Open Enrollment 2015
Open Enrollment 2015

Health and Welfare Plans Overview and Changes

- Medical plans
  - Prescription Drugs
  - Behavioral Health
  - UC Living Well
- Salary Bands
- Dental
- Vision
- ARAG Legal
- Flexible Spending Accounts
  - Health FSA (requires positive re-enrollment)
  - DepCare FSA (requires positive re-enrollment)
- Supplemental Disability; increase waiting period only

Open Enrollment: October 30 - November 25, 2014
Open Enrollment 2015

Plans **Not** Eligible For Open Enrollment Changes

- **Supplemental Life Insurance**
  - *Enroll or increase amount with Statement of Health approval*

- **Dependent Life Insurance**
  - *Enroll or increase amount with Statement of Health approval*

- **Supplemental Disability Insurance**
  - *Enroll or decrease waiting period with Statement of Health approval*
  - *Increase waiting period only option available on OE website*
# HMO vs. PPO

**HMO**

- Restricts medical provider access (PCP/medical group or Kaiser).
- Care starts with PCP; PCP refers to specialists; medical group authorizes most care outside of PCP’s office.
- Only ER and urgent care covered outside of medical group.
- Fixed costs – most services have flat copays.
- Must live in service area.

**PPO**

- Access to larger network of doctors. Not assigned to a doctor or group.
- Self-refer to doctors and specialists; no authorization requirement to see doctors.
- Health plan must authorize surgery and some services and medications in advance.
- Costs vary depending on whether provider is participating with plan and other factors. Out-of-network providers cost you more.

Open Enrollment: October 30 - November 25, 2014
Kaiser South HMO

- Must use Kaiser providers and facilities (except for behavior health benefits or in emergencies)
- No deductible; $20 co-pay office visits for most services
- OOP Max: $1,500 Single/$3,000 Family (medical and drug copays apply)
- $250 co-pay inpatient hospitalization
- $100 co-pay outpatient Ambulatory Surgery Center
- $75 co-pay for Emergency Room
- Prescription Drug Coverage
- Behavioral Health Benefits through Optum or Kaiser
- **Chiropractic/Acupuncture – 24 aggregate visits covered per year**
  - $15 copay when using American Specialty Health Plan Network
  - $20 copay for Kaiser provider for acupuncture only

If no change, medical rolls into 2015  
Open Enrollment: October 30 - November 25, 2014
Health Net Blue and Gold HMO

- Limited network HMO – does not include all medical groups; does include UCLA Medical Group
- Requires PCP & Medical Group Assignment
- No deductible; $20 co-pay office visits for most services
- OOP Max $1,000 Single/$3,000 Family (medical and drug co-pays apply)
- $250 co-pay inpatient hospitalization
- $100 co-pay outpatient Ambulatory Surgery Center in-network
- $75 co-pay for Emergency Room
- Prescription Drug Coverage
- Behavioral Health Benefits through Optum
- **Chiropractic/Acupuncture - 24 aggregate visits covered per year**
  - $20 copay through American Specialty Health Plan Network

*If no change, medical rolls into 2015*  
*Open Enrollment: October 30 - November 25, 2014*
UC Care PPO

- **UC Care PPO** – no PCP or medical group, no referrals or authorizations to see specialists. Blue Shield processes claims.

- **Select** tier includes **UC providers** and **set co-pays for many services**.
  - $20 copays for office visits; $200-250 ER; $250 hospital and skilled nursing unit *in hospital* admission; $100 outpatient surgery in hospital.
  - Some services **not covered on Select tier** (including stand-alone skilled nursing facility, home health, hospice, prosthetics/orthotics, acupuncture, chiropractic, outpatient surgery at freestanding ambulatory surgery center).

- **Preferred** tier includes **Blue Shield PPO network** and worldwide coverage; deductibles and coinsurance apply, up to annual maximums.

- **Services outside the US covered at the Preferred PPO benefit level.**

- **Non-preferred** providers covered; higher out-of-pocket costs.

