# **Your VHHSBP Benefits-At-A-Glance:**

# **Jersey City Medical Center**



# **Welcome to the Voluntary Hospitals House Staff Benefits Plan (VHHSBP)!**

The VHHSBP Trustees understand how important it is for you to have top-notch healthcare coverage.

Once you enroll, you'll save on out-of-pocket expenses if you need non-preventative medical or dental care, or for certain vision care expenses - something we hope gives you peace of mind as you focus on the important task of caring for your patients.

We believe you'll find this Benefits-At-A-Glance useful, as it describes your benefits provided through the House Staff Benefits Plan (HSBP) for you and your covered dependents as of July 1. The only authorized information concerning your benefits is in writing from the Board of Trustees acting in their official capacity and whose sole decision regarding benefits is final. The trustees reserve the right to change or discontinue the eligibility rules and the type and amounts of benefits under this Plan at any time.

You can also learn more by:

- Visiting our website (<u>cirseiu.org/benefits</u> under your hospital's name)
- Emailing the Fund office at benefits@cirbenefitfunds.org
- Calling the Fund Office (212) 356-8180

For a complete description of your benefits and your rights, please read the Summary Plan Description (SPD) — also located on the CIR website under "Benefits" — which also serves as the Plan Document.

With best wishes for a successful and fulfilling medical career, Your VHHSBP Trustees

## **When You Get Benefits And Who You Can Cover**

To enroll in coverage, complete an enrollment form at orientation. Return the form to your CIR organizer or the CIR Office, Attention: Operations Department within 31 days after your first day of work. Please be sure to name at least one beneficiary for your Life Insurance benefit when filling out the enrollment form.

You and your enrolled family members' coverage starts on your first day of work or the first of the month after the month you start working. The date depends on the hospital at which you work and the calendar day on which you start working. Contact the Benefits Plan Office for more details.

Outside of Orientation and Open Enrollment, there are circumstances where special enrollment is possible. Please see <a href="here">here</a> for a HIPAA Notice of Special Enrollment Rights.

#### **During Open Enrollment in July or January, please note that:**

- You need to provide a Social Security Number (SSN) for you or your covered dependents. You will also need to provide a copy of a marriage license or birth certificate(s) for children; if you are missing either of these documents you can submit <u>this</u> affidavit instead via <u>this</u> update form.
- O If you are enrolling a domestic partner, you'll need to submit the Domestic Partnership application found on cirseiu.org/benefits by selecting your hospital's name.



This is a sample of the Davis Vision ID card, which includes your CIR Member ID number. You will receive this ID card in the mail from the insurer. Only the primary cardholder's name will appear on this ID card.





ID #: 900XXXXX
Name: John Smith

Affiliation: CIR SEIU BENEFITS PLAN

www.davisvision.com | 1.800.999.5431

Fully insured product Underwritten by HM Life Insurance Company. Administered by Davis Vision, which may operate as Davis Vision Insurance Administrators in California.

## **Vision Benefits with Davis Vision**

It's easy to take good vision for granted. However, getting your vision checked each year is just as important as your annual physical or dental check-up. That's why the Plan offers vision benefits through Davis Vision, which includes eye exams, eyeglass lenses and frames, and contact lenses.

Vision Benefits			
At-A-Glance (Amounts are what YOU pay,	VISION BENEFIT - DAVIS VISION PROVIDER		
unless noted otherwise)	In-Network Benefit		
<b>EYE EXAM</b> (one every year beginning July 1)	\$0		
<b>LENSES</b> (one pair every year beginning July 1)	\$0		
FRAMES (one every two years beginning July 1) DAVIS VISION COLLECTION	\$125 allowance towards a pair of frames \$15 co-pay for Designer Frames \$40 co-pay for Premier Frames		
NON-DAVIS VISION FRAME	If you choose a frame that is NOT in the Davis Vision collection, you will be given a \$50 allowance toward any frame from the participating provider plus 20% off the balance.		
CONTACT LENSES - In Lieu of eyeglasses (every year beginning July 1)	If you require a contact lens fitting, you will receive a 15% discount off the fitting exam when you visit an in-network provider. You will receive a \$100 allowance toward any provider-supplied contact lenses, plus 15% off the balance.		

#### **Out-of-Network Benefit**

You may receive services from an out-of-network provider. However, you will receive the greatest value when you use an in-network provider. If you choose an out-of-network provider, you will receive a maximum of \$40 per year toward an eye exam and \$60 toward materials. You must file a claim with Davis Vision to be reimbursed.

## **Dental Benefits with Guardian Insurance**

If your address is within the Tri-State Area (NY, NJ, CT) you are defaulted into the Managed Dental Guard (MDG) Plan. This plan lowers your cost for services rendered. If you do not select a dentist, you will be assigned a dentist near your home. If you already have a dentist and you want to continue to see that dentist, contact Guardian before July 30th or during the periods of open enrollment (either in July or January).

If your address is outside of the Tri-State Area you will be defaulted into the Dental Guard Preferred (DGP) Plan. This option is typically used for those residents whose family will continue to live outside the Tri-State area. This plan allows you greater choice of dentists, but you will pay more for services.

Dental Benefits At-A-Glance	MANAGED DENTAL GUARD	<b>DENTAL GUARD PREFERRED</b> Freedom to Go to Any Dental Provider	
	In-Network Only	Preferred Provider	Non-Preferred Provider
PREVENTATIVE CARE	\$0	\$0	\$0*
DIAGNOSTIC VISIT (Including bitewing X-rays)	\$0	20%	20%*
MINOR SERVICES (Including crowns and bridges)	\$0 - \$316	20%	20%*
MAJOR SERVICES (Including oral surgery)	\$0 - \$625	50%	50%*
ORTHODONTICS	\$0 - \$2,425	50%	\$1,500

<sup>\*</sup> You pay any charges above the Usual and Customary Rate (UCR). There is a \$25.00 annual deductible.

#### Managed Dental Care

Plan Holder: Plan Number:

Subscriber: Subscriber ID: Member:

Network: MANAGED DENTAL GUARD

Plan: Office Visit Copay:

DDS Office Name:

DDS Office Number: For Appointments:



This is a sample of the Dental ID card. You will receive this ID card in the mail from the insurer. Each family member will receive their own ID card.



#### **Disability Benefits**

For purposes of our disability benefits, "disabled" means you can no longer perform the duties of your occupation due to accidental bodily injury, sickness, or a related medical condition, including pregnancy or childbirth. You must also be under the care of a licensed provider as defined by the state in which you work.

#### **Short-Term Disability (STD):**

- Coverage begins on the eighth (8th) day of your disability. The maximum benefit payable is 60% of your weekly salary, up to \$692 per week, for up to 26 weeks.
- O For complete guidelines, refer to your Summary Plan Description booklet.
- O If you are going out on a disability leave, contact you employer as soon as possible.

#### **Long-Term Disability (LTD):**

- O The LTD plan pays you 60% of your monthly salary, up to a maximum of \$3,500 a month, in the event of a disability.
- LTD benefits typically start if you are still disabled after 26 continuous weeks.
- When you terminate employment, you will have the option to convert this benefit to an individual policy, subject to certain conditions.

#### **Employee Assistance Program (EAP)**

We are here to support you in managing life's challenges. WorkLifeMatters if a free confidential employee assistance program provided through Guardian and Uprise Health (f.k.a. Integrated Behavioral Health). Counselors are available 24/7 and are just a phone call away. WorkLifeMatters offers help to assist you with family and personal issues you might be facing or questions you might have.



- Anxiety
- Dependent Care & Caregiving
- Depression
- Drug & Alcohol Dependency
- Education
- Grief Assistance
- Legal & Financial
- Lifestyle & FitnessManagement

- Parenting
- Pet Care
- Work Issues
- And More

#### **QI/Patient Safety Educational Benefits**

VHHSBP is committed to offering residents additional education and training to help you deliver safe, efficient and effective care to your parents.

#### **QI/Training Scholarships**

- VHHSBP will be providing scholarships for eligible covered residents to attend one approved QI/Patient Safety Education and Training program available in the U.S. Participants will be eligible to receive a scholarship of up to \$3,000 per residency year to cover expenses related to registration, travel and tuition.
- O Covered residents accessing this benefit are responsible for securing time off (vacation or education leave time) to attend or participate in these educational opportunities.

#### **Even More Benefits**

#### **Life Insurance**

If you die, a \$125,000 benefit goes to your beneficiary. You will receive a \$20,000 death benefit if your spouse or domestic partner dies.

#### **Ancillary Death Benefit**

Provides up to \$5,000 for transportation of the remains of the deceased to a place of burial more than 200 miles from New York City.

#### **Accidental Dismemberment Benefit**

Payments for the loss of a limb as the result of an accident on or off the job.

#### **Hearing Aid Benefit**

Covers up to \$1,500 per ear, per lifetime for each family member.

# Other important information and required notices can be found in the SPD:

- Full Description of Benefit
- Claims review and Appeal Procedures
- HIPAA Privacy Practices
- Leave for Military Service
- COBRA
- Coordination of Benefits
- ERISA

## **Committee of Interns & Residents Legal Services (CIRLS)**

Committee of Interns & Residents VHHSBP Legal Services Plan is a pre-paid legal services benefit which provides legal assistance to resident physicians and qualifying family members on covered matters.

The Plan connects you with lawyers who can help with immigration issues, landlord-tenant problems, family matters, and more.

## **How to Obtain Legal Benefits**

#### **Below** is a list of Legal Services coverage

- Bankruptcy & Debt Problems
- Consumer Protection
- Credit Rating
- Criminal Matters
- Document Review
- Estate Matters
- Family Matters
- Immigration
- Landlord-Tenant Problems
- Medical Licensure
- Name Changes
- Power of Attorney
- Unemployment Benefits
- Wills, Living Wills



For details, see the VHHSBP CIR Legal Services Summary Plan Description found on the CIR website. Click "Benefits" and then click on your hospital from the drop-down menu.

# **Contact Information**

## For questions on benefits coverage, please see the information below:

BENEFIT	ADMINISTRATOR		CONTACT INFORMATION
Employee Assistance Program	Guardian Integrated Behavioral Health (IBH)	Phone: Days/Hours: Website:	(800) 386-7055 M - F, 9:00 a.m. to 8:00 p.m. EST: Emergency access 24/7 <a href="https://ibhworklife.personaladvantage.com">https://ibhworklife.personaladvantage.com</a> (Username: Matters / Password: wim70101)
Dental Group # G-417733	Guardian Managed Dental Guard (MDG)  Guardian Dental Guard Preferred (DGP)	Phone: Days/Hours: Website: Phone: Days/Hours: Website:	MDG: (888) 618-2016 M - F, 9:00 a.m. to 8:00 p.m. EST <u>www.guardiananytime.com</u> DGP: (800) 541-7846 M - F, 9:00 a.m. to 8:30 p.m. EST <u>www.guardiananytime.com</u>
Vision	Davis Vision Client Code: 2189	Phone: Days/Hours: Website:	(800) 999-5431 M - F, 8:00 a.m. to 11:00 p.m. EST; Sat., 9:00 a.m. to 4:00 p.m. EST; Sun., 12:00 p.m. to 4:00 p.m. EST; automated assistance available 24/4 www.davisvision.com
Life Insurance Group # G-348566	Standard Security Insurance	Phone: Days/Hours: Fax: Website:	(800) 525-4542 M – F, 8:00 a.m. to 6:00 p.m. EST (610) 807-2724 www.guardiananytime.com

## **Contact Information**

#### For questions on benefits coverage, please see the information below:

BENEFIT	ADMINISTRATOR		CONTACT INFORMATION
Hearing Aid	EPIC Hearing Healthcare*	Phone: Days/Hours: Fax: Website:	(800) 525-4542 M - F, 8:00 a.m. to 6:00 p.m. EST (610) 807-2724  www.guardiananytime.com  *When calling EPIC Hearing Healthcare, you must mention that you are a CIR VHHSBP member.
Legal Services	CIR Legal Services Plan (CIRLS)	Phone: Days/Hours: Fax: Email: Website:	(212) 356-8195 M – F, 9:00 a.m. to 5:00 p.m. EST (212) 504-3057 cirls@cirseiu.org www.cirseiu.org/legalservices
Short-Term Disability	NJ Divison of Temporary Insurance	Phone: Fax: Address: Website:	(609) 292-7060 (609) 984-4138 P.O. Box 387, Trenton, NJ 08625-0387 https://myleavebenefits.nj.gov/labor/myleavebenefits/
Long-Term Disability Group # G-348566	Guardian Life Insurance	Phone: Days/Hours: Fax: Website:	(800) 525-4542 M - F, 8:00 a.m. to 6:00 p.m. EST (610) 807-2724 www.guardiananytime.com

This Benefits-At-A-Glance describes your benefits provided through the Voluntary Hospitals House Staff Benefits Plan (VHHSBP) as of July 1. The only authorized information concerning your benefits is in writing from the VHHSBP Trustees acting in their official capacity and whose sole decision regarding benefits is final. The Trustees reserve the right to change or discontinue the eligibility rules and the type and amounts of benefits under this Plan at any time. Please read the Summary Plan Description (SPD)/Plan Document for more information.

The Voluntary Hospitals House Staff Benefits Plan staff can help with questions about your benefits.

For questions contact the VHHSBP Fund Office:



10-27 46th Avenue, Suite 300-2 Long Island City, NY 11101

Phone: (212) 356-8180

Monday - Friday 9:00 am - 5:00 pm EST

EST Fax: (212) 356-8181

Email: benefits@cirbenefitfunds.org



