—Agenda—

- Your Options
- Making Changes
- Medicare and UC
- Plan Overviews
- Conclusion
Your Options
—Your options—

- UC offers a menu of medical plan options
  - HMO plans
  - PPO plans
- Availability determined by zip code
  - Medical Plan Chooser
  - ucnet.universityofcalifornia.edu
—UC medical plans—

◆ HMOs
  ◇ Health Net Blue & Gold/ Seniority Plus
  ◇ Kaiser Permanente/ Senior Advantage
  ◇ Western Health Advantage

◆ PPOs
  ◇ Core Medical
  ◇ UC Care PPO
  ◇ Blue Shield Medicare PPO
  ◇ High Option
Medical plan premiums

- 100% of UC contribution: see rate chart
- Graduated Eligibility:
  - Log on to At Your Service Online (password)
  - Or, use Medical Plan Chooser (no password) at ucnet.universityofcalifornia.edu
  - Or, call Customer Service at 1-800-888-UCOP
- % of UC contribution is printed on address label

85
IMA RETIREE
1 SHIELDS AVE
DAVIS CA 95616-9999
Medical plan premiums

- Retirees age 65+ not eligible for Medicare
  - Rates linked to employee rates
- Medicare Part B reimbursement
  - Will you have a net premium to pay?
About UC medical plans

- Preventive care generally provided at no cost
- Medical benefits often separate from Mental Health benefits and Pharmacy benefits
- For details, see Plan Booklets (Evidence of Coverage)
  
  http://ucnet.universityofcalifornia.edu
—Making Changes—
—Making changes—

- Open Enrollment
  - Changes effective January 1, 2015
- Move outside plan service area
- Adding newly eligible family member
- No pre-existing conditions exclusions
Open Enrollment for 2015—

- Changes made online: ucnet.universityofcalifornia.edu
- No online access? Locked out of the website? Call the Retirement Administration Service Center at 1-800-888-UCOP
- Additional paperwork required if Medicare-eligible
- Remember to get a Confirmation Number
If you like what you have…do nothing

This includes WHA members who will be 65 next year
—Medicare and UC—
Medicare and UC

- Medicare is the federal health insurance program for those over 65 and some disabled
  - **Part A:** Hospital insurance
    - Premium-free for most
  - **Part B:** Medical insurance
    - $104.90/month in 2015
    - Costs more if MAGI >$85K/year ($170K for couples)
—UC’s Medicare requirements—

◆ Retirees and their family members must enroll in Medicare Part B:
  ◊ If they are enrolled in medical insurance
  ◊ If they are eligible for Part A free of charge
  ◊ Failure to comply may result in the loss of UC-sponsored medical coverage
  ◊ Exceptions:
    ◆ Retirees who reside outside of the U.S.
    ◆ Those who retired prior to July 1, 1991
—Medicare and HMOs—

✦ Medicare Advantage plans

◇ If you have Medicare A & B, and you are enrolled in an HMO, you must sign over your Medicare benefits to the HMO (by form)

✦ Medicare pays a flat monthly fee to the insurance company

✦ Medicare cannot be used separately from the Medicare Advantage plan
1. Medicare primary
2. Blue Shield plans are secondary
   - Medicare-certified providers must be used
     - ~96% of U.S. physicians participate in Medicare
     - Ask if accepting new Medicare patients
     - Providers that do not accept “assignment” can charge up to 15% more
—Medicare Part D—

- Subsidizes medical plan premiums
- UC Part D plans: no “doughnut hole”
- **Form** required if choosing a new plan
More on Part D

◆ Duplicate Part D coverage not allowed

◆ Enrollment in a non-UC Part D plan may result in loss of coverage

◊ Exception: Blue Shield Medicare PPO without Rx
## Mixed Medicare families

<table>
<thead>
<tr>
<th>Non-Medicare family members</th>
<th>Family members with Medicare</th>
</tr>
</thead>
<tbody>
<tr>
<td>Core Medical</td>
<td>Blue Shield Medicare PPO</td>
</tr>
<tr>
<td>Health Net Blue &amp; Gold HMO</td>
<td>Health Net Seniority Plus</td>
</tr>
<tr>
<td>Kaiser Permanente</td>
<td>Kaiser Permanente Senior Advantage</td>
</tr>
<tr>
<td>UC Care PPO</td>
<td>Blue Shield Medicare PPO</td>
</tr>
</tbody>
</table>
Medicare retirees outside CA—