- Set co-pays for prescriptions, except specialty drugs.

- **Read summary grid for more details of plan coverage, and review full plan coverage booklet on UCNet,**
  [http://ucnet.universityofcalifornia.edu/forms/category.html](http://ucnet.universityofcalifornia.edu/forms/category.html)

Open Enrollment: October 30 - November 25, 2014
## UC Care PPO at a glance

<table>
<thead>
<tr>
<th></th>
<th>UC Select</th>
<th>Preferred</th>
<th>Non-preferred</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Deductibles</strong></td>
<td>None</td>
<td>$250 / $750</td>
<td>$500 / $1,500</td>
</tr>
<tr>
<td><strong>Out-of-Pocket Maximums – medical</strong></td>
<td>$1,500 / $4,500</td>
<td>$3,000 / $9,000</td>
<td>$5,000 / $15,000</td>
</tr>
<tr>
<td><strong>Out-of-Pocket Maximums – Rx</strong></td>
<td>$3,600 / $4,200 (network pharmacy copay only)</td>
<td>No OOP max on OON Rx</td>
<td></td>
</tr>
<tr>
<td><strong>Physician Office Visits / Urgent Care</strong></td>
<td>$20</td>
<td>20%</td>
<td>50%</td>
</tr>
<tr>
<td><strong>ER Facility &amp; ER Physicians</strong>^</td>
<td>$200 - $250^</td>
<td>$200 - $250^ (no deductible)</td>
<td>$200 - $250^ (no deductible)</td>
</tr>
<tr>
<td><strong>Ambulance (subject to deductible)</strong></td>
<td>Not covered</td>
<td>$200</td>
<td>$200</td>
</tr>
<tr>
<td><strong>Ambulatory Surgery Center</strong></td>
<td>Not covered</td>
<td>20%</td>
<td>50%^1</td>
</tr>
<tr>
<td><strong>Outpatient Surgery/Hospital</strong></td>
<td>$100</td>
<td>20%</td>
<td>50%^1</td>
</tr>
<tr>
<td><strong>Hospital (non-emergency)</strong></td>
<td>$250</td>
<td>20%</td>
<td>50%^2</td>
</tr>
<tr>
<td><strong>Durable Medical Equipment</strong></td>
<td>Not covered</td>
<td>20%</td>
<td>50%</td>
</tr>
<tr>
<td><strong>S/A Skilled Nursing Facility Home Health</strong></td>
<td>Not covered</td>
<td>20% (100 day limit)</td>
<td>50%^2 (100 days)</td>
</tr>
<tr>
<td></td>
<td>Not covered</td>
<td>20% (100 visit limit)</td>
<td>50%^3 (100 visits)</td>
</tr>
<tr>
<td><strong>Chiropractic</strong>^</td>
<td>Not covered</td>
<td>20%</td>
<td>50%</td>
</tr>
<tr>
<td><strong>Acupuncture</strong>^</td>
<td>Not covered</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td><strong>Prescriptions</strong></td>
<td>Copays or coinsurance (speciality Rx), subject to Rx OOP</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Behavioral Health</strong></td>
<td>Carved out to Optum</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TeleDoc (phone, mobile, online)</strong></td>
<td>$20 (24/7/365) copay does not apply to deductible, does apply to max</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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^$250 ER copay if admitted, plus 20% of inpatient charges.  
*Plan limit of 24 visits for chiropractic and acupuncture combined.  
^3If preauthorized, coinsurance will be 20% for non-pref. home health.  
Plan Pays maximum of:  
1 50% on $350/day  
2 50% on $600/day
UC Care – Be Aware of Limitations

- Services with **non-preferred providers** (providers who are not contracted and do not have a fee agreement with the plan) are paid by plan based on **allowed amounts** (not billed charges).
- Members are responsible for coinsurance and **any amounts in excess of allowed amounts**.
- Amounts in excess of allowed amounts **do not apply to deductibles or out-of-pocket maximums**.
- Services with day or visit limit accrue to the limit even if the deductible has not been met.

