

**USC SENIOR CARE**  
**FREQUENTLY ASKED QUESTIONS (FAQs)**  
(213) 740-0035

Q. *Can I be sure that my USC physician accepts Medicare assignment?*

A. Virtually all USC physicians accept Medicare assignment, with rare exception. However, it's a good idea to get in the habit of checking on your physician's status regarding Medicare assignment so it probably wouldn't hurt to ask when scheduling your appointment.

Q. *How can you be sure that a doctor you may be seeing outside USC accepts Medicare assignment?*

A. Never assume the doctor accepts Medicare assignment. It is your responsibility to determine whether your medical provider accepts Medicare assignment *before* your doctor visit.

Q. *If a doctor or hospital actually charges more than Medicare pays, what happens?*

A. Medical billing practices vary widely. Often a doctor or hospital will bill for substantially more than Medicare or an insurance carrier with whom the medical provider may have a contract will actually pay. This is a commonly accepted industry practice. The reality is that if the provider accepts Medicare assignment, the provider must accept the Medicare-allowable rate regardless of the billed amount.

Q. *Are the Delta Dental/Vision Services Plan benefits the same in both the Network Plan and Senior Care?*

A. Yes. The Delta Dental benefit is the same as the Delta Dental program offered to active faculty and staff. The VSP benefits are identical in both Network and Senior Care plans.

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Q. *What are the differences between the Network Plan and Senior Care?*

A. Some, but not all, differences you may find between the Network Plan and Senior Care are:

- With USC-designed Senior Care, benefits are based on covered services as determined by Medicare. If a service is covered by Medicare, it is covered by USC Senior Care. If a service is not covered by Medicare, it is not covered by Senior Care. Many retirees in USC Senior Care report that receiving medical care, and having that medical care paid for, is essentially identical to the Network plan.
- With USC Senior Care the greatest benefit is with USC providers (fully paid – no copayments and no deductibles) so long as the service is covered by Medicare. The second “tier” is all providers in the U.S. who accept Medicare assignment. These non-USC providers are paid all but 2% after a \$200 annual deductible. In Senior Care the Anthem Blue Cross provider designation *is of no significance*.
- There is no prescription drug coverage as part of Senior Care. Senior Care members have their prescription drug plans covered through a Medicare Part D prescription drug plan which is purchased by each individual based on his/her prescription drug needs.
- There are no flat dollar copayments for office visits in Senior Care. If you utilize USC providers, you will pay nothing and if you utilize non-USC providers who accept Medicare assignment, you will pay 2% of Medicare-allowable charges after a \$200 annual deductible.

Q. *If I have Kaiser HMO now and am happy with it, why would I change to Senior Care when I retire?*

A. If you retire from USC and enroll in Kaiser’s Senior Advantage plan, your Kaiser benefits will change somewhat. You can call Kaiser’s Member Services for a breakdown of the individual Senior Advantage plan and compare those costs and benefits to those of your existing Kaiser plan or to those of Senior Care. Of course, the actual *care* you presently receive at Kaiser will not change, and when you take into consideration that Kaiser offers its Senior Advantage plan which

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includes a Part D prescription drug plan, currently with no monthly premium, you may find it more comfortable for you to stay with Kaiser.

Q. *How do we know if Senior Care is a good deal? How can we find out?*

A. A good place to research all things Medicare is the government's website Medicare.gov. Enter "Medigap plans" into the Medicare.gov Search box and then enter your zip code in the pop-up box; the site will display all Medigap plans in your geographical area, complete with benefits and premium. Medigap plans are Medicare supplemental plans similar to Senior Care, ranging from "A"-low benefits/cost to "L"-high benefits/cost. You will find that Senior Care is comparable in benefits, but *generally* lower in cost, to the higher-lettered plans.

Q. *If someone worked for USC for a short time, maybe years ago, are they eligible upon attaining age 65, parts A&B, and retirement, of joining Senior Care?*

A. Yes. Length of tenure at USC is not relevant. In order to join Senior Care, one must be a "former employee of USC." USC will verify employment before approving the enrollment.

Q. *Can a surviving spouse join or remain in USC Senior Care?*

A. Yes. Spouses and Registered Domestic Partners remain eligible after the passing of the former employee.

Q. *Would there ever be an occasion upon retiring from USC at or after age 65 that taking COBRA would be appropriate?*

A. In some situations it may be reasonable to consider COBRA as a bridge between the USC Network Plan and Senior Care. Examples include a delay in obtaining Part B or when taking certain expensive prescription drugs. If you are taking expensive Brand name medications, consider your monthly prescription

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drug copayments and the COBRA premium vs. what you would pay for a Medicare Part D plan, as well as your copayments under Part D and at what point in time you would fall into the Part D “doughnut hole.” The pharmacy where you fill your prescriptions may be able to help you with the analysis.

**CAVEAT:** COBRA is not a Group Health Plan. If you choose to enroll in **COBRA** **you must still enroll in Medicare Part B**. If you do not enroll in Medicare Part B **timely**, you will pay a penalty for the rest of your life and will have a waiting period before Part B coverage will become effective. You will be **uninsurable** during the waiting period.