New Dimensions

Benefits Newsletter for UC Annuitants

Volume 14 Number 3, November 1999

After the Bid Process and Open Enrollment: Implementation

In the recent Open Enrollment materials and in the summer issue of this newsletter, you read about the California medical plan bid process and the tremendous efforts put forth by UC faculty and staff to identify the health care concerns of our plan members.

“As while the bid process did not result in a lot of new medical plans, we were able to bring some important changes to our existing plans,” says Judith W. Boyette, Associate Vice President of Human Resources and Benefits, who worked closely with others throughout the process. “Our members have a wide range of interests and needs. The challenge is to find ways of addressing these concerns and yet keep the costs down for all.”

Establishing policy to meet this challenge is the work of the Health and Welfare Benefits Planning and Analysis staff, led by Acting Director Lily Pang. “We look forward to forging a long-term partnership with our health plan carriers to offer the best benefits and service to our faculty, staff, retirees, and their families,” says Pang. “We are working with the carriers to develop innovative and creative ways to service the University community while providing affordable health care.”

Pang’s team continues to work with the carriers to “hold the line” on cost increases and at the same time to help carriers find ways to move toward the goals sought by the UC community: easier access to specialists; educational health care outreach; self-help programs for disease management and prevention.

Local implementation and administration of UC’s Health and Welfare policy is the responsibility of Judy McConnell, Director of the newly formed Health, Welfare, and Work/Life Programs unit. McConnell and her team members work behind the scenes to resolve problems and issues that arise.

“It’s important to us that employees and annuitants are provided with the highest quality health care possible. Efficient administration reduces the headaches and troubles our members face when they and their families are in need. We will be working closely with our carriers throughout the year to ensure that these difficulties are minimized.”
Medical Plan Costs

Group Insurance Rates, the UC/Employer Contribution, and “Risk-Adjustment”

As stated in the recent Open Enrollment materials, UC is committed to making affordable, high quality health coverage available to our faculty, staff, and annuitants. In response, some employees and annuitants have begun to ask: Given today's marketplace, how is UC working to keep our medical plans affordable? This article gives a simplified explanation of UC's strategy for controlling the rate of increase in costs in future years. Because the issues are complex, and the benefits of the strategy will unfold over time, we will have more articles in the future. But we hope the information here will help you better understand this important issue.

UC Member Costs

Group insurance allows you to receive medical coverage at a lower rate than you can obtain as an individual. The medical needs of the larger group are pooled and costs are averaged out. The healthier the group as a whole, the lower the rates will be; the larger the pool, the more stable the rates will be over time.

For UC members, most (in some plans, all) of the monthly cost is borne by the UC/employer contribution. By and large, UC members fare very well in this regard. The chart below shows how UC member rates compare to those of California Public Employees' Retirement System and Federal Employees Health Benefits. The chart shows 1999 costs; some rates for 2000 were not yet available, but the overall comparisons are similar.

However, UC strives not just to compare favorably to other groups, but to keep the costs affordable and stable from year to year for a range of options and to pay plans fairly. The long-term strategy adopted to achieve these aims is referred to as “risk-adjustment.” UC researchers have been exploring risk-adjustment for several years. For the year 2000, we took the first step in implementation.

For the year 2000, the UC contribution toward each California medical plan is based not only on direct negotiation with the plans but also is adjusted based on the demographic mix of the UC membership in each plan. The overall benefit—in the short term—is that we retain an affordable range of options for all of our members. The effect on members' costs is not very great—some slightly increased, others slightly decreased. But for the overall picture, this first step is highly significant.

In the long term, the goal is to compensate providers based on the population they serve. This means the plan's gross premium will be risk-rated, and the plan will pass on the adjustment to its providers. In this fashion, a provider will be compensated more if

<table>
<thead>
<tr>
<th>Medical Plan</th>
<th>California Public Employees’ Retirement System</th>
<th>Federal Employees Health Benefits</th>
<th>University of California</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Net</td>
<td>$ 0.00</td>
<td>$ 5.82</td>
<td>$ 17.48</td>
</tr>
<tr>
<td>PacifiCare</td>
<td>0.00</td>
<td>6.28</td>
<td>18.05</td>
</tr>
<tr>
<td>Kaiser</td>
<td>0.00</td>
<td>6.67</td>
<td>18.57</td>
</tr>
<tr>
<td>PERS Care</td>
<td>99.00</td>
<td>223.00</td>
<td>300.00</td>
</tr>
<tr>
<td>UC Care</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>Western Health Advantage</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
</tbody>
</table>
the medical needs of the members he or she serves are greater; less if their needs are less. Achieving this goal will take some time, but we have taken the first step by adopting risk-adjustment.