OneExchange™

◆ Formerly Extend Health
  ◇ Medicare Exchange
  ◇ Sells local Medicare supplement plans inside U.S.A.
◆ All covered family members must have Medicare
◆ Does not affect Dental/Vision/Legal coverage
UC provides premium support

- Health Reimbursement Account (HRA)
- $3,000 per covered person
- Subject to graduated eligibility

Use HRA money to buy Medi-Gap or Medicare Advantage plans, pay for Medicare Parts B/D
—HMO Plan Overview—
About HMOs

- The insurance company prepays a monthly per capita rate (capitation) to each Medical Group
- Your Primary Medical Group is responsible for your care for that month
- You choose a Primary Care Physician (PCP) who acts as your gatekeeper to care through the Medical Group
  - Exception: emergencies covered anywhere; call 911 or go to the nearest hospital. Let PCP know ASAP.
  - PCP must be within 30 miles of home
  - To change PCPs, call plan
—HMO coverage: Copayments—

- Physician office visit: $20
- ER: $75 (Medicare: $65)
  - Emergencies covered worldwide
- Outpatient surgery: $100
- Inpatient hospitalization: $250
- Behavioral health outpatient: $20
- Behavioral health inpatient: $250
HMO behavioral health

- UC has “carved out” behavioral services for most of our non-Medicare plans to Optum (United Behavioral Health)

- Separate behavioral health plan manages care

- Call Optum directly for mental health/ substance abuse treatment
—HMO behavioral health—

<table>
<thead>
<tr>
<th>Medical Plan</th>
<th>Behavioral Health Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Net Blue &amp; Gold</td>
<td>Optum</td>
</tr>
<tr>
<td>Health Net Seniority Plus</td>
<td>Managed Health Network</td>
</tr>
<tr>
<td></td>
<td>Exception: Sutter medical groups</td>
</tr>
<tr>
<td>Kaiser Permanente</td>
<td>Go through PCP and/or Optum</td>
</tr>
<tr>
<td>Kaiser Senior Advantage</td>
<td>Go through PCP</td>
</tr>
<tr>
<td>Western Health Advantage</td>
<td>Optum</td>
</tr>
</tbody>
</table>
### Non-Medicare HMO $Rx$

<table>
<thead>
<tr>
<th>$Rx$ 30-day supplies</th>
<th>Health Net Blue &amp; Gold</th>
<th>Kaiser Permanente</th>
<th>WHA</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tier 1</strong> (generic, formulary)</td>
<td>$5</td>
<td>$5</td>
<td>$5</td>
</tr>
<tr>
<td><strong>Tier 2</strong> (brand name, formulary)</td>
<td>$25</td>
<td>$25</td>
<td>$25</td>
</tr>
<tr>
<td><strong>Tier 3</strong> (non-formulary)</td>
<td>$40</td>
<td>Not covered</td>
<td>$40</td>
</tr>
</tbody>
</table>

Some meds require prior authorization
HMO Rx 90-day supplies for 2 copays—

◆ UC pharmacies
  ◇ Does not apply to Kaiser

◆ Mail-order
  ◇ Kaiser: 100-day supply

◆ New for 2015: some local retail pharmacies
  ◇ Health Net Blue & Gold: CVS
  ◇ WHA: Costco, CVS, Walgreens, and others
### HMO copayment maximums

<table>
<thead>
<tr>
<th>Health Net Blue &amp; Gold</th>
<th>Kaiser Permanente*</th>
<th>WHA</th>
</tr>
</thead>
<tbody>
<tr>
<td>$1,000/person</td>
<td>$1,500/person</td>
<td>$1,000/person</td>
</tr>
<tr>
<td>$3,000/family</td>
<td>$3,000/family</td>
<td>$3,000/family</td>
</tr>
</tbody>
</table>

*Kaiser maximum does not include Optum copayments*
### HMO Rx: Medicare Part D

<table>
<thead>
<tr>
<th>Rx 30-day supplies</th>
<th>Health Net Seniority Plus</th>
<th>Kaiser Senior Advantage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tier 1</strong>&lt;br&gt;(generic, formulary)</td>
<td>$5</td>
<td>$5</td>
</tr>
<tr>
<td><strong>Tier 2</strong>&lt;br&gt;(brand name, formulary)</td>
<td>$25</td>
<td>$25</td>
</tr>
<tr>
<td><strong>Tier 3</strong>&lt;br&gt;(non-formulary)</td>
<td>$40</td>
<td>Not covered</td>
</tr>
<tr>
<td><strong>Tier 4 or 5</strong>&lt;br&gt;(specialty/self-injectable)</td>
<td>25%</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Rx Out-of-Pocket Limit</strong></td>
<td>$2,000</td>
<td>$4,700</td>
</tr>
</tbody>
</table>
HMO $R_x$: Part D 90-day supplies

