# 2025 Retiree Open Enrollment Highlights

Presented by: UCLA Health Care Facilitator Program Erika Castillo and Debra Wells

### Agenda

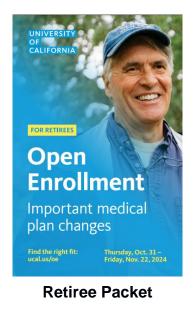
- Open Enrollment Overview
- UC Medicare Requirements
- Medical Plan Changes
- Non-Medical Plan Changes
- How to Make Changes
- Getting Help
- Q&A

## **Open Enrollment Materials**

#### October 24: Open Enrollment Materials Mailed Data pulled: September 20, 2024









Out-of-State Medicare Retiree (Via Benefits) Booklet



FOR FACULTY AND STAFF

#### Open Enrollment

Important medical plan changes

Find the right fit:

employees will see increases in their costs. To ensure medical costs are shared fairly, the CORE PPO plan will require an employee premium contribution next year, CORE members should consider carefully which UC medical plan is best for them

For the remaining plans, employees with 2024 ennual salaries up to \$140,000 will see 9% premium increases, and employees with 2024 annual salaries over \$140,000 will see 11% premium increases.

from \$20 to \$30 for members of UC Blue & Gold HMO, Kelser HMO and UC Care



#### **Open Enrollment Materials**

Faculty & Staff

#### WHAT'S CHANGING FOR 2025

#### MEDICAL

Medical costs are increasing - nationwide and at UC. To keep your costs as low as possible, UC's funding will increase by \$198 million for 2025.

Despite this additional funding, some costs for retirees will increase in 2025:

- · Premiums are increasing for all of UC's non-Medicare plans and most of UC's Medicare plans.
- · Some cost-sharing amounts will increase. For example, the copay for office visits will change from \$20 to \$30 for UC Blue & Gold HMO, Kaiser HMO, UC Care (tier 1), Kaiser Senior Advantage and UC Med

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Open Enrollment



#### Open Enrollment

Important medical plan changes

#### Your of Take time

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choice. If

then no a

Find the right fit: ucal.us/oe

Thursday, Oct. 31 -Friday, Nov. 22, 2024

If you're considering changes, review your choices at ucal.us/oe. Then make your elections on UCRAYS by Friday, Nov. 22, at 5 p.m.

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FOR RETIREES

- For Medicare members changing medical plans To complete your enrollment, you must submit the Medicare assignment forms for your new plan via UCRAYS, by fax (800-792-5178) or by mail (least efficient). Every person you enroll must complete a separate form, due to UC by Monday, Nov. 25, 2024.
- □ Enroll in pet, retiree vision and/or accidental Land Anna Manager

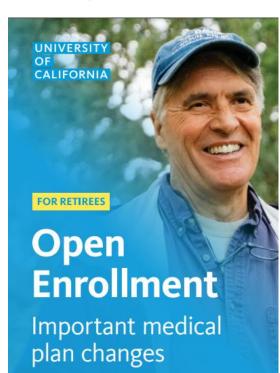
**Open Enrollment** Oct. 31-Nov. 22, 2024



During Open Enrollmen UNIVERSITY in or change your cover OF Medical, dental and v CALIFORNIA



#### **Open Enrollment Materials**





Find the right fit: ucal.us/oe Thursday, Oct. 31 – Friday, Nov. 22, 2024



# Open Enrollment Deadline!

Open Enrollment changes must be completed by November 22, 2024 at 5:00 p.m. PST



## Do not get your deadlines confused!

## University of CA's Open Enrollment

Starts: October 31, 2024 Ends: November 22, 2024 Medicare's Open Enrollment

Starts: October 15, 2024 Ends: December 7, 2024



# There are no pre-existing condition exclusions!



# What happens if you do nothing?

If you are satisfied with your current health plans, and do not make any open enrollment changes, your current plan selections will automatically continue for next year.



## Things to consider for next year

- ✓ Are you satisfied with your current medical and dental plan provider options?
- ✓ Have you recently married or added a new family member?
- ✓ Are you aging into Medicare next year?
- ✓ Have your health needs changed or do you need more flexibility?

#### Change/Unsuspend

- Medical plans
- Dental plans



#### Add or Remove

- Spouse
- Same-Gender
   Domestic Partner
- Opposite-Gender
   Domestic Partner
- Children
- Stepchild
- Grandchild
- Legal ward

#### Enroll

- Vision Plan
- ARAG Legal Plan



# **Retiree Premiums**

#### YOUR MONTHLY MEDICAL PREMIUM COSTS

Medical plan costs are increasing next year—for UC and most employers. Some premium costs will be significantly higher in 2025, so consider your options carefully before making a decision to stay with your current plan or make a change.

These monthly costs apply to retirees eligible to receive 100% of the UC/employer contribution toward the premium for each plan. If you are subject to graduated eligibility for retiree medical insurance and receive less than 100% of the UC contribution, your costs may be higher than those listed here. You can find your 2025 premium costs on UCRAYS during Open Enrollment.

#### Plan Cost Key \$0.00 Your premium \$174.70 Medicare Part B reimbursement

Medicare Part B reimbursement may apply if your premium cost is \$0.00. If applicable, UC will reimburse you based on a Medicare Part B premium of up to \$174.70 per person. Reimbursements vary and are added automatically to your monthly retirement payment.

**Note:** You must be current on your Medicare Part B premium payments to Social Security for this reimbursement.

S: Self+C: Self plus child(ren)+A: Self plus adult+F: Self plus adult and child(ren)

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## **Understanding Your Deductions**

UC medical, dental and legal plan premiums are deducted from you monthly pension. The amount you pay (if any), appears as:

Retiree Only - UC Blue and Gold		Retiree Only - UC Medicare Choice		
MED MBR PREM	\$302.53	MED MBR PREM	\$42.47	
DEN MBR PREM	\$0.00	DEN MBR PREM	\$0.00	
MED ER PREM	\$726.43	MED ER PREM	\$431.60	
DEN ER PREM	\$44.24	DEN ER PREM	\$44.24	
		MEDICARE REIMBURSEMENT	\$0.00	



MED = Medical DEN = Dental MBR = Member ER = Employer PREM = Premium

## 2025 Retiree Non-Medicare (pre 65) Premiums

Rates based on full UC contribution (no graduated eligibility)

Medical Plans	Se	elf	Self + Cł	nild(ren)	Self +	Adult		Adult + d(ren)
	2024	2025	2024	2025	2024	2025	2024	2025
CORE (Anthem)	\$0.00	\$120.61	\$0.00	\$217.09	\$0.00	\$301.26	\$0.00	\$397.74
Kaiser Permanente — California	\$232.44	\$216.50	\$418.38	\$389.70	\$544.02	\$513.45	\$729.96	\$686.65
UC Blue & Gold HMO (Health Net)	\$295.49	\$302.53	\$531.88	\$544.56	\$676.43	\$694.11	\$912.82	\$936.14
UC Care (Anthem)	\$415.21	\$480.54	\$747.38	\$864.97	\$927.84	\$1,067.93	\$1,260.01	\$1,452.36
UC Health Savings Plan (Anthem)	\$346.66	\$390.63	\$623.99	\$703.13	\$783.89	\$879.12	\$1,061.22	\$1,191.62