Risk-adjustment is not a new concept. We mentioned above that UC researchers have explored risk-adjustment for some time. Specifically, Professor Harold Luft of the UCSF School of Medicine has been at the forefront of this research. Associate Professor Richard Kronick of UC San Diego has done extensive consultation with various groups on designing an approach that could be implemented for UC. We were fortunate to have these two individuals serving on the UC Faculty Welfare Health Subcommittee and working closely with HR/Benefits in developing our risk-adjustment strategy.

Risk-adjustment was a key recommendation of Governor Wilson’s Managed Care Task Force and Senator Rosenthal sponsored one of the first bills asking CalPERS and other large employers to explore its feasibility in California. Other universities, including Stanford, have implemented some form of risk-adjustment. Medicare is also adopting risk-adjustment for the coming year.

Be assured that UC’s goal of providing affordable, quality healthcare choices for the UC community is intact. Risk-adjustment is a significant component of UC’s plan of action for achieving this goal. For more information about risk-adjustment and how UC’s plan of action is evolving, look to future editions of this newsletter.

Please note that Medicare enrollees continue to benefit from receiving the same UC/employer contributions as do employees and annuitants who are not enrolled in Medicare. Also note that at this time risk-adjustment applies only to the California medical plans, not to those of the Los Alamos National Laboratory.

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**In the Mail**

**Imputed Income and Tax Information.** During the week of November 1, information was mailed to all annuitants who have a same-sex domestic partner and/or a partner’s child or grandchild enrolled in the UC-sponsored health plans. This information will allow you to calculate your imputed income and resulting taxes for the year 2000. If your enrolled same-sex domestic partner and/or a partner’s child or grandchild is your 1999 tax dependent, you must submit the form (enclosed in your packet) to UC HR/Benefits Accounting as soon as possible in order to have the imputed income removed from your 1999 form W-2.

**Medical, Dental, and Legal Plan Carriers.** During the months of December, January and February, many of you will receive mailings from your UC-sponsored medical, dental, and/or legal plan carrier. These may include a new or updated medical I.D. card, an evidence of coverage booklet, or other plan materials.

**Social Security Annual Statement.** On October 1, 1999, Social Security began mailing an annual Social Security Statement to approximately 125 million people who are age 25 and older and who are not receiving Social Security benefits. You will automatically receive your statement about three months before your birth month. Approximately 500,000 statements will be delivered each day. The four-page statement is designed to help people with financial planning by providing estimates of their retirement, disability, and survivor benefits. It also helps people determine whether their earnings are accurately posted on their Social Security records. For more information, go to the Social Security website (www.ssa.gov) or call Social Security at 1-800-772-1213.

**Health Care Facilitator (HCF) Pilot Program.** Brochures were mailed to UC Berkeley and UC Irvine faculty, staff and annuitants in mid-November. The Health Care Facilitator (HCF) assists with medical plan issues outside the purview of the local Benefits Office. The pilot program is currently available only through the UC Berkeley and UC Irvine campuses.
UC Care’s New Behavioral Health Provider—United Behavioral Health (UBH)

Beginning January 1, 2000, UBH will be the new behavioral health provider for all UC Care medical plan members. If you are currently receiving care from a PacifiCare Behavioral Health provider, you will have the first three months of the year 2000 to begin transition of service. Beginning in January, you can call UBH at 1-888-440-8225 and a counselor will provide you with the information necessary to select a new provider.

UBH features a full range of managed mental health and substance abuse services. Its member-sensitive values drive how services are provided, such as:

• Easy and early access to quality care;
• Referrals and treatment plans based on the needs of each member;
• Care at a level least disruptive to the patient’s life, yet most therapeutic and cost-effective.

The foundation of UBH’s care delivery process is individualized treatment planning. UBH will match your needs and preferences to the most appropriate level of care for your situation. When you call UBH, you will immediately reach an experienced and clinically trained Intake Counselor who will help determine the best course of action, taking into consideration such things as the scope of your problem, your work and family schedules, and your location.