- Retail pharmacies: 3 copayments
- UC pharmacies: 2 copayments
  - Does not apply to Kaiser
- Mail order: 2 copayments
  - Kaiser: 100-day supplies
---Medicare HMO copay limits---

<table>
<thead>
<tr>
<th>Out-of-pocket maximum*</th>
<th>Includes medical &amp; mental health</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Net Seniority Plus</td>
<td>Kaiser Permanente Senior Advantage</td>
</tr>
<tr>
<td>$1,500/person</td>
<td>$1,500/person</td>
</tr>
<tr>
<td>$3,000/family</td>
<td></td>
</tr>
</tbody>
</table>

* Maximums do not include Rx copayments
—Health Net Blue & Gold/Seniority Plus—

- Large provider network
- Available in most of urban California
- Hearing aids: 2 aids every 36 months; $2,000 benefit max
- WellRewards discount programs
—Health Net Blue & Gold/Seniority Plus—

◆ Disease Management programs

◆ Decision Power:
  ◇ Track your health issues/knowledge base
  ◇ Health coach (nurse, respiratory therapist, dietician)
  ◇ 24-hour nurse line, case managers

◆ Allergy shots: $20

◆ Pharmacy Benefit Manager: CVS/Caremark
—Health Net Blue & Gold/Seniority Plus—

◆ Telehealth consults 24/7 through MDLive
  ◊ No copay virtual urgent care visit; less than 1 hour wait
◆ Welvie surgery risk analysis
  ◊ $25 Amazon gift card for participation
◆ Omada Health: a free, online diabetes prevention lifestyle program for the pre-diabetic
◆ Be sure to specify a PCP when choosing either plan
—Health Net Blue & Gold vs. Seniority Plus—

Health Net Blue & Gold

◆ Does not offer local Sutter groups
◆ $75 ER copay
◆ $1,000 per person Out of Pocket Limit for medical, mental health and $R_x$
◆ 90-day supplies @ local CVS pharmacies

Seniority Plus

◆ Does offer Sutter groups
◆ $65 ER copay
◆ $1,500 per person OOP Limit for medical & mental health
◆ $2,000 $R_x$ OOP Limit
◆ $R_x$ specialty/self-injectables: 25% coinsurance
—Health Net Blue & Gold vs. Seniority Plus—

Health Net Blue & Gold
◆ Acupuncture/chiropractic 24 visit limit
◆ Optum

Seniority Plus
◆ Chiropractic (20 visit limit)
◆ Eye glasses: $100 frame allowance; lenses covered in full; every 24 months
◆ SilverSneakers fitness clubs
◆ Mental health: MHN or Sutter
—Kaiser Permanente/Senior Advantage—

◆ Kaiser Foundation Health Plan contracts with one large group, the Permanente Medical Group
◆ Available in most of urban California
◆ Advanced electronic medical records and online tools
◆ Clinics tend to offer pharmacies, imaging, laboratories, urgent care all at one location
Classes, pamphlets, videos on a wide variety of health topics

Disease Management programs

Rx: 30-/60-/100-day supplies at 1x/2x/3x copays
  ◊ Must use Kaiser pharmacies
  ◊ Mail order: 100-day supply for 2x copays
Kaiser Permanente vs. Senior Advantage

Kaiser Permanente

◆ $1,500 out of pocket maximum includes $x
◆ Hearing aids: $1,000 allowance per aid per ear, every 36 months
◆ Allergy shots: $5
◆ + Optum
◆ Acupuncture/chiropractic 24 visit limit
◆ No cost women’s preventive cancer risk reducing medications

Senior Advantage

◆ Rx Out of Pocket Max: $4,700
◆ Hearing aids: $2,500 allowance per aid per ear, every 36 months
◆ $150 allowance for eye glass frames and lenses every 24 months
◆ Chiropractic
◆ Allergy shots: $3
Western Health Advantage

- Local health plan, only available in a limited number of counties
- Owned in part by UC Davis Health System, Mercy and NorthBay hospitals
- Advantage Referral Program
—Western Health Advantage—