- **Read summary grid for more details of plan coverage, and review full plan coverage booklet online.**
Health Savings PPO

- High Deductible PPO plan (Blue Shield) with Health Savings Account (HSA, Health Equity)
- Contributions to HSA
  - UC contributes $500 Single / $1,000 Family
  - Member contribution up to $2,850 Single / $5,650 Family
  - If age 55 or older, additional member contribution of $1,000 allowed
- Contributions are FDIC insured; excess > $2,000 can be invested in mutual fund (no FDIC)
- Contribution election amount will rollover to 2015 unless changed (no action required)
- Tax savings:
  - No FICA and Federal taxes on contributions; No taxes on growth
  - No taxes on reimbursements if used for IRS eligible expenses, otherwise taxes, possible penalty
  - Can use money for any reason after age 65, no penalties; taxes will apply if not used for qualified medical expenses.
- Once the deductible is met, PPO begins; deductible and coinsurance apply to OOP max.
- Only contributed/deposited funds are accessible to you.
- No use it or lose it rules. You own account and take funds with you if you separate.
- Cannot enroll if you have other coverage that is not a qualified high deductible PPO plan including Medicare or FSA. Cannot be claimed as someone else’s tax dependent. Must have valid street address, not PO Box.

Open Enrollment: October 30 - November 25, 2014
# Health Savings PPO

<table>
<thead>
<tr>
<th>HSA</th>
<th>Individual Coverage</th>
<th>Family (2+) Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>UC Contribution</td>
<td>$500</td>
<td>$1000</td>
</tr>
<tr>
<td>Enrollee Contribution</td>
<td>Up to $2,850 (or $3,850 if 55+)</td>
<td>Up to $5,650 (or $6,650 of 55+)</td>
</tr>
</tbody>
</table>

*HSA contributions are annual amounts and subject to IRS rules and limits.*

<table>
<thead>
<tr>
<th>PPO Plan</th>
<th>Individual Coverage</th>
<th>Family Coverage (2+)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Preferred Providers</td>
<td>Non-Preferred*</td>
</tr>
<tr>
<td>Deductibles</td>
<td>$1,300</td>
<td>$2,500*</td>
</tr>
<tr>
<td>Coinsurance~</td>
<td>20%</td>
<td>40%*</td>
</tr>
<tr>
<td>Maximum Out-of-Pocket</td>
<td>$4,000</td>
<td>$8,000*</td>
</tr>
</tbody>
</table>

*Services with non-preferred providers are paid by plan based on allowed amounts. Members are responsible for coinsurance and any amounts in excess of allowed amounts. Amounts in excess of allowed amounts do not apply to deductibles or out-of-pocket maximums.*

~Review summary grid for details and coinsurance variations.

11
<table>
<thead>
<tr>
<th></th>
<th>Network</th>
<th>Non-network^</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Deductible</td>
<td>$1,300 / $2,600</td>
<td>$2,500 / $5,000</td>
</tr>
<tr>
<td>Out-of-pocket max.</td>
<td>$4,000 / $6,400</td>
<td>$8,000 / $16,000</td>
</tr>
<tr>
<td>Physicians/Specialists</td>
<td>20%</td>
<td>40%</td>
</tr>
<tr>
<td><strong>TeleDoc (phone, mobile, online)</strong></td>
<td><strong>$40 (before deduct.) - 20%</strong></td>
<td>N/A</td>
</tr>
<tr>
<td>Outpatient Surgery ASC</td>
<td>20%</td>
<td>40%^1</td>
</tr>
<tr>
<td>Hospitalization</td>
<td>20%</td>
<td>40%^2</td>
</tr>
<tr>
<td>Preventative</td>
<td>No Charge</td>
<td>40%</td>
</tr>
<tr>
<td>Pregnancy/Maternity</td>
<td>20%</td>
<td>40%</td>
</tr>
<tr>
<td>ER Services</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td>Acupuncture*</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td>Chiropractic*</td>
<td>20%</td>
<td>40%</td>
</tr>
<tr>
<td>Prescriptions</td>
<td>20%</td>
<td>40%</td>
</tr>
<tr>
<td>Hearing Aids ($2000 max/36 mo)</td>
<td>50%</td>
<td>50%</td>
</tr>
<tr>
<td>Mental Health Benefits</td>
<td></td>
<td>Carved out to Optum</td>
</tr>
</tbody>
</table>

