UC Retiree Medical Plans 2021

Overview of Coverage & Changes for UCLA Retirees *Without Medicare*







Open Enrollment: Oct. 29-Nov. 24, 2020

ucal.us/oe



Special pandemic edition with wellness resources and virtual care information

J. Bridget Sheehan-Watanabe UCLA Health Care Facilitator

Agenda

- Open Enrollment Logistics (slide 3-5)
- Non-Medicare Retiree Medical Plans (slides 6-29)
 - Medical Plan Changes for 2021 (slides 7-9)
 - HMOs coverage basics + (slides 10-18)
 - PPOs coverage basics + (slides 19-28)
 - Comparing Costs: UC Care and CORE (slide 29)
- Split Family Partner Plans/Medicare Transition Plans (slide 30)
- Brief Updates on Changes Dental, Vision, Legal (slide 31)
- Don't Want to Make Changes? (slide 32)
- Reminders, Resources, Links, Contacts (slides 33-36)
- Virtual Fair Navigation Information (slides 37-41)



Watch for virtual mask to find online and app-based programs and services that help you stay healthy and access care while staying home and staying safe!

Open Enrollment for 2021

• UC's Open Enrollment in 2020 for 2021:

Begins: Oct. 29 at 8 am

Ends: Nov. 24 at 5 pm

• Changes effective Jan. 1, 2021

Watch for ID cards in the mail in late December

• NEW: Virtual Benefits Fair <u>ucal.us/benefitsfair</u> Available 24/7 throughout open enrollment

See slides <u>37-41</u> for Virtual Fair navigation information





November 2020

Open Enrollment Oct. 29 – Nov. 24, 2020

Enroll Online: ucal.us/oe

ENROLL ONLINE

- Go to <u>ucal.us/oe</u>, select "Retirees"
- Sign in to UC Retirement At Service
- Choose "Open Enrollment"
- Select "Medical," "Dental" or
 "Legal" to see 2021 options
- Click to calculate costs to see your premiums
- Select "Confirm" and follow steps to get confirmation number to finalize enrollment or changes.

No internet access or need help with the enrollment process or premium information? Call Retirement Administration Service Center (RASC) 1-800-888-8267



Open Enrollment Oct. 29 – Nov. 24, 2020 Find YOUR premiums based on full or graduated eligibility in UCRAYS Open Enrollment mailer and ucnet includes premiums for those with full 100% eligibility



4

Click here for 2021 Retiree Premiums

SIGN IN TO UCRAYS

• Log in with UCRAYS username and

password. If this is your first time, use AYSO username if you have one, or create a new account. Answer security questions to confirm identity.

•Check your contact information in UCRAYS, make sure phone & email are current

FORGOT PASSWORD?

- Enter username, click "Forgot Password?"
- Enter last four of SSN and DOB

• Select to have temporary password sent to cell phone, OR answer security questions.

Using Form to Change Plans

Open Enrollment Oct. 29 – Nov. 24, 2020

• Retirees can use UBEN 100 form:

ucnet.universityofcalifornia.edu/forms/pdf/uben-100.pdf

- You must use form if:
 - Your September through December retirement is pending
 - You want to suspend or un-suspend medical and/or dental plans
- Instructions are on the form.
- Must submit form to RASC by November 24 at 5 pm



Medical Plans - 2021

Plan availability based on zip code and Medicare enrollment status

Non-Medicare Plans

HMOs:

- Kaiser Permanente ^
- UC Blue & Gold HMO (Health Net) ~

PPOs (Anthem plans):

- UC Care ~
- CORE ^
- UC Health Savings Plan ^

Only new members receive new ID cards
 All members receive new ID cards for 2021
 *New members receive medical and Rx cards;
 current members receive only new Rx cards

Medicare Plans

Open Enrollment Oct. 29 – Nov. 24, 2020

Medicare Advantage HMO:

• Kaiser Senior Advantage ^

Medicare Advantage PPO (UHC):

• UC Medicare Choice~

Medicare PPOs (Anthem plans):

- UC Medicare PPO *
- UC Medicare PPO without Prescription Drug ^
- UC High Option Supplement to Medicare *

Via Benefits Medicare Coordinator (outside of California, in U.S.)



Changes for 2021 Kaiser Permanente



- Emergency Room (ER) copay increasing to \$125
- Outpatient Prescription Drugs with over the counter equivalent (same active ingredient, strength, dosage form as the prescription drug) are excluded from coverage.
 - Exclusion does <u>not</u> apply to:
 - Insulin
 - OTC covered preventive drugs (e.g., smoking cessation, contraceptives)
 - Entire class of a drug when one drug in that class becomes available OTC



Premiums also change each year. Review the plan premiums online or in the open enrollment mailer.

Open Enrollment Oct. 29 – Nov. 24, 2020

Changes for 2021 UC Blue & Gold

- UC Blue & Gold HMO
- Emergency Room (ER) copay increasing to \$125
- UC Blue & Gold Rx refill-in-advance days reduced
 - from 7 to 5 days for specialty and retail
 - from 23 to 16 days for mailorder
- Telehealth provider is changing to Babylon IIII
- UC Blue & Gold/HN out-of-pocket maximum change:
 - Out-of-pocket maximum no longer includes hearing aid costs or infertility treatment costs (making it consistent with other UC plans).



Premiums also change each year. Review the plan premiums online or in the open enrollment mailer.

Open Enrollment Oct. 29 – Nov. 24, 2020

Open Enrollment Oct. 29 – Nov. 24, 2020

Changes for 2021 Non-Medicare PPOs



UC Care

- Deductibles increasing on PPO and out-of-network tiers
- Coinsurance on PPO tier increasing to 30% for services with PPO providers inside the United States
- Out-of-pocket maximums increasing on all tiers
- Emergency room copay is increasing to \$300
- Urgent care copay decreasing to \$20

See UC Care deductibles and max OOPs on slide 21

UC Health Savings Plan

• HSA contribution maximum increasing in 2021 - <u>see slide 24</u>

All Anthem plans: Anthem's Engage Elite Plus mobile app no longer offered. New Tool: Sydney Health (web & mobile app)



Premiums change each year. Review your premiums online or in the open enrollment mailer.

HMOs for 2021 – Coverage Basics

HMOs:

California residency required to be eligible for UC's HMO plans

- Kaiser Permanente
- UC Blue & Gold HMO (Health Net) UC Blue & Gold HMO

Primary Characteristics of HMOs:

- Restricted choice of physicians and facilities
- PCP gatekeeper, referrals and authorizations
- Predictable and controlled costs you pay mostly copays for medical services and prescription drugs



Benefits At a Glance Non-Medicare HMOs

2021	<u>Doctor</u> <u>Visit</u>	<u>ER</u>	<u>Hospital</u> Inpatient	<u>Outpatient</u> <u>Surgery</u>	Prescription Drugs^	<u>Specialty Drugs</u> (w/prior auth)
UC Blue & UC Blue & Gold HMO OOP max: \$1000 individual; \$3000 family	Gold HMO \$20	€ Health Net	\$250	\$100	\$5/\$25/\$40* retail (30 days) - \$10/\$50/\$80 mail order, CVS or UC pharmacy (up to 90 days)	\$20 self-injectables – 50% for infertility and sexual dysfunction Rx
Kaiser OOP max: \$1500 individual; \$3000 family	\$20	\$125	\$250	\$100	\$5/\$25~ Retail (30 days) – \$10/\$50 mail order (up to 100 days)	Covered under Rx copays. – 50% for infertility and sexual dysfunction Rx

 ^ CA regulated plans must prorate Rx copays for partial month fills.
 *Health Net Rx copays are for generic/brand name formulary/nonformulary.

UCLA

~Kaiser's Rx copays are for generic/brand name.

Benefits At a Glance Non-Medicare HMOs

2021	Lab, Imaging and xray	<u>DME</u>	<u>Physical</u> <u>Therapy</u>	<u>Hearing Exam</u> <u>Hearing Aids*</u>
UC Blue & Gold UC Blue & Gold HMO OOP max: \$1000 individual; \$3000 family	HMO HealthNet \$0	\$0	\$20/visit	\$20 exam; Plan covers 50% up to \$2000 for two hearing aids every 36 months. Does not cover repair or parts (e.g. batteries). Must use plan contracted vendor.
Kaiser OOP max: \$1500 individual; \$3000 family	\$0	\$0	\$20/visit	\$20 exam; Plan provides \$1000 allowance for each ear hearing aid every 36 months. Does not cover repair or parts (e.g. batteries). Must use plan contracted vendor.



*For hearing aids, your share of cost over the allowance *does not* apply to your annual out-of-pocket maximum.

Non-Medicare HMO Kaiser Permanente HMO



- Must use Kaiser providers and facilities
 - Exceptions: urgent and emergency care, additional benefits below
- Same day, telephone and video appointments available
- Kaiser hospitals and medical centers providing full range of care throughout Southern CA
- Pre-Enrollment Toll Free Number: 1-800-324-9208
- Additional benefits and offerings:
 - **Optum** for behavioral health services (psychology, psychiatry) 🍳 ортим⁻
 - American Specialty Health for acupuncture/chiropractic
 - Target Clinics
 - Away From Home Travel Services/Visiting Member Program
 - CVS Minute Clinics in states without Kaiser for urgent care needs
 - Wellness Apps & Fitness Discounts



Open Enrollment Oct. 29 - Nov. 24, 2020



or dial 911.

14

Non-Medicare HMO Kaiser Permanente

Getting care or advice outside your doctor's office

Target Clinics	Phone & Video Appointments, & Nurse Advice Line	Away From Home Travel Services/Visiting Member	CVS Minute Clinic* (limited access)		
kptargetclinic.org 1-833-KP4CARE	kp.org/getcare 1-833-574-2273 24/7	kp.org/travel 1-951-268-3900 24/7	Minuteclinic.com* Limited under Kaiser		
Cost: \$20 (or \$0 for preventive)	Cost: \$0	Cost: Applicable plan copays	Show plan ID card and pay urgent care \$20 copay.*		
Available: M-F 9-2, 2:30-7 Weekends 11-2, 2:30-4 Appointments & walk-ins (if schedule not full). Staffed by Kaiser providers. Preventive care & care for minor injuries & illnesses. Do not visit with cold, flu or COVID-19 symptoms.	Available: hours vary Phone and video appointments available with Kaiser providers at most Kaiser facilities, when appropriate. Call number on card to schedule with own doctor, if available. 24 hour Nurse Advice line also available.	Get care at Kaiser facilities in other areas/states when visiting those areas <u>https://healthy.kaiserper</u> <u>manente.org/content/da</u> <u>m/kporg/acaa/get-</u> <u>care/getting-care-kaiser-</u> <u>permanente-service-</u> <u>areas.pdf</u> This is a Kaiser program, not a UC-negotiated benefit.	Available: 7 days a week; hours vary. For urgent care services only, when traveling in states where there are no Kaiser providers* MinuteClinics are located inside select CVS Pharmacy stores, nationwide. For minor conditions and injuries		
Ine also available. oc-negotiated benefit. *Kaiser will not cover routine or preventive care from Minute Clinics. Kaiser members who use you can be the nearest the nearest room Minute Clinics for urgently needed services in states where there are Kaiser providers must pay and emergency room					



*Kaiser will not cover routine or preventive care from Minute Clinics. Kaiser members who use Minute Clinics for urgently needed services in states where there are Kaiser providers must pay and submit claims to Kaiser for reimbursement, less plan copay.

Non-Medicare HMO Kaiser Permanente





Wellness Resources

Calm







Calm is a free app for meditation and mental resilience, to lower stress, reduce anxiety, improve sleep. Includes guided meditation and sleep stories.

myStrength is a free app to help manage and overcome challenges, reduce stress, control anxiety, manage depression. It can be personalized and incorporates multiple programs. ClassPass provides free access to 4,000+ online ondemand video workouts. It also offers discounts on livestream and inperson fitness classes. Included are pilates, yoga, dance, strength training.

ChooseHealthy provides discounts on: health and fitness products, and services from specialty care practitioners. Enroll in Act&Fit Direct gym membership program for \$25/mo. Access free health classes and articles a no extra cost.

kp.org/selfcare

kp.org/selfcare

kp.org/exercise

kp.org/choosehealthy

Open Enrollment Oct. 29 – Nov. 24, 2020

Kaiser wellness resources on this page are perks, not UC-negotiated benefits. Calm, myStrength and ClassPass apps available free to all adult members. ChooseHealthy discounts available to all members, except Active&Fit is not included for Kaiser Senior Advantage.

Non-Medicare HMO UC Blue & Gold HMO UC Blue & Gold HMO

UC Blue & Gold HMO (formerly called Health Net Blue & Gold)

- Includes UCLA Medical Group and other groups (limited network)
- You must live in your medical group's service area (within 30 miles of PCP)
- Requires PCP assignment, referrals, medical group authorizations
- No out-of-network coverage except ER and urgent care
- Additional Benefits:
 - American Specialty Health for acupuncture/chiropractic
 - Limited to 24 visits per calendar year for acupuncture/chiropractic combined •
 - Managed Health Network (MHN) for behavioral health services (psychology, psychiatry) MHN
 - MinuteClinic at CVS pharmacies



Telehealth by Babylon

Health Improvement Programs, including: Active & Fit, myStrength, Quit for Life Smoking Cessation, Omada Health





Email questions year-round to Health Net at: askblue&gold@healthnet.com

Non-Medicare HMO UC Blue & Gold HMO Health Net UC Blue & Gold HMO

Getting care or advice outside your doctor's office



Babylon (Telehealth) 💙 babylon	Nurse Advice Line	Minute Clinic
www.babylonhealth.com/us/hnc	800-893-5597	minuteclinic.com
Cost: \$0 Code: HNCOM	Cost: \$0	Cost: \$20 copay (or \$0 for preventive services)
Available: 24/7 Mobile app & phone virtual visits, medical and behavioral health providers who can write prescriptions and refer for lab work. Chatbot symptom checker. COVID-19 Care Assistant.	Available: 24/7 Speak with a nurse about symptoms, minor illnesses or injuries, chronic conditions, medical tests and medications.	Available: 7 days a week; hours vary. MinuteClinics are located inside select CVS Pharmacy stores, nationwide. Clinicians can evaluate and treat minor conditions and prescribe medications.

In an emergency, you can go to the nearest emergency room or dial 911.



UC Blue & Gold HMO Non-Medicare HMO UC Blue & Gold HMO Wellness Programs

Open Enrollment Oct. 29 - Nov. 24, 2020

The UC Blue & Gold HMO plan partners with organizations to deliver programs to help you get and stay physically and emotionally healthy. To learn more, go to healthnet.com/uc. Under the Health Net Extras section, select Wellness programs and discounts.

https://uc.healthnetcalifornia.com/health-wellness/wellness.html

The Active&Fit Direct[™] program

Fitness center membership program that offers \$25-a-month membership at over 10,000 participating fitness centers and YMCAs nationwide (plus one-time \$25 enrollment fee and taxes).

Health Coaching programs



One-on-one phone support with unlimited access to a registered dietitian or health educator to help you reach your goals and sustain positive change.

myStrength

Interactive, individually tailored virtual program to address depression, anxiety, stress, substance abuse, chronic pain and sleep challenges, while also supporting physical and spiritual aspects of the whole person.

Omada

Online personalized behavior-change program to support people at risk of developing and those living with type 2 diabetes and other chronic conditions.

Quit For Life[®] tobacco cessation

One-on-one telephonic support to help you quit smoking or stop using e-cigarettes.

Omada Health is a UCnegotiated plan benefit. The other wellness programs are perks offered by Health Net.



Non-Medicare

PPOs for 2021 – Coverage Basics

PPOs:

- UC Care
- CORE

UNIVERSITY PPO Plans CALIFORNIA

www.ucppoplans.com

• UC Health Savings Plan - not retiree open enrollment option. Retirees who retired when enrolled in this plan can keep it until anyone under the coverage is Medicare-eligible or the retiree moves outside the US.

Primary Characteristics of PPOs:

- Freedom to select providers and facilities; no referrals/authorizations needed to see specialists; no PCP or medical group assignment.
- Most services are subject to deductibles and coinsurance (with exception) for some services, e.g. preventative, and UC Care Rx and Select network).
- Plan benefits, deductibles and coinsurance may differ for services with in-network and out-of-network providers.
- UC's PPOs cover medical, Rx and behavioral health benefits; administered by Anthem, with IngenioRx as pharmacy manager.



Open Enrollment Oct. 29 - Nov. 24, 2020

Non-Medicare PPO UC Care PPO

3-Tiered PPO



- Tier 1: UC Select
 - Includes UC providers and set co-pays for many services
 - Some services not covered on Select tier see slide 21
 - Maximum out-of-pocket increasing.

• Tier 2: In-network PPO

- Includes Anthem Blue Cross/BlueCard participating providers and worldwide coverage
- Deductibles and maximum out-of-pocket increasing
- Coinsurance for services with PPO providers in the US increasing
- Services <u>outside the US</u> covered subject to the new <u>higher PPO deductible</u>, then <u>20% coinsurance</u>.

Tier 3: Out-of-network

- Covers services with out-of-network providers
- Deductibles and maximum out-of-pocket increasing
- Copays for prescriptions, except specialty drugs (coinsurance).
- Copays for behavioral health providers in Anthem PPO network.