- Travel insurance: Assist America
- Pharmacy Benefit Manager: Express Scripts
- Allergy shots: $5
- Be sure to specify a PCP when choosing this plan
—New for WHA—

◆ Chiropractic/acupuncture
  ◊ 24 visits/person/year combined
  ◊ $20 copayment; self-refer to Landmark

◆ Rx 90-day supplies @ local Costco, CVS, Walgreens, and other pharmacies for 2 copayments

◆ Rx counts toward out-of-pocket maximum

◆ Service area expands to Marin, Napa, Sonoma counties
—Blue Shield Plans—
◆ Not-for-profit insurance company

◆ “2% pledge” limits annual net income to 2% of revenue

◆ Large Preferred Provider network:
  ◊ In California: 70,000+ Blue Shield network providers including 370+ network hospitals
  ◊ More than 97% of hospitals and 92% of physicians across the country are Blue Cross/Blue Shield (BlueCard) providers
UC-dedicated customer service
Discount access to health & wellness
Disease Management programs
Variety of online tools & mobile website
  Treatment/Rx cost estimator
Pharmacy Benefit Manager: Blue Shield
  Mail order service called PrimeMail
Core Medical
Custom plan for UC

Family members with Medicare will have Blue Shield Medicare PPO

No cost preventive care

For everything else: “Catastrophic” coverage
Core coverage

Blue Shield Preferred Providers

1. $3,000 deductible
   - Per person per year
2. 20% coinsurance
3. $6,350 Out-of-Pocket Limit
   - Per person, per year
   - $12,700 per family

Out-of-network providers

1. $3,000 deductible
   - Per person, per year
2. 20% coinsurance
3. $6,350 Out-of-Pocket Limit
   - Per person, per year
   - $12,700 per family

◇ Balance billing
### Core Coverage

<table>
<thead>
<tr>
<th>Self Only Coverage</th>
<th>Preferred Providers</th>
<th>Out-of-Network Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>1: Deductible</td>
<td>$3,000</td>
<td>$3,000</td>
</tr>
<tr>
<td>2: Coinsurance</td>
<td>20%</td>
<td>20% + balance</td>
</tr>
<tr>
<td>3: Out-of-Pocket Limit</td>
<td>$6,350</td>
<td>$6,350 + balance</td>
</tr>
</tbody>
</table>
Core $R_x$ —

- No flat copays; covered like medical
- Drug expenses apply toward your deductible/OOP Limit
Core mental health

- Behavioral health covered the same way medical and pharmacy are covered
  - Coverage not “carved out”
—New for Core Medical—

- Teladoc 24/7 telemedicine
  - $40 copayment until deductible met; then 20%

- Chiropractic/acupuncture 24 visit limit
  - 2014: $500 limit

- Over-the-counter nicotine replacement products
  - No copay; prescription required

- No cost women’s preventive cancer risk reducing medications
  - Tamoxifen, Raloxifene, etc.

- Oral anti-cancer drugs: coinsurance limited to $200 per 30-day supply
  - After deductible is met
—Advantages of Core 😊—

◆ No monthly premium
◆ No PCP, self-refer to specialists
◆ Large, national preferred provider network
◆ Out-of-Network/world-wide coverage
—Limits of Core 😞—

◆ **High** deductible per person & per family

◆ **High** OOP Limit per person & per family

◆ No coverage for hearing aids

◆ Outpatient surgery at out-of-network ambulatory surgical centers limited to $350

◆ Chiropractic/acupuncture 24 visit limit
—Core: Family members w/ Medicare—

- Partner plan: Blue Shield Medicare PPO
- Retirees who enroll in Core won’t see “Blue Shield Medicare PPO” as an option on At Your Service Online
—UC Care PPO—
Custom plan for UC

Like a standard PPO, but offers access to a special UC Select provider network for low copays
—UC Care PPO coverage—

◆ Blue Shield Preferred Providers
  1. $250 deductible
     ◆ Per person per year
     ◆ $750 for 3 or more
  2. 20% coinsurance
  3. $3,000 Out-of-Pocket Limit
     ◆ Per person, per year
     ◆ $9,000 for 3 or more

◆ Out-of-Network providers
  1. $500 deductible
     ◆ Per person, per year
     ◆ $1,500 for 3 or more
  2. 50% coinsurance
  3. $5,000 Out-of-Pocket Limit
     ◆ Per person, per year
     ◆ $15,000 for 3 or more
     ◆ Balance billing
UC Care PPO: UC Select providers