If ≥ 2 members, family deductible and OOP apply

*Up to 24 visits aggregate/year

Plan Pays a maximum:

1 50% on $350/day facilities plan max
2 50% on $600/day facilities plan max
**CORE**

- **Annual Deductible** $3,000 / individual
- **Out-of-pocket max.** $6,350 / $12,700^  
- **Preventative Health Benefits** No Charge
- **Physicians** 20%
- **Outpatient facilities** 20%¹
- **Hospitalization facilities** 20%²
- **ER Services** 20%
- **Chiropractic** 20%*
- **Acupuncture** 20%*
- **Mental Health Benefits** 20%
- **Prescriptions** 20%

*24 visits maximum aggregate.  
Home health, hospice, bariatric surgery, durable medical equipment and mail order Rx not covered out of network.  
^Balance billing not applied to OOP  

Plan Pays maximum of:  
¹ 20% on $350/day non-network  
² 20% on $600/day non-network
## Prescription Drug Coverage*

### 30-day supply (network pharmacy/specialty pharmacy):

<table>
<thead>
<tr>
<th></th>
<th>UC Care PPO**^</th>
<th>Blue &amp; Gold</th>
<th>Kaiser</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generic</td>
<td>$10.00</td>
<td>$ 5.00</td>
<td>$ 5.00</td>
</tr>
<tr>
<td>Brand</td>
<td>$30.00</td>
<td>$25.00</td>
<td>$25.00</td>
</tr>
<tr>
<td>Non Formulary</td>
<td>$45.00</td>
<td>$40.00</td>
<td>N/A</td>
</tr>
<tr>
<td>Specialty</td>
<td>30% to $150</td>
<td>$20</td>
<td>$25</td>
</tr>
</tbody>
</table>

### 90-day supply (mail-order and select network pharmacies for maintenance medications):

<table>
<thead>
<tr>
<th></th>
<th>UC Care PPO**^</th>
<th>Blue &amp; Gold</th>
<th>Kaiser</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generic</td>
<td>$20.00</td>
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<td>$10.00</td>
</tr>
<tr>
<td>Brand</td>
<td>$60.00</td>
<td>$50.00</td>
<td>$50.00</td>
</tr>
<tr>
<td>Non Formulary</td>
<td>$90.00</td>
<td>$80.00</td>
<td>N/A</td>
</tr>
<tr>
<td>Specialty</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**HSA PPO and Core members: Rx subject to deductible and coinsurance, up to OOP max.**

*Generic drugs mandatory on all UC plans unless medically necessary and authorized by plan.

^Rx subject to Rx OOP max.

**Some adult vaccines covered under pharmacy benefits with no copay (tetanus, pertussis, pneumococcal, meningococcal, HPV, shingles).**
Behavioral Health Outpatient Benefits^  

- Kaiser HMO (Kaiser or Optum, no out-of-network coverage)
  - Optum: First 3 visits no member co-pay, then $20 co-pay/visit
  - Kaiser Providers
    - $20 co-pay/individual therapy
    - $10 co-pay/group therapy
- Health Net Blue and Gold HMO (Optum only, no out-of-network coverage)
  - First 3 visits no member co-pay, then $20/visit co-pay
- UC Care PPO (Optum, in- and out-of-network coverage*)
  - In-network first 3 visits no co-pay, then $20/visit co-pay
  - Out of network subject to $500 deductible and 50% coinsurance*
  - **New prior auth requirements for some services (e.g. 60 minute+ sessions)**
- Health Savings PPO (Optum, in- and out-of-network coverage*)
  - Subject to in- or out-of-network deductible and coinsurance, up to max*
  - CORE (Blue Shield) – subject to deductible and coinsurance, up to max.*

^Behavioral health plan coverage levels track to medical plan for inpatient and outpatient services.

