

Family Changes

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Families can change in many ways over the years through marriage or divorce, birth or death, to name a few. When you add a new member to your family, you'll want to make sure you enroll the person in all the benefits for which he or she is eligible. And if a family member loses eligibility, you'll need to de-enroll this person from your benefits.

Here's a list of the family changes that warrant a review of your benefits:

- Marriage or divorce
- Establishing or ending a domestic partnership
- Adding a new child to your family
- Legal separation, annulment
- Child or grandchild's loss of eligibility for coverage
- Death of an eligible family member

This fact sheet covers benefits eligibility for family members, and how to enroll and de-enroll a family member in UC-sponsored benefits. It also includes suggestions for other steps you might wish to take after a family change, such as updating your beneficiaries.

Got questions?

If you still have questions after reviewing the information here, check out UCnet (ucnet.universityofcalifornia.edu). You'll find general information, UC publications and forms, and details on benefit plans. To review the specific benefits you're enrolled in, select "AYS Online," log on, and then choose "Current Enrollments" under the "Health and Welfare" option. You can also contact your local Benefits Office for help.

When to Add a New Family Member to Your Benefits

BENEFITS WITH AN ENROLLMENT DEADLINE

For most benefits, there's a 31-day period in which you may enroll new family members, enroll yourself if you're not enrolled already, or make other changes. This period begins the date your new family member becomes eligible for enrollment in your UC-sponsored benefits. It's known as the Period of Initial Eligibility, or PIE. The first day of eligibility varies for different new family members, as shown in the chart below.

WHEN NEW FAMILY MEMBERS BECOME ELIGIBLE

New family member	Must enroll in benefits within the 31-day PIE that begins on the:
Spouse	Date of marriage
Domestic partner	Date partner meets all eligibility requirements
Domestic partner's child or grandchild	Date child meets all eligibility requirements*
Newborn child	Child's date of birth
Adopted child	The date the child is placed for adoption, or the date your spouse or domestic partner has the legal right to control the child's health care — whichever is later. Or when the adoption is final, if you didn't enroll the child before then.
Stepchild, grandchild or legal ward	Date the child meets all eligibility requirements

* to enroll a domestic partner's child or grandchild, the partner must also meet all eligibility requirements, even if the partner won't be enrolled in benefits

IF YOU MISS THE ENROLLMENT DEADLINE

For medical plans, if you do not enroll during your PIE, you may enroll later, but with a 90-day waiting period before you and/or your family member are covered. You may also enroll during Open Enrollment, which is usually held in November, with coverage beginning the following January 1.

For the other plans, you may need to submit a statement of health, with no guarantee that the insurance carrier will approve your application. That's why it's best to enroll during the PIE.

IF YOU LOSE OTHER COVERAGE

If you don't enroll yourself or your eligible family member in UC-sponsored medical, dental, vision or legal coverage because you have other insurance, and you lose the other insurance involuntarily, you will have a new 31-day PIE that begins the date the other coverage was lost. You'll need to submit proof that the other coverage was lost.

If you involuntarily lose coverage provided by Medicaid or the State Children's Health Initiative Program (CHIP), the PIE for enrolling is extended to 60 days.

BENEFITS WITHOUT AN ENROLLMENT DEADLINE

You may enroll newly eligible family members in Accidental Death and Dismemberment, and Automobile/Homeowner/Renter Insurance at any time. If you're not enrolled in Bright Horizons Care Advantage, you may enroll at any time.

You may also enroll eligible children in Dependent Life Insurance at any time during the year without a statement of health or evidence of insurability.

You don't have the option to make changes to your basic life, Basic Disability or Voluntary Disability coverage as the result of a family change.

How You Can Change Your Benefits When a Family Member Becomes Eligible

Benefit	What you can do	When coverage begins
Medical, Dental, Vision	<p>If you're enrolled, you may add your newly eligible family member to your current plans. At the time you enroll the new family member, you may also change to a different medical plan for which you're eligible. However, if you are enrolled in a Health FSA, you may not enroll in the UC Health Savings Plan.</p> <p>If you're not enrolled in medical, dental or vision plans, you and your new family members may enroll during your new PIE.</p>	<p>If you enroll during your PIE, on the day your family member becomes eligible.</p> <p>If you change your medical plan, the first of the following month.</p> <p>If you miss your PIE and enroll during Open Enrollment, the following January 1.</p> <p>If you miss your PIE and enroll in medical (but not dental or vision) outside of Open Enrollment, 90 days after your completed enrollment form is received.</p>
Legal	If you're enrolled, you may add newly eligible family members to your plan during your new PIE.	The day your family member becomes eligible.
Basic Life, Basic Disability, Voluntary Disability	You may not change these benefits as a result of a family change.	N/A
Supplemental Life	You may enroll or increase coverage during your PIE; if you want to cancel or decrease coverage, you may do so at any time. Please see the information on updating beneficiaries in "Other Things to Do After a Family Change" on page 9.	The first day of your new PIE.
Basic Dependent Life, Expanded Dependent Life	If you're enrolled in Supplemental Life, you may choose one of these options for your new spouse, domestic partner and/or child(ren). (Dependents can't be enrolled in both plans.) Children can be added at any time without a statement of health submitted to the carrier; adults may be required to submit a statement of health if enrolling outside of the PIE. See ucal.us/lifeinsurance for details, current rates, and restrictions that may apply.	The first day of the new PIE unless your eligible family member is hospitalized on that day; if so, coverage starts the day after release from the hospital. Newborns are covered from the date of birth. Adopted children are covered from the date of adoption.
Accidental Death and Dismemberment	You may enroll yourself and eligible family members at any time.	On the day you enroll your family member, unless the person is hospitalized on that day. Then coverage starts the day after release from the hospital. Newborn children are covered from birth and adopted children from the date of adoption.
Dependent Care Flexible Spending Account (DepCare FSA), Health Care Flexible Spending Account (Health FSA)	You may enroll, de-enroll or change these accounts during your new PIE, as allowed by IRS rules. The changes you make must result from, and be consistent with, your family change and your family members will need to meet IRS rules. See the <i>DepCare FSA</i> or <i>Health FSA Summary Plan Descriptions</i> on UCnet (ucnet.universityofcalifornia.edu/forms/index.html) for details.	The first of the month following your PIE, subject to payroll deadlines.
Tax Savings on Insurance Premiums (TIP)	Your salary reduction amount will adjust automatically if your health plan premium goes up because you added a new family member.	With your first paycheck after the addition of your family member.
Automobile/Homeowner/Renter	You may add licensed drivers in your household—and the personal property of insured family members who live in your household—to your coverage, provided they meet the insurer's underwriting guidelines.	The day you enroll your family member.

How You Can Change Your Benefits When a Family Member Becomes Eligible

Benefit	What you can do	When coverage begins
Bright Horizons Care Advantage	You may register online through Bright Horizons Care Advantage at careadvantage.com/universityofcalifornia , as long as you're eligible for this benefit.	The day you register on Bright Horizons Care Advantage website for Sittercity and/or Years Ahead.
UC Retirement Plan, DC Plan, 403(b) Plan, 457(b) Plan	Adding a new family member doesn't affect your participation in these plans. Please see the information on updating beneficiaries and on Qualified Domestic Relations Orders in "Other Things to Do After a Family Change" on page 9.	N/A

How to Enroll a New Family Member

When you add an eligible new family member, it's your responsibility to take action to enroll that person in your benefits. Here's what you need to do:

FOR MOST BENEFITS:

- **Fill out the UPAY 850 form** (available at ucal.us/UPAY850) and return it to your local Benefits Office. Retirees should use the UBEN 100 form (ucal.us/UBEN100) and return it to the Retirement Administration Service Center.
- **Verify your family member's eligibility.** If you're enrolling a new family member in a UC-sponsored health plan, Secova, Inc., the administrator of the family member eligibility verification process, will send you a request for specific documentation. You'll need to respond by the deadline on the letter, or risk de-enrollment of the new family member. For more information, please see ucal.us/fmv.

FOR AUTOMOBILE/HOMEOWNER/RENTER

- Contact the carrier directly

FOR BRIGHT HORIZONS CARE ADVANTAGE

- Register through the website at careadvantage.com/universityofcalifornia

FOR ALL BENEFITS:

Once you've made the enrollment changes, take a close look at your direct deposit record or pay stub to make sure your choices have been processed as you intended. If questions or problems crop up, contact your local Benefits or Payroll Office right away.

Tip:

Your family members are covered as soon as they become eligible, but it can take as long as 60 days for the insurance carriers to have a record of their enrollment. If your family member needs services during this period, check with your insurance carrier first to see if they have a record of your family member's enrollment. If they don't, ask them to contact your local Benefits Office or the person in your department who handles benefits to help you get services.

How to De-Enroll Family Members

When a family change results in a family member losing eligibility (see chart below), you must de-enroll that person from your UC-sponsored benefits. (You are also required to de-enroll a family member who dies; contact your Benefits Office for assistance.)

Family member	Changes that result in loss of eligibility
Spouse	Annulment of marriage, legal separation or divorce
Domestic partner	Ending of domestic partnership
Domestic partner's child or grandchild	Ending of domestic partnership
Child, grandchild, or stepchild	Child reaches age 26
Legal ward	Child reaches age 18
Adult dependent relative	Relative reaches age 65 (unless he/she is not eligible for Medicare Part A; see below)

When a family member loses eligibility, coverage will end on the last day of the month in which the family change occurs, no matter when you complete the de-enrollment transaction.

Here's what you need to know to de-enroll a family member.

MEDICAL, DENTAL, VISION

For a child, legal ward or adult dependent relative, you don't need to take any action. UC automatically de-enrolls these family members when they reach the age limit. However, you must submit the *Notice of Qualifying Event* form (UBEN 109) so that information about continued coverage can be provided. (See page 8 for more information.) If you submit proof that your child is disabled or that your adult dependent is not eligible for Medicare Part A, he or she will not be de-enrolled.

If you divorce, end your domestic partnership, become legally separated, or your marriage is annulled, you need to de-enroll the person by filling out and completing the UPAY 850 form, available at ucal.us/UPAY850 or the UBEN 100 (ucal.us/UBEN100).

If you're required by legal decree to maintain health coverage for a former spouse or other ineligible family members, you need to make your own arrangements for that coverage. Please see "More Options for Continuing Your Benefits" on page 8.

If you are enrolled in the UC Health Savings Plan and de-enrolling your family member changes your coverage to

How to De-Enroll Family Members

individual coverage, you may need to adjust your Health Savings Account contribution to ensure you do not exceed the IRS contribution limit.

LEGAL, ACCIDENTAL DEATH AND DISMEMBERMENT, LIFE, DEPCARE FSA, HEALTH FSA

Fill out and complete the UPAY 850 form, available at ucal.us/UPAY850 or the UBEN 100 (ucal.us/UBEN100).

TAX SAVINGS ON INSURANCE PREMIUMS (TIP)

You don't need to take any action. If your family change decreases your monthly cost for health coverage, your salary reduction amount will adjust automatically.

AUTO/HOMEOWNER/RENTER'S INSURANCE

Contact the carrier directly to de-enroll an ineligible or deceased family member. You may add or delete family members, or change your coverage, at any time.

More Options for Continuing Benefits

COBRA AND CALCOBRA

If you're enrolled in UC's medical, dental or vision plans and a family change causes one of your family members to lose eligibility for coverage, he or she may be able to continue these benefits under COBRA or CalCOBRA. (Eligibility for the Employee Assistance Program continues under COBRA, as well.)

Generally, if a family member loses coverage because you divorce, legally separate, get an annulment, end a domestic partnership or die or because the dependent loses eligibility (for example, turns age 26), he or she may continue coverage for up to 36 months. The federal COBRA period runs for 18 months; if this coverage period is exhausted, eligible family members may be able to extend UC-sponsored medical coverage (but not dental or vision) under CalCOBRA for up to an additional 18 months. *CalCOBRA is not available for Core, UC Care or UC Health Savings Plan medical plans because it does not apply to self-insured plans.* These options, though, tend to be more expensive than continuation through UC.

If you're enrolled in the Health FSA and a family member loses coverage, the family member may continue coverage under COBRA through December 31 of the current plan year by making after-tax payments.

You may also want to explore your options through the health insurance marketplace established under the Affordable Care Act. In California, you can find information at coveredca.com or call 800-300-1506.

Deadlines: You'll need to apply no later than 60 days from the date your family member loses coverage by reason of a qualifying event, or 60 days from the date you receive notice of your continuation rights—whichever is later. Talk with your local Benefits Office about how to apply, or go to ucal.us/COBRA.

WHAT YOU NEED TO DO

It is up to you to notify your Benefits Office or department of a:

- divorce/legal separation/annulment
- termination of domestic partnership
- dependent's loss of eligibility

Then, to be eligible for COBRA, you or the family member who lost coverage must provide notice within 60 days of the event, either by completing the *Notice to UC of a Qualifying Event* form (UBEN 109, available at ucnet.universityofcalifornia.edu/forms/uben109.pdf), or by providing written notice.

Other Things to Do After a Family Change

CONVERSION TO AN INDIVIDUAL POLICY

If your family member is enrolled in medical, life, AD&D or legal, he or she may convert the UC-sponsored group coverage to individual policies without the need for individual underwriting by the insurer.

Deadline: Your family member will need to apply within 31 days after UC-sponsored or COBRA coverage ends.

MAKING LIFE INSURANCE PORTABLE

If your family member is enrolled in Supplemental Life, he or she may be eligible for the Prudential Portability benefit. This allows your family member to buy a Prudential group term-life policy for similar amounts to what he or she had under the UC-sponsored Supplemental Life, Basic Dependent Life, or Expanded Dependent Life policies.

Deadline: Your family member will need to apply for the portability benefit within 31 days after Supplemental Life insurance ends. For details about how to apply, see the Life Insurance plan booklet on ucal.us/lifeinsurance.

CONFIRM YOUR PERSONAL INFORMATION

Because family changes often prompt other changes, make sure that your Payroll and Benefits Offices have your up-to-date address, phone number, emergency contact information, direct deposit numbers and other personal information. You can make changes online: go to UCnet and sign in to your AYSO Online account.

UPDATE YOUR BENEFICIARIES

A family change is a good time to review the beneficiaries you've named to receive benefits from your UC-sponsored plans in the event of your death. Changes in your family situation don't automatically change your beneficiary choices, and a will does not supersede a beneficiary designation. You'll need to make any changes by filling out a new designation form. For UCRP (which includes the Pension Choice pension benefit), the Capital Accumulation Payment (CAP) and life insurance, go to UCnet and sign in to your AYSO Online account. For Savings Choice, Pension Choice supplemental and Retirement Savings Program accounts (403(b), 457(b) and DC Plans), sign in to your account on ucfocusonyourfuture.com. For the UC Health Savings Plan health savings account, sign in to your account on the Health Equity website (healthequity.com/ed/uc) or contact Health Equity at 855-201-8375.

REVIEW YOUR PRIMARY CARE PHYSICIAN AND DENTIST

If you're enrolling a new family member in an HMO medical plan, you'll need to choose a primary care physician for that family member. And if you're enrolled in the DeltaCare® USA dental plan, you'll need to select a dentist for any new family members. Contact the health or dental plan directly.

QUALIFIED DOMESTIC RELATIONS ORDERS (QDROS)

Generally, University of California Retirement System (UCRS) accumulations and benefits are payable to you or your beneficiaries. They can't be attached by creditors, and the benefits can't be assigned to others.

There's an exception to this, though, if you're divorcing and have a Qualified Domestic Relations Order (QDRO). You, your spouse or former spouse, and your respective attorneys or other authorized legal representatives have the right to obtain information about your benefits and how they are determined. This also applies to the termination of a registered domestic partnership. If you have questions about QDROs and how they might relate to your retirement benefits, please contact the Retirement Service Administration Center's Special Claims Unit, at 800-888-8267.

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

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