UC Care at a glance - 2021

Anthem 🔯

JC Care al a giance - 202			Anunem.			
UC Care PPO	<u>UC Select</u>	In-network PPO~	Out-of-network			
Annual Deductibles	None	\$500 / \$1000	\$750 / \$1,750			
Annual Out-of-Pocket Maximums (includes medical, beh health and Rx)	\$6,100 / \$9,700	\$7,600 / \$14,200	\$9,600 / \$20,200			
Physician Services/ Urgent Care	\$20 (professional fee)	30% / \$20 copay urgent care)	50%			
Diagnostic Test, Lab, Imaging, Treatment at Hospital-based Facility	\$20 (facility fee)	30%	50%			
ER Facility & ER Physicians [^] Ambulance	<mark>\$300</mark> or \$250^ N/A	\$300 or \$250^ (no deductible) \$200 flat fee	\$300 or \$250^ (no deductible) \$200 flat fee			
Ambulatory Outpatient Surgery	\$100	30%	50% ¹			
Hospital inpatient (non-emergency)	\$250	30%	50% ²			
Durable Medical Equipment	Not covered	30%	50%			
Stand Alone Skilled Nursing Facility Home Health	Not covered Not covered	30% (100 day limit) 30% (100 visit limit)	50%² (100 days) 50% (100 visits)			
Chiropractic*	Not covered	30%	50%			
Acupuncture*	Not covered	30%	30%			
Prescription Drugs (generic/brandname formulary/nonformulary & specialty)		ay; \$10/50/80 90-day; D/each Specialty Rx	Some Rx not covered out of network; some 50% of retail			
Behavioral Health	Anthem Network: \$	\$20 copays for outpatient	50%			
Hearing Aids Not covered 50% (of contracted rate or allowance) up to \$2000 every 3 years						
 Coinsurance for services outside US wil \$300 ER only; \$250 if admitted to hospi 			n Pays maximum of:			

*Plan limit of 24 visits for chiropractic and acupuncture combined.

Plan Pays maximum of: ¹ 50% on \$350/day ² 50% on \$600/day

21

Non-Medicare PPO CORE

CORE

- \$0 Premium cost for most retirees
- High-deductible \$3,000 individual (applies to max OOP)
 - All covered services, in- and out-of-network, apply to single deductible
- 80/20* PPO after deductible is met (plan benefit is 80%*)

Deductible

- Maximum out-of-pocket (max OOP): \$6,350 individual; \$12,700 family
- Does not cover hearing aids or hearing tests

CORE	Deductible	Comsulance	
Medical (in- and out-of-network^) Behavioral health (in- and out-of-network^)	\$3,000 single individual annual	20% of contracted rate for network providers; 20% of allowance for out-of-network providers +	\$6,350 individual \$12,700 family
Prescription / Drugs	deductible	possibility of balance billing~	

Coincurance

*After deductible met, plan pays 80% of contracted rate for Anthem PPO providers,

or 80% of allowance for out-of-network providers.



- ^Allowed amounts for out-of-network providers applies to deductible.
 - ~Amounts in excess of allowance are not recognized as covered expenses by the plan.

Anthem.

Open Enrollment

Oct. 29 - Nov. 24, 2020

Non-Medicare

Anthem 🕸 **Health Savings Plan w/HSA**

- Not open for retiree enrollment. Only retirees enrolled at time of retirement can remain in plan until anyone in family becomes Medicare-eligible or moves outside the U.S.
- High-deductible PPO with Health Savings Account (HSA), and contribution to HSA by UC.
- HSA can be used to meet deductible and pay eligible health care expenses. After age 65, funds can be used for non-eligible expenses (taxed but no IRS penalty).
- Once Medicare-eligible and move to Medicare plan, remaining funds can be used for Medicare premiums, plan premiums, and qualified medical and Rx expenses, until fund is exhausted.
- HSA contribution maximum increasing in 2021



PPO Plans

At a Glance Health Savings Plan w/HSA - 2021

HSA	Individual	Family (2+)
UC Contribution	\$500	\$1000
Enrollee Contribution	Up to <mark>\$3,600</mark> (+\$1,000 if over age 55)	Up to \$7,200 (+\$1,000 if over age 55)

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

PPO Plan	Individ	ual Coverage	Family Coverage (2 +)		
	In-network Providers	Out-of-network Providers*	In-network Providers	Out-of-network Providers*	
Deductibles*	\$1,400	\$2,550	\$2 <i>,</i> 800	\$5,100	
Coinsurance*	20%	40%	20%	40%	
Maximum Out-of- Pocket*	\$4,000	\$8,000	\$6,400	\$16,000	

*After deductible met, plan pays 80% of contracted rate for services with network providers and 60% of allowance for most services with out-ofnetwork providers. Review plan booklet for coinsurance variations. Only allowed amounts for services with out-of-network providers applies to annual deductible and maximum out of pocket.

Open Enrollment Oct. 29 – Nov. 24, 2020



PPOs – Buyer Beware

Services with out-of-network, non-preferred providers can put you at risk of high out-of-pocket costs

- Out-of-network claims paid by PPO plans based on an allowance, not billed charges. Billed charges can be much higher than plan allowance for out-of-network services.
- Amounts in excess of plan allowance do not apply to deductibles or out-of-pocket maximums.
- After deductible is met, plan member is responsible for the balance after plan payment (coinsurance plus amount in excess of plan allowance).
- If maximum out-of-pocket for out-of-network services is met, plan member will still be responsible for amounts in excess of allowance.
- Out-of-network facility claims have caps on plan payment.*

Services with day or visit limit (e.g. acupuncture) accrue to the limit even if the deductible has not been met.



*Caps should not apply if you use an out-of-network emergency room and hospital in an emergency, when you had no choice of facilities or providers. Call your plan if you encounter billing issues related to emergency services.

Understanding Balance Billing PPO Claim Processing Example

Example assumes:

- Annual deductible met
- 70% benefit level for PPO providers (30% coinsurance)
- 50% benefit level for out-ofnetwork providers (50% coinsurance)

Note: In addition to different benefit levels for PPO and out-of-network benefits, PPOs usually have separate deductibles and separate maximum out-ofpockets for services with PPO and out-of-network providers. (UC CORE plan is an exception to this.)

Office Visit	In-network Preferred Provider	Out-of- network Provider
Amount Billed	\$250	\$250
Contracted Rate	\$100	N/A
Allowed Amount	\$100	\$100
Plan Pays	\$70	\$50
Provider Write-off (Insurance Adjustment)	\$150	N/A
Member Coinsurance (applied to max OOP)	\$30	\$50
Member may be billed	\$30	\$200

Open Enrollment Oct. 29 – Nov. 24, 2020



Non-Medicare

PPOs - UC Care, Health Savings Plan, CORE

Getting care or advice outside your doctor's office

- Telehealth LiveHealth Online*
 - Available 24/7 via app or website livehealthonline.com
 - 1-844-784-8409, 7 am 11 pm any time zone
 - Medical, Psychology, Psychiatry Board Certified Providers in all 50 states

Plan	Medical visit cost	Psychology* visit cost	Psychiatry* visit cost
UC Care	• First consult is free. \$20 per visit thereafter. To receive your free consult, please call Anthem Health Guide toll-free at 1-844-437-0486 for more information.	 First three consultations are free. receive your free consults, please of toll-free at 1-844-437-0486 for mo 	all Anthem Health Guide
Health Savings Plan	 \$59 until deductible is met. Once deductible is met, you pay 20%. 	 \$95 for a psychologist*or \$80 for a therapist until deductible is met. After your plan deductible is met, you pay 20%. 	 \$175 for the initial evaluation, then \$75 for each follow-up visit until deductible is met. After your plan deductible is met, you pay 20%.
CORE	 \$59 until deductible is met. Once deductible is met, you pay 20%. 	 \$95 for a psychologist* or \$80 for a therapist until deductible is met. After your plan deductible is met, you pay 20%. 	 \$175 for the initial evaluation, then \$75 for each follow-up visit until deductible is met. After your plan deductible is met, you pay 20%.

Anthem 24/7 NurseLine - Consult with a registered nurse around the clock to discuss your health concerns. 1-800-977-0027





UNIVERSITY OF PPO Plans CALIFORNIA



n

*In response

to the

Non-Medicare PPOS - UC Care, Health Savings Plan, CORE Plan App, Wellness Programs, Special Offers



- Sydney Health replacing Engage Elite Plus app
 - Find doctors near you, review benefits and claims, track progress toward health goals, and more. Download the Sydney Health app to get started. Plan ID required to register.
- Wellness Programs and Special Offers discounts on healthy lifestyle programs and products including:

Garmin, Fitbit, 23andMe, Puritan Pride vitamins and minerals, BREVENA skincare, glasses.com, 1-800-CONTACTS, gym memberships through Active&Fit Direct and Global Fit, LivingWell, and more.

Plan members: log in to Anthem member portal and select "Discounts" to find more information and links to discount programs and special offers.



Special offers and discounts are not UC-negotiated benefits and are subject to change at any time.

Open Enrollment Oct. 29 - Nov. 24, 2020 28

Open Enrollment Oct. 29 – Nov. 24, 2020

Comparing UC Care PPO and CORE

For those NOT using UC Select providers or are living outside of CA, inside US^

	Monthly Premiums 100% Eligibility	Annual Deductible PPO Network	Annual Deductible <i>Out-of-</i> <i>Network*</i>	Coinsurance after deductible for PPO Network	Coinsurance after deductible for <i>Out-of-</i> <i>Network</i> *	Maximum Out- of-Pocket (Max OOP) PPO Tier~	Maximum Out-of- Pocket (Max OOP) <i>Out-of-</i> <i>Network Tier*</i>
UC Care~	\$311.17 S \$560.10 SC \$700.38 SA \$949.31 SAC (see key below)	\$500 individual/ \$1,000 family	\$750* individual/ \$1,750 family	30%^	50%*	\$7,600 individual/ \$14,200 family	\$9,600* individual/ \$20,200* family
CORE	\$0	\$3000 individual (combines in- and out-of-network*/ no family deductible)		_)% t-of-network*)	\$12,70	individual D0 family nd out-of-network*)

This slide does <u>not</u> include costs under the UC Care <u>Select network</u>. There are copays for services on the Select network but not all UC Care members can take advantage of that level of coverage. You should consider your own circumstances when comparing plans. Review UC Care coverage on <u>slide 21</u>. See premiums (full eligibility) <u>here</u>.

On both plans, amounts paid towards deductibles and coinsurance is included in the maximum out-of-pocket costs.

Both UC Care and CORE partner with UC Medicare PPO for retirees with split families (see slide 30).

~On UC Care, Rx copays do not apply to deductible but do apply to PPO maximum out-of-pocket.

^This slide shows the UC Care 30% coinsurance for PPO providers *in the US.* The coinsurance for services outside the US continues to be 20% after the deductible is met.

*You can be subject to balance billing for services with out-of-network providers. See <u>slides 25-26</u>.

Key : S = Self; SC = Self+child(ren); SA = Self+Adult; SAC = Self+family (self, adult, child(ren))



2021 Split Family Partner Plans* Medicare Transition Plans

Open Enrollment Oct. 29 – Nov. 24, 2020

<u>Non-Medicare^</u>	<u>Medicare</u> ~
UC Blue & Gold	UC Medicare Choice/UHC
Kaiser	Kaiser Senior Advantage
UC Care PPO	UC Medicare PPO/Anthem
Core	UC Medicare PPO/Anthem
Health Savings Plan*	HSP members can select any UC Medicare plan when aging into Medicare

*The Health Savings Plan is not available to "split" families. The Health Savings Plan requires that no one under the coverage have Medicare. High Option is also not available to split families or as a transition plan, except for Health Savings Plan members who become Medicare-eligible. Other retirees with Medicare can select High Option during open enrollment once everyone under the coverage has Medicare.

^If you are in a non-Medicare plan and become Medicare-eligible during the year, you will transition to the Medicare partner plan (outside of Open Enrollment).

~Retirees outside of CA who transition to Medicare may transition to <u>Via Benefits</u> if there is no one left without Medicare on the coverage. A separate presentation is available covering UC Medicare plans. Those transitioning to Medicare in the next year are encouraged to review it.

Dental, Vision, Legal

Delta Dental PPO 1-800-777-5854

•Crown and prosthodontic replacement change - every 7 years (from 5)

- •Reduction in exams to 2 per year (routine and non-routine combined)
- DeltaCare USA (DHMO) 1-800-422-4234
 - •Crown fusion copay increase from \$50 to \$150 (correcting previous plan booklet error)

VSP Open for Enrollment for 2021

- Participating Walmart Vision Centers added to network
- Network change from VSP Choice to Advantage
- Look for mailer from VSP or call 1-866-240-8344
- Retirees enroll with, and pay premium in full to, VSP
- <u>https://www.vsp.com/go/ucretirees</u>

ARAG Legal Open for Enrollment for 2021

New Diversity and Inclusion services including domestic partnership agreements, funeral directives, hospital visitation rights, and gender identifier changes on government issued documents.



Open Enrollment Oct. 29 – Nov. 24, 2020

Don't Want to Make Changes?

You've Reviewed:
✓ Open Enrollment Mailer
✓ Open Enrollment Website
✓ Changes for Next Year
✓ Your Plan Options
✓ Your Plan Premiums
And you don't want to make any changes:
You do not have to do anything.

If you do not make changes, your current retiree plan enrollments will continue next year subject to 2021 premiums and benefit changes outlined in the open enrollment materials.



Whether you make changes or remain with your current plans, wishing you the best of health, luck and happiness in 2021!

Update Your Records with UC

The Retirement Administration Service Center (RASC) Maintains Your:

- Contact Information
- •Plan Enrollments
- Power of Attorney
- Direct Deposit Information

Update your address, email and phone numbers on UCRAYS <u>https://retirementatyourservice.ucop.edu/UCRAYS/</u>

Important forms are found here,

https://ucnet.universityofcalifornia.edu/forms/number.html

- UBEN 100: Retiree Continuation, Enrollment or Change Form
- UBEN 109: Notice to UC of COBRA Qualifying Event
- UBEN 131: UC HR Address Change
- UCRS 160: Direct Deposit for Monthly Benefit form





Resources and Links

Open Enrollment Website: <u>http://ucnet.universityofcalifornia.edu/oe</u> or <u>ucal.us/oe</u>

Emergency resources from UC Plans for wildfires & pandemic <u>https://ucnet.universityofcalifornia.edu/compensation-and-benefits/emergency-</u> <u>resources.html</u>

Health plans COVID-19 response <u>https://ucnet.universityofcalifornia.edu/news/2020/03/your-health-plans-response-to-</u> <u>the-coronavirus-covid-19-outbreak.html</u>

Flu vaccine information/UC plans https://ucnet.universityofcalifornia.edu/news/2020/10/time-for-your-flu-shot.html

Flu vaccine requirements for working on campus <u>https://ucnet.universityofcalifornia.edu/news/2020/08/new-flu-vaccine-requirement-for-uc-student-faculty-and-staff.html</u>

UC Health Plan Booklets available year-round: <u>http://ucnet.universityofcalifornia.edu/forms/category.html</u> (expand link for plan booklets)

Plan Contacts http://ucnet.universityofcalifornia.edu/contacts/plan-contacts.html

Plan Contacts	Phone Numbers
Anthem Blue Cross	1-844-437-0486
IngenioRx (Anthem pharmacy manager)	1-844-437-0486
Anthem Behavioral Health Resource Center	1-844-792-5141
Blue Card Global Core <u>https://www.bcbsglobalcore.com/</u> https://www.ucppoplans.com/search/node/international	See links for Anthem plans foreign travel coverage and claims
<u>Health Net – UC Blue & Gold</u>	1-800-539-4072
CVS Mailorder Pharmacy/Health Net	1-888-624-1139
Managed Health Network (Health Net members)	1-800-663-9355
American Specialty Health for acupuncture/chiropractic (Health Net and Kaiser/non-Medicare)	1-800-678-9133
<u>Kaiser</u>	1-800-464-4000
Optum Behavioral Health (Kaiser non-Medicare members)	1-888-440-8225
Kaiser Senior Advantage	1-800-443-0815
UnitedHealthcare - UC Medicare Choice	1-866-887-9533



Contacts for Retirees

Helpful Contacts	Phone Numbers
UC Retirement Administration Service Center (RASC) – Maintains retiree accounts and processes enrollments and plan changes for retirees	1-800-888-8267
Emeriti/Retirees Relations Center	310-825-7456
Medicare	1-800-MEDICARE (1-800-633-4227)
Medicare Coordination of Benefits (Call if Medicare is not paying as primary)	1-855-798-2627
Social Security Administration	1-800-772-1213
Fidelity Retirement Services	1-866-682-7787
UCLA Health Care Facilitator –Assists employees and retirees with medical, dental and vision plan issues	1-310-794-3057 retirees@chr.ucla.edu



Virtual Benefits Fair Navigation

- Step 1: Go to <u>ucal.us/benefitsfair</u>
- Step 2: Register with name and email to enter fair. Confirm email in popup box upon entry. Then click "Join the Event" banner.

Welcome to the UC Benefits Fair!

Open until 5pm, November 24

You can now:





Virtual Benefits Fair Navigation

• Once inside the fair, click on the second banner from left, **All About Open Enrollment**, to find plan comparison charts, and more.









Open Enrollment Oct. 29 – Nov. 24, 2020

Virtual Benefits Fair Navigation

• Once inside the fair, click on **Benefits Exhibition Hall** banner on the right to find health plan booths





Virtual Benefits Fair Health Plan Booths Navigation

