

**HOUSE STAFF BENEFITS  
THE JOHNS HOPKINS UNIVERSITY  
SCHOOL OF MEDICINE**

**VACATION POLICY, STIPEND LEVELS, AND SUMMARY OF BENEFITS**

I. VACATION POLICY  
The vacation policy is 2 weeks to one month as determined by the training program director for Postgraduate year.

<u>II. STIPEND POLICY</u> <u>Postdoctoral Year in Program*</u>	<u>2005-2006</u> <u>Annual Stipend</u>
1st	\$41,655
2nd	43,660
3rd	45,488
4th	47,490
5th	49,816
6th	51,566
7th	53,128
8th	56,017
9th	58,149

\*Not all prior postgraduate years of training count toward the year in program. Postgraduate year is determined by the Postdoctoral Office based on established criteria.

III. SUMMARY OF BENEFITS FOR JOHNS HOPKINS HOSPITAL HOUSE STAFF AND JOHNS HOPKINS BAYVIEW MEDICAL CENTER HOUSE STAFF AS OF JULY 1, 2005.

**(All insurance benefits provided at no cost to House Officers)**

**DESCRIPTIONS OF THE BENEFIT PLANS WILL BE DISTRIBUTED TO YOU WITH MEMBERSHIP CARDS AND INSURANCE CERTIFICATES.**

STUDENT HEALTH PROGRAM (Effective date is determined by completion date of application)

For house officers, spouses, same-sex domestic partners and dependent children. Enrollment must take place within 30 days of appointment. Changes in enrollment can be made during the July open enrollment period or as a result of a "life event" provided application is made within 30 days of the qualifying event.

I. HOSPITALIZATION INSURANCE - STUDENT HEALTH PROGRAM

A. Hospitalization

All inpatient care - 30 day semi-private room at 100% of Reasonable & Customary charges; then 80% of Reasonable & Customary charges, after deductible  
Outpatient Surgical Facility Charges – 100% of Reasonable & Customary charges

B. Out-of-Pocket Maximum- Calendar Year

Individual	\$3,000
Family	\$9,000

C. Diagnostic Tests

For diagnostic tests performed in a physician's office or hospital outpatient department:

1. X-ray examinations, radioisotope studies (made by qualified X-ray specialist or radiologist upon referral from another physician or by a specialist qualified to make such examination in his own field), electrocardiograms, and electroencephalograms.
2. Pathology examinations including the study of surgically removed tissue, blood tests, analysis of urine, spinal fluids, etc.

D. Prescription Plan

Benefits are paid for most prescription drugs, injectable insulin, diabetic supplies and other medicines and supplies. You can receive a supply equal to 34 days or 100 units; whichever is greater at a pharmacy. When you go to a pharmacy, show your membership card and pay only 20% of the cost of a prescription. A 90-day supply of medication may be obtained by mail. Details on the mail order program are included in the Student Health Program brochure. Prescribed oral contraceptives and contraceptive devices are covered under the Prescription Plan.

E. Maximum Lifetime Benefit - \$1,000,000

Subject to a \$100 deductible per member (\$300 per family), per calendar year. The Program will pay 80% of Reasonable & Customary charges for all other covered expenses up to the \$1,000,000 lifetime maximum. (Except substance abuse care which has a \$250,000 lifetime maximum)

F. Outpatient Mental Health Services

The program provides benefits for outpatient mental health service when provided in a psychiatrist's office, or in a hospital outpatient department or clinic. These benefits are coordinated with the benefits available under the Student Mental Health Program as discussed in the Summary of Health Benefits and Description of the House Staff Ambulatory Care Program.

G. Case Management Component

Elective (non-emergency) hospitalizations require certification by the Johns Hopkins Student Health Program prior to admission. Emergency care must be reported to the Johns Hopkins Student Health Program within 48 hours.

- H. Pre-Existing Condition Exclusion (applies only to subscribers who have not presented a valid Certificate of Health Coverage from a prior health plan)  
Benefits will be limited to \$10,000 during the first year of the policy for any condition, except pregnancy, for which a new subscriber has received medical treatment in the 90 days preceding effective date of policy.
- II. AMBULATORY CARE PROGRAM (Coverage is effective date of Student Health Program enrollment)  
The House Staff Ambulatory Care Program (HSACP) is designed to provide payment for comprehensive ambulatory health services to house officers, spouses, same-sex domestic partners and dependent children. The Ambulatory Care Program covers professional fees and, within certain guidelines, medical expenses not covered by the Student Health Program. Outpatient pediatric care is also supplemented under this program. You can read the entire brochure on the following website: <http://www.hopkinsmedicine.org/som/Audience/residents.html>.
- III. UNIVERSITY HEALTH SERVICES  
Services provided by the University Health Services (UHS Center) are available to house staff for adult ambulatory care. The physicians and professional staff of the UHS Center may be utilized as your primary and referring internists for the Ambulatory Care Program.
- IV. STUDENT MENTAL HEALTH SERVICES  
Student Mental Health offers a confidential source for house staff and their spouses/same-sex domestic partners seeking mental health help. Services are rendered by physicians and professional staff of the Johns Hopkins Psychiatry Department. Co-payments are required after eight calendar year visits.
- V. FACULTY & STAFF ASSISTANCE PROGRAM (FASAP)  
The FASAP program is available to house staff and their immediate families. Services include identification, assessment and diagnosis of personal problems, referral to appropriate service or treatment resources; brief counseling, preventive and educational sessions, and support and discussion groups.
- VI. DENTAL PLAN - Coverage effective first of the month following month of appointment  
For house officers, spouses, same-sex domestic partners and dependent children. This is a basic CareFirst BlueCross BlueShield dental plan with a co-payment requirement for services rendered.
- VII. LONG TERM DISABILITY INSURANCE (House Officer Only)  
Enrollment Form Required. Effective date is determined by completion date of application. Details of the plan will be mailed approximately 6 weeks after your appointment commences.
- A. The policy is noncancellable and guaranteed renewable for your lifetime.
- B. The monthly benefit is an amount equal to 60% of monthly compensation plus \$750 with a minimum benefit of \$2,250 per month and a maximum benefit of \$2,750 per month. This benefit applies to new appointments 7/01/05 and beyond. For appointments prior to 7/01/05, the monthly benefit is \$2,250 per month.
- C. Benefits are payable after the 90th day of your disability.
- D. The policy can be maintained by you after you leave Hopkins by the continuation of premium payments.
- E. Eligibility for those holding concurrent long term disability policies will be determined by UnumProvident.
- VIII. SUPPLEMENTAL DISABILITY BENEFITS  
In addition to the above benefit a Supplemental Disability Insurance Plan may be purchased by the house officer on a direct pay basis. The plan provides a \$1,000 additional monthly benefit at guaranteed rates. Enrollment information will be mailed to your home by UnumProvident.
- IX. LIFE INSURANCE (House Officer only – Coverage is effective date of appointment. No enrollment form required; completion of beneficiary form required.)  
\$100,000 of group life coverage under a policy underwritten by Unum Life Insurance Company of America.
- X. RETIREMENT PLAN 403(b)  
The institutions provide 1.5% of your annual salary to a retirement plan. In addition, this plan allows you to voluntarily tax shelter a portion of your taxable income received as compensation for services (i.e. salary/wages). That portion of income received in the form of fellowships (stipends) is excluded from 403(b) eligibility. The minimum voluntary contribution is \$15 per month and may not exceed \$14,000 of your taxable income for the 2005 calendar year and \$15,000 in 2006. The effective date of your voluntary participation will be the first day of the month after all appropriate enrollment forms are received by the Office of Benefits Administration.
- XI. DEPENDENT CARE ACCOUNT  
A dependent care reimbursement plan allows house staff to use pre-tax dollars to pay for eligible dependent care expenses for children or dependent adults. Details are available in the Registrar's Office, Broadway Research Building, Suite 147, at orientation. Internal Revenue Service regulations govern eligibility; you must receive a wage/salary to participate. Compensation received in the form of a fellowship stipend will be excluded from eligibility. An overview of the dependent care program, enrollment form, claim form, flexible spending worksheet, and direct deposit authorization form are on <http://www.hopkinsmedicine.org/som/Audience/residents.html>.