99
Postdoc + Child(ren)	\$32.64	\$16.35	\$16.29
Family	\$45.92	\$15.77	\$30.15
Dental POS			
Postdoc	\$40.26	\$26.98	\$13.28
Postdoc + Spouse/Partner	\$80.76	\$40.38	\$40.38
Postdoc + Child(ren)	\$82.77	\$41.38	\$41.39
Family	\$127.50	\$43.36	\$84.14
Vision			
Postdoc	\$8.06	NA	\$8.06
Postdoc + Spouse/Partner	\$15.31	NA	\$15.31
Postdoc + Child(ren)	\$16.11	NA	\$16.11
Family	\$23.69	NA	\$23.69
Disability - Long & Short-Term Plans	\$42.77	\$42.77	NA
Life Insurance (\$10K)	\$1.83	\$1.83	NA



INFORMATION SOURCES

Insurance Carrier Member Services

Aetna Medical.....	(877) 204-9186
Delta Dental.....	(800) 422-4234
Principal.....	(800) 843-1371
EyeMed.....	(866) 723-0513
The Standard.....	(800) 319-9557
The Hartford Disability.....	(800) 523-5065

Gallagher Benefit Services (GBS)

Phone.....	800-319-9557
Email.....	UniversityServices.GBS.uscpbp@ajg.com
Dedicated PSBP Website.....	https://clients.garnett-powers.com/pd/usc/

Your Dedicated Account Manager: Dane Pisano

Duties: Dane manages GBS’s University of California, University of Southern California and Northwestern University Postdoc accounts. He assists GBS’ clients with administrative duties such as enrollment, billing and strategic planning, and is a resource for all postdoctoral scholars with questions regarding benefits, accessing care, claims and more.

Background: Dane’s background as a senior account manager, as well as his BA in Communications from Cal State Fullerton, equip him with insight an skills that allow him to effectively communicate benefits information to postdocs and administrators.



Insurance | Risk Management | Consulting

This document is an outline of the coverage provided under your employer's benefit plans based on information provided by your company. It does not include all the terms, coverage, exclusions, limitations, and conditions contained in the official Plan Document, applicable insurance policies and contracts (collectively, the "plan documents"). The plan documents themselves must be read for those details. The intent of this document is to provide you with general information about your employer's benefit plans. It does not necessarily address all the specific issues which may be applicable to you. It should not be construed as, nor is it intended to provide, legal advice. To the extent that any of the information contained in this document is inconsistent with the plan documents, the provisions set forth in the plan documents will govern in all cases. If you wish to review the plan documents or you have questions regarding specific issues or plan provisions, you should contact your Human Resources/ Benefits Department.