One of UBH’s newest services, and a new feature for the UC Care behavioral health plan, is MemberWeb. MemberWeb is an internet-based service that serves as a convenient place for you to access on-line behavioral health benefit plan information, prevention and education articles, self-assessment tools, and personal planning and skill building programs.

If you or an eligible family member is in the hospital on January 1, 2000, UBH care managers will work with PacifiCare Behavioral Health to arrange ongoing coverage. If you or an eligible family member is expecting to continue current outpatient treatment after January 1, 2000, please contact UBH to find out if your provider is in the network.

If your provider is in the network, you should call UBH at 1-888-440-8225 to pre-certify your care so that you will be eligible to receive network-level benefit coverage for your treatment expenses beginning January 1.

If your provider is not in the network and your treatment continues beyond January 1, special “transition benefits” apply that will pay your expenses with a non-network provider at the network benefit level for up to three months—until March 31, 2000. During this time, you can decide what to do: complete your treatment at your own expense or switch to a network provider to continue receiving UBH network benefits. To be eligible for the special “transition benefits,” you must call UBH to pre-certify your benefits between December 1, 1999 and January 1, 2000.

Delta Dental Plan

Usually, Delta Dental members use dentists affiliated with Delta and don’t have to file claims. However, if you are using a non-Delta dentist, you should submit your claims to Delta Dental at the appropriate address below. Beginning January 1, 2000, LANL annuitants should always send claims to the New Mexico office, rather than to California.

Send claims to:

California Claims Address:
Delta Dental Plan of California
P.O. Box 7736
San Francisco, CA 94120
Telephone: 1-800-777-5854

New Mexico Claims Address:
Delta Dental Plan of New Mexico
2500 Louisiana Blvd., N.E., Suite 600
Albuquerque, NM 87110
Telephone: 1-800-999-0963

Claim forms are available by calling the 800 numbers listed above.
The Women’s Health and Cancer Rights Act—Annual Notification of Rights

In October 1998, a federal law (HR 4328) known as the Women’s Health and Cancer Rights Act of 1998 (Women’s Health Act) was enacted. It requires group medical plans and insurance companies that provide coverage for mastectomies to also provide certain related benefits or services.

The UC-sponsored medical plans provide coverage to comply with the Women’s Health Act.

Under the Women’s Health Act, a group medical plan member who receives a mastectomy and elects breast reconstruction in connection with the mastectomy is entitled to coverage for the following:

- Reconstruction of the breast on which the mastectomy has been performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance; and
- Prosthesis and treatment of physical complications at all stages of mastectomy, including lymphedemas.

The coverage for the mastectomy-related services and benefits required under the Women’s Health Law applies to any employee, annuitant, or eligible family members covered under a UC-sponsored medical plan. Coverage is to be provided in a manner determined in consultation with the plan member’s attending physician and is subject to the same deductibles, coinsurance and copayments that apply to other medical or surgical benefits covered under the plan. If you have questions, please contact your medical plan carrier or refer to your insurance benefit booklet for specific coverage.

Golden State ScholarShare Trust

Under the Golden State ScholarShare Trust Act of 1997, Californians have a new way to save in order to meet the increasing cost of higher education for their children’s (or other individuals’) college education.

The Golden State ScholarShare Trust allows you to open a higher education expense account on behalf of a designated beneficiary. The money you contribute to the account is placed in a trust and remains in your name until withdrawn. The general features of the program are:

- Tax-deferred earnings
- No income limits
- Professional money management
- Significant growth potential
- Easy payment methods
- May be used for most college expenses.

When the funds are distributed for educational purposes, earnings are taxed based on the student beneficiary’s rate, which is likely to be lower than the tax rate of the account owner.

Anyone who is eligible and interested in participating in the program can do so by making direct payments through their bank account to ScholarShare. To request an enrollment kit, visit the new ScholarShare website (www.csac.ca.gov/scholar/scholar.htm) or call 1-877-SAV-EDU (1-877-728-4338).

HMO Legislation Signed Into Law

On September 27, 1999, Governor Davis signed a comprehensive health care reform package that included 21 bills. California now stands at the forefront of attempts around the country and in Congress to reform health care. In addition to making California only the third state to allow patients to sue their health maintenance organization (HMOs) for damages suffered from denial of treatment, the bills mandate coverage for mental health, diabetes, cancer screening, and contraception.