- All UC medical centers and select other providers located near UC campuses
- Certain services for flat copayments:
  - Physician office visit: $20
  - ER (any ER, not just UC Select): $200
  - Outpatient surgery: $100
  - Inpatient hospitalization: $250

- Copayments for UC Select providers apply to the Blue Shield Preferred Out-of-Pocket Limit
# UC Care PPO coverage

<table>
<thead>
<tr>
<th>Self only coverage</th>
<th>UC Select</th>
<th>Preferred Providers</th>
<th>Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>1: Deductible</td>
<td>None</td>
<td>$250</td>
<td>$500</td>
</tr>
<tr>
<td>2: Coinsurance</td>
<td>Flat copayments</td>
<td>20%</td>
<td>50% + balance</td>
</tr>
<tr>
<td>3: Out-of-Pocket Limit</td>
<td>$1,500</td>
<td>$3,000</td>
<td>$5,000 + balance</td>
</tr>
</tbody>
</table>
— UC Care PPO Rx —

1. **Generic:** $5/30-day supply
2. **Brand name:** $25/30-day supply
3. **Non-formulary:** $40/30-day supply
   - 90-day supplies available for 2 copays:
     - UC pharmacies
     - Costco, Safeway, Walgreens, and others
     - Mail Order through PrimeMail
4. **Specialty Rx:** 30% up to $150/script
   - Rx counts toward new, separate out-of-pocket maximum ($3,600/person or $4,200 per family)
Coverage “carved out” to Optum (United Behavioral Health)

- Call Optum directly for service
- www.liveandworkwell.com
  - Provider search: use Access Code 11280
- Optum providers are preferred providers

- Outpatient visits 1-3, no copay; additional visits $20
- Prior authorization required for “non-routine” treatments
  - Outpatient therapy sessions longer than 50 minutes
—New for UC Care PPO—

- ER copayment of $200 includes physician fees
  - 2014: $100 + 20%

- Ambulance copayment $200
  - 2014: 20%

- Teladoc 24/7 telemedicine
  - $20 copayment

- New UC Select hospitals
  - Marshall Medical Center
  - Lodi Memorial Hospital
—New for UC Care PPO (continued)—

- \( R_x \) 90-day supplies @ local Costco, Safeway, Walgreens, and other pharmacies for 2 copayments
- \( R_x \) counts toward new, separate out-of-pocket maximum ($3,600/person or $4,200 per family)
- Over-the-counter nicotine replacement products
  - No copay; prescription required
- No cost women’s preventive cancer risk reducing medications
  - Tamoxifen, Raloxifene, etc.
—Advantages of UC Care PPO 😊—

◆ Care from UC Select providers for low copays
◆ No PCP, self-refer to medical providers
◆ Large, national preferred provider network
◆ Out-of-network/world-wide coverage
Limits of UC Care PPO 😞

- Many services not available at UC Select level of coverage
- Acupuncture/chiropractic visits limited to 24 visits combined
- Outpatient surgery at out-of-network ambulatory surgical centers limited to $350
- Specialty drugs have especially high copays
—UC Care PPO: Family w/ Medicare—

◆ Partner plan: Blue Shield Medicare PPO

◆ Retirees who enroll in UC Care PPO won’t see “Blue Shield Medicare PPO” as an option on At Your Service Online
—Blue Shield Medicare PPO—
—About Blue Shield Medicare PPO—

- Medicare pays first for covered services
- Blue Shield pays second
- You pay the balance
  - 4% if covered by Medicare (20% of the 20% Medicare didn’t pay)
  - 20% if not covered by Medicare
Blue Shield Medicare PPO coverage

Medicare-covered services
1. Deductible N/A
2. 4% (20% after Medicare pays first)
3. $1,500 Out-of-Pocket Limit
   • Per person, per year

Services not covered by Medicare
1. $100 deductible
   • Per person, per year
2. 20% coinsurance
3. $1,500 Out-of-Pocket Limit
   • Per person, per year
—Blue Shield Medicare PPO coverage—

- Deductible applies only when receiving services not covered by Medicare (acupuncture, hearing aids, etc.)