*Balance billing may apply; plan will process out of network claims based on allowance, not billed charges.
UC Living Well Wellness Program (UCLW), Incentive Program by Optum

Earn $75 VISA card for completing healthy lifestyle activities!

2015 Eligibility:

• Employees and retirees enrolled in a UC-sponsored medical plan in 2015, regardless of hire date.
  • Member of certain unions are not eligible for the incentive.
  • Spouses, domestic partners, and other dependents are not eligible for incentive.
UC Living Well Wellness Program (UCLW), Incentive Program by Optum (cont’d)

2015 UC Living Well Incentive Structure
7,500 points = $75 gift card

**Total Health Profile:** 5,000 points.

- **Wellness Coaching:**
  - Enroll in 1 Telephonic Wellness Coaching program (and complete 1st call) = 2,500 points.
  - Complete 1 Telephonic Wellness Coaching program = 2,500 points.
  - Complete 1 Online Coaching program = 2,500 points.

- **UC Living Well Activities:** 2,500 points each, up to 2 maximum, to earn 5,000 points maximum annually.
  - UCLW Activity 1 = 2,500 points
  - UCLW Activity 2 = 2,500 points
  - Preventive Exams/Screenings = 2,500 points
## Salary Bands

<table>
<thead>
<tr>
<th>2014 Pay Band</th>
<th>Definition of Range Using Full-Time Salary As of Jan 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$50,000 &amp; Under</td>
</tr>
<tr>
<td>2</td>
<td>$51,001 to $101,000</td>
</tr>
<tr>
<td>3</td>
<td>$101,001 to $151,000</td>
</tr>
<tr>
<td>4</td>
<td>$151,001 &amp; Over</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2015 Pay Band</th>
<th>Definition of Range Using Full-Time Salary As of Jan 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$51,000 &amp; Under</td>
</tr>
<tr>
<td>2</td>
<td>$51,001 to $101,000</td>
</tr>
<tr>
<td>3</td>
<td>$101,001 to <strong>$152,000</strong></td>
</tr>
<tr>
<td>4</td>
<td><strong>$152,001</strong> &amp; Over</td>
</tr>
</tbody>
</table>

- Pay bands adjusted annually, based on change in California consumer price index from February of prior year to February of current year (determined by the California Department of Finance).
- Use index for urban wage earners and clerical workers (CPI-U).

Open Enrollment: October 30 - November 25, 2014
Other Health Plans

- Delta Dental PPO (UC Paid)
  - No changes to plan
  - Slight decrease in premiums (-1.5%)

- Delta Care USA (UC Paid)
  - No changes to plan
  - Slight decrease in premiums (-3.1%)

- VSP Optical (UC Paid)
  - No changes to plan
  - Slight increase in premiums (+1.8%)
  - *Retiree vision open for 2015; all retirees will receive mailing from VSP*

If no change, plan rolls into 2015
Group Legal - ARAG

- The plan will be **open** for new enrollments this year.
- Claims experience has been consistent, thus **rates are not increasing**.

**Expanded identity theft protection benefit** added that includes:

- Full service identity restoration
- Identity Theft Insurance up to $1million
- Lost wallet services
- Credit monitoring service, internet surveillance of personal information and child identity monitoring
- Powered by CSID, leader of global enterprise level identity protection and fraud detection solutions.

