

Health Insurance: The Basics (How to Enroll)

Who is Eligible?

- Residents (title codes 2708, 2724), Clinical Fellows (title codes 2726, 2732) and the non-MD trainees (title code 2740) are the only groups of trainee-employees eligible for enrollment in the Resident/Fellows health insurance plans. All registered candidates from the above title codes in the Schools of Medicine, Nursing, Pharmacy, and Dentistry are eligible for these plans. Contrarily, this group is not eligible for the Faculty/Staff benefit plans.
- Dependents are also eligible for coverage - see the [Insurance Action Form](#) for a list of eligible dependents. Eligible dependents must be listed on the initial enrollment form or added by submitting an Insurance Action Form within 31 days of the qualifying event, such as birth, arrival in the U.S., new marriage, etc.

What is the Coverage?

- Residents are eligible for complete health coverage: **medical, dental, vision, life and accidental death and dismemberment**, as well as **disability insurance**. Dependents are eligible for **medical, dental, and vision coverage**. The plans are designed for trainees and purchased just for this group. The medical plan options are Health Net HMO and Anthem Blue Cross PPO. Note, the plan costs and designs are different than the Faculty/Staff plans; Note, coverage comes as a package deal and enrollment in a medical plan automatically enrolls the trainee and their dependents with the other insurance carriers.

What is the Cost?

- A trainee pays \$0 monthly premium for Health Net HMO. Those choosing Anthem Blue Cross PPO pay a premium contribution of \$30 for self, \$60 for self plus child(ren) or self plus spouse/domestic partner and \$90 for family coverage. Enrollees who are not paid through the UCSF payroll system will be expected to make personal payments to their departments for their monthly premium contributions. Enrollment with Delta Dental, Vision Service Plan, disability and life insurance is automatic once enrolled in medical insurance; trainees pay a \$0 monthly premium for these plans.

What is the difference between an HMO and a PPO?

- Generally an **HMO plan** has lower out-of-pocket costs but limits the network of providers a patient has access to. In an HMO, all care is generally coordinated through a Primary Care Provider (PCP) and referrals are required for most services not provided by your PCP. If you enroll in this plan and want access to UCSF physicians you must choose a PCP that is affiliated with Hill Physicians Medical Group in San Francisco. - [How to Find a UCSF PCP](#)

- Generally a **PPO plan** provides access to a broader network of physicians and allows the flexibility of self-referral to specialists but generally has higher out-of-pocket costs for services from non-network physicians and you may need to pay up front and file claim forms to request reimbursement.

When Does Coverage Begin?

- The Resident Plan Year coincides with the academic year, July 1st - June 30th. This is different from the Faculty & Staff insurance plans, which begin January 1st.
- Residents and their dependents must actively enroll within the initial 31 days after appointment to an above title code at UCSF, or within 31 days after a marriage, birth, etc. This is the **PIE = Period of Initial Eligibility** for the member and dependents.
- If trainees miss the PIE, they cannot enroll themselves or a new dependent until an Open Enrollment period. Open Enrollment is held during the months of June and July with an effective date of July 1st (even if the enrollment is processed on July 31st, it is retroactive to July 1st).

How Does a Trainee Enroll?

- The Resident completes the [Insurance Action Form](#), the Designation of Beneficiary Form, the [COBRA Acknowledgement Form](#), the [Declaration of Domestic Partnership Form](#), if applicable, and returns the forms to the Departmental Coordinator.
- The Department Coordinator must verify the following data prior to entering it into the GME Benefits Database:
 1. The employee ID number and SSN are legibly written.
 2. The enrollment ID number is legibly written if electing Health Net and there is a preference for PCP and/or medical group.
 3. The home address in CA is written legibly - HealthNet HMO will not enroll the employee with an out of state address. Please do not substitute a UC department address given HIPAA protected confidential information will be mailed to the member.
- UCSF rules do not allow duplicate UCSF coverage. This means that you cannot be covered in a UCSF sponsored health plan as a resident AND as an eligible family member under another resident UCSF plan. Generally this also means that you cannot be covered under a UCSF faculty/staff plan when you have your own UCSF coverage. Children can only be covered under one parent with a UCSF health plan. If duplicate enrollment occurs, UCSF will cancel the later enrollment. UCSF and the plans reserve the right to collect reimbursement for any duplicate premium payments and for any benefits provided due to the duplicate enrollment.

What Are Some Qualifying Events?

- Some qualifying events may allow residents to make changes outside of the Open Enrollment period. Examples: marriage/DP, birth/adoption, or spouse's/DP's involuntary loss of coverage from their employer plan (ILOC). The 'Insurance Action Form' must be submitted to the Dept Coordinator within the 31 day PIE starting with the date of the qualifying event. Proper documentation is required for the ILOC.
- Upon termination or loss of eligibility, Residents are eligible for COBRA or conversion for most of the plans. The department is required by law to distribute [COBRA information](#) to housestaff members separating from employment with UC. Coverage ends on the last day of the appointment. Trainees may also want to explore other insurance options under the Affordable Care Act. Resources are available at
- <https://www.healthcare.gov/> (national) or <http://www.coveredca.com/> (California). Coordinator is responsible for entering the termination in the GME database within the PIE. This is required so the University may inform the health plans to discontinue enrollment.