At the signing ceremonies in Los Angeles, appearing before more than 100 doctors, consumer advocates, health insurers, lawmakers, and others, Davis said, “It is time to make the health of the patient the bottom line of every managed care company.”

How the components of this new legislation may impact UC and its UC-sponsored HMO medical plans is currently being reviewed by Lily Pang, Acting Director of Health and Welfare Benefits Planning and Analysis. Pang says, “Certain requirements of the legislation signed by Governor Davis have already been implemented as part of the continued on page 6
UC-sponsored health plan benefits provided to employees and their enrolled family members, while others are not effective until a future date. Staff is working diligently to complete the review process to see what, if any, further steps the University needs to take in order to comply with the recently passed legislation.”

The ABCs of Health Care

Medical Plans—Survey of Member Satisfaction

Earlier this year, the Center for the Study of Services (CSS) conducted a member satisfaction survey of the UC-sponsored medical plans. CSS is an independent, nonprofit consumer research organization located in Washington D.C.

The survey, which measured member satisfaction with the medical plans during the calendar year 1999, was sent to randomly selected members of the UC-sponsored medical plans. The survey population included UC employees, annuitants, and their family members who were 18 years of age or older as of December 31, 1998, and whose primary coverage was through a UC medical plan (rather than Medicare).

Survey results for the California HMO plans—Health Net, Kaiser, PacifiCare and Western Health Advantage—are available in the California Consumer HealthScope produced by the Pacific Business Group on Health (the 1999 publication is available on the UCbencom website: www.ucop.edu/bencom). Results for UC Care (the University’s point-of-service plan for California) and for the BluePremier plans are summarized in the chart below.

Survey results are based on responses from 2,198 members of the UC Care and BluePremier plans.

1999 Member Satisfaction Survey Results (for plans not included in HealthScope)

<table>
<thead>
<tr>
<th>UC Plan</th>
<th>Health Plan Overall</th>
<th>Ease of Choosing Physician</th>
<th>Authorizations Have Not Delayed Care</th>
<th>Ease of Getting Referrals</th>
<th>No Recent Complaints</th>
<th>Staff Able to Answer Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>UC Care</td>
<td>70%</td>
<td>52%</td>
<td>66%</td>
<td>50%</td>
<td>74%</td>
<td>42%</td>
</tr>
<tr>
<td>BluePremier HMO*</td>
<td>63</td>
<td>60</td>
<td>68</td>
<td>55</td>
<td>72</td>
<td>44</td>
</tr>
<tr>
<td>BluePremier POS**</td>
<td>55</td>
<td>53</td>
<td>67</td>
<td>55</td>
<td>57</td>
<td>36</td>
</tr>
</tbody>
</table>

* Includes BluePremier HMO–New Mexico and BluePremier HMO–Nevada

** Includes BluePremier POS members living in the HMO service areas
The federal agencies that administer Social Security and Medicare have recently announced changes for the year 2000 and other news of interest. This edition of UC’s Medicare Corner focuses on these announcements.

Social Security Benefits

Social Security and Supplemental Security Income (SSI) benefits will increase by 2.4% in 2000, announced Kenneth S. Apfel, Commissioner of Social Security. “This year’s cost-of-living allowance reflects another year of very low inflation,” Commissioner Apfel said. “The cost-of-living adjustment (COLA) is a centrally important feature of Social Security that ensures that beneficiaries, no matter how long they live, will retain their purchasing power as costs rise.”

Automatic COLAs became a feature of Social Security in 1975 and are based on the rise in the Consumer Price Index over the preceding year.

Medicare Part B Premium Set for 2000

The Health Care Financing Administration, the federal agency that administers Medicare, announced on October 22, 1999, that the premium for Medicare Part B for the year 2000 will be $45.50—the same as in 1999.

Medicare and You 2000 Mailing

Medicare enrollees nationwide are receiving the handbook Medicare and You 2000 in a mailing from the Health Care Financing Administration (HCFA), the federal agency that runs Medicare. The mailing is intended to inform America’s seniors about what is available for them in the health care field. The handbook has a wealth of information about how Medicare works and how the program has changed recently, especially in making new options available for individuals enrolled in Medicare.

However, this “wealth of information” can be overwhelming—especially since it is not intended for those with employer plans, such as the UC-sponsored plans.

