

UNIVERSITY  
OF  
CALIFORNIA



For Faculty and Staff



# Open Enrollment

Oct. 25 – Nov. 20, 2018

**In a domestic partnership?**  
Good news about eligibility

**Blue & Gold HMO**  
New plan features

**We love our pets!**  
UC offers pet insurance

## THE BIG PICTURE

UC is committed to providing quality, affordable benefits to you and your eligible family members. Read all about UC's expanded eligibility for domestic partners, changes for Blue & Gold and new pet insurance program.

Check out [ucnet.universityofcalifornia.edu/oe](https://ucnet.universityofcalifornia.edu/oe) to learn more about each plan and find out about any changes for 2019.

### HIGHLIGHTS

UC will offer equal access to benefits for your spouse or domestic partner, regardless of gender. See page 5 for new eligibility rules and what they mean for you and your family.

Health Net Blue & Gold HMO is getting a new name — UC Blue & Gold HMO. Health Net will administer medical, pharmacy and behavioral health benefits (through MHN, a Health Net Company) for Blue & Gold and Seniority Plus. See page 5 for details.

As medical costs rise, UC continues to negotiate to keep costs low without sacrificing quality. Most faculty and staff will see medical plan premium increases of less than \$6 a month. See pages 8–9 for your 2019 medical plan contributions.

Protect your pets with UC's new voluntary pet insurance. See page 5 to learn more.

Dental and vision plans are still offered by UC at no cost for employees — with a few

enhancements this year. See page 5 for more information.

ARAG Legal Insurance is open for enrollment this year. See page 5 for details on this year's plan enhancements.

What's the difference between a Health Savings Account and a Health Flexible Spending Account (FSA), and which one should you choose? See page 6 to learn more — and remember that you need to re-enroll in your FSAs each year.

### **Visit the Open Enrollment website:**

[ucnet.universityofcalifornia.edu/oe](https://ucnet.universityofcalifornia.edu/oe) to get all the details for each plan.

Choose the login button for your location, then sign in to your benefits account to enroll and make changes by 5 p.m. on Tuesday, Nov. 20.

# 2019 OPEN ENROLLMENT

## KNOW YOUR OPTIONS

If you haven't thought about your benefits in a while, you may be missing out! Check out this booklet and [ucnet.universityofcalifornia.edu/oe](http://ucnet.universityofcalifornia.edu/oe) to make sure you're enrolled in the right benefits for you and your family.

Para información en español acerca de sus opciones, visite [ucnet.universityofcalifornia.edu/oe](http://ucnet.universityofcalifornia.edu/oe) y seleccione "Planes médicos."

## DON'T FORGET...

- ☐ **Add or remove family members**  
See page 5 for news about expanded eligibility for domestic partners and their dependents.
- ☐ **Enrolled in UC Blue & Gold HMO?**  
If you're seeing a behavioral health care provider, verify that your provider is in the MHN network or nominate them to join. See page 5 for information about the transition to MHN for behavioral health benefits.
- ☐ **Enroll or re-enroll in tax-free Flexible Spending Accounts**  
You must re-enroll each year to continue your Health FSA (for health care expenses for you and your family members) or Dependent Care FSA (for childcare or eldercare expenses). See page 6 to learn more.
- ☐ **Health Savings Account (HSA)**  
See page 6 for this year's limits, and to learn more about the advantages of enrolling in UC Health Savings Plan, with an HSA. (You can't enroll in both an FSA and an HSA.)
- ☐ **Update your contact information**  
Provide or update your address, home phone number, personal cell phone number and/or personal email address while you're signed into your benefits account.
- ☐ **Need to change your primary care physician (PCP)?**  
If you are not changing your medical plan, call your plan to request a change of PCP. See page 10 for contact information. If you are changing plans during Open Enrollment, you may enter your PCP information when you enroll online, for some plans.

- ☐ **Your Form 1095-C**  
Form 1095-C verifies the health insurance provided by your employer. For locations using At Your Service Online (AYSO) for Open Enrollment, sign up online to receive your Form 1095-C electronically. Employees on UCPath will receive their 1095-C form via postal mail. It is advisable to retain your 1095 form as you may need it when preparing your 2018 income taxes.
- ☐ **ENROLL BY 5 P.M., TUESDAY, NOV. 20**  
Go to [ucnet.universityofcalifornia.edu/oe](http://ucnet.universityofcalifornia.edu/oe), choose your location from the dropdown, and sign in to your benefits account. After you've confirmed your enrollments, keep a copy for your records.

**Any changes you make during Open Enrollment will be effective Jan. 1, 2019 (with the exception of pet insurance).**

## IF YOU DON'T HAVE ACCESS TO A COMPUTER

- ☐ If you need additional information or a form to complete your benefits changes during Open Enrollment, contact your local benefits office.

## Review your summary of benefits and coverage

Choosing a medical plan is an important decision, and UC offers a range of plans and coverage options. To help you make an informed choice, each of the medical plans makes available a Summary of Benefits and Coverage (SBC), which provides important information about that plan's coverage in a standard format so that you can easily compare plans.

The SBCs are available at [ucnet.universityofcalifornia.edu/oe](http://ucnet.universityofcalifornia.edu/oe) (see Medical Plans) and on each plan's website. Paper copies are also available, free of charge, by calling the plans.

If you or your covered family members have Medicare or will become eligible for Medicare in the next 12 months, you should understand which of UC's plans are considered "creditable coverage" under Medicare Part D (prescription drug) rules. Please see pages 12–13 for details.



# WHAT ARE YOUR UC BENEFITS WORTH?

**Estimate your total compensation  
at [ucal.us/totalcomp](http://ucal.us/totalcomp)**



## Your UC benefits by the numbers

**84%**

UC's share of the  
costs for  
medical coverage

**Compare to:**  
69% paid by similar  
institutions\*, on average

**100%**

UC's share of the  
premium costs  
for dental coverage.

**Compare to:**  
45% paid by similar  
institutions\*, on average

**\$0.00**

**Your annual deductible**  
if you enroll in any UC  
HMO plan, or choose UC  
Select providers through  
UC Care.

**\$7,000**

Amount you can save **tax-free** each year in your  
Health Savings Account if your family is enrolled in  
UC Health Savings Plan. See page 6 to learn more.



\* Comparisons drawn from a 2017  
analysis by Willis Towers Watson,  
with 197 companies in higher  
education and hospitals.

# WHAT'S NEW OR CHANGING FOR 2019

For more information about each plan's features, costs and changes, check out the plan's page on [ucnet.universityofcalifornia.edu/oe](http://ucnet.universityofcalifornia.edu/oe).

## DOMESTIC PARTNER ELIGIBILITY

Beginning Jan. 1, 2019, UC will offer access to benefits for spouses and domestic partners of eligible employees regardless of gender.

During Open Enrollment, you may enroll your domestic partner, and your partner's eligible dependents, in health and welfare benefits as long as the relationship meets established, gender-neutral criteria. You will have a separate Period of Initial Enrollment for Life and/or Accidental Death & Dismemberment (AD&D) insurance — see your benefits portal for details.

In another important change, enrolling your domestic partner in medical, dental and/or vision benefits will be an additional method for naming your partner as your survivor for UCRP benefits, subject to additional eligibility requirements.

It is important to understand whether enrolling your partner or your partner's dependents subjects you to imputed income on your federal or state taxes. See [ucal.us/domesticpartnership](http://ucal.us/domesticpartnership) for full details about eligibility, establishing your partnership for UCRP benefits, and tax implications of enrolling your domestic partner in benefits.

## UC BLUE & GOLD HMO

Health Net Blue & Gold HMO is getting a new name in 2019 — UC Blue & Gold HMO. Health Net will continue to administer medical benefits for the plan and for the Seniority Plus Medicare plan.

Managed Health Network (MHN), a Health Net company, will replace Optum Behavioral Health as administrator of UC Blue & Gold HMO's behavioral health benefits, effective Jan. 1, 2019. MHN will continue as the administrator of behavioral health benefits for Health Net Seniority Plus. For questions about the behavioral health transition, including support available to you for transition of care, call MHN at 800-663-9355.

Some specialty behavioral health services, such as psychological testing and Applied Behavioral Analysis (ABA), will be covered without a copay for each visit beginning in 2019. See the Open Enrollment website for details.

UC Blue & Gold members will have access to care in select CVS Minute Clinic walk-in locations, with a \$20 copay for routine visits and \$0 copay for preventive care. Telehealth services, including visits with psychiatrists, will be available through Teladoc.

## WESTERN HEALTH ADVANTAGE

Members can enroll in Optum Real Appeal Effect, a 12-month weight loss program for adults with coaching classes and videos focused on reducing the risk of Type 2 diabetes.

The extra costs associated with choosing a brand name drug over the generic version will no longer count toward the out-of-pocket maximum for the year.

## PET INSURANCE

UC is offering a new program for your family — preferred pricing on pet insurance through Nationwide. Plans are available for dogs, cats, birds, small mammals and exotics (such as reptiles).

You can enroll in pet insurance at any time — not just during Open Enrollment — and your coverage will be effective the day your application is approved by Nationwide. That means you can enroll now for coverage in 2018, or you can enroll midyear when a new pet joins your family. You'll pay your premiums directly to Nationwide.

To learn more and enroll in pet insurance, contact Nationwide at [petinsurance.com/uc](http://petinsurance.com/uc) or 877-738-7874.

## LEGAL INSURANCE

Legal insurance will be open for enrollment this year, with no rate changes and a few changes to benefits. Trust services will be a standalone, paid-in-full benefit, separated from general in-office services, which will be reduced from eight to four hours. Divorce coverage will be capped at 25 hours to improve access to network attorneys.

## DENTAL INSURANCE

The Delta Dental PPO plan will now cover a second routine exam each year.

## VISION INSURANCE

The vision plan's frame allowance will increase from \$130 to \$160, and standard progressive lenses will be covered in full with no copay. VSP members can download ID cards from the VSP website.

