

2006 Postdoctoral Open Enrollment Rates

SERVICE REQUEST 16990

Payroll Coordination

Contact: Julia Sills (7-0944)

11/09/05

Modify the benefit rates in PPS to support the 2006 Postdoctoral Open Enrollment process.

Attached are the 2006 Open Enrollment rates for the Postdoctoral Benefit Plans (Medical, Dental, Vision, and Short-term Disability). These rates are effective January 1, 2006. Please note that the Postdoctoral Scholar Benefit Plans were first implemented on January 1, 2005.

See attachment for 2006 rates.

University of California

"PSBP" 2006 Monthly Premium Rates

	Health Net Current Medical	Health Net Renewal Medical
HMO	<i>HMO</i>	<i>HMO</i>
Postdoc	\$229.02	\$229.02
Postdoc + Spouse	\$549.66	\$549.66
Postdoc + Child(ren)	\$400.80	\$400.80
Family	\$698.52	\$698.52
PPO	<i>PPO</i>	<i>PPO</i>
Postdoc	\$319.61	\$319.61
Postdoc + Spouse	\$767.06	\$767.06
Postdoc + Child(ren)	\$559.32	\$559.32
Family	\$974.82	\$974.82
	Health Net / Principal Current Dental	Health Net / Principal Renewal Dental
HMO	<i>HMO</i>	<i>HMO</i>
Postdoc	\$11.19	\$11.19
Postdoc + Spouse	\$20.14	\$20.14
Postdoc + Child(ren)	\$21.26	\$21.26
Family	\$31.33	\$31.33
PPO	<i>PPO</i>	<i>PPO</i>
Postdoc	\$25.79	\$27.34
Postdoc + Spouse	\$53.22	\$56.42
Postdoc + Child(ren)	\$59.33	\$62.89
Family	\$95.16	\$100.87
	Health Net Current Vision	Health Net Renewal Vision
PPO	<i>PPO</i>	<i>PPO</i>
Postdoc	\$7.52	\$7.52
Postdoc + Spouse	\$11.98	\$11.98
Postdoc + Child(ren)	\$12.22	\$12.22
Family	\$19.72	\$19.72
	Standard Insurance Current Life and AD&D	Standard Insurance Renewal Life and AD&D
\$50,000 per Postdoc	\$4.20	\$4.20
	Standard Insurance Current Short Term Disability	Standard Insurance Renewal Short Term Disability
60% Benefit Up to 180 days	\$12.09	\$10.24
	Standard Insurance Current Long Term Disability	Standard Insurance Renewal Long Term Disability
60% Benefit After 180 days	Individually Rated	Individually Rated No Change In Rate
	Garnett-Powers Benefit Broker Fee	Garnett-Powers Benefit Broker Fee
Per Postdoc	\$11.10	\$11.10



**PAYROLL/PERSONNEL
BENEFITS RATE TABLE - DENTAL INSURANCE RATES
UPAY551 (R11/02) R1440**

DENTAL INSURANCE PLAN: **PDS - Health Net DHMO**

A/D	TABLE	PLAN CODE	BUC	R	S	D	EFFECTIVE DATE
1	2 3	4 5	7 8	61 62	63	64 65	MM DD YY
A	14	DI	P399				010106

ENTRY	COVERAGE	PREMIUM	CONTRIBUTION
10 11	CODE	15	20 21 26
01	U	11.19	11.19
02	UA	20.14	20.14
03	UC	21.26	21.26
04	UAC	31.33	31.33

PREPARED BY:	DATE
APPROVED BY:	DATE

RETN: ACCOUNTING: UNTIL ACTION TAKEN



**PAYROLL/PERSONNEL
BENEFITS RATE TABLE - DENTAL INSURANCE RATES
UPAY551 (R11/02) R1440**

DENTAL INSURANCE PLAN: PDS-Principal PPO

A/D	TABLE	PLAN CODE	BUC	R	S	D	EFFECTIVE DATE
1	2 3	4 5	7 8	61 62	63	64 65	MM DD YY
A	14	DI	P499				01 01 06

ENTRY	COVERAGE	PREMIUM	CONTRIBUTION
10 11	CODE	15	20 21 26
01	U	27.34	27.34
02	UA	56.42	56.42
03	UC	62.89	62.89
04	UAC	100.87	100.87

PREPARED BY:	DATE
APPROVED BY:	DATE

RETN: ACCOUNTING: UNTIL ACTION TAKEN



**PAYROLL/PERSONNEL
BENEFITS RATE TABLE - MEDICAL INSURANCE RATES
UPAY 555 (R11/02) R1440**

MEDICAL PLAN: PSBP Med HMO

A/D	TABLE	PLAN CODE	BUC	R E P	S H C	D U C	EFFECTIVE DATE
1	2 3	4 5	7 8	61 62	63 64	65 66	MM DD YY
A	14	HI	PL	99			01 01 06

SALARY BASE
12 14

SALARY BASE
12 14

ENTRY 10 11	COVERAGE CODE	PREMIUM		CONTRIBUTION	
		15	20	21	26
01	U	229.02		229.02	
02	UA	549.66		549.66	
03	UC	400.80		400.80	
04	UAC	698.52		698.52	
05	M	000000		000000	
06	MM	000000		000000	
07	MMM	000000		000000	
08	MA	000000		000000	
09	MC	000000		000000	
10	MAC	000000		000000	
11	MMC	000000		000000	

ENTRY 10 11	COVERAGE CODE	PREMIUM		CONTRIBUTION	
		15	20	21	26
01	U				
02	UA				
03	UC				
04	UAC				
05	M				
06	MM				
07	MMM				
08	MA				
09	MC				
10	MAC				
11	MMC				

RETN: ACCOUNTING: UNTIL ACTION TAKEN

PREPARED BY:	DATE
APPROVED BY:	DATE



**PAYROLL/PERSONNEL
BENEFITS RATE TABLE - MEDICAL INSURANCE RATES
UPAY 555 (R11/02) R1440**

MEDICAL PLAN: **PSBP Med PPO**

A/D	TABLE	PLAN CODE	BUC	R E P	S H C	D U C	EFFECTIVE DATE
1	2 3	4 5	7 8	61 62	63 64	65	MM DD YY
A	14	HI	B	99			01 01 06

SALARY BASE	
12	14

SALARY BASE	
12	14

ENTRY 10 11	COVERAGE CODE	PREMIUM		CONTRIBUTION	
		15	20	21	26
01	U	319.61		289.61	
02	UA	767.06		707.06	
03	UC	559.32		499.32	
04	UAC	974.82		884.82	
05	M	000000		000000	
06	MM	000000		000000	
07	MMM	000000		000000	
08	MA	000000		000000	
09	MC	000000		000000	
10	MAC	000000		000000	
11	MMC	000000		000000	

ENTRY 10 11	COVERAGE CODE	PREMIUM		CONTRIBUTION	
		15	20	21	26
01	U				
02	UA				
03	UC				
04	UAC				
05	M				
06	MM				
07	MMM				
08	MA				
09	MC				
10	MAC				
11	MMC				

RETN: ACCOUNTING: UNTIL ACTION TAKEN

PREPARED BY:	DATE
APPROVED BY:	DATE



**PAYROLL/PERSONNEL
BENEFITS RATE TABLE - VISION INSURANCE RATES
UPAY708 (R11/82) R1440**

VISION INSURANCE PLAN **PSBP - ~~DIT~~ VISION HMO**

A/D	TABLE	PLAN CODE	BUC	R E P	S H C	D U C	EFFECTIVE DATE
1	2 3	4 5	7 8	61 62	63 64	65 66	MM DD YY
A	14	VI	X	9.9			01 01 06

P5

ENTRY 10 11	COVERAGE CODE	PREMIUM		CONTRIBUTION	
		15	20 21	26	
01	U	7.52		7.52	
02	UA	11.98		11.98	
03	UC	12.22		12.22	
04	UAC	19.72		19.72	

PREPARED BY:	DATE
APPROVED BY:	DATE

RETN: ACCOUNTING: UNTIL ACTION TAKEN