If no change, plan rolls into 2015

Open Enrollment: October 30 - November 25, 2014
ARAG’s New Expanded ID Theft Protection

• Many of the new tools are full service/concierge type, rather than just information based

• ARAG will work on the member’s behalf to completely resolve the ID theft problem

• Free insurance covers members’ costs associated with ID theft restoration
  • For example: child care expenses, unpaid time off work, mileage
Flexible Spending Accounts

Health FSA
• Enroll or re-enroll in Health FSA
• Annual limit is $2,500
• Blue Shield HSA members CANNOT enroll in a Health FSA
• *No more “grace periods”; IRS change to “carry overs”*

DepCare FSA
• Enroll or re-enroll in DepCare FSA
• Annual limit is $5,000 ($2,500 if married and filing a separate tax return)
• Not subject to carry over rules

***YOU MUST RE-ENROLL EACH YEAR***
Health FSA - Carryover Change

Health FSA plan will include the new carryover provision effective for 2015 Plan Year.

- For 2015 plan year, you may **carry over up to $500** of remaining Health FSA funds into the 2016 plan year.
- Per IRS guidelines, Health FSA plans cannot have both the carryover feature and a grace period. Therefore, **grace period will no longer be offered for 2015 contributions**.
Grace Period vs Carry Over

Grace Period – *Going away*
- Unspent balance up to $2500 may be used to reimburse expenses incurred during a 2-1/2 month grace period (Jan 1 - March 15 of the following year)
- Unused amounts are forfeited if not claimed by April 15

$500 Carryover – *New*
- Unspent balance up to $500 may be carried over to next calendar year and can be used to reimburse expenses incurred throughout 2016.
- Unused amounts over $500 are forfeited if not claimed by April 15

Open Enrollment: October 30 - November 25, 2014
Health FSA 2015 plan year timeline

• Expenses incurred in 2015 will be reimbursed from 2015 funds

• Any carryover balance (up to $500) is not available until after all 2015 activity has been processed by CONEXIS (after April 15, 2016 claim filing deadline).

• Any unused dollars (up to $500) not submitted for reimbursement during the claim filing run-out period (until April 15, 2016) will be moved to the carry over plan.
Change **DOES NOT** affect 2014 Plan Year (Grace Period)

- You may continue to use any funds that remain in your 2014 Health FSA for eligible expenses incurred through March 15, 2015; *grace period still applies*.

- All claims for expenses incurred from January 1, 2014 through March 15, 2015 must be received by CONEXIS by April 15, 2015.

- Claims incurred after March 15, 2015 or submitted after the April 15, 2015 filing deadline will be denied.

Open Enrollment: October 30 - November 25, 2014
Family Member Verification (FMEV)

• FMEV process will be pended during OE and end of year.
• Any new hires and newly added family members in the months of mid-September to mid-January will be sent to SECOVA in January 2015.
• SECOVA will audit these new dependents directly.
Other 2014 H & W plans, **not open**

<table>
<thead>
<tr>
<th>Line of Coverage</th>
<th>Rate Change</th>
<th>Action</th>
<th>Application outside of PIE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prudential Life Insurance- Supplemental Plan</td>
<td>No Change</td>
<td>- Enroll</td>
<td>Approval of Statement of Health</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Increase coverage</td>
<td></td>
</tr>
<tr>
<td>Prudential Life Insurance- Dependent Life</td>
<td>No Change</td>
<td>- Enroll</td>
<td>Approval of Statement of Health</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Increase coverage</td>
<td></td>
</tr>
<tr>
<td>Liberty Mutual Disability- Supplemental Plan</td>
<td><strong>+19% rate increase to 7- &amp; 30- day waiting periods</strong></td>
<td>- Enroll</td>
<td>Approval of Statement of Health</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Decrease waiting period</td>
<td></td>
</tr>
<tr>
<td>AIG – AD&amp;D</td>
<td>No Change</td>
<td>- Enroll</td>
<td>•Anytime, subject to pay compute</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Increase coverage</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Add family members</td>
<td></td>
</tr>
</tbody>
</table>

Open Enrollment: October 30 - November 25, 2014
Paycheck reminders...

- Medical Contribution Base FTE salary as of 1/1/2014
- Life Insurance and Disability salary base as of 1/1/2015
- Life insurance rates effective 1/1/2015 paycheck
  - Premiums will reflect rate increases
- Disability insurance effective 2/1/2015 (arrears)
  - Premiums will reflect rate increases
- Definition of pay is “base salary” only
  - Stipends, shift differentials, summer salary, etc. are excluded from all salary base calculations
- Multiple appointments with different rates will receive pro-rated salary base (instead of highest rate)
COBRA Open Enrollment

COBRA Open Enrollment handled by CONEXIS

- CONEXIS will mail OE information, including 2015 rates, plan changes and paper form to all COBRA participants
- COBRA participants may view detailed plan changes at AYSO on UC Net; all other questions, including plan premiums, should be referred to CONEXIS 1-877-722-2667

COBRA participants submit OE changes directly to CONEXIS

- Via website at www.mybenefits.conexis.com
- Via paper form included in the mailing
Open Enrollment Tidbits

- EDB Cutoff as of August 31
- Booklets mailed October 24 – 27
- Open Enrollment Website application live October 30
- All Open Enrollment changes need to be done on the OE website
- **New hires:**
  - Must enroll for 2014 at the New Hire application
  - Must enroll for 2015 at the Open Enrollment website for medical changes and re-enroll for FSA
- **New hires after November 25th:**
  - Complete UPAY 850 for December 2014 (Dept)
  - Complete UPAY 850 for calendar year 2015 (CHR)
- **AYSO closes December 12 @ 5pm; reopens January 7 @ 8am**
New ID cards

• Blue Shield – all members will receive new ID cards
  • Dependents will now have their names on cards
    • UC Care PPO
    • HSA PPO
    • CORE
• Health Net Blue & Gold – all members will receive new ID cards
• Kaiser Permanente – only newly added members will receive ID cards
Open Enrollment Support

• Special designated Open Enrollment hotline:

310.794.0421

openenrollment@chr.ucla.edu
### UC Medical & Behavioral Health

<table>
<thead>
<tr>
<th>Health Plan</th>
<th>Website</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Net Blue &amp; Gold</td>
<td><a href="http://www.healthnet.com/uc">www.healthnet.com/uc</a></td>
<td>1-800-539-4072</td>
</tr>
<tr>
<td><a href="mailto:UCWell@healthnet.com">UCWell@healthnet.com</a> (email for HN OE questions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Blue Shield</td>
<td><a href="http://www.blueshieldca.com/uc">www.blueshieldca.com/uc</a></td>
<td>1-855-201-8375</td>
</tr>
<tr>
<td>HSA – Health Equity</td>
<td><a href="http://www.healthequity.com">www.healthequity.com</a></td>
<td>1-866-346-5800</td>
</tr>
<tr>
<td>Optum Behavioral Health</td>
<td><a href="http://www.liveandworkwell.com">www.liveandworkwell.com</a></td>
<td>1-888-440-8225</td>
</tr>
</tbody>
</table>

**Online plan links and more contact information:**

- [http://ucnet.universityofcalifornia.edu/oe](http://ucnet.universityofcalifornia.edu/oe)
- [http://ucnet.universityofcalifornia.edu/forms/category.html](http://ucnet.universityofcalifornia.edu/forms/category.html) (expand link for plan booklets)
- [http://ucnet.universityofcalifornia.edu/contacts/plan-contacts.html](http://ucnet.universityofcalifornia.edu/contacts/plan-contacts.html)

**Open Enrollment:** October 30 - November 25, 2014
Reminder!!!

8:00am October 30\textsuperscript{th} –
5:00pm November 25\textsuperscript{th} 
(before Turkey Day break)

AYS Online at the **UC Net site**
(ucnet.universityofcalifornia.edu)