

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



Save up to \$480 annually



Complete online
questionnaire



Complete in-person
health screening or
approved wellness
activities

Visit employees.usc.edu/wellness-benefit to participate in our Vitality health assessment incentive and save \$40 each month on your medical plan premium.

2024 monthly employee contribution

Employee	without incentive	with incentive
Salary \$68,000 or less	\$327	\$287
\$68,000.01-\$133,000	\$334	\$294
\$133,000.01-\$200,000	\$351	\$311
\$200,000.01-\$250,000	\$365	\$325
More than \$250,000	\$372	\$332

Employee + Adult*		
Salary \$68,000 or less	\$725	\$685
\$68,000.01-\$133,000	\$740	\$700
\$133,000.01-\$200,000	\$778	\$738
\$200,000.01-\$250,000	\$809	\$769
More than \$250,000	\$824	\$784

Employee + Child(ren)		
Salary \$68,000 or less	\$580	\$540
\$68,000.01-\$133,000	\$593	\$553
\$133,000.01-\$200,000	\$623	\$583
\$200,000.01-\$250,000	\$648	\$608
More than \$250,000	\$660	\$620

Employee + Adult + Child(ren)*		
Salary \$68,000 or less	\$942	\$902
\$68,000.01-\$133,000	\$962	\$922
\$133,000.01-\$200,000	\$1,012	\$972
\$200,000.01-\$250,000	\$1,052	\$1,012
More than \$250,000	\$1,071	\$1,031

*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

 **HealthComp**

hconline.healthcomp.com/usc
855-727-5267

 **Livongo**
by Teladoc Health

join.livongo.com/usctrojans/hi
Member Support
800-945-4355

lyra

lyrahealth.com
844-495-7094

LiveHealth
ONLINE

livehealthonline.com
888-548-3432

 **NAVITUS**
Our business is personal

navitus.com
855-673-6504

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

