When Coverage Ends / Continuation of Benefits

Your insurance will remain in effect for the duration of your appointment to a UCSD training program. Once your training ends with UCSD Medical Center, your coverage will cease on the last day of the month in which your contract expires.

You have the option of continuing your coverage through COBRA by paying for your premiums.

For more information on COBRA continuation of your benefits, please go to:
http://meded.ucsd.edu/gme/housestaff/housestaff_benefits/housestaff-benefits/cobra/

Carrier Contact Information

<table>
<thead>
<tr>
<th>Provider</th>
<th>Member Services</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anthem Blue Cross HMO</td>
<td>800-227-3613</td>
<td><a href="http://www.anthem.com/ca">www.anthem.com/ca</a></td>
</tr>
<tr>
<td></td>
<td>Group Name: UCSD Medical Center Group Number: 5713A</td>
<td></td>
</tr>
<tr>
<td>PPO</td>
<td>800-765-2588</td>
<td><a href="http://www.anthem.com/ca">www.anthem.com/ca</a></td>
</tr>
<tr>
<td></td>
<td>Group Name: UCSD Medical Center Group Number: 1250CA</td>
<td></td>
</tr>
<tr>
<td>Dental DPPO</td>
<td>888-209-7852</td>
<td><a href="http://www.anthem.com/ca">www.anthem.com/ca</a></td>
</tr>
<tr>
<td></td>
<td>Group Name: UCSD Medical Center Group Number: 182415</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Group Name: Regents University of California Group Number: 12170630-0003-0003</td>
<td></td>
</tr>
<tr>
<td>Standard Basic Life/AD&amp;D</td>
<td>800-547-9515</td>
<td><a href="http://www.standard.com">www.standard.com</a></td>
</tr>
<tr>
<td>Long Term Disability (LTD)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Enrollment is easy!

- Go to: https://www.eenroller.net/login.asp?ST=UCSD0001
- Your user name is your first initial and first 5 of last name and last 4 digits of your social security number (no spaces/no hyphens, up to a maximum of 10 characters)
- Your password is the last 4 digits of your social security number

Need Help?
For help in using the online enrollment system, go to: https://www.eenroller.net/btrac/eeaccessguide.asp?ST=UCSD0001

2012 - 2013 Benefit Summary

What’s Inside?

- Eligibility
- Medical
- Dental
- Vision
- Life/AD&D
- Long Term Disability (LTD)

Carrier Contact Information

This is a brief description of benefits offered by UCSD Medical Center. Not all plan provisions, limitations and exclusions are included in this publication. In the event of any conflict between the information contained in this publication and the plan provisions, the Plan Documents and insurance contracts will govern. Copies of these documents are available at http://meded.ucsd.edu/gme/housestaff/housestaff_benefits/housestaff-benefits/cobra/. UCSD Medical Center reserves the right to change benefits at any time.
Overview of Benefits
This booklet contains an easy to read overview of your benefits in effect as of July 1, 2012. It is not intended to be a legal document. Please read this carefully. More details are available in the summary plan description for each plan.

Eligibility
You are eligible for medical, dental, vision, life/AD&D insurance, and long-term disability coverage if you are a full-time employee.

You may enroll your spouse (or domestic partner) and dependent children in the health plans you elect.

Make Changes to Your Benefit Elections
Once you make your health care elections, you may not change them until the next annual open enrollment period. The only time you may make a health plan change is if you experience a qualifying event. The coverage change you make must be consistent with your qualifying event. Some examples would include:

- Legal marital or domestic partner status including marriage, death of spouse/domestic partner, divorce, legal separation, or annulment;
- Dependents of including birth, adoption, placement for adoption or death of a dependent;
- Employment status (including termination of employment by employer, spouse or dependent); and
- Change in your residence or worksite, which causes a loss or gain in coverage for the employee, spouse or dependent.

Eligibility changes due to Medicare/CHIPS, changes must be submitted within 60 days of the event.

Medical
UCSD Medical Center offers medical coverage through the following plans:
- Anthem Blue Cross HMO, a health maintenance organization
- Anthem Blue Cross PPO, a preferred provider organization

Medical eligible dependents include children to age 26.

Please note that initial enrollment and enrollment changes to your health benefits are your responsibility. It is not an automatic process. Your decision to not enroll or to change your benefit choices will automatically continue until the termination of your training.