## SAVE MONEY WITH A TAX-FREE ACCOUNT

Both the Health Savings Account (HSA), paired with UC Health Savings Plan, and the Health Flexible Spending Account (FSA), allow you to save for health care expenses for you and your eligible family members through pretax deductions from your paycheck. You can only choose one — here's an overview:

### UC HEALTH SAVINGS PLAN WITH HSA

### HEALTH FSA

Your contributions	
You select an amount, up to \$3,500 self/\$7,000 self + dependent(s)	You select an amount, up to \$2,650 (if both you and your spouse are UC employees, you may each contribute up to \$2,650)
UC contributions	
\$500 each year if you have an individual UC HSP plan, and \$1,000 if you also enroll a family member	None
Carryover rules	
You own your account — the money is yours for qualified expenses even when you change health plans, retire or leave UC. You can choose how to invest funds over \$1,000.	You can carry over up to \$500 to the next plan year, but you can't take your money with you when you retire or leave UC.
Big picture	
The HSA is a good choice if the UC Health Savings Plan, a lower premium, higher deductible PPO plan, works for you. The HSA is tax-advantaged in three ways — your contributions lower your taxable income, your account grows year over year free of federal taxes, and your payments for medical expenses are not taxed — making the HSA a smart way to save now for post-retirement medical expenses.	The Health FSA is a good choice if you'd like to save pretax for health care expenses for you and your eligible family members, and you prefer a medical plan other than UC Health Savings Plan. A \$500 carryover limit gives you flexibility in budgeting for medical expenses, but doesn't allow for long-term savings.
Need to know	
If you are currently enrolled in the Health FSA and want to enroll in the UC Health Savings Plan in 2019, you must have a balance of \$0 in your 2018 Health FSA. You may forfeit any unused Health FSA funds, including carryover funds, by completing the Health FSA Carryover Waiver form (available on UCnet) by Dec. 31, 2018.	<p>The Dependent Care (DepCare) FSA is a separate account that helps you pay for childcare and elder care expenses so you can continue to work. You have a grace period for using your money each year (through March 15), but you cannot carry over funds to the next year, the way you can with the Health FSA.</p> <p>You must re-enroll in your Health and/or DepCare FSA if you wish to participate in 2019, with a contribution of at least \$180 per year for each account.</p> <p>The UC FSA website (<a href="http://wageworks.com/ucfsa">wageworks.com/ucfsa</a>) provides a list of eligible FSA expenses and links to FSA calculators to help you estimate the amount you should contribute and your potential tax savings.</p>

## Choose UC Health

**UC Health's medical centers and medical schools are ranked among the best in the nation. If you live or work near a UC Health facility, you can choose UC Health by enrolling in:**

Core  
UC Blue & Gold HMO  
UC Care  
UC Health Savings Plan  
Western Health Advantage

## Why I chose UC Health Savings Plan with an HSA

**Dorothy Ong, Benefits Manager, UCI Health**

UC employees are fortunate to have a lot of great options — there really isn't one "best plan." And health care choices are very personal, so I would never tell someone what plan to choose.

UC HSP has been a good choice for me and my family for a few reasons. First, UC HSP offers the flexibility and provider network of a PPO, with lower premium costs each month. UC's \$1,000 contribution (for family coverage) to the HSA goes a long way toward covering our out-of-pocket costs for care, especially since preventive care is covered at no cost to us. The main selling point for me has been the multiple tax advantages of the HSA, giving us the opportunity to lower our taxes with pretax contributions, build longterm savings tax-free and make tax-free withdrawals for medical expenses.

Although premiums are low, deductibles and copayments can be higher with UC HSP than with an HMO, so I make sure to budget carefully. I contribute enough to the HSA to meet our deductible each year, with an emergency fund in place in case of unexpected medical expenses that hit our out-of-pocket maximum.





## YOUR MEDICAL PLAN COSTS

UC has once again avoided significant cost increases for faculty and staff. With the exception of UC Care, increases to employee contributions are less than \$6.

**Below are the 2019 monthly employee costs for medical plan premiums based on your full-time salary rate as of Jan. 1, 2018.**

### FOR THOSE WITH FULL-TIME SALARY RATE OF \$56,000 OR LESS

PLAN	Self	Self plus child(ren)	Self plus adult	Self plus adult and child(ren)
Core	\$0.00	\$0.00	\$0.00	\$0.00
Kaiser Permanente – CA (HMO)	\$20.97	\$37.75	\$45.93	\$62.68
UC Blue & Gold HMO	\$40.88	\$73.58	\$146.70	\$179.40
UC Care (PPO)	\$153.86	\$276.95	\$383.96	\$507.05
UC Health Savings Plan (PPO)	\$21.47	\$38.65	\$47.03	\$64.18
Western Health Advantage (HMO)	\$21.23	\$38.22	\$46.50	\$63.47

### FOR THOSE WITH FULL-TIME SALARY RATE OF \$56,001 TO \$111,000

PLAN	Self	Self plus child(ren)	Self plus adult	Self plus adult and child(ren)
Core	\$0.00	\$0.00	\$0.00	\$0.00
Kaiser Permanente – CA (HMO)	\$57.02	\$102.64	\$128.23	\$173.82
UC Blue & Gold HMO	\$76.93	\$138.47	\$229.00	\$290.54
UC Care (PPO)	\$189.91	\$341.84	\$466.26	\$618.19
UC Health Savings Plan (PPO)	\$57.52	\$103.54	\$129.33	\$175.32
Western Health Advantage (HMO)	\$57.28	\$103.11	\$128.80	\$174.61



**FOR THOSE WITH FULL-TIME SALARY RATE OF \$111,001 TO \$167,000**

PLAN	Self	Self plus child(ren)	Self plus adult	Self plus adult and child(ren)
Core	\$0.00	\$0.00	\$0.00	\$0.00
Kaiser Permanente – CA (HMO)	\$94.02	\$169.24	\$201.99	\$277.18
UC Blue & Gold HMO	\$113.93	\$205.07	\$302.76	\$393.90
UC Care (PPO)	\$226.91	\$408.44	\$540.02	\$721.55
UC Health Savings Plan (PPO)	\$94.52	\$170.14	\$203.09	\$278.68
Western Health Advantage (HMO)	\$94.28	\$169.71	\$202.56	\$277.97

**FOR THOSE WITH FULL-TIME SALARY RATE OF \$167,001 OR MORE**

PLAN	Self	Self plus child(ren)	Self plus adult	Self plus adult and child(ren)
Core	\$0.00	\$0.00	\$0.00	\$0.00
Kaiser Permanente – CA (HMO)	\$132.33	\$238.20	\$278.41	\$384.25
UC Blue & Gold HMO	\$152.24	\$274.03	\$379.18	\$500.97
UC Care (PPO)	\$265.22	\$477.40	\$616.44	\$828.62
UC Health Savings Plan (PPO)	\$132.83	\$239.10	\$279.51	\$385.75
Western Health Advantage (HMO)	\$132.59	\$238.67	\$278.98	\$385.04

# CONTACT INFORMATION

Call the plan directly if you need coverage information for a specific condition, service area or plan provider.

## MEDICAL PLANS

### **CORE (ANTHEM BLUE CROSS)**

844-437-0486 (Anthem Health Guide)  
ucppoplans.com

### **KAISER PERMANENTE-CALIFORNIA**

800-464-4000  
my.kp.org/universityofcalifornia

### **UC BLUE & GOLD HMO (HEALTH NET)**

800-539-4072  
healthnet.com/uc

### **UC CARE (ANTHEM BLUE CROSS)**

844-437-0486 (Anthem Health Guide)  
ucppoplans.com

### **UC HEALTH SAVINGS PLAN (ANTHEM BLUE CROSS)**

844-437-0486 (Anthem Health Guide)  
ucppoplans.com

### **WESTERN HEALTH ADVANTAGE**

888-563-2252  
choosewha.com/uc

## OTHER CARRIERS

### **ARAG LEGAL INSURANCE**

800-828-1395  
ARAGLegalCenter.com, enter 11700UC

### **BRIGHT HORIZONS CARE ADVANTAGE**

careadvantage.com/universityofcalifornia

### **CALIFORNIA CASUALTY (AUTO, HOME & RENTER INSURANCE)**

866-680-5142  
calcas.com

### **DELTACARE® USA (DENTAL HMO)**

800-422-4234  
deltadentalins.com/uc

### **DELTA DENTAL PPO**

800-777-5854  
deltadentalins.com/uc

### **HEALTHEQUITY (HSA)**

866-212-4729  
healthequity.com/uc

### **LINCOLN FINANCIAL (FORMERLY LIBERTY MUTUAL-DISABILITY)**

800-838-4461  
mylibertyconnection.com

### **MHN BEHAVIORAL HEALTH (UC BLUE & GOLD AND SENIORITY PLUS MEMBERS)**

800-663-9355

### **NATIONWIDE PET INSURANCE**

877-738-7874  
petinsurance.com/uc

### **OPTUM BEHAVIORAL HEALTH (KAISER AND WHA MEMBERS)**

888-440-8225  
liveandworkwell.com, enter 11280

### **PRUDENTIAL (LIFE AND AD&D)**

800-524-0542  
prudential.com/uc

### **VISION SERVICE PLAN**

866-240-8344  
vsp.com

### **WAGeworks (FORMERLY CONEXIS) (COBRA, DEPENDENT CARE FSA, HEALTH FSA)**

877-722-2667 (COBRA)  
800-482-4120 (FSA)  
wageworks.com/ucfsa

## HEALTH CARE FACILITATORS

Your Health Care Facilitator (HCF) is here to help you better understand and use your UC benefits. Learn more, and find contact information for your location, at [ucal.us/hcf](http://ucal.us/hcf).

## THINGS TO CONSIDER

### IF YOU OR A FAMILY MEMBER BECOME ELIGIBLE FOR MEDICARE IN 2019

**If you continue working at UC past age 65 and you have a UC-sponsored employee medical plan, you are not required to sign up for Medicare Parts A, B or D.** Any family member covered by your employee plan, with the exception of your domestic partner in some cases, who becomes eligible for Medicare may also defer signing up for Medicare. Domestic partners covered by a UC medical plan are advised to contact the SSA to determine if they are eligible to defer enrollment into Medicare without incurring a penalty. They may be able to defer signing up for Medicare under their employer plan.

If you and/or any covered family members lose eligibility for the UC-sponsored employee plan, you and/or your Medicare-eligible family members should immediately enroll in Medicare or another employer group health plan to avoid any penalties from the Centers for Medicare and Medicaid Services.

If you plan to retire in 2019, are eligible for retiree health insurance, and expect to enroll in Medicare during the year, consider whether the Medicare version of your current medical plan offers the benefits you may want and whether your primary care physician (PCP) or primary medical group (PMG) accepts Medicare. If not, Open Enrollment is the time to change plans.

Unless you are enrolled in UC Health Savings Plan or Western Health Advantage (which don't have a corresponding Medicare plan), you can't change plans mid-year simply because you have become eligible for Medicare or have elected to retire. If you are enrolled in either of those plans, you have a 31-day Period of Initial Eligibility (PIE) when you turn 65 to enroll in any of the UC-sponsored Medicare plans in your service area.

Medicare can be complicated. To make sure you have the information you need (including when to enroll, what costs to expect and how to pay your premiums), read the Medicare Fact Sheet or the "Enrolling in Medicare" roadmap ([ucal.us/medicare](http://ucal.us/medicare)) on UCnet. The fact sheet and other Medicare assignment forms needed to continue your UC insurance can be obtained online or by calling the UC Retirement Administration Service Center at 800-888-8267, Monday–Friday, 8:30 a.m. to 4:30 p.m.

If you plan to move outside California and all covered members of your family are eligible for Medicare, UC offers a special medical benefits program for you. Learn more about Via Benefits (formerly OneExchange) at [my.viabenefits.com/uc](http://my.viabenefits.com/uc) and keep your address and other contact information current.

### FAMILY MEMBER ELIGIBILITY VERIFICATION

UC requires all faculty, staff and retirees who enroll new family members in their medical, dental and/or vision insurance plans to provide documents to verify their family members' eligibility for coverage.

If you add a family member to your coverage during Open Enrollment, in early 2019 you will receive a packet of materials to complete the verification process. You must respond by the deadline shown on the letter or risk disenrollment of your newly enrolled family members from UC benefits. As part of UC's periodic review process, you may also be contacted for information to reverify the eligibility of your previously verified spouse or domestic partner, grandchildren and legal wards.

Starting Jan. 1, 2019, UnifyHR will administer the verification program for UC. More information about the verification process is available online at [ucal.us/fmv](http://ucal.us/fmv).

### TRANSITION-OF-CARE SUPPORT

If you are a member of the UC Blue & Gold HMO and you expect to continue behavioral health care into 2019 with a provider who is not in the MHN network, you may request transition-of-care support. Please call MHN for assistance at 800-663-9355.

If you choose to enroll in a new medical plan for 2019 and you or a family member has ongoing health care needs, you should understand how your plan change will affect your ability to continue with your current health care providers or proceed with planned care.

If you voluntarily change plans and your current plan is still being offered, your new plan is not required to provide transition of care assistance. You should verify that your providers and facilities are part of your new plan network and will be accessible to you in the new year. Your costs for continuing care with your current providers after Jan. 1 will depend on the plan you select.

You should review your new plan information to understand your copays and/or coinsurance, and any prior authorization requirements. Check the websites for your current and new plans for information on how to take the right steps so you're covered.



# IMPORTANT NOTICES

## **IMPORTANT NOTICE ABOUT YOUR PRESCRIPTION DRUG COVERAGE AND MEDICARE**

**Medicare requires individuals enrolled in Medicare plans to have “creditable coverage” for prescription drugs. The required information below explains all options available.**

### **MEDICARE PART D CREDITABLE AND NON-CREDITABLE COVERAGE UC-SPONSORED GROUP PLANS**

#### **Plans with Creditable Coverage**

Kaiser Senior Advantage  
Health Net Seniority Plus  
UC Medicare PPO  
UC High Option Supplement to Medicare Core  
Kaiser Permanente  
UC Blue & Gold HMO  
Western Health Advantage  
UC Care  
UC Health Savings Plan

#### **Plan with Non-Creditable Coverage**

UC Medicare PPO without Prescription Drugs

### **WHAT DOES CREDITABLE COVERAGE MEAN?**

If you are Medicare-eligible and enrolled in Kaiser Senior Advantage, Health Net Seniority Plus, UC Medicare PPO, UC High Option Supplement to Medicare, Core, Kaiser Permanente, UC Blue & Gold HMO, Western Health Advantage, UC Care or UC Health Savings Plan, your prescription drug coverage is expected to pay out as much as the standard level of coverage set by the federal government under Medicare Part D. This qualifies as creditable coverage under Medicare Part D.

### **WHAT DOES NON-CREDITABLE COVERAGE MEAN?**

If you are Medicare-eligible and enrolled in UC Medicare PPO without Prescription Drugs, the plan is NOT expected to pay out as much as standard Medicare prescription drug coverage pays. Therefore, your coverage is considered Non-Creditable Coverage.

You can keep your current coverage from UC Medicare PPO Plan without Prescription Drugs. However, because this coverage is non-creditable, you must have and maintain creditable prescription drug coverage from another, non-UC source.

By enrolling in a non-UC prescription drug plan, you will receive help with your drug costs, as there is no prescription drug coverage under the UC Medicare PPO without Prescription Drugs plan. If you do not enroll in a Medicare drug plan when you are first eligible, you may pay a higher premium (a penalty) for a Medicare drug plan. When you make your decision about whether to choose the UC Medicare PPO without Prescription Drugs plan, you should take into account this plan's coverage,

which does not include prescription drugs, with the coverage and cost of the plans offering Medicare prescription drug coverage in your area.

### **WHEN WILL YOU PAY A HIGHER PREMIUM (PENALTY) TO JOIN A MEDICARE DRUG PLAN?**

If, in the future, you or a Medicare-eligible dependent terminate(s) or lose(s) Medicare Part D coverage and you go without coverage, you may be assessed a penalty. UC's evidence of creditable coverage will prevent you from incurring penalties charged by the federal government for late enrollment in Medicare Part D for up to 63 days if you decide to re-enroll in a Medicare Part D plan.

You must enroll in Medicare Part D no more than 63 days after you or a Medicare-eligible dependent are eligible for Medicare Part D. In addition, if your Medicare Part D is terminated for any reason, you must re-enroll in a Medicare Part D plan within 63 days of the termination. In either scenario, anyone who fails to act within that time period will incur a late enrollment penalty of at least 1 percent per month for each month after May 15, 2006, that the person did not have creditable coverage or enrollment in Part D.

For example, if 23 months passed between the time a person terminated creditable coverage with UC and that person's enrollment in Medicare Part D, that person's Medicare Part D premium would always be at least 23 percent higher than what most other people pay. That person might also be required to pay a non-Medicare premium until UC can obtain Medicare approval of your Part D re-enrollment or wait until the following November, when the federal government conducts Open Enrollment for Medicare, in order to sign up for Medicare Part D prescription coverage.

If a person loses creditable prescription drug coverage through no fault of his or her own, that person may also be eligible for a Special Enrollment Period (SEP) to join a Medicare drug plan.

### **WHEN CAN YOU JOIN A MEDICARE DRUG PLAN?**

If you are eligible for UC-sponsored coverage, you can join a UC Medicare drug plan during a period of initial eligibility, UC's annual Open Enrollment period each fall, or midyear if you lose other creditable coverage. If you are interested in non-UC insurance and are eligible for Medicare, you can join a non-UC Medicare drug plan each year from Oct. 15 to Dec. 7.

### **WHAT HAPPENS TO YOUR CURRENT COVERAGE IF YOU DECIDE TO JOIN A NON-UC COMMERCIALLY AVAILABLE MEDICARE DRUG PLAN?**

Each plan handles your decision to join a Medicare drug plan differently. UC offers one plan, the UC Medicare PPO without Prescription Drugs plan, that allows you to keep your current UC

medical coverage and coordinate with Medicare for a non-UC drug plan. UC's other plans do not. Before you make a change, contact the UC Retirement Administration Service Center at 800-888-8267 to get information on how your current plan coverage will be affected by your decision to join a commercially available Medicare drug plan. More information about Medicare plans through UC can be found in the UC Medicare Fact Sheet (see <http://ucnet.universityofcalifornia.edu/forms/pdf/medicare-factsheet.pdf>).

Detailed information about non-UC commercially available Medicare Part D Plans can be found in the "Medicare & You" handbook. You'll get a copy of this handbook in the mail every year from Medicare. For more information about Medicare prescription drug coverage, visit [www.medicare.gov](http://www.medicare.gov).

Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help, or call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at [www.socialsecurity.gov](http://www.socialsecurity.gov), or call them at 1-800-772-1213 (TTY 1-800-325-0778).

#### VIA BENEFITS

Plans obtained through Via Benefits are considered individual plans, and the plans vary in offering creditable coverage and non-creditable coverage for Medicare Part D. For more information about the type of coverage offered by your plan, visit [my.viabenefits.com/uc](http://my.viabenefits.com/uc).

#### MORE INFORMATION

For more information about this notice or your current prescription drug coverage, contact UC Retirement Administration Service Center at 800-888-8267. You may also find coverage details on UCnet at <http://ucnet.universityofcalifornia.edu/compensation-and-benefits/health-plans/medical/medicare>.

#### COMPLAINTS

If you believe your privacy rights have been violated, you may file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 877-696-6775, or visiting [www.hhs.gov/ocr/privacy/hipaa/complaints](http://www.hhs.gov/ocr/privacy/hipaa/complaints). You will not be retaliated against for filing a complaint.

#### LANGUAGE ASSISTANCE SERVICES FOR SELF-FUNDED PPO PLANS

**English:** Language assistance services, free of charge, are available to you. Call 1-877-437-0486 TTY Users Call 711.

**Arabic:** خدمات المساعدة اللغوية متاحة لك مجاناً. 711. اتصل بالرقم 1-877-437-0486 تي اتصل ب

**Armenian:** Լեզվի օգնության ծառայությունները մատչելի են ձեզ համար անվճար: Զանգահարեք 1-877-437-0486 TTY Users զանգահարեք 711:

**Farsi:** خدمات کمک به زبان برای شما رایگان است. با 711. تماس بگیرید 1-877-437-0486 TTY شماره تلفن

**Hindi:** भाषा सहायता सेवाओं, नः शुल्क, आपके लिए उपलब्ध है कॉल 1-877-437-0486 टीटीआई उपयोगकर्ता कॉल 711

**Hmong:** Cov kev pabcuam hauv kev txhais lus muaj rau koj dawb xwb. Hu rau 1-877-437-0486 TTY Cov Neeg Siv Hu Xov tooj 711.

**Japanese:** 言語支援サービスは無料でご利用いただけます。電話 1-877-437-0486 TTYユーザーは711に電話をかける。

**Khmer:** សេវាជំនួយ ចំពោះអ្នកដែលមិនមានប្រាក់ចំណូលខ្ពស់ ឬមិនមានធនធាន 1-877-437-0486 អតិថិជន TTY ទូរស័ព្ទ 711

**Korean:** 언어 지원 서비스는 무료로 이용하실 수 있습니다. 전화 1-877-437-0486 TTY 사용자는 711에 전화하십시오.

**Punjabi:** ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ, ਮੁਫਤ, ਤੁਹਾਡੇ ਲਈ ਉਪਲਬਧ ਹਨ 1-877-437-0486 ਟੀ ਟੀ ਆਈ ਉਪਭੋਗਤਾ ਕਾਲ 711 'ਤੇ ਕਾਲ ਕਰੋ.

**Russian:** Языковые услуги предоставляются вам бесплатно. Вызов 1-877-437-0486 Пользователи TTY Вызов 711.

**Spanish:** Los servicios de asistencia lingüística están disponibles gratuitamente. Llame al 1-877-437-0486 Usuarios de TTY Llame al 711.

**Tagalog:** Ang mga serbisyo ng tulong sa wika ay libre sa iyo. Tumawag sa 1-877-437-0486 Mga gumagamit ng TTY Tumawag sa 711.

**Thai:** มีบริการช่วยเหลือด้านภาษาโดยไม่เสียค่าใช้จ่าย โทร 1-877-437-0486 ผู้ใช้ TTY โทร. 711

**Chinese:** 免费提供语言援助服务。致电1-877-437-0486 TTY 用户致电711。

**Vietnamese:** Các dịch vụ hỗ trợ ngôn ngữ có sẵn cho bạn miễn phí. Gọi số 1-877-437-0486 Người sử dụng TTY Gọi số 711.

## IMPORTANT NOTICES

### **THE WOMEN'S HEALTH AND CANCER RIGHTS ACT ANNUAL NOTIFICATION OF RIGHTS**

The Women's Health and Cancer Rights Act of 1998 (Women's Health Act) requires group medical plans such as those offered by UC that provide coverage for mastectomies to also provide certain related benefits or services.

Under a UC-sponsored medical plan, a plan member (employee, retiree or eligible family member) who receives a mastectomy and elects breast reconstruction in connection with the mastectomy must be eligible to receive coverage for the following: reconstruction of the breast on which the mastectomy was performed; surgery and reconstruction of the other breast to produce a symmetrical appearance; and prostheses and treatment of physical complications of the mastectomy, including lymphedema.

Coverage will be provided in a manner determined in consultation with the patient's physician and is subject to the same deductibles, coinsurance and copayments that apply to other medical or surgical benefits covered under the plan.

If you have questions, please contact your medical plan carrier or refer to your carrier's plan booklet for specific coverage.

### **UNIVERSITY OF CALIFORNIA HEALTHCARE PLAN NOTICE OF PRIVACY PRACTICES — SELF-FUNDED PLANS**

The University of California offers various health care options to its employees and retirees, and their eligible family members, through the UC Healthcare Plan. Several options are self-funded group health plans for which the university acts as its own insurer and provides funding to pay the claims; these options are referred to as the "Self-Funded Plans." The Privacy Rule of the federal Health Insurance Portability and Accountability Act of 1996, also known as HIPAA, requires the Self-Funded Plans to make a Notice of Privacy Practices available to plan members. The University of California Healthcare Plan Notice of Privacy Practices—Self-Funded Plans (Notice) describes the uses and disclosure of protected health information, members' rights and the Self-Funded Plans responsibilities with respect to protected health information.

UC's self-funded plans for 2019 include: Delta Dental PPO, Core, UC Care, UC Health Savings Plan, UC High Option Supplement to Medicare, UC Medicare PPO and UC Medicare PPO without Prescription Drugs.

A copy of the updated Notice is posted on the UCnet website at [ucal.us/hipaa](http://ucal.us/hipaa) or you may obtain a paper copy of this Notice by calling the UC Healthcare Plan Privacy Officer at 800-888-8267, press 1. The Notice was updated to reflect the current health care plan options effective Jan. 1, 2019.

If you have questions or for further information regarding this privacy Notice, contact the UC Healthcare Plan HIPAA Privacy Officer at 800-888-8267, press 1.

### **TERMS AND CONDITIONS**

The Terms and Conditions governing participation in UC-sponsored health and welfare plans can be found on the Open Enrollment website: [ucnet.universityofcalifornia.edu/oe](http://ucnet.universityofcalifornia.edu/oe). Ask your local benefits office for a copy if you don't have access to a computer.

### **OTHER NOTICES ONLINE**

Under HIPAA (Health Insurance Portability and Accountability Act of 1996), you may have additional opportunities outside of Open Enrollment to enroll in a UC-sponsored medical plan — for instance, if you have lost eligibility for coverage in another plan. However, certain conditions apply. See the full HIPAA notice on the Open Enrollment website ([ucnet.universityofcalifornia.edu/oe](http://ucnet.universityofcalifornia.edu/oe)).



### **PREMIUM ASSISTANCE UNDER MEDICAID AND THE CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP)**

If you or your children are eligible for Medicaid or CHIP and you are eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from its Medicaid or CHIP programs. If you or your children are not eligible for Medicaid or CHIP, you will not be eligible for these premium assistance programs, but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit [www.healthcare.gov](http://www.healthcare.gov).

If you or your dependents are already enrolled in Medicaid or CHIP, you can contact your state Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, you can contact your state Medicaid (Medi-Cal in California) or CHIP office or visit [www.insurekidsnow.gov](http://www.insurekidsnow.gov) or dial 1-877-KIDS-NOW to find out how to apply. If you qualify, you can ask the state if it has a program that might help you pay the premiums for a UC-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under UC's plan, UC will permit you to enroll in UC's plan, if you are not already enrolled. This is called a "special enrollment" opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance.

If you live in California, you can contact the California Department of Health Care Services for further information on eligibility at: [www.dhcs.ca.gov/Pages/default.aspx](http://www.dhcs.ca.gov/Pages/default.aspx)  
Email: [HIPP@dhcs.ca.gov](mailto:HIPP@dhcs.ca.gov)

If you live outside of California, please visit the UC Open Enrollment website ([ucnet.universityofcalifornia.edu/oe/more-information/chip.html](http://ucnet.universityofcalifornia.edu/oe/more-information/chip.html)) for a list of states that currently provide premium assistance. The list is effective as of July 31, 2018, and includes contact information for each state listed.

To see if any more states have added a premium assistance program since July 31, 2018, or for more information on special enrollment rights, you can contact:

#### **U.S. Department of Health and Human Services Centers for Medicare & Medicaid Services**

[www.cms.hhs.gov](http://www.cms.hhs.gov)

877-267-2323, Menu Option 4, Ext. 61565

By authority of The Regents, University of California Human Resources, located in Oakland, administers all benefit plans in accordance with applicable plan documents and regulations, custodial agreements, University of California Group Insurance Regulations, group insurance contracts, and state and federal laws. No person is authorized to provide benefits information not contained in these source documents, and information not contained in these source documents cannot be relied upon as having been authorized by The Regents. Source documents are available for inspection upon request (800-888-8267). What is written here does not constitute a guarantee of plan coverage or benefits — particular rules and eligibility requirements must be met before benefits can be received. The University of California intends to continue the benefits described here indefinitely; however, the benefits of all employees, retirees, and plan beneficiaries are subject to change or termination at the time of contract renewal or at any other time by the University or other governing authorities. The University also reserves the right to determine new premiums, employer contributions and monthly costs at any time. Health and welfare benefits are not accrued or vested benefit entitlements. UC's contribution toward the monthly cost of the coverage is determined by UC and may change or stop altogether, and may be affected by the state of California's annual budget appropriation. If you belong to an exclusively represented bargaining unit, some of your benefits may differ from the ones described here. For more information, employees should contact your Human Resources Office and retirees should call the UC Retirement Administration Service Center (800-888-8267).

In conformance with applicable law and University policy, the University is an affirmative action/equal opportunity employer. Please send inquiries regarding the University's affirmative action and equal opportunity policies for staff to Systemwide AA/EEO Policy Coordinator, University of California, Office of the President, 1111 Franklin Street, 5th Floor, CA 94607, and for faculty to the Office of Academic Personnel, University of California Office of the President, 1111 Franklin Street, Oakland, CA 94607.

University of California  
Human Resources  
P.O. Box 24570  
Oakland, CA 94623-1570

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UNIVERSITY  
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# Open Enrollment

Oct. 25 – Nov. 20, 2018



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