

# Benefits Orientation

For Newly Hired, Post  
Doctoral Scholars

University of Pittsburgh  
Office of Human Resources  
Benefits Department

July 1, 2023 – June 30, 2024



# Agenda

- Health and Welfare Plans
  - Medical: Choice of three (3) UPMC Health Plan, Plans
  - Dental: Choice of three (3) United Concordia Plans
  - Vision: Choice of two (2) Davis Vision plans
- Additional Benefits and Related Programs
  - PittPerks Voluntary Benefits and Discount Programs
  - UPMC MyHealth@Work Health & Wellness Center
  - Education Benefits



# Health & Welfare Benefits

# Benefits Provisions

- Effective Date of Coverage
  - If hired the first business day of the month, coverage becomes effective the first day of that same month
  - If hired after the first business day of the month, coverage becomes effective the first day of the following month
- The plan year for all health and welfare benefits is July 1<sup>st</sup> – June 30<sup>th</sup>
- Enrollment is completed online in Pitt Worx, which is accessible through your Pitt Portal
  - Detailed instructions on this process are available at [hr.pitt.edu/benefits/enrollment](https://hr.pitt.edu/benefits/enrollment)

# Election Changes

- Open Enrollment
  - Annual election period to make coverage changes (or newly enroll) effective for July 1<sup>st</sup>
- Qualified Status Change (within 60 days of the life event)
  - Examples of qualified events under the IRS regulations include, but are not limited to:
    - Marriage
    - Divorce
    - Birth/adoption of a child
    - Loss of dependent status at age 26
    - Death of an enrolled dependent

# Eligible Dependents

- Coverage for your spouse/domestic partner or child(ren)\* requires proof of the relationship
  - For a full listing of acceptable documentation by relationship type, please visit [hr.pitt.edu/benefits/dependents](http://hr.pitt.edu/benefits/dependents)
- This documentation must be uploaded in the Pitt Worx system prior to enrolling for benefits
  - Dependents will be removed from your policy if valid, required documentation is not submitted within 31 days from date of hire

# Premium Deductions

## Pre-Tax Deductions

- Medical\*
- Dental\*
- Vision\*
- Flexible Spending & Health Savings Accounts

## After – Tax Deductions

- Optional Life Insurance
- Optional ADD Insurance
- Spouse/Domestic Partner Life Insurance
- Dependent Life Insurance

➤ Additional information about benefit premium deductions is available at [hr.pitt.edu/premiums](https://hr.pitt.edu/premiums)

# Medical Plans UPMC Health Plan

	Panther Gold HMO		Panther PPO		Panther Basic HDHP	
	UPMC Advantage Network	UPMC Health Plan Network	In-Network	Out-of-Network	In-Network	Out-of-Network
<b>Deductible</b>	\$150 / \$300 <i>For non-copay services</i>	\$300 / \$600	\$750 / \$1,500	\$1,500 / \$3,000	\$2,000 / \$4,00	\$3,000 / \$6,000
<b>Coinsurance</b>	N/A	20%	15%	35%	30%	50%
<b>Adult and Pediatric Wellness and Preventive Services</b>	100%		100%*	65%**	100%*	50%**
<b>Doctor Office or Convenient Care Clinic Visit</b>	100% after \$25 copayment		85%	65%	70%	50%
<b>Specialist Office Visit</b>	100% after \$50 copayment					
<b>Urgent Care Services</b>	100% after \$60 copayment		85% (after in-network deductible)		70% (after in-network deductible)	
<b>Emergency Room Services</b>	\$100 copayment (children through age 18) / \$150 copayment (adults 19+) <i>copayment waived if admitted</i>		85% (after in-network deductible)		70% (after in-network deductible)	

\*deductible does not apply

\*\*deductible does not apply to pediatric immunizations and preventive mammograms



# Panther Gold HMO

## Health Maintenance Organization

- Coverage is provided for physicians and facilities within the UPMC Panther Gold Advantage Network (in-network only)
  - If you live, or are planning to live, outside of the Western PA area, it is recommended that you do not select the Panther Gold plan. The coverage/in-network area for the Panther Gold (HMO) plan is limited to the Western PA area. Please visit [hr.pitt.edu/medical](http://hr.pitt.edu/medical) to review a list of ineligible counties.
- Must select a Primary Care Physician (PCP)
  - Your PCP must participate in the health plan's provider network
  - Can be changed at any time with appropriate notice
- The Panther Gold plan meets the J-1 Visa status requirements

# Panther PPO

## Preferred Provider Organization

- After the deductible is met, the plan's co-insurance will be pay 85% of the cost of in-network services and 70% of the cost of out-of-network services
- UPMC Health Plan provides access to an extended network of providers, urgent and emergency care, and telehealth options.
  - Participating Networks
    - Cigna PPO Network
    - SuperMed PPO Network
  - Information on Extended Network Coverage can be found at [hr.pitt.edu/medical/extended](https://hr.pitt.edu/medical/extended)

# Panther Basic QHDHP

## Qualified High Deductible Health Plan

- The Panther Basic medical plan has the option of a Health Savings Account (HSA)
  - 2023 HSA deferral limits are \$3,850 for individuals and \$7,750 for families
  - Individuals who elect the Health Savings Account cannot also elect the Health Care FSA
  - HSA funds can be used to pay for your health care expenses, as well as those of your spouse and dependents.
    - examples of eligible expenses:
      - Doctor visits (including coinsurance, copayments, and deductibles)
      - Eyewear, chiropractic care, and dental and vision services
      - Prescriptions

# Prescription Drug Coverage

- 30-day supply of medication at any participating retail pharmacy
- 90-day supply of medication at a discounted price available through:
  - Falk Pharmacy (campus delivery is available)
  - University Pharmacy
  - Express Scripts Inc. (mail-order service)
- Note: Applies to all plans\*
  - *\*Applies to Panther Basic (QHDHP) health plan only after the deductible has been met*

# Health Incentive Reward Dollars

- Employees and their covered spouse/domestic partner, if applicable, that are enrolled in UPMC Health Plan coverage can earn up to \$200 in reward dollars for participating in healthy activities
- Healthy Activities include, but are not limited to:
  - MyHealth Questionnaire
  - Well-visits and immunizations
  - Preventive health screenings
  - Biometric screening (routine blood work)

# Additional Services Available to UPMC Medical Plan Participants

- Hearing Aid Benefits – Amplifon
  - Visit: [www.amplifonusa.com/pitt](http://www.amplifonusa.com/pitt)
  - Call: 1-866-978-9379
- Comprehensive Medication Management Program
  - Call: 412-383-6337
  - Email: [mymeds@pitt.edu](mailto:mymeds@pitt.edu)
  - Visit: [www.hr.pitt.edu/cmm](http://www.hr.pitt.edu/cmm)
- Health Coaching Services: Call: 412-647-4949
  - Visit: [www.hr.pitt.edu/wellness](http://www.hr.pitt.edu/wellness)
- Assist America (personal travel)
  - 1-800-872-1414

# Premium Summary – Medical Plans

		Total Rate	University Contribution	Employee Contribution
<b>Panther Gold</b>	Individual	\$ 644.00	\$ 553.00	<b>\$91.00</b>
	Parent/Child(ren)	\$ 1,430.00	\$ 1,194.00	<b>\$236.00</b>
	Two Adults	\$ 1,616.00	\$ 1,285.00	<b>\$ 331.00</b>
	Family	\$ 1,777.00	\$ 1,326.00	<b>\$ 451.00</b>
<b>Panther Plus</b>	Individual	\$ 613.00	\$ 553.00	<b>\$ 60.00</b>
	Parent/Child(ren)	\$ 1,361.00	\$ 1,194.00	<b>\$ 167.00</b>
	Two Adults	\$ 1,539.00	\$ 1,285.00	<b>\$ 254.00</b>
	Family	\$ 1,692.00	\$ 1,326.00	<b>\$ 336.00</b>
<b>Panther Basic</b>	Individual	\$ 553.00	\$ 553.00	<b>\$ 0.00</b>
	Parent/Child(ren)	\$ 1,200.00	\$ 1,194.00	<b>\$ 6.00</b>
	Two Adults	\$ 1,333.00	\$ 1,285.00	<b>\$ 48.00</b>
	Family	\$ 1,394.00	\$ 1,326.00	<b>\$ 68.00</b>

## Dental Plans United Concordia

	Concordia Plus Managed Care (PA Only) DHMO	Concordia Flex I	Concordia Flex II
<b>Annual Deductible</b>	None	\$50/individual; \$100/individual + one adult/child; \$150 family  <i>Deductible applies for all services</i>	Same as Flex I—waived for preventive diagnostic, and orthodontics
<b>Exam/Cleaning Frequency</b>	One in any consecutive six months		
<b>Preventive Services</b> (e.g., x-rays)	Insurance pays 100%	Insurance pays 100% of MAC	Insurance pays 100% of MAC
<b>Basic Services</b> (e.g., cavity fillings)	Insurance pays 100%	Insurance pays 50% of MAC	Insurance pays 80% of MAC
<b>Major Services</b> (e.g., crowns)	Covered based on specific member copayment schedule amounts	Insurance pays 50% of MAC	Insurance pays 50% of MAC
<b>Annual Plan Year Maximum</b>	None	\$500/covered person	\$1,000/covered person



# Concordia Plus Managed Care (PA Only) DHMO

- Dental Health Maintenance Organization (DHMO)
  - Requires selection of a primary dental office (PDO) in the Western PA DHMO network
  - All dental services, including emergency dental services, must be coordinated through the assigned PDO. Otherwise, services will not be covered.
    - There is no out-of-network coverage
    - Referrals are required for specialty and pediatric care
      - Coverage for referral to a pediatric Specialty Care Dentist ends on a Member's seventh birthday

# Premium Summary – Dental Plans

	Concordia Plus Managed Care (PA Only) DHMO*	Concordia Flex I	Concordia Flex II
Individual	\$21.58	\$18.20	\$27.30
Individual Plus One	\$43.68	\$34.58	\$52.78
Family	\$71.24	\$55.90	\$101.92

# Vision Plans

## Davis Vision by MetLife

	In-Network		Out-of-Network
	Fashion Excellence	Designer Gold	Fashion Excellence and Designer Gold
<b>Eye Examination</b>	Covered in full	Covered in full	Play pays up to \$32
<b>Eyeglass Lenses</b>	Covered in full	Covered in full	Single Vision \$25 Bifocal \$36 Trifocal \$46 Lenticular \$72
<b>Frame</b>	Plan pays up to \$60  Davis Vision Fashion Frame: Covered in full  Davis Vision Designer Frame: \$20 copay  Davis Vision Premier Frame: \$40 copay	Plan pays up to \$130  Davis Vision Fashion Frame: Covered in full  Davis Vision Designer Frame: \$0 copay  Davis Vision Premier Frame: \$25 copay	Plan pays up to \$30
<b>Contacts</b> (in lieu of eyeglasses)	Evaluation and fitting: Covered in full  Plan pays up to \$75 for provider supplied contacts  Medically necessary: Covered in full	Evaluation and fitting: Covered in full  Plan pays up to \$130 plus 15% for provider supplied contacts  Medically necessary: Covered in full	Daily wear: up to \$20 Extended wear: up to \$30 Elective: up to \$48 Disposable: up to \$75 Medically necessary: up to \$225

# Premium Summary

	Fashion Excellence	Designer Gold
Individual	\$6.93	\$10.25
Individual Plus One	\$12.45	\$18.42
Family	\$16.95	\$25.07

# Life Insurance and AD&D

## Group Life

- Basic Group Life
  - Provided by the University at no cost to you
  - One times your salary (up to \$50,000 maximum)
- Optional Group Life
  - 1 to 6 times your salary
  - Cost is age-graded
  - Optional Group Life is capped at \$1,500,000

## Accidental Death and Dismemberment (AD&D)

- Basic AD&D
  - Provided by the University at no cost to you
  - One times your salary (up to \$50,000 maximum)
- Optional AD&D
  - 1 to 6 times your salary
  - \$.015 per \$1,000 of coverage

- You must complete a [beneficiary election form](#)
- Proof of good health, also called Evidence of Insurability (EOI), is required for some types of coverage. EOI is an application process in which you provide information on the condition of your health or your dependent's health to be approved for coverage. The Hartford provides 60 days to submit the EOI application for approval or denial of coverage.

# Dependent Life

## Coverage for Spouse/Domestic Partner

Option 1 \$1.18.....	\$10,000
Option 2 \$2.32.....	\$15,000
Option 3 \$2.63.....	\$20,000
Option 4 \$7.74.....	\$50,000
Option 5 \$10.77.....	\$75,000
Option 6 \$14.61.....	\$100,000
Option 7 \$19.33.....	\$125,000
Option 8 \$23.20.....	\$150,000

## Coverage for Dependent Child(ren)\*

Option 1 \$.80.....	\$10,000
Option 2 \$1.20.....	\$15,000
Option 3 \$1.60.....	\$20,000

*\*only dependents up to age 26 are eligible*

- Proof of good health, also called Evidence of Insurability (EOI), is required for some types of coverage. EOI is an application process in which you provide information on the condition of your health or your dependent's health in order to be approved for coverage. The Hartford provides 90 days to submit the EOI application for approval or denial of coverage.

# Pitt Worx Enrollment

- Detailed instructions on the enrollment process in Pitt Worx are available at [hr.pitt.edu/benefits/enrollment](http://hr.pitt.edu/benefits/enrollment)
  - Including screenshots and a guided video
- Supporting documentation for dependent must be uploaded in the Pitt Worx system prior to enrolling for benefits



The image displays three sequential screenshots from the Pitt Worx enrollment system. The first screenshot shows the main dashboard with a grid of icons for various services. The 'Benefits' icon is highlighted with a red box. The second screenshot shows a 'Review your benefits package and relevant info before you enroll' screen with a 'Make Changes' button highlighted in red. The third screenshot shows the 'Start Enrollment' screen with an 'Authorization' section containing a list of terms and conditions, and 'Accept' and 'Decline' buttons at the bottom.

Me Tools

QUICK ACTIONS APPS

Personal Details Document Records Contact Info Benefit Contacts Employment Info

Pay Time and Absences Personal Information **Benefits** Roles and Delegations

Self Service Instructions Employee Paystub Personal TimeOff Balances Address & Tax Form Changes +

Review your benefits package and relevant info before you enroll.

Make Changes

Time Remaining 28 days Make Changes Until 5/25/22 11:59 PM EST

Pending Actions Your Benefits Report a Life Event Before You Enroll

Primary Care Physicians Document Records Additional Benefits outside of Pitt Work

Start Enrollment Cancel

Authorization

I understand that:

- My benefit selections will remain in effect for the entire year and may only be changed during the next annual open enrollment period or, if earlier, during a limited time period associated with a qualified status change as defined under the University of Pittsburgh Welfare Benefit Plan (the "Plan").
- By completing this administrative form, I authorize the University of Pittsburgh to adjust my pay and make payroll deductions pursuant to the terms, conditions and provisions of the University of Pittsburgh Flexible Compensation Plan and in the amount of the employee contribution portion for my benefits selections.
- If I select "Waive" to any of the above benefit options, I and/or my eligible dependents will not be covered for any of those benefit options.
- If I elect to waive, and not enroll in, any University medical plans, I need to have proof of alternative medical coverage under another plan.
- I will not be eligible for a subsidy on the marketplace exchange if I choose to waive, and not enroll in an offered University medical plan that the IRS considers is affordable for me.
- If I withdraw from coverage as permitted during the annual open enrollment period or during the year due to a qualified status change, and request that my payroll deduction be cancelled accordingly, I relinquish my rights to future coverage under the designated terms and conditions. If I desire to participate again after withdrawal, I may do so only at designated open enrollment or qualified status change times when my re-enrollment is permitted.
- If at any point, I fail to make premium payments for benefits that I have enrolled in, I understand that the university has the right to deduct the remaining amount owed from future payments or compensation owed to me.
- If I have the right to recover expenses incurred for my own or my eligible dependent's care from another person or organization that may have caused my own or my eligible dependent's injury or illness, the Plan has the right to take action to assert against them any such rights I have and recover the full amount the Plan paid for my own or my eligible dependent's care and I have a legal obligation to help the Plan recover against such other person or organization for the amounts the Plan paid. The Plan reserves the right and is entitled to be repaid the entire amount of any amount awarded to me or my eligible dependents, regardless of the amount of the award we actually receive.
- My personal and protected health information may be disclosed and used as described in the University of Pittsburgh's Notice of Privacy Practice, a copy of which has been made available to me.

I certify that all of the information provided above is true and correct and is being provided for the purpose of securing medical and other benefits (some of which may be insured by a third party) for me or other persons eligible under the Plan. I further acknowledge that it is unlawful for me or any other person to make a false or inaccurate statement for the purpose of securing benefits for myself, themselves or any other person, and further acknowledge and agree that any false or misleading statement herein may affect eligibility and may result in discipline by the University of Pittsburgh (up to and including termination of employment) to the extent otherwise permitted by law.

Accept Decline

# **Additional Benefits and Related Programs**



# Work-Life Balance

## Care.com

Care.com offers a network of providers and options to assist with needs such as after-school care, caring for a child who is home sick, caring for children while you are working from home, caring for aging parents, and more.

## International SOS (ISOS)

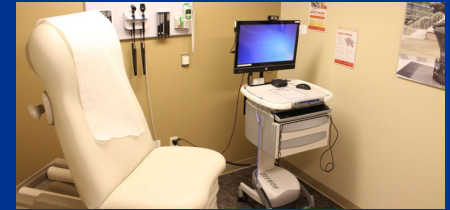
The ISOS program covers non-routine care for regular full-time and part-time faculty and staff declared to be on an academic or work-related assignment on behalf of the University to a country other than their home/country of origin for up to six consecutive months at a time.

## Life Solutions

Life Solutions, the University's Faculty and Staff Assistance Program, offers a variety of resources and services to assist with employees' lives within and beyond the workplace.

# UPMC MyHealth@Work Health & Wellness Center

Since the filming of this video, the MyHealth@Work Center has transitioned to **by appointment** operations; walk-ins will not be accepted.



Appointments can be made using the **online scheduling form** by visiting [hr.pitt.edu/benefits/wellness-center](http://hr.pitt.edu/benefits/wellness-center) or by calling **412-647-4949**.

Medical Arts Building  
3708 Fifth Avenue  
5th Floor, Suite 505  
Pittsburgh, PA 15213

Monday - Friday,  
7:00 am to 3:30 pm



# Postdoctoral Scholars Education Benefits

- Available at the University of Pittsburgh's Oakland and Regional Campuses
- Eligibility for the benefit does not guarantee admission or retention
- Remains on your account irrespective of the grade received
- The education benefit is applied to tuition only
- The education benefit is available the first semester following the Postdoctoral Scholar's date of hire.

# Postdoctoral Scholars Education Benefits

## Benefit for Yourself

Full-time, Regular Faculty

- 97% of Tuition, up to 6 credits
- 90% of Tuition, up to 6 credits

## Benefit for Dependent Child(ren)

100% tuition coverage for up-to 12 terms of full- or part-time study in an undergraduate program leading to a first baccalaureate degree

## Benefit for Spouse/Domestic Partner

90% of Tuition, up to 6 credits for both Undergraduate and Graduate Level Programs

- Under IRS tax code, the value of certain educational benefits is considered taxable income. This taxation could reduce the benefit amount applied to the applicable student account. Learn more and view examples at [hr.pitt.edu/education/taxable](http://hr.pitt.edu/education/taxable).

# Contact Us

## Benefits Department

University of Pittsburgh, Office of Human Resources

**Monday - Friday, 8:30am to 5:00pm**

**833-852-2210 or [hr.pitt.edu/contact-ohr](https://hr.pitt.edu/contact-ohr)**

For Additional Benefits Information:

[hr.pitt.edu/benefits](https://hr.pitt.edu/benefits)

For Upcoming Benefits Webinars:

[hr.pitt.edu/events](https://hr.pitt.edu/events)