NOTE: If you select the HMO plan, you will be required to choose a PCP (primary care physician) from within the Anthem Blue Cross HMO network. The PPO plan provides the greatest flexibility as a PCP is not required, but you do achieve a higher level of benefits when choosing a provider within the Anthem Blue Cross PPO network.

Tier 1 (UCSD/CHSD): $2,000/$4,000
Tier 2 (PPO Providers): $1,000/$2,000
Tier 3 (Non-PPO): N/A

Office Visit/Exam
- $15 copay
- $30 copay
- $60 copay

Adult Routine Physical Exam
- No copay
- No copay
- No copay

Well Baby/Child Exams
- No copay
- No copay
- No copay

Dental
- $1,000 Annual Deductible (Individual/Family)
- $250 Annual Out-of-Pocket Maximum (Individual/Family)

Anthem HMO

Tier 1 (UCSD/CHSD): $250 copay
Tier 2 (PPO Providers): $500 copay
Tier 3 (Non-PPO): N/A

Outpatient Hospital Service
- $1,000/$2,000 Annual Deductible
- $400/$800 Annual Out-of-Pocket Maximum (Individual/Family)

Anthem Blue Cross PPO

Tier 1 (UCSD/CHSD): $2,000/$4,000
Tier 2 (PPO Providers): $250 copay
Tier 3 (Non-PPO): N/A

PPO Valuable Tools & Services
- ucsmcnet
- UCSD Medical Center offers medical coverage through the following plans:
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- No copay
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Dental
- $1,000 Annual Deductible (Individual/Family)
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Attention: If you select the HMO plan, you will be required to choose a PCP (primary care physician) from within the Anthem Blue Cross HMO network. The PPO plan provides the greatest flexibility as a PCP is not required, but you do achieve a higher level of benefits when choosing a provider within the Anthem Blue Cross PPO network.

Tier 1 (UCSD/CHSD): $250 copay
Tier 2 (PPO Providers): $500 copay
Tier 3 (Non-PPO): N/A

Outpatient Hospital Service
- $1,000/$2,000 Annual Deductible
- $400/$800 Annual Out-of-Pocket Maximum (Individual/Family)

Cobra (Continued of Coverage)
Cobra legislation requires employers to continue group health and dental for a maximum of 18 months to employees and their covered dependents who would lose their group insurance at the time of termination of employment.

For More Information
Visit http://meded.ucsd.edu/gme/housestaff/housestaff_benefits/housestaff-benefits/cobra/

Valuable Anthem Blue Cross Tools & Services
The HealthExteions program (also known as SpecialOffersSM) offers health and well-being topics relevant to your lifestyle. Stay healthy with HealthExteions, which tells you about discounts from independent vendors and practitioners. To take advantage of these discounts, simply show your ID card when purchasing items or inform the product or service provider that you are a member.

Discounted Products & Services
The Online Pharmacy offers drugstore.com, an online discount program for non-prescription items.

Enjoy better Fitness and Nutrition with discounts on health club memberships and safe and rapid weight loss programs, as well as rehabilitation and exercise products.

Health and Wellness Practitioners
Receive special discounts offered by Massage Therapists and Registered Dieticians.

For More Information
Visit http://www.anthem.com/ca/. Click on 360° Health and then Health Extras for a list of selected health and wellness vendors.

PPO Valuable Tools & Services
As a PPO member, you have access to additional services, tools and products, including:
- Future Moms is a pregnancy program that provides mothers-to-be with access to specialist obstetrical and neonatal nurses who can answer any questions or concerns regarding the member’s pregnancy and newborn.
- 24/7 NurseLine is a free service. If you have health care questions, call 24/7 NurseLine. Registered nurses will answer your questions confidentially, 24 hours a day, seven days a week. 24/7 NurseLine nurses can also connect you to an audio library that contains a wealth of health care information.

For More Information
Call toll-free 866-664-5404 for more details and receive a free informational package offering discounts. Or, visit http://www.anthem.com/ca/ and click on 360° Health.

Annual Reminders
On an annual basis, it is important to review the following:

- Dependent coverage – should you add/remove dependents from any of your benefit plans? (You may not be able to do so after Open Enrollment unless you have a qualifying status event.)
- Beneficiary designations – are your beneficiary designations for basic life/AD&D current and up-to-date?
- Personal information – have you kept Human Resources informed of any changes (address, marital status, etc.) that have occurred?