

## FAQs (Frequently Asked Questions & Answers)

### For Residents & Clinical Fellows

Q. How do I enroll in Health & Welfare benefits?

A. You should contact your Department Coordinator to enroll. Review the following page for additional information, <http://ucsfhr.ucsf.edu/index.php/postdoc/article/medical-insurance-the-basics/>

Q. When will enrollment become effective?

A. For those not previously enrolled in a benefit program through UCSF, the effective is the first date of your GME appointment. For those that are enrolled in the faculty/staff benefit program or postdoctoral scholar benefit program immediately prior to a GME appointment, the benefits under your previous appointment continue through the end of the month for which you are appointed in GME, and your GME insurance will begin the first of the month following your GME appointment.

Q. When will I receive new member I.D. cards for myself and family members?

A. You should receive your new member I.D. cards within 30 to 45 business days from the date you enroll. If you have a fairly immediate need to access health care prior to receiving your I.D. cards, contact the Central Insurance Desk for assistance.

Q. How do I add a new infant to my health plans?

A. Please complete the [Insurance Action Form](#) and submit it to your Departmental Coordinator within 31 days from the date of birth. Enrollment will be retro to the date of birth. If you are enrolled in Health Net please contact your plan to discuss the plan's policy regarding PCP/Medical group options for the first month following the birth.

Q. I am enrolling my Domestic Partner and/or Domestic Partner's children in my benefit plans; do I also need to complete the [Declaration of Domestic Partnership Form](#)?

A. Yes, both the enrollment and the Declaration of Domestic Partnership form are required. Please note UC contributions towards benefits for your Domestic Partner and/or Domestic Partner's children may be considered imputed income and subject to taxation.

Q. I would like to opt out of the medical plan and enroll in all the other benefits plans, is this possible?

A. No. Currently, if you choose to opt out of medical, you will be opted out of all the other benefit plans.

Q. Can my department require me to pay additional dollars for my benefits coverage beyond what is listed as the '[Residents Premium Contributions](#)'?

A. No.

Q. What should I do if I have a question about my health plan coverage?

A. Please review the information available on the [Residents/Clinical Fellows website](#). If you still have questions please contact your plan directly. Be sure to record the date and the person you speak with whenever you contact your plan – [Contact List](#).

A. I contacted my health plan and the representative didn't recognize my enrollment. What should I do?

Q. Please contact Susan Descalso at the Central Insurance Desk, (415) 476-8093, [susan.descalso@ucsf.edu](mailto:susan.descalso@ucsf.edu)

Q. I need to take a leave of absence from my work at UCSF, what steps should I take to maintain benefits enrollment?

A. Please contact your Departmental Coordinator.

Q. Will I be paid during my time away from work?

A. Please contact your Departmental Coordinator.

Q. I see a deduction from my pay check for the Defined Contribution Plan (DCP SH). What is the Defined Contribution Plan?

A. The Defined Contribution Plan is a University of California Retirement Savings Program. Though the contribution is fixed and mandatory, this is 'your' money and you do have the option to invest this money in the various investment options available through FITSCo (Fidelity Investments Tax Exempt Services Company). For more information please review the [Summary Plan Description](#). Log into [FITSCo](#) to visit your money!

Q. Can I enroll in the UC 403(b) and 457(b) retirement savings plans?

A. If you are receiving pay through the UCSF payroll system, you are eligible to enroll in these retirement savings plans. Be sure to review the Summary Plan Descriptions for the [403\(b\)](#) and the [457\(b\)](#) regarding early withdrawal penalties and other important plan rules. For more information and to enroll log onto, [FITSCo](#).

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### **For Administrators (Residents & Clinical Fellows Coordinators)**

Q. Is an Enrollment Form needed to end insurance enrollment under the Resident /Fellows benefit program in all cases?

A. Yes, please complete the enrollment form indicating the date the appointment ended and submit it to the Central Insurance Desk. Though you may have indicated a termination of account/fund on your preliminary report, an 'official' termination via the enrollment form must be submitted to the Central Insurance Desk so that the plan may be notified.

Q. When a Resident/Fellow's appointment ends, do I need to send the COBRA Acknowledgement Form to the Central Insurance Desk along with the Enrollment Form?

A. No, currently, your department is the office of record for the COBRA documentation.

Q. When a Resident/Fellow moves from one department to another, which department is responsible for initiating the change in funding on the Enrollment Form?

A. The new department should submit the form to the insurance desk indicating the change in funding. Benefits should not be terminated.

Q. I have a question about the recharges on my preliminary report, who should I contact?

A. Please contact the Finance Desk, (415) 514-3798.