<table>
<thead>
<tr>
<th>Self only coverage</th>
<th>Medicare Services</th>
<th>Other Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>1: Deductible</td>
<td>None</td>
<td>$100</td>
</tr>
<tr>
<td>2: Coinsurance</td>
<td>20% after Medicare</td>
<td>20%</td>
</tr>
<tr>
<td>3: Out-of-Pocket Limit</td>
<td>$1,500</td>
<td></td>
</tr>
</tbody>
</table>
1. **Generic:** $10/30-day supply
2. **Brand name:** $30/30-day supply
3. **Non-formulary:** $45/30-day supply
   ◇ 90-day supplies available for 2 copays:
     ◆ UC pharmacies
     ◆ Albertsons, CVS, Safeway, and some others
     ◆ Mail Order through PrimeMail
   ◆ Some meds require prior authorization
   ◆ **Out-of-pocket Limit:** $4,700
Behavioral health covered the same way medical is covered

- Coverage not “carved out”

Use Medicare providers

- Exception: MFTs, MFCCs
Adantages of Blue Shield Medicare PPO 😊

- Use any Medicare provider for Medicare-covered services
- Comprehensive, world-wide coverage
- Chiropractic/acupuncture coverage
- Hearing aid coverage at 80%
Limits of Blue Shield Medicare PPO 😞

- Must use Medicare providers for Medicare-covered services
  - Medicare offers few psychiatrists
- Acupuncture visits limited to 24 visits per year
—High Option—
—About High Option—

- For most services, plan pays 100% of balance after Medicare
- $50 annual deductible, 20% coinsurance applies only to services not covered by Medicare
  - Example: Acupuncture
—High Option coverage—

◆ Medicare primary, High Option secondary
◆ Caution: must use Medicare providers

<table>
<thead>
<tr>
<th>Self only coverage</th>
<th>Not covered by Medicare*</th>
</tr>
</thead>
<tbody>
<tr>
<td>1: Deductible</td>
<td>$50</td>
</tr>
<tr>
<td>2: Coinsurance</td>
<td>20%</td>
</tr>
<tr>
<td>3: Out-of-Pocket Limit</td>
<td>$1,050</td>
</tr>
</tbody>
</table>

Examples:
* Acupuncture
* Hearing aids
* MFTs
* Services outside U.S.A.
—High Option behavioral health—

✦ Behavioral health covered the same way medical is covered
  ◇ Coverage not “carved out”

✦ No coinsurance for most services

✦ Use Medicare providers
  ◇ Exception: MFTs, MFCCs
—High Option Rx—

1. **Generic:** $10/30-day supply
2. **Brand name:** $30/30-day supply
3. **Non-formulary:** $45/30-day supply
   
   ◇ 90-day supplies available for 2 copays:
   - UC pharmacies
   - Albertsons, CVS, Safeway, and some others
   - Mail Order through PrimeMail

◆ Some meds require prior authorization

◆ **Out-of-pocket Limit:** $1,000
Advantages of High Option 😊

- Pay **nothing** for most services
- Use any Medicare provider
- Hearing aid coverage at 80%
- Chiropractic/acupuncture coverage
- Lowest $R_x$ Out-of-Pocket Limit ($1,000$)
—Limits of High Option 😞—

- Highest monthly premium (no Part B reimbursement)
- Must use Medicare providers
  - Medicare offers few psychiatrists
- 24-visit annual limit on acupuncture
Conclusion
Choosing a plan

- Every plan has a different drug formulary
- Match your priorities with the services available
- Do a cost/benefit analysis based on plan premiums and your expected medical, behavioral and pharmacy needs
- Review the Evidence of Coverage/Summaries
  - UCnet ➔ Open Enrollment
—Making a change—

- Open Enrollment is online until 5 p.m. on 11/25
  - You can request a form or make changes over the phone by calling 1-800-888-UCOP (8267)
- Remember to get a confirmation number
- Medicare members will have additional paperwork
- Remember, you can always change again during the next Open Enrollment...
Help is available

Health Care Facilitator Program

◆ Guerren Solbach:
  ◇ (530) 752-4264 (Davis)
  ◇ (916) 734-8880 (Sacramento)

◆ Erika Castillo:
  ◇ (530) 752-7840 (Davis)
  ◇ (916) 734-4341 (Sacramento)

http://www.hr.ucdavis.edu/hcf
2015 Health Benefits Open Enrollment
OCT. 30 – NOV. 25, 2014
UNIVERSITY OF CALIFORNIA

UC Retiree Medical Plans
—Presented by Guerren Solbach—

UC DAVIS
HEALTH CARE FACILITATOR PROGRAM