

A high-quality medical plan offering the most provider choice for USC employees.

The USC PPO offers access to three tiers of providers. You also have access to Lyra Health for mental and emotional care and to Livongo for diabetes management. Learn more at employees.usc.edu/ppo.

Tier 1: Keck Medicine of USC providers

Keck
Medicine
of USC

USC Norris
Comprehensive
Cancer Center
Keck Medicine of USC

USC Arcadia Hospital
Keck Medicine of USC

USC Verdugo
Hills Hospital
Keck Medicine of USC

Tier 2: Anthem Blue Cross Prudent Buyer/ BlueCard providers (nationwide and international providers)

Anthem
Prudent Buyer PPO
and International
Coverage

Tier 3: Out-of-network

Non-contracted providers



2025 monthly employee contribution

| Employee | |
|-------------------------|-------|
| Salary \$68,000 or less | \$345 |
| \$68,000.01-\$133,000 | \$354 |
| \$133,000.01-\$200,000 | \$378 |
| \$200,000.01-\$250,000 | \$393 |
| More than \$250,000 | \$400 |

| Employee + Adult* | |
|-------------------------|-------|
| Salary \$68,000 or less | \$764 |
| \$68,000.01-\$133,000 | \$785 |
| \$133,000.01-\$200,000 | \$837 |
| \$200,000.01-\$250,000 | \$870 |
| More than \$250,000 | \$886 |

| Employee + Child(ren) | |
|-------------------------|-------|
| Salary \$68,000 or less | \$612 |
| \$68,000.01-\$133,000 | \$628 |
| \$133,000.01-\$200,000 | \$671 |
| \$200,000.01-\$250,000 | \$697 |
| More than \$250,000 | \$710 |

| Employee + Adult + Child(ren)* | |
|--------------------------------|---------|
| Salary \$68,000 or less | \$994 |
| \$68,000.01-\$133,000 | \$1,020 |
| \$133,000.01-\$200,000 | \$1,089 |
| \$200,000.01-\$250,000 | \$1,131 |
| More than \$250,000 | \$1,152 |

Rates do not include Health Assessment Incentive credit
*Spousal Surcharge may apply

Medical coverage

| | |
|---|--|
| Primary care physician (PCP) required? | No, but you can save by designating one |
| Out-of-network coverage? | Yes |
| Preventive care cost | Tier 1: \$0 Tier 2: \$0 Tier 3: 50%+* |
| Primary care visit cost | Tier 1: \$25 (\$15 copay with designated PCP) Tier 2: \$40 copay (\$30 copay with designated PCP) Tier 3: 50%+* |
| Deductible (individual/family) | Tier 1: \$125/\$375 Tier 2: \$300/\$900 Tier 3: \$750/\$2,250 |
| Out-of-pocket maximum (individual/family) | Tier 1: \$1,500/\$4,500 Tier 2: \$3,000/\$9,000 Tier 3: \$12,500/\$37,500 |

*If you use a Tier 3 (out-of-network) provider, you pay deductible and all charges above 50% of "usual and customary" fees.

Retail prescription drug coverage (30-day supply)

| | |
|------------------------------|--------------------|
| Generic | \$5 copay |
| Brand (no generic available) | \$25 copay |
| Brand (generic available) | \$70 copay |
| Specialty drug | \$125 copay |

Service plan providers

Anthem
anthem.com/ca
800-227-3771

LiveHealth
ONLINE
livehealthonline.com
888-548-3432

Livongo
by Teladoc Health
join.livongo.com/usctrojans/hi
Member Support
800-945-4355

Lyra
lyrahealth.com
844-495-7094

Optum Rx
coming 1/1/25

~personify
HEALTH
(Formerly known as HealthComp)
hconline.healthcomp.com/usc
855-727-5267

Other benefits available to you

DELTA DENTAL
deltadentalins.com
888-335-8227

UNITED CONCORDIA
DENTAL
ucci.com
800-937-6432

vsp
vision care
vsp.com
800-877-7195

