Job Aid: Making a Pre-Offer to a Direct-Funded Postdoc

This Job Aid provides a template to ensure a postdoc will bring sufficient funding to meet the minimum required salary and benefits costs in cases where the intent is for the outside funding to cover all costs. This should be sent prior to initiating the Invite in the PS Webforms System to ensure the appointment is feasible and that the faculty and departments do not incur unexpected costs.

Short-falls in funding due to fluctuation of currency exchange rates, increases to Provost-approved required salaries, and dependent additions to benefits (births, marriages) will continue to be the responsibility of the appointing faculty and/or department.

Upon invitation, departments must also submit a formal Postdoc-Paid Insurance Premium Exception Request. Detailed instructions can be found on the OPA website here:

Suggested Template

Dear XXXXXX,

We are excited by your interest in a postdoctoral scholar appointment in our department at Stanford.

Thank you for sending along your CV and funding details. Before a formal invitation is made, I would like to confirm that your benefits and funding will cover the minimums required by the University Provost. I see that your funding will cover medical benefits. We would like to confirm that your coverage includes the Institutional Cost for the Stanford health insurance as listed in the middle column of the 2017 Monthly Contribution Rates for Health Premiums document here: https://postdocbenefits.stanford.edu/eligibility-enrollment/forms-and-resources. Note that there may be additional out-of-pocket costs not included in the minimum required funding if you elect dependent coverage for your family (last column under Your Cost).

A note about insurance coverage: Stanford requires that all postdocs, regardless of visa status, be covered by health insurance that meets the Affordable Care Act and other Stanford requirements. In most cases, that means using the Stanford SHCA plan (https://postdocbenefits.stanford.edu/benefit-options/medical-plans/stanford-health-care-alliance). Note that we have not seen a travel insurance policy that meets ACA standards. If you have questions about whether another insurance plan meets our requirements, we recommend that, BEFORE YOU PURCHASE, you send a copy of the Explanation of Benefits for your plan to postdocbenefits@stanford.edu for review.

In order for us to extend an offer, the following funding plus estimated increases should be included. Note that the funding required will increase if adding dependents to the insurance plan as shown.

<table>
<thead>
<tr>
<th>Coverage</th>
<th>Annual insurance* (paid in monthly installments)</th>
<th>Minimum Annual Salary (0 mths exp)**</th>
<th>Minimum Required Funding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Postdoc Only</td>
<td>$8,214 +</td>
<td>$53,406 +</td>
<td>$61,620 +</td>
</tr>
<tr>
<td>PD + Spouse</td>
<td>$13,821 +</td>
<td>$53,406 +</td>
<td>$67,227 +</td>
</tr>
<tr>
<td>PD + Children</td>
<td>$12,124 +</td>
<td>$53,406 +</td>
<td>$65,530 +</td>
</tr>
<tr>
<td>PD + Family</td>
<td>$19,648 +</td>
<td>$53,406 +</td>
<td>$73,054 +</td>
</tr>
</tbody>
</table>

* Rates will likely increase Calendar Year 2018 effective January 1, 2018. Please estimate a 5% increase for months Jan 2018-on.
** Minimum will likely increase Acad Year 2018-19 effective October 1, 2018. Please estimate a 4% increase for months Oct 2018-on.

Please let me know if you have any questions regarding this information.

Best regards,

XXXXXXXXXX