For most UC annuitants, the role that Medicare plays in their overall benefits is invisible. This is especially true for those enrolled in a Medicare Managed Care HMO plan. (Kaiser, Health Net, PacifiCare, and Western Health Advantage are all Medicare managed care plans for the year 2000.) In this case, you pay your $45.50 Part B premium to Social Security each month; Social Security pays your medical plan a monthly fee to cover your medical needs; and your medical plan takes it from there. You receive your medical care from your doctors as usual—and you have no direct contact with Medicare.

If you want to know more about the Medicare programs, you may want to read the handbook. But please remember that it applies to individual plans—not to an employer plan, such as your UC-sponsored plan. Please be sure you don’t enroll in a Medicare + Choice plan. If you do—or if you enroll in any Medicare Managed Care HMO plan that is not a UC-sponsored plan—you will permanently forfeit your UC-sponsored coverage. If you consider purchasing medical coverage outside UC, ask the plan if your Medicare benefits will be assigned (or locked in) to that plan. If so, don’t enroll unless you are willing to give up your UC benefits!

Medical Plans and Medicare

You have probably heard (or read newspaper accounts) from time to time about some medical plans canceling Medicare coverage in certain parts of the country. In fact, this has happened in some parts of California where UC annuitants live. Please understand that these changes are between the plan, the doctors in the plan network, and Medicare. They are not initiated by UC. If this ever happens with your UC-sponsored plan, we will make sure that you are notified well in advance and we will try to make your transition to a new plan as smooth as possible.
We have received a number of requests for more information in New Dimensions about the UC savings and investment funds and how you can access information about your account(s) in the Defined Contribution and Tax-Deferred 403(b) plans. From now on, look for this type of information in future issues of this newsletter, and please let us know of any other information along these lines that you would like to see.

**UC-Managed Investment Funds**

**Performance Results**
Since June 30, 1999, the UC-managed investment funds have generated the following monthly unit values and interest factors:

<table>
<thead>
<tr>
<th>At:</th>
<th>The unit value was:</th>
<th>The interest factor was:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Equity</td>
<td>Bond</td>
</tr>
<tr>
<td>July 31, 1999</td>
<td>$279.740</td>
<td>$106.456</td>
</tr>
<tr>
<td>August 31, 1999</td>
<td>272.864</td>
<td>105.984</td>
</tr>
<tr>
<td>September 30, 1999</td>
<td>266.205</td>
<td>107.205</td>
</tr>
<tr>
<td>October 31, 1999</td>
<td>286.114</td>
<td>106.834</td>
</tr>
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**Rates of Return as of October 31, 1999**

<table>
<thead>
<tr>
<th>Total Return Funds</th>
<th>1-year</th>
<th>5-year</th>
<th>10-year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Equity</td>
<td>30.32%</td>
<td>21.65%</td>
<td>16.42%</td>
</tr>
<tr>
<td>Bond</td>
<td>-2.88</td>
<td>13.18</td>
<td>10.62</td>
</tr>
<tr>
<td>Multi-Asset</td>
<td>12.47</td>
<td>12.80</td>
<td>N/A</td>
</tr>
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</table>

**Income Funds**

<table>
<thead>
<tr>
<th></th>
<th>1-year</th>
<th>5-year</th>
<th>10-year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Savings</td>
<td>6.03%</td>
<td>6.25%</td>
<td>7.07%</td>
</tr>
<tr>
<td>Insurance Company Contract</td>
<td>7.02</td>
<td>7.55</td>
<td>8.08</td>
</tr>
<tr>
<td>Money Market</td>
<td>5.17</td>
<td>5.60</td>
<td>5.55</td>
</tr>
</tbody>
</table>

*The investment returns shown here represent past performance and are not necessarily indicative of future results.*

Participants with internet access can also get the latest investment performance results for the UC-managed funds by visiting UC’s benefits website, UCBencom. To get there, go to: www.ucop.edu/bencom; click on the Retirement and Savings icon, and then select “Tax-Deferred 403(b) Plan and Defined Contribution Plan.” The UC funds are valued monthly, and we post the new unit values and interest factors on our website around the 10th of each month.
Request A Distribution by Telephone

You can now use your telephone to request a distribution from your account(s) in the Defined Contribution Plan (DC Plan) and Tax-Deferred 403(b) Plan. The Distribution Line, a new feature on UC’s interactive telephone service, bencomfone, is available from any touch-tone telephone, 24 hours a day, seven days a week, by calling 1-800-888-8267.

By using the Distribution Line, participants no longer have to fill out paper forms to request most distributions. In fact, after December 1999, forms will no longer be accepted for distributions that can be requested through the Distribution Line. (Exceptions: You cannot use the Distribution Line if your address of record is outside the U.S., to request a distribution from the Calvert or Fidelity mutual funds, or to take a distribution of money you accumulated in the DC Plan Pretax-Account as a non-exempt student employee. For a complete list of exceptions, see the guide listed below.)

The Distribution Line provides the full variety of distribution options—full and partial distributions, which may be rolled over or paid directly to you. Before calling, read the UC Account Distribution Line guide, which includes instructions on using the telephone system as well as the Special Tax Notice for Plan Distributions. The UC Account Distribution Line guide is available on the UCbencom website (www.ucop.edu/bencom) and at local Benefits Offices.

Statement on Demand
Account Information Anytime!

UC employees and retirees who want to know how much money they have in their UC savings and investment plans can get the answer quickly by making a toll-free telephone call. You can check your plan balances in the UCRS plans at any time, day or night, by calling bencomfone (1-800-888-8267).

When you have finished listening to the recording of your plan balances, you may request that a printed statement be mailed to your home or faxed to your home or office. For security purposes, you will need your Social Security number and your Benefits Personal Identification Number (PIN) before you can access your account information. (If you have lost or forgotten your PIN, call the UC HR/Benefits Customer Service at the same number. Customer Service is open Monday through Friday, from 9:00 a.m. to 4:00 p.m. Pacific Time.)

You can also get the latest investment performance results for the UC-managed funds by paying a visit to UChencom. Go to www.ucop.edu/bencom; click on the Retirement and Savings icon, and then select “Tax-Deferred 403(b) Plan and Defined Contribution Plan.” The UC funds are valued monthly, and we post the new interest factors and unit values on our website around the 10th of each month.

Correction: New Dimensions, Summer 1999

UC-sponsored California Medical Plans—Survey Results article:

We said that: “Respondents who are members of other plans were slightly more satisfied than Prudential High Option members.” This sentence should read: “Respondents who are members of other plans were slightly more satisfied with pharmacy benefits than Prudential High Option members.”

We apologize for this error.
Annuitant Newsletter on Audio Cassette

This newsletter is available on audio cassette tape for visually impaired and disabled annuitants. If you are interested, call New Dimensions at 1-800-239-4002, extension 70270, and leave your name, address, and phone number. Please indicate that you want to receive New Dimensions on tape. Please note that audio cassette tapes are generally mailed four weeks after each New Dimensions mailing.

New Dimensions
Volume 14 Number 3, November 1999

New Dimensions is published by University of California Human Resources and Benefits to provide news and information to UC annuitants.

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Director, Communications and Training: Barbara Facey

By authority of The Regents, University of California Human Resources and Benefits, 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 to University of California Human Resources and Benefits (1-800-888-8267). 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, annuitants, 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 and employer contributions at any time. Health and welfare benefits are subject to legislative appropriation and are not accrued or vested benefit entitlements. If you belong to an exclusively represented bargaining unit, some of your benefits may differ from the ones described here. Contact your Human Resources Office for more information.

In conformance with applicable law and University policy, the University is an affirmative action/equal opportunity employer. Inquiries regarding the University’s affirmative action and equal opportunity policies may be directed to Sheila O’Rourke—Academic Affairs at 510-987-9499 (for academic employee-related matters) or to Mattie L. Williams—Business and Finance at 510-987-0865 (for staff employee-related matters).

Comments or Questions?
Write New Dimensions at:
University of California
Human Resources and Benefits
P.O. Box 24570, Oakland, CA 94623-1570

Association Contacts
Use this listing if you’re interested in joining an association, or to inform your association of an address change.

<table>
<thead>
<tr>
<th>City</th>
<th>Contact Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>BERKELEY</td>
<td>UCB Retirement Center 510-642-5461</td>
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<tr>
<td>DAVIS</td>
<td>John R. Whitaker 530-753-2381 <a href="mailto:jrwhitaker@ucdavis.edu">jrwhitaker@ucdavis.edