Frequently Asked Questions (FAQ)

UC Medicare Coordinator Program (MCP), administered by Via Benefits

What is Via Benefits and how do they operate?

UC sponsors the Medicare Coordinator program (MCP) which was implemented in January 2014 and is administered by Via Benefits with a Health Reimbursement Arrangement (HRA). The MCP is for eligible UC retirees and their spouses or domestic partners, or retirees’ eligible survivors who are living outside of California, excluding the US territories, 65 years old or older and Medicare eligible.

Via Benefits offers a wide range of individual medical plans through different insurance companies on their open marketplace platform for all US states, excluding the US territories. Medicare plans for UC members include Medicare Advantage HMO, Medicare Advantage PPO, Medicare Supplemental (Medigap), and Prescription Drug plans. Members may also choose to enroll in Kaiser Permanente (visit Enrolling in Kaiser for more information) if you live in a Kaiser service area. Via Benefits’ Benefit Advisors can provide an overview of the different types of Medicare plans and assist members in determining which plans are available in your area and the best ones to meet your medical needs and budget.

What are the Medicare Coordinator Program eligibility requirements?

Retiree and all eligible family members must be 65 years old or older, Medicare eligible AND living outside of California, excluding the US territories.

What is a Health Reimbursement Arrangement (HRA)?

Your enrollment in an individual Medicare plan through Via Benefits will be paired with a Health Reimbursement Arrangement (HRA), with a maximum annual UC contribution of $3,000 for a single enrollee or a maximum of $6,000 for a joint HRA account for a family for 2024. UC contribution is based on graduated eligibility rules.

To qualify and maintain HRA eligibility, you must meet all of the MCP eligibility requirements, continue to pay your Medicare Part B premiums to Social Security and stay enrolled in your Medicare plans through Via Benefits. Working directly with a carrier, except with Kaiser Permanente, will terminate your HRA eligibility. See Enrolling
in Kaiser for more information on the steps you need to take to enroll with Kaiser and set up your HRA funding.

Unused HRA funds are rolled over year over year while you are covered under Medicare plans through Via Benefits. Annual Via Benefits HRA reminder notifications are sent about September every year to members who have not used their HRA for the past three years.

The HRA is funded and owned by UC for your benefit. HRA funds are forfeited when your coverage through Via Benefits ends or is terminated, and it cannot be transferred or bequeathed following the retiree’s death.

What expenses does the HRA cover and how will I get reimbursed for eligible expenses?

Via Benefits will send you a Funding Guide to Reimbursement with the instructions after you complete your enrollments. The guide will include instructions to manage your HRA and a form to request reimbursement for your eligible expenses.

You may set up automatic reimbursement for some eligible expenses. Visit Access your HRA -Anytime, Anywhere on how to manage your HRA account. For eligible expenses that are not set up for automatic reimbursement, you need to pay out-of-pocket first, then request reimbursement from your HRA account. The deadline to submit reimbursement requests is Dec. 31 of the following year. For example, claims for charges incurred in 2023 should be submitted to Via Benefits no later than Dec. 31, 2024. Keep your original receipts and documents as you need to provide copies to Via Benefits for reimbursements.

What is a HRA Cobra?

HRA Cobra is offered to those with qualifying events such as the death of a retiree, a divorce, or the termination of a domestic partnership. HRA Cobra enrollment is a voluntary fee-based election and provide access to an existing HRA balance. A new HRA Cobra account will be set up following an enrollment which will include the existing HRA balance and new HRA funding for the enrollee. The HRA Cobra will terminate when the enrollment terminates or at the end of a maximum 36-month period, whichever is earlier. Contact Via Benefits for more information.

If HRA Cobra is not elected, there is a 12-month run-out period to submit claims to Via Benefits for services rendered through the HRA eligibility end date (i.e., if the HRA ended on October 31, 2021, claims can be submitted up through October 31, 2022, for services rendered up to October 31, 2021).
I think I may be eligible for the Medicare Coordinator Program. How and when do I enroll?

Eligibility for the Medicare Coordinator Program is determined by UC, and your data is shared with Via Benefits through monthly or manual files. Upon receiving your data, Via Benefits will begin to send you communications and/or call you with information for enrollments. See the reference guide for more information.

What do you need to do -

- Make sure your address and contact information are current and accurate with UC by visiting UC Retirement At Your Service (UCRAYs) at https://ucnet.universityofcalifornia.edu/retirees/ucrays-how-to-guide.html
- Make sure you and your spouse or domestic partner enroll in Medicare as soon as you become eligible. If you do not qualify, check, and see if you may be eligible under a former, current, or deceased spouse. Call the Social Security Administration (SSA) for more information. If you are ineligible for Medicare, be sure to provide a copy of the SSA denial letter to RASC as you are ineligible for the Medicare Coordinator Program and should remain in the UC group plans.
- Read all correspondence from UC and Via Benefits.
- Remember that your enrollment through Via Benefits qualifies you for the HRA. Make sure you work directly with Via Benefits to enroll or make changes to your plan or coverage. Your HRA eligibility will be terminated if you enroll or make plan changes directly with your insurance carrier. Kaiser Permanente is the only plan that you may enroll directly (see Enrolling in Kaiser before enrolling).
- Contact the UC Retirement Administration Service Center (RASC) if you believe you are eligible for the Medicare Coordinator Program and did not receive enrollment communications from Via Benefits, or if you received enrollment communications but do not believe you are not eligible.

Will there be a guarantee of continued coverage by our current doctors?

No. Doctors choose which carrier networks they accept and choose to affiliate with. Via Benefits can assist you in finding a carrier network and plan(s) that might work with your existing doctors.

Can I remain in a UC group plan after moving out of California?

If you have non-Medicare and Medicare-covered family members (referred to as a split family) on your UC plans, you may stay enrolled in UC medical plans until all in the family meet the MCP eligibility requirements and all are 65 years old or older.
(see reference guide). Be sure to check to see if you are still in the service area of your current UC plan(s), otherwise, you need to change your UC medical plan(s).

Once your youngest covered family member turns 64 years old, Via Benefits will receive your family’s data from UC because you have met the eligibility for the Medicare Coordinator Program (MCP). Via Benefits will begin to send you communications about the MCP (in intervals of 12, 7 and 3 months to your family’s enrollment effective date with Via Benefits). Visit https://my.viabenefits.com/uc and scroll down to Helpful Resource for video library to learn about the process and what to expect during the various stages of your enrollment. You may be subject to Medicare offset penalty by UC and termination of UC group coverage if you are not enrolled through Via Benefits by your enrollment date.

May I have a family member, friend or caregiver join in on a phone call with Via Benefits?

Yes.

You can give verbal consent to Via Benefits for a single call purpose when you are calling in so that person can remain on the call,

You can give an individual a HIPAA Representative designation so they may join in on future calls or call in on your behalf but cannot make changes. You can set up this by requesting Via Benefit to update your record with the HIPAA representative’s information if you choose to. This individual will remain on your account until you remove them, or

You may consider a general Power of Attorney or UCRP Special Durable Power of Attorney so another person can act on your behalf. For more information, you can visit https://ucnet.universityofcalifornia.edu/forms/pdf/ucrp-special-durable-power-of-attorney-fact-sheet.pdf.

What if I have health care coverage somewhere else (outside of UC)?

You may suspend your UC-sponsored coverage while you have other medical coverage and return to UC-sponsored coverage by participating during the UC Open Enrollment period.

Is it necessary to schedule an appointment to shop plans through Via Benefits during Medicare Open Enrollment?

No, you may shop, compare and enroll online by visiting https://my.viabenefits.com/uc, or if you choose so, schedule an appointment to speak with a Benefit Advisor. Appointments can be scheduled online, and these are call-in appointments, meaning that you need to call in during your appointment date and
time. Appointment slots do fill up quickly so book early during Medicare Open Enrollment which runs from October 15 through December 7 every year.

How do I shop for Medicare plans through Via Benefits?

There are two options, either online or with a Benefit Advisor.

You may shop, compare to enroll, or change plans online. Start by visiting https://my.viabenefits.com/uc and scroll down to Helpful Resources on Enrollment to watch the tutorial. This is the fastest and most convenient way to review and shop at your leisure, or

You may also schedule an appointment to enroll with a Benefits Advisor by visiting https://my.viabenefits.com/uc. Once your appointment is set, you must call in during your appointment so your Advisor may assess your medical and prescription needs through a series of questions and find the best plans for you to choose from. An average appointment is about 60 minutes long. Appointment is reserved for one enrollee, so a separate appointment is needed if there is another enrollee with the family.

If you are planning to move out of California but have not finalized your move yet, you may visit https://my.viabenefits.com/uc to review and compare available plans. Your data will be shared with Via Benefits after your new address is updated in UCRAYS and you have met the MCP eligibility requirements. You may begin your enrollment process with Via Benefits.

For your protection, the sale of individual Medicare plans is regulated by CMS and your state’s Department of Insurance. During your enrollment appointment with a Benefits Advisor, you will be asked to provide your personal information and listen to recorded messages of terms and conditions that you need to verbally accept and/or agree to during your phone appointment to complete your Medicare plan enrollment. Upon request, Via Benefits can provide copies of paperwork that was completed electronically during your enrollment appointment with a Benefits Advisor.

What happens if I add a non-Medicare family member due to a life event while I am enrolled through Via Benefits?

When adding a new non-Medicare family member for coverage, you are no longer eligible for the MCP and will need return to UC group coverage by submitting a UBEN 100 and an appropriate Medicare assignment form(s) for each Medicare family member within 31 days of your PIE to RASC (visit https://ucnet.universityofcalifornia.edu/tools-and-services/administrators/docs/girs-6000.pdf for more information).
What happens if I move to a new address or another state while enrolled through Via Benefits?

Always check with Via Benefits to be sure you are still in the service area of your current Medicare plan, otherwise, you need to change your plan so you can access services.

What happens if I move back to California while enrolled through Via Benefits?

You will remain in the MCP through the end of the year. Be sure you work with Via Benefits to change your Medicare plans if you have moved outside of your current plan’s service area. Also, remember to update your new address with UC through your UCRAYS account.

You will have two choices during the Open Enrollment season. Refer to the reference guide for more information.

I am a current MCP member. Can I change my Medicare plan during Open Enrollment?

You can participate in the Medicare Open Enrollment period that runs from October 15 through December 7 through Via Benefits. Watch your mail for information from your current plan and Via Benefits. If you are happy with the plan you have, you do not need to take any action. If you choose to make changes to your Medicare plan, make sure you work directly with Via Benefits to make the plan changes, so you do not lose your HRA eligibility. Your Open Enrollment plan election becomes effective January 1 of the new year.

Members of Medicare Advantage plans have one additional plan change opportunity after the Medicare Open Enrollment to another Medicare Advantage plan with Via Benefits during the Medicare General Enrollment Period (GEP) that runs from January 1 through March 31.

Members of Medicare Supplement (Medigap) plans may make plan changes to another Medicare Supplement plan anytime during the year with Via Benefits but may be subject to underwriting.

Can I enroll in a Kaiser plan?

You can enroll in a Kaiser Senior Advantage plan if you live in a Kaiser Permanente service area. It is important that you follow the process below so Via Benefits can set up your HRA upon your enrollment.
• Contact Via Benefits to inform them that you want to enroll in Kaiser
• Via Benefits will give you a specific Kaiser number to call
• Call Kaiser to enroll
• After enrollment, call Via Benefits to provide your Kaiser identification number
• Via Benefits will then set up your HRA

Note: UC does not permit direct enrollment through any other carrier/broker outside of the Via Benefits Individual Marketplace, only Kaiser.

Are there newsletters available through Via Benefits?

An online resource, “The Groove,” thegrooveviabenefits.com is available to members and prospective members with information on enrollments, and informative articles from keeping your profile current, to Is telemedicine right for you? The Groove replaced the previous quarterly newsletters that were mailed to members. Members who opted in to receive email notifications will receive emails to alert them there are updates made to the Groove, especially on Open Enrollment. Members can visit The Groove at their leisure.

What is Catastrophic Coverage Special Payments Benefits?

This benefit was offered through the MCP which provided additional reimbursement beyond the HRA funding for members with high prescription costs to reduce their Medicare D out-of-pocket costs during the catastrophic coverage phase also referred as the Medicare Donut Hole. The benefit ended on December 31, 2023, Beginning January 1, 2024, a provision of the Inflation Reduction Act (IRA) will eliminate the 5% coinsurance for Catastrophic coverage. Medicare members who reached the catastrophic coverage phase at the TrOOP threshold amount, will no longer be responsible for any Part D out-of-pocket drug costs for the rest of that year, however, the TrOOP amount resets to zero at the beginning of each year. Visit https://www.thegrooveviabenefits.com/articles/catrx for more information. CMS reviews the TrOOP amount annually and determines the amount for the new year. The TrOOP amount for 2024 is $8,000 and is the total drug costs that you and others pay on your behalf.