## 2025 Retiree Medicare Premiums – All Medicare

Rates based on full UC contribution (no graduated eligibility)

Medicare Diane		Self in N	Self in Medicare		Adult Child(ren)	Self + Adult + Child(ren) All in Medicare	
Medicare Plans				Both in I	Medicare		
		2024	2025	2024	2025	2024	2025
	Your Premium	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Kaiser Permanente Senior Advantage	Medicare Part B Reimbursement	\$122.55	\$174.70	\$245.10	\$349.40	\$367.65	\$524.10
UC High Ontion Supplement to Medicare	Your Premium	\$312.70	\$300.15	\$625.40	\$600.30	\$938.10	\$900.45
UC High Option Supplement to Medicare (Anthem)	Medicare Part B Reimbursement	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
UC Medicare Choice	Your Premium	\$0.00	\$42.47	\$0.00	\$84.94	\$0.00	\$127.41
(United Healthcare (UHC))	Medicare Part B Reimbursement	\$20.89	\$0.00	\$41.78	\$0.00	\$62.67	\$0.00
UC Medicare PPO	Your Premium	\$90.21	\$92.10	\$180.42	\$184.20	\$270.63	\$276.30
(Anthem)	Medicare Part B Reimbursement	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
LIC Madisens DDO with aut Dreaminties Dream	Your Premium	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
UC Medicare PPO without Prescription Drugs (Anthem)	Medicare Part B Reimbursement	\$164.90	\$174.70	\$329.80	\$349.40	\$494.70	\$524.10

All Medicare = All family members are enrolled in Medicare Part A and Part B.

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OF

### 2025 Retiree Non-Medicare 65+ Premiums

Rates based on full UC contribution (no graduated eligibility)

Medical Plans	Se	elf	Self + Cł	nild(ren)	Self + Adult Self + Adult +		+ Child(ren)	
	2024	2025	2024	2025	2024	2025	2024	2025
CORE (Anthem)	\$0.00	\$73.02	\$0.00	\$131.43	\$0.00	\$213.67	\$0.00	\$272.08
Kaiser Permanente — California	\$87.17	\$93.84	\$156.89	\$168.91	\$262.98	\$277.42	\$332.70	\$352.49
UC Blue & Gold HMO (Health Net)	\$117.71	\$126.72	\$211.88	\$228.10	\$330.40	\$351.78	\$424.57	\$453.16
UC Care (Anthem)	\$290.58	\$312.83	\$523.05	\$563.09	\$688.07	\$741.80	\$920.54	\$992.06
UC Health Savings Plan (Anthem)	\$88.01	\$94.75	\$158.42	\$170.55	\$276.19	\$296.65	\$346.60	\$372.45

Over age 65 and not eligible for Medicare, per Social Security Administration



## 2025 Retiree Split or Mixed Family Premiums

Rates based on full UC contribution (no graduated eligibility)

Medical Plans		Self + Adult (1 Adult in Medicare)		Self + Child(ren) (Adult in Medicare)		Self + Adult + Child(ren) (1 Adult in Medicare)		Self + Adult + Child(ren) (2 Adults in Medicare)	
		2024	2025	2024	2025	2024	2025	2024	2025
CORE (Anthem)/	Your Premium	\$0.00	\$272.75	\$0.00	\$188.58	\$0.00	\$369.23	\$0.00	\$280.68
UC Medicare PPO (Anthem)	Medicare Part B Reimbursement	\$164.90	\$0.00	\$164.90	\$0.00	\$164.90	\$0.00	\$83.28	\$0.00
Kaiser Permanente/	Your Premium	\$189.03	\$97.38	\$63.93	\$0.00	\$374.97	\$270.58	\$0.00	\$0.00
Kaiser Senior Advantage	Medicare Part B Reimbursement	\$0.00	\$0.00	\$0.00	\$26.37	\$0.00	\$0.00	\$59.19	\$225.94
UC Blue & Gold (Health Net)/	Your Premium	\$360.05	\$434.05	\$215.50	\$284.50	\$596.44	\$676.08	\$194.61	\$326.97
UC Medicare Choice (UHC)	Medicare Part B Reimbursement	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
UC Care (Anthem)/	Your Premium	\$602.80	\$679.49	\$422.38	\$476.53	\$935.01	\$1,063.92	\$512.59	\$568.63
UC Medicare PPO (Anthem)	Medicare Part B Reimbursement	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Split or Mixed Family = Some enrolled in Medicare and some family members not enrolled in Medicare.



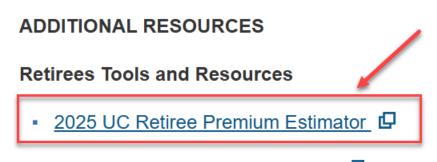
### **Retiree Premium Estimator**

If you want to know the plan premiums for next year, log into UCRAYS. You can also use the <u>Retiree Premium Estimator</u> tool found on our HCF page.

Click the link to download Excel spreadsheet:

- Save on your desktop
- Go to your Downloads
- Follow the instructions





<u>2025 UC Medical Plan Availability</u> IP

# **UC Medicare Requirements**

#### Aging into Medicare Next Year?

#### FAQ:

## I'm enrolling in Medicare next year — are there any resources to help me understand my choices and what I need to do?

Yes! UC offers many helpful resources, including the Medicare Fact Sheet, Medicare FAQs and Medicare office hours and webinars. For more information about these resources, see *What to do when you're enrolling in Medicare* at <u>ucal.us/medicare</u>.



## Medicare and UC Medical Plans

- Medicare enrollment is mandatory for all retirees and their family members if you are eligible for premium-free Medicare Part A. If Part A is premium-free, you must enroll in Medicare Part B.
- UC relies on Medicare to offset the cost of insurance.
- Retirees over age 65 without Medicare cost twice as much or more to insure.
- Medicare partially reduces the cost, which keeps the UC premiums affordable, which allows UC to continue to fund health benefits for retirees.
- To enroll in a UC-sponsored Medicare plan, your Medicare ID card must reflect both Part A and Part B.
- Failure to comply may result in penalties and permanent loss of UC-sponsored medical coverage.

#### Exception:

- Those who retired prior to July 1, 1991
- > Retirees who reside outside of the U.S.A.

If you move back to the U.S.A., UC will require you to enroll in Medicare, so you may have a Medicare late enrollment penalty.





#### Eligible for Medicare next year? Split or Mixed Families

Once you are retired, if you have some family members eligible for Medicare and other family members who are not currently eligible for Medicare, you're considered a split or mixed-Medicare family.

Non-Medicare Members	Required Form	Medicare Members
UC Blue and Gold (Administered by Health Net)	UBEN121	UC Medicare Choice PPO (Administered by United Healthcare)
Kaiser Permanente	UBEN127	Kaiser Senior Advantage
Core (Administered by Anthem)	UBEN123	UC Medicare PPO (Administered by Anthem)
UC Care (Administered by Anthem)	UBEN123	UC Medicare PPO (Administered by Anthem)
UC Health Savings Plan (Administered by Anthem)	UBEN100 + UBEN ???	Must choose another plan.



Each Medicare eligible family member must complete and sign their own form.

#### 2024 Medicare Premiums

- Medicare Part A Most get Part A PREMIUM FREE
  - \$0 per month if you paid FICA taxes for 10 years and have 40 credits
  - \$505 per month for those with 0-29 quarters and \$278 per month for those with 30-39 quarters
- Medicare Part B Premium based on 2022 income RETIREE PAYS
  - Deducted from Social Security check or you pay directly/quarterly
- Medicare Part D \$0.00 (May have a cost if higher income) RETIREE PAYS

Individual Tax Return	al Tax Return File Joint Tax Return		ed on 2022 income.
		Part B	Part D
\$103,000 or less	\$206,000 or less	\$174.70	\$0.00
\$103,001 to \$129,000	\$206,001 to \$258,000	<b>\$244.60</b> (\$174.70 + \$69.90)	\$12.90
\$129,001 to \$161,000	\$258,001 to \$322,000	<b>\$349.40</b> (\$174.70 + \$174.70)	\$33.30
\$161,001 to \$193,000	\$322,001 to \$386,000	<b>\$454.20</b> (\$174.70 + \$279.50)	\$53.80
\$193,001 to \$499,999	\$386,001 to \$749,999	<b>\$559.00</b> (\$174.70 + \$384.30)	\$74.20
\$500,000 and above	\$750,000 and above	<b>\$594.00</b> (\$174.70 + \$419.30)	\$81.00

# Not eligible for Medicare?

**Currently Married:** If you did not pay into Social Security, nor earned 40 credits elsewhere, you may qualify under your current spouse work record when they age <u>62</u>.

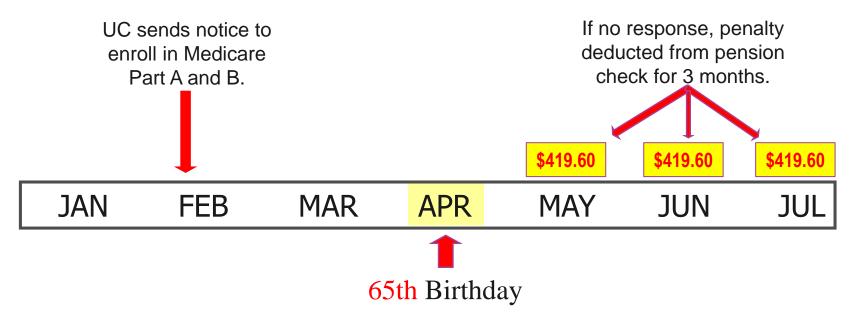
Currently Single: If you are currently single but was previously married at least 10 years, you may qualify under your former spouse if they are eligible for Social Security benefits when they age <u>62</u>.

It's very important that you know the facts about Medicare and what UC requires of you, so that you are not penalized later.





## Retired – Medicare Enrollment Timeline



If you are <u>NOT</u> eligible for Medicare, request a denial letter from Social Security.



## **Medical Plan Overview**

#### Insurance Plans offered next year

Non-Medicare Retirees	Medicare Retirees	Other Plans
<ul> <li>ANTHEM BLUE CROSS</li> <li>UC Care (PPO)</li> <li>Core (PPO)</li> <li>UC Health Savings Plan (PPO) (NOT OPEN for retirees - current members only)</li> </ul>	<ul> <li>ANTHEM BLUE CROSS</li> <li>UC Medicare PPO</li> <li>UC Medicare PPO no Rx</li> <li>UC High Option PPO* <ul> <li>(*All members enrolled in Medicare A&amp;B)</li> </ul> </li> </ul>	<ul><li>Dental</li><li>Delta Dental PPO</li><li>DeltaCare USA (HMO)</li></ul>
<ul><li>HEALTH NET</li><li>UC Blue and Gold (HMO)</li></ul>	<ul><li>KAISER PERMANENTE</li><li>Kaiser Senior Advantage Plan (HMO)</li></ul>	<ul><li>Vision</li><li>Vision Service Plan (VSP)</li></ul>
<ul><li>KAISER PERMANENTE</li><li>Traditional Plan (HMO)/*Optum overlay</li></ul>	<ul><li>UNITED HEALTHCARE</li><li>UC Medicare Choice (Advantage PPO)</li></ul>	Legal ■ ARAG Legal Plan
	VIA BENEFITS (Retirees outside of CA) Plans through ViaBenefits are considered individual plans.	<ul><li>Life</li><li>Prudential Life AD&amp;D</li></ul>
		<ul><li>Pet Insurance</li><li>Nationwide</li></ul>



## Medical Plan options depend on where you live.

CALIFORNIA		
California	Outside California	Abroad
<ul> <li>ANTHEM BLUE CROSS</li> <li>UC Care</li> <li>*UC Health Savings Plan PPO</li> <li>Core</li> <li>UC Medicare PPO</li> <li>UC Medicare PPO no Rx</li> <li>UC High Option (all in Medicare)</li> </ul>	<ul> <li>ANTHEM BLUE CROSS</li> <li>UC Care</li> <li>*UC Health Savings Plan PPO (not open for retirees)</li> <li>Core</li> <li>UC Medicare PPO</li> <li>UC Medicare PPO no Rx</li> </ul>	<ul><li>ANTHEM BLUE CROSS</li><li>UC Care</li><li>Core</li></ul>
<ul><li>HEALTH NET</li><li>UC Blue and Gold (HMO)</li></ul>	VIA BENEFITS (Retirees outside of CA) Individual plans through ViaBenefits. VB members can enroll in Delta Dental PPO, VSP and the ARAG Legal plan using the UBEN100 form.	
<ul> <li>KAISER PERMANENTE</li> <li>Traditional Plan (HMO) /*Optum overlay</li> <li>Senior Advantage Plan (HMO)</li> </ul>		JOHN L SMITH Medicare Number/Namero du edicare 1EG4-TE5-MI /2 Entitled to/Con derector PART A Coverage rt//Cobertura empieza PART A 03-03-016
UNITED HEALTHCARE UC Medicare Choice (PPO)		PART B 03-03-20 6

## Medical Plan Availability Tool

If you want to know which medical plans are available in your area, use the **Plan Availability** tool: <u>https://chr.ucla.edu/benefits/health-care-facilitator</u>

The Kaiser Senior Advantage plan is not offered in the San Luis Obispo area (zip code: 93401). Your medical plan options are:

- UC Medicare Choice
- UC Medicare PPO
- UC High Option

#### ADDITIONAL RESOURCES

Retirees Tools and Resources

- 2025 UC Retiree Premium Estimator
- <u>2025 UC Medical Plan Availability</u>



# **HMO Plan Changes**

## **UC Blue & Gold**

(Administered by Health Net)

UC BLUE & GOLD	2024	2025
Administered by:	Health Net	Health Net
Office/Specialists Visit/Urgent Care	\$20	\$30
Inpatient/Mental Health Inpatient	\$250	\$250
Outpatient Surgery	\$100	\$100
Emergency Room Services	\$125	\$125
Prescription Drugs 90-day at UC pharmacy/CVS = 2 copays Pharmacy Benefit Manager: CVS/Caremark	Retail: \$5/\$25/\$40 (30-day supply) Mail Order: \$10/\$50/\$80 (90-day supply) Specialty Drugs: \$25 30-day/\$50 31-90-day Office administered injectable drugs: \$20	Retail: \$10/\$30/\$50 (30-day supply) Mail Order: \$20/\$60/\$100 (90-day supply) Specialty Drugs: 30% coinsurance up to \$150 Office administered injectable drugs: \$30
Behavioral Health Office Visit	\$20 – Health Net Behavioral Health	\$30 – Health Net Behavioral Health
Hearing Aids Allowance	50% up to \$2,000 (per ear, every 36 months)	50% up to \$2,000 (per ear, every 36 months)
Acupuncture/Chiropractic Care	\$20/24 visits (combined benefit, per year) through American Specialty Health (ASH)	\$20/24 visits (combined benefit, per year) through American Specialty Health (ASH)
Telehealth Services (Virtual Visit/Behavioral Health Visit)	\$0 Teladoc Available 24/7	\$0 Teladoc Available 24/7
Other Services	MinuteClinic = \$20 copay (\$0 if preventive visit) located in CVS Pharmacy/Target stores across the U.S.	MinuteClinic = \$30 copay (\$0 if preventive visit) located in CVS Pharmacy/Target stores across the U.S.
Doula Services	Not covered	Covered with no copay - 11 visits per pregnancy; members pay full cost of services after 11 free visits
Physician Medical Groups	You may select a UCLA Health provider or any provider within the UC Blue and Gold network.	You may select a UCLA Health provider or any provider within the UC Blue and Gold network.
Annual Out of Pocket Maximum (refer to EOC for list of exclusions)	\$1,000 - individual (medical, mental, Rx) \$3,000 - 3 persons or more (medical, mental, Rx)	\$1,000 - individual (medical, mental, Rx) \$3,000 - 3 persons or more (medical, mental, Rx)

# **Kaiser Permanente**

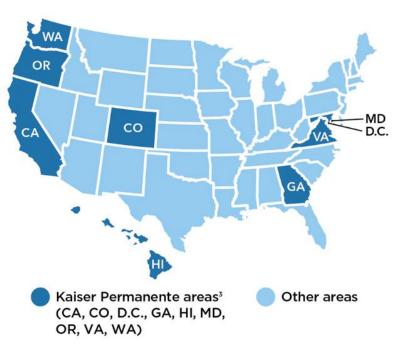
KAISER PERMANENTE	2024	2025
Office/Specialists Visit/Urgent Care	\$20	\$30
Inpatient/Behavioral Health Inpatient	\$250	\$250
Emergency Room services	\$125	\$125
Optum Behavioral Health Emergency Room	\$75	\$125
Prescription Drugs	Generic \$5/Brand \$25 (30-day supply) Generic \$10/Brand \$50 (31- 60 day supply) Generic \$15/Brand \$75 (61 – 100 day supply) Mail order: Generic \$5/Brand \$25 (30-day supply) Mail order: Generic \$10/Brand \$50 (31-100-day)	Generic \$10/Brand \$30 (30-day supply) Generic \$20/Brand \$60 (31- 60 day supply) Generic \$30/Brand \$90 (61 – 100 day supply) Mail order: Generic \$10/Brand \$30 (30-day supply) Mail order: Generic \$20/Brand \$60 ( up to 100-day) Specialty Drugs: 30% coinsurance up to \$150
Doula Services	Not covered	Covered with no copay - 11 visits per pregnancy; members pay full cost of services after 11 free visits
Behavioral and Mental Health	Kaiser \$20 individual/\$10 group visit *Optum Visits 1-3 = \$0 copay Visits 4+ = \$20	Kaiser <mark>\$30</mark> individual/ <mark>\$15</mark> group visit *Optum Visits 1-3 = \$0 copay Visits 4+ = <mark>\$30</mark>
Wellness Resources	myStrength will be disco	ontinued after 12/31/2024.
Hearing Aids (every 36 months)	\$1,000 allowance, per aid, per ear	\$1,000 allowance, per aid, per ear
*Acupuncture (American Specialty Health) *Chiropractic Care	\$15/24 visits (This is a combined benefit acupuncture/chiropractic care)	\$15/24 visits (This is a combined benefit acupuncture/chiropractic care)
Annual Out of Pocket Maximum (*services do not apply)	\$1,500 - individual/\$3,000 - 2 persons or more (medical, behavioral health, prescription)	\$1,500 - individual/\$3,000 - 2 persons or more (medical, behavioral health, prescription)
Oraclinic Target Clinic: (no auth necessary)	Preventive \$0 Non-emergent services \$20	Preventive \$0 Non-emergent services \$20

# Kaiser Permanente Senior Advantage

KAISER SENIOR ADVANTAGE	2024	2025
Office/Specialists Visit/Urgent Care	\$20	\$30
Inpatient/Mental Health Inpatient	\$250	\$250
Emergency Room services	\$65	\$65
Prescription Drugs	Generic \$5/Brand \$25 (30-day supply) Generic \$10/Brand \$50 (31- 60 day supply) Generic \$15/Brand \$75 (61 – 100 day supply) Mail order = Generic \$5/Brand \$25 (30-day supply) Mail order = Generic \$10/Brand \$50 (31-100-day)	Generic \$10/Brand \$30 (30-day supply) Generic \$20/Brand \$60 (31- 60 day supply) Generic \$30/Brand \$90 (61 – 100 day supply) Mail order = Generic \$10/Brand \$30 (30-day supply) Mail order = Generic \$20/Brand \$60 ( up to 100-day)
Eye Glasses	\$150 allowance (eyeglass/contact lenses, frames) every 24 months	
Eye Exams	\$20	\$30
Behavioral Health	Kaiser Only (No Optum coverage) \$20 for individual visit \$10 for group visit	Kaiser Only (No Optum coverage) \$30 for individual visit \$15 for group visit
Wellness Resources/Fitness Benefit	Two mobile apps: Calm and Headspace Care	Two mobile apps: Calm and Headspace Care One Pass Membership will be added, offering access to fitness gyms, home fitness kits, and more.
Hearing Aids (every 36 months)	\$2,500 allowance, per ear	\$2,500 allowance, per ear
*Acupuncture (American Specialty Health) *Chiropractic Care	Acupuncture \$20 copay when medically necessary. Chiropractic \$20 copay if covered by Medicare.	Acupuncture \$20 copay when medically necessary. Chiropractic \$20 copay if covered by Medicare.
Annual Out of Pocket Maximum (*services do not apply)	\$1,500 each/\$3,000 family -medical/behavioral (\$8,000 TrOOP) - prescription, per member	\$1,500 each/\$3,000 family - medical/behavioral (\$2,000 TrOOP) - prescription, per member
CLINIC Target Clinic: (no auth necessary)	Preventive \$0/Non-emergent services \$20	Preventive \$0/Non-emergent services \$20

#### Kaiser and Kaiser Senior Advantage Plans

- Planning a trip? Have a child going away to college?
- Contact Kaiser's Away From Home Travel Services/Visiting Member Program: 1-951-268-3900 available 24/7
- Additional benefits and offerings in addition to Kaiser Permanente facilities.
- > You have many ways to get care anywhere in the U.S.





#### Kaiser and Kaiser Senior Advantage Plans

➢ Pre-Enrollment Toll Free Number: 1-800-324-9208, Monday – Friday, 7:00am – 6:00pm PST

Virtual 15-minute Appointment (available in Spanish) Scan Kaiser's QR code to learn more

➢ If you're aging into Medicare soon, attend Kaiser's Monthly Medicare 101 workshop.





# **PPO Plan Changes**







Accolade will continue as Anthem's first point of contact for help with health benefits questions for the Anthem non-Medicare PPO plans: UC Care, UC Health Savings Plan and Core <u>ONLY</u>.

Some of Accolade's Services include, but not limited to:

- Answer benefit questions
- Claims issues resolution
- Coordination of benefits
- Obtain referrals
- Locate network providers
- Arrange for second opinions
- Discuss potential options with providers
- Explain a diagnosis, and many more

Virtual 2<sup>nd</sup> opinions through 2<sup>nd</sup>.MD and Virtual Primary Care + Behavioral Health therapy

Phone Number:

1-866-406-1182

Monday - Friday, 5AM - 8PM PST (nurse support available 24/7)

Activate your Accolade account on the Member Portal at: http://member.accolade.com/

UNIVERSITY OF CALIFORNIA



#### (Administered by Anthem Blue Cross)

#### CORE

Worldwide Coverage	In-Network	Out of Network
Deductible	\$3000 per member	\$3000 per member
Preventive Services	\$0 (not subject to deductible)	\$0 (not subject to deductible)
Physician/Behavioral Office Visit Outpatient X-Ray/Lab, Ambulance	20%	20% + remaining balance
Inpatient/Maternity Inpatient	20%	20% (out-of-network hospitals subject to maximum payment of \$480/day)
Emergency Room	20%	20%
Prescription Drugs (Navitus Pharmacy Benefit Manager)	20% - retail, up to a 30-day supply 20% - mail order, up to a 90-day supply	20% - retail, up to a 30-day supply Mail order 31-90 day supply – Not covered
Telehealth/Telemedicine/Psychology	LiveHealth Online available 24/7 for doctor or psychiatrist visits - \$49 copay	
Hearing Aids	Not covered	Not covered
Chiropractic/Acupuncture Services 24 visits per member, combined benefit	20%	20%
Out-of-Pocket Maximum (Medical/Prescription)	\$6,350 per member/\$12,700 family	\$6,350/\$12,700 (+ remaining balance)



New – Core members will now have a monthly premium

# **UC Care**

#### (Administered by Anthem Blue Cross)

UC CARE – WORLDWIDE COVERAGE	* UC Select	In-Network	**Out of Network
Deductible	N/A	\$500 (individual) \$1,000 (3+ family members)	\$750 (individual) \$1,750 (3+ family members)
Office/Specialists Visit/Diagnostic Test (xray, lab, imaging)	\$20 to <mark>\$30</mark>	30%	50% + remaining balance
Behavioral office visit	Visits 1-3/\$0 copay, V	/isits 4+/ <mark>\$30</mark> No deductible	50% + remaining balance
Preventive Care	\$0	\$0 No deductible	50%
Inpatient	\$250	30%	50% of \$300/day
Inpatient Behavioral Health	\$25	0 No deductible	50% of \$300/day
Outpatient Surgery	\$100	30%	50% of \$175/max
Emergency Room	\$300	\$300 No deductible	\$300
Urgent Care	\$30	\$30 No deductible	50%
Prescription Drugs 30 day/90 day supply at UC pharmacies, Costco, CVS, Vons, Walgreens, Walmart) Mail order: Costco (no membership required - register online at <u>pharmacy.costco.com</u> or call (800) 607-6861)		Mail Order: \$20/\$60/\$100 to \$150 max (30-day supply) formulary: \$200/30 day supply.	Retail/Specialty: 50% (30-day) Mail Order (31+ day): Not covered
Telehealth/Telemedicine	LiveHealth Online available 24/7 for medical, psychology or psychiatrist services - \$30 copay		
Out-of-Pocket Maximum (Medical/Prescription)	\$6,100 (individual) \$9,700 (family)	\$7,600 (individual) \$14,200 (family)	\$9,600 (individual) \$20,200 (family)

\* UC SELECT (Tier 1): See Evidence of Coverage (EOC) for limitations, exclusions, and services not available in the UC Select tier. Multiple copayments can apply per service.

\*\* OUT-OF-NETWORK (Tier 3) Some Out-of-Network services have maximum payment limits. Refer to the EOC for detailed information.

## UC Health Savings Plan (HSP) (Administered by Anthem Blue Cross)

#### UC HEALTH SAVINGS PLAN (HSP)

- High deductible PPO plan (you nor family members cannot have Medicare Part A nor Medicare Part B)
- Coverage within the U.S. (outside the U.S. = urgent/emergency services only)
- The Health Savings Account (HSA) will continue to be administered by HealthEquity

#### What's changing?

#### In-network deductible increase

- \$1,600 to \$1,650 for self-only coverage (\$50 increase)
- \$3,200 to \$3,300 for family coverage (\$100 increase) For family coverage, the full family deductible must be paid before the enrollee or covered dependents can receive plan benefits for covered services.

#### No changes to the Out-of-Network deductible

• \$2,600 for self-only coverage and \$5,200 for family coverage

#### Maximum Health Savings Account Contributions are set by the IRS

- Individual increases from \$4,150 to \$4,300
- Family increases from \$8,300 to \$8,550
- \$1,000 catch-up for members age 55+ remains the same

#### Same one time UC contribution towards the member's HSA on January 1

• \$ 500 for single coverage/\$1,000 for family per year

#### **Copay for Accolade Care Telehealth & Virtual Visits**

From \$0 copay for first 12 visits to \$30 copay for all visits, counts towards deductible



#### Aging into Medicare next year?

If you or your family member become eligible for Medicare, you must complete the UBEN100 form to enroll in another medical plan. The family member aging into Medicare must also complete the corresponding prescription drug form.

# Medicare PPO Plan Changes

# **UC Medicare Choice**

#### (Administered by United Healthcare (UHC))

UC MEDICARE CHOICE	2024	2025	
Administered by:	United Healthcare (UHC) - Advantage PPO Plan	United Healthcare (UHC) - Advantage PPO Plan	
Office/Specialists Visit/Urgent Care	\$20	\$30	
Inpatient/Behavioral Inpatient	\$250	\$250	
Outpatient Surgery	\$100	\$100	
Emergency Room Services	\$65	\$65	
Prescription Drugs (Mail Order: OptumRx)	Select Generics: \$0 Retail: \$5/\$25/\$40 (30-day supply) Mail Order: \$10/\$50/\$80 (90-day supply) Specialty Drugs: 30-day = \$25/90-day = \$50 Rite Aid, Safeway/Vons, Walmart, Walgreens, Costco	Select Generics: \$0 Retail: \$10/\$30/\$45 (30-day supply) Mail Order: \$20/\$60/\$90 (90-day supply) Specialty Drugs: 30-day = \$30/90-day N/A 90-day supply at UC pharmacies only = 2 copays	
Behavioral Health Office Visit	\$20 – UHC, any licensed provider	\$30 – UHC, any licensed provider	
Hearing Aids Allowance	\$2,000 (combined ear, every 36 months)	\$2,000 (combined ear, every 36 months)	
Acupuncture/Chiropractic Care 24 visits (each benefit, per year)	Acupuncture \$20/Chiropractic \$20	Acupuncture \$30/Chiropractic \$20	
Telehealth Services	\$0 Doctor Visit/\$20 Behavioral Health Visit. 24/7 Clinical Support changing from 24/7 Nurse Support to 24/7 Doctor Access when accessing services through AmWell, Doctor on Demand or Teladoc		
Fitness Program	Renew Active         Silver Sneakers - no cost fitness clubs		
Other Services	Post-hospital discharge meals and transportation. Personal emergency response system by Lifeline.		
Physician Medical Groups	Open access. You may use any Medicare provider that will bill your UHC plan. Coverage abroad for up to 6 months.		
Annual Out of Pocket Maximum (refer to EOC for list of exclusions)	\$1,500 each/\$3,000 family - medical \$2,000 - prescription, per member (\$8,000 TrOOP)	\$1,500 each/\$3,000 family - medical \$2,000 - prescription, per member (\$2,000 TrOOP)	
No longer \$0 premium, Medicare Part B reimbursement going away			

# **UC Medicare PPO**

(Administered by Anthem Blue Cross)

#### UC MEDICARE PPO

Medicare is your Primary Plan	Anthem Blue Cross is your Supplement Plan	
Deductible	\$100 per member (\$0 deductible if covered by Medicare)	
Inpatient Services	Days 1-60: No copay   Days 61-90, you pay \$70.40 per day   Days 91+, you pay 20%	
Physician/Behavioral health/Chiro visit	20% or 20% + remaining balance if not contracted	
Prescription Drugs 30 day supply/90 day supply 90-day supply at UC pharmacies, Walgreens, CVS, Vons & Costco. Mail order vendor: Costco	Select Generics: \$0 copay Generics: \$15/\$30 Preferred Brand: \$35/\$70 Non-Preferred Brand: \$50/\$100	Diabetic supplies: Medicare Part B must be billed first and Navitus second
Eye Glasses	NO COVERAGE (Consider enrolling in VSP)	
Hearing Aids	Note: Services are not covered by Medicare Anthem pays 80%, you pay 20% (2 hearing aids per 36-months)	
Acupuncture	Note: Services are not covered by Medicare Anthem pays 80%, you pay 20% up to 24 visits per calendar year.	
Annual Out of Pocket Maximum (refer to EOC for list of exclusions)	\$1,500 - medical, per member \$8,000 to <mark>\$2,000</mark> - prescription, per member	
Telehealth/Telemedicine/Psychology – no deductible	LiveHealth Online available 24/7 for doctor or	psychiatrist visits - \$20 copay

Worldwide coverage up to 6 months (see EOC). If outside of the U.S over 6 months, you <u>must</u> enroll in UC Care or Core

Please note: You must use Medicare-approved providers. Exception: Acupuncture services, hearing aids and behavioral health outpatient office visits with all licensed providers, including psychiatrists, psychologists, Marriage, Family and Child Counselors (MFT, MFCC)

# UC High Option (Administered by Anthem Blue Cross)

#### UC HIGH OPTION

Medicare is your Primary Plan	Anthem Blue Cross is your Supplement Plan	
Deductible	\$50 – Most services paid at 100% after deductible.	
Inpatient Services	Days 1-90: No copay Days 91+: 20%	
Physician/Emergency Room/Chiro visit	No copay	
Behavioral/Mental Health	You pay nothing for services provided by Medicare; otherwise you pay 20%	
Prescription Drugs 30 day supply/90 day supply 90-day supply at UC pharmacies, Costco, CVS, Walgreens, Vons/Safeway Mail order vendor: Costco	Select Generics: \$0 copay Generics: \$15/\$30Diabetic supplies: Medicare Part B must be billed first and Navitus secondNon-Preferred Brand: \$50/\$100First and Navitus second	
Eye Glasses	NO COVERAGE (Consider enrolling in VSP)	
Hearing Aids (Not covered by Medicare)	Anthem pays 80%, you pay 20% (2 hearing aids per 36-months)	
Acupuncture	Note: Services are not covered by Medicare Anthem pays 80%, you pay 20% up to 24 visits per calendar year.	
Annual Out of Pocket Maximum (refer to EOC for list of exclusions)	\$1,050 - medical, per member \$1,000 - prescription, per member <mark>(\$2,000 TrOOP)</mark>	
Telehealth – no deductible	LiveHealth Online available 24/7 for doctor or psychiatrist visits - \$20 copay	

Worldwide coverage up to 6 months (see EOC). If outside of the U.S over 6 months, you must enroll in UC Care or Core

Please note: You must use Medicare-approved providers. Exception: Acupuncture, hearing aids, outpatient office visits with licensed behavioral health providers, including psychiatrists, psychologists, Marriage, Family and Child Counselors (MFT, MFCC).

# **UC Medicare PPO without Rx**

(Administered by Anthem Blue Cross)

#### UC MEDICARE PPO w/o Rx

Medicare is your Primary Plan	Anthem Blue Cross is your Supplement Plan	
Deductible	\$100 per member (\$0 deductible if covered by Medicare)	
Inpatient Services	Days 1-60: No copay   Days 61-90, you pay \$70.40 per day   Days 91+, you pay 20%	
Physician/Behavioral health/Chiro visit	20% or 20% + remaining balance if not contracted	
Prescription Drugs	NO COVERAGE	
Eye Glasses	NO COVERAGE (Consider enrolling in VSP)	
Hearing Aids	Note: Services are not covered by Medicare Anthem pays 80%, you pay 20% (2 hearing aids per 36-months)	
Acupuncture	Note: Services are not covered by Medicare Anthem pays 80%, you pay 20% up to 24 visits per calendar year.	
Annual Out of Pocket Maximum	\$1,500 - medical, per member	
Telehealth/Telemedicine/Psychology – no deductible	LiveHealth Online available 24/7 for doctor or psychiatrist visits - \$20 copay	
Worldwide coverage up to 6 months (see EOC). If outside of the U.S over 6 months, you must enroll in UC Care or Core		

Please note: You must use Medicare-approved providers. Exception: Acupuncture services, hearing aids and behavioral health outpatient office visits with all licensed providers, including psychiatrists, psychologists, Marriage, Family and Child Counselors (MFT, MFCC)



# **Member ID Cards**

#### Member ID Cards for next year

Plan	# of Cards	What to expect for next year
Anthem Blue Cross - UC Care	1	All members, new and current
Anthem Blue Cross - UC Health Savings Plan (HSP)	1	All members, new and current
Health Equity – Health Savings Account	1	New and current members with expiring debit card.
Anthem Blue Cross - Core	1	New members only
Anthem Blue Cross - UC High Option	2	New Members will receive a medical ID card from Anthem and a separate prescription drug ID card from Navitus ID
Anthem Blue Cross - UC Medicare PPO	2	New Members will receive a medical ID card from Anthem and a separate prescription drug ID card from Navitus ID
Anthem Blue Cross - UC Medicare PPO w/o Rx	1	New members only
UC Blue & Gold HMO	1	All members, new and current.
Kaiser Permanente HMO	1	New members only
Kaiser Senior Advantage	1	New members only
UC Medicare Choice Advantage PPO	1	All members, new and current
Delta Dental PPO	0	Members must log in and register to obtain ID cards.
DeltaCare USA	1	New members only
ARAG Legal Plan	1	New members only
Vision Service Plan (VSP)	0	Members must log in and register to obtain ID cards

# **Via Benefits**

#### UC's Medicare Coordinator Program

### **VIA BENEFITS**

ViaBenefits is UC's Medicare Coordinator Program for retirees living in a state outside of California. All family members must be enrolled in Medicare Part A and Part B.

This program offers:

- > Choice: More local plans, including Kaiser where available
- > Value: Plans to fit every budget
- > Flexibility: Family members can elect different plans
- > **Support:** Personalized assistance from Via Benefits

UC will provide an annual contribution for <u>each</u> covered family member under a Health Reimbursement Account (HRA).

Each covered family member will choose an individual plan that's best for them.

Use your HRA funds to pay for your Medicare Supplement Plan, Medicare Part B and D premiums, as well as some additional out-of-pocket costs.

During open enrollment, retirees must submit a paper form to enroll or change their dental, vision or legal plan.

Open Enrollment Oct. 31–Nov. 22, 2024



HRA contributions based on		
graduated eligibility. 🔒 🔒		
Years	Contribution	
20+	\$3,000	
19	\$2,850	
18	\$2,700	
17	\$2,550	
16	\$2,400	
15	\$2,250	
14	\$2,100	
13	\$1,950	
12	\$1,800	
11	\$1,650	
10	\$1,500	

HRA contributions based on

### **VIA BENEFITS**

Via Benefits' The Groove at https://www.thegrooveviabenefits.com/ will include information on Medicare OEP.

Members can log in to https://my.viabenefits.com/uc to review their current coverage, compare available plans, including Kaiser Permanente Senior Advantage plans, available on the Via Benefits platform, make plan changes or start a new enrollment online, or they may choose to work with licensed benefit advisors by reserving appointments.

The Solution Center is available Monday-Friday, 8 a.m. to 7 p.m. EST (5a.m. to 4 p.m. PT) at 1-855-359-7381, except for closures on November 23rd, 24th and December 25th.



# **Non-Medical Plans**

### Dental

- Delta Dental PPO Delta Dental continues as the vendor
  - There are no benefit nor premium changes
- DeltaCare USA HMO Delta Dental continues as the vendor
  - There are no benefit nor premium changes
- UC pays 100% of the monthly premium for retirees eligible for the full UC contribution
- > If you are currently enrolled, your coverage will continue for next year
- Open for enrollment

Graduated Eligibility



Retirees with graduated eligibility pay a portion of the premium and the premium is deducted from the retiree's monthly pension.



# Vision

- VSP continues as the vendor
- There are no benefit changes
- Premiums will have a 5% increase
  - There is no UC contribution.
  - Make payment arrangements directly with VSP.
- > If you are currently enrolled, your coverage will continue for next year.
- > Open for enrollment. If you need to enroll for next year, you have two options to enroll:
  - Online <u>https://ucretirees.vspforme.com/</u>
  - By Phone (866) 240-8344



	2024	2025
Retiree Only	\$11.61	\$12.19
Retiree + One Adult	\$21.96	\$23.06
Retiree + Child(ren)	\$22.15	\$23.26
Retiree + Family	\$27.12	\$28.48

### Legal

- ARAG continues as the provider
- There are no benefit changes
- Premiums will remain the same
  - No UC contribution
  - Premium is deducted from the retiree's monthly pension
- If you are currently enrolled, your coverage will continue for next year
- Open for enrollment

Monthly Cost		
Self	\$11.59	
Self plus adult	\$13.95	
Self plus child(ren)	\$13.95	
Self plus adult plus child(ren)	\$16.31	

ARAGLegalCenter.com Access Code 11700uc



## Accidental Death and Dismemberment (AD&D)

- Prudential Life continues as the AD&D Insurance provider
- > There are no benefit changes
- > There is no UC contribution
- Make payment arrangements directly with Prudential
- > If you are currently enrolled, your coverage will continue
- You have two options to enroll:
  - Call 1-800-524-0542 or
  - Log onto UCnet to download their form
- > Always open throughout the entire year for enrollment

Monthly Cost				
Coverage Amount	Self	Self + Adult		
\$10,000	\$11.80	\$17.40		
\$25,000	\$29.50	\$43.50		
\$50,000	\$59.00	\$87.00		
\$100,000	\$118.00	\$174.00		
\$250,000*	\$295.00	\$435.00		

\*Available only if coverage as an employee exceeded \$250,000



### PET INSURANCE

- Nationwide continues as the vendor.
- Exclusive plan with preferred pricing just for UC.
- Coverage for cats, dogs, birds, small mammal and exotic pets.
- Livestock <u>excluded</u> (including horses).
- Rates based on species of animal and state of residence.
  - There is no UC contribution
  - Make payment arrangements directly with Nationwide
- > If you are currently enrolled, your coverage will continue
- > Always open throughout the entire year for enrollment









#### To enroll:

- <u>https://www.petinsurance.com/uc</u>
- Call (877)738-7874



# **How to Make Changes**

## Making Changes

• To make changes, log onto UCRAYS at <a href="http://ucal.us/oe">http://ucal.us/oe</a>

• Once you make your selections, click confirm.

• You must "confirm" changes to receive your confirmation.



### No Computer? Locked out of UCRAYS?

- If you are unable to make changes through UCRAYS or recently retired:
  - Call the RASC at 1-800-888-8267, Monday–Friday, 7:00 a.m. to 4:30 p.m. (PT)

- or -

Submit a paper form: UBEN100 by November 22<sup>nd</sup>, 5:00pm.



## Changing to a New Medicare Plan?

- If you change to a <u>new</u> Medicare plan for next year.
  - > Anthem Blue Cross plans use UBEN123
    - If switching from UC Medicare PPO to High Option or switching from High Option to UC Medicare PPO, a new UBEN123 form is <u>not</u> required.
  - Kaiser Senior Advantage use UBEN127
  - UC Medicare Choice PPO use UBEN121
- Fax forms to RASC at (800) 792-5178 must be received by the deadline
- Mail forms to RASC at PO Box 24570, Oakland, CA 94623 must be postmarked by the deadline



## Changing Medicare plans? UBEN101

If you are the retiree or survivor enrolled in a UC medical plan and either you or your covered family member(s) are in a UC-sponsored Medicare plan, the UBEN101 form must be completed **ONLY IF** you:

- > Disenroll or cancel a Medicare family member from your plan
- Suspend your medical plan which covers a Medicare member
- Disenroll from any Medicare plan and enroll in UC Medicare PPO without Prescription Drug coverage plan

If you have any questions, call the RASC at 1-800-888-8267 or your local HCF.



## Qualifying Event (QE)

- When you have a (QE) outside of Open Enrollment
  - Move outside plan service area
  - Involuntary loss of other coverage
  - Marriage
  - Addition of newly eligible family member(s)





## **UCLA Health Providers**

# **UCLA Health**

### **NON-MEDICARE PLANS**

- UC Blue and Gold (Health Net)
- UC Care (Anthem Blue Cross)
- Core (Anthem Blue Cross)
- UC Health Savings Plan (Anthem Blue Cross)

### **UCLA Health**

(310) 825-2631 Monday to Friday, 7 am - 7 pm (PST) <u>https://www.uclahealth.org/</u>

### **MEDICARE PLANS**

- UC Medicare PPO (Anthem Blue Cross)
- UC Medicare PPO no Rx (Anthem Blue Cross)
- UC High Option PPO (Anthem Blue Cross)
- UC Medicare Choice PPO (United Healthcare)



# Health Care Facilitator (HCF) Program

### HEALTH CARE FACILITATOR (HCF) PROGRAM

The Health Care Facilitator (HCF) Program serves over 56,000 active and over 17,000 retired faculty and staff as well as eligible family members. We can assist with issues that you have not been able to resolve on your own. The HCF Program specializes in troubleshooting the use of UC Health plans and coordinating them with Medicare. Please note: The team does not provide counseling on retirement, disability or Postdoc benefits.

Before you contact your HCF:

- 1. Take time to understand your benefits Log onto UCnet: ucnet.universityofcalifornia.edu and review your Evidence of Coverage (EOC) booklet. Check if there are any plan limitations or exclusions to your health plan.
- **Contact your medical plan -** Your plan can answer questions about your coverage, 2. authorization requirements, provider networks, assist with second opinions or pharmacy related questions and help you change your primary care physician (PCP).
- 3. Contact your provider's office or the billing office if you receive a bill, call the provider to make sure they billed your insurance.

### Erika Castillo

Serving employees and retirees with last names A - K (<u>310)</u> 794-8121 HCFHelp@chr.ucla.edu

Debra Wells Serving employees and retirees with last names L - Z (310) 794-3057 HCFHelp@chr.ucla.edu

**Health Care** Facilitator Program

Your health care facilitator can:

Do you have a complicated problem with your medical, dental or vision plan? UC's health care facilitators offer confidential and free assistance to faculty, staff, retirees, survivors and eligible family members.

Health care facilitators have the knowledge and experience to HOW TO WORK WITH A HEALTH CARE FACILITATOR answer complex questions and work with you to solve problems.

· Clarify your benefits and your rights and responsibilities as a plan membe Help you compare your benefit options when you or a family

member have complex medical needs or other coverage outside of UC

· Explain how Medicare benefits coordinate with UC-spon-

· Help resolve billing or authorization problems

· Explain how to appeal a decision made by your health plan · Provide information on medical and mental health provider

· Direct you to appropriate resources (within or outside of UC)

Along with providing one-on-one help, your health care facilitator may also offer workshops about UC's health plans and health coverage.

It's best to go to your health care facilitators for help with tou problems that you can't solve on your own. Before you get in touch with your facilitator, try these other avenues first Take time to understand your benefits. You'll find ben

information and news on UCnet (ucal.us/ucnet) · Review your medical plan booklet (available on UCnet) fo

detailed explanations of what's covered and what's not. · Call your medical plan if you have guestions about coverage authorization requirements, provider networks and claims

processing.

· Depending on the issue, contact your medical provider's office, billing office or medical group to see if they can help resolve your problem directly.

If you still need help after taking the steps above, contact the health care facilitator at your location (or the last location when you worked, if you're a retiree). To make the most of your consultation, gather as much information as you can, such as the dates of visits to providers, notes about phone conversations, and documentation of billings and payments.

It's also helpful to let the health care facilitator know if you're mainly looking for information, or would like them to advocate on your behalf.

Facilitators are required to comply with Health Insuran ortability and Accountability Act (HIPAA) privacy and

curity laws mandating protection and safeguards for



## **Tools and Resources**

### Tools and Resources

#### **UC Retirees Open Enrollment Process**

- Go to ucal.us/oe and click on "Get started" then "Retirees"
- Sign in to your UCRAYS account and select "Open Enrollment"
- Select plan to see your options and premiums
- When you are done, select "Confirm".
- You will receive your confirmation by email. If no email on file, you will receive your confirmation by U.S. mail.

#### UCnet - http://ucnet.universityofcalifornia.edu

- Annual Open Enrollment Information
- Medicare Information
- Complete Guide to Your UC Benefits
- Forms and fact sheets
- Evidence of Coverage plan booklets
- Webinars: Retirement, plan information and rates

#### UC Retirement Administration Service Center (RASC)

- Domestic calls toll-free: 1-800-888-8267
- International callers: 1-510-987-0200
- Monday–Friday, 8:30 a.m. to 4:30 p.m. (PT)
- Monday–Friday, **7:00** a.m. to 4:30 p.m. (PT) (Open Enrollment Only) Support from UnifyHR for assistance with Open Enrollment or accessing UCRAYS
- Secure message (email) Sign in to your UCRAYS account and select "Messages"
- Fax: 1-800-792-5178
- Mailing address: P.O. Box 24570, Oakland, CA 94623-1570

#### **UCLA Emeriti/Retirees Association**

• 1-310-825-7456

#### UC Health Plans and Information: uchealthplans.com

- Review all medical plans
- Find a Provider
- Wellness Resources
- Transitioning to Medicare

#### **Medicare Coordination of Benefits**

#### (Call if Medicare is not paying as primary)

• 1-855-798-2627

#### Centers for Medicare & Medicaid Services (CMS)

- 1-800-MEDICARE (1-800-633-4227) (say "agent") TTY users should call 1-877-486-2048
- Medicare.gov
- Medicaid.gov/

#### **Social Security Administration**

- 1-800-772-1213
- 1-800-325-0778 TTY users
- <u>SocialSecurity.gov/</u>

#### HICAP - Health Insurance Counseling/Advocacy Program

Medicare information and assistance

https://cahealthadvocates.org/hicap/

- Los Angeles County, 213-383-4519
- For all other counties, 800-434-0222

## Retiree Open Enrollment Help Desk Sessions Registration

	Date	Time
Thursday	October 31, 2024	1:00 pm - 2:00 pm
Thursday	November 7, 2024	9:00 am - 10:00 am
Wednesday	November 13, 2024	5:00 pm - 6:00 pm
Tuesday	November 19, 2024	11:00 am - 12:00 pm
Thursday	November 21, 2024	4:00 pm - 5:00 pm

To register: <u>https://errc.ucla.edu/events-programs/open-enrollment</u>



# Conclusion

### **Conclusion – Final Reminders**

- <u>Read</u> your open enrollment booklet.
- **<u>Review</u>** the pre-recorded presentations and materials.
- **<u>Confirm</u>** your changes and make sure you receive a confirmation.
- <u>Medicare</u> forms must be received by **November 25, 2024**.
- If you are satisfied with your current health plan options, <u>you are not required</u> to do anything, but it's highly suggested that you log in to view your current enrollments.
- If you add any new family members expect a letter from UnifyHR in February requesting documentation to verify the eligibility of your new dependent.
- If you change plans, look for your new ID card in the mail and file your old card in a safe place.
- Open Enrollment ends on Friday, November 22<sup>nd</sup> at 5:00 p.m. PST, FIRM DEADLINE!

## **Questions?**

# 2025 Retiree Open Enrollment Highlights

Presented by: UCLA Health Care Facilitator Program Erika Castillo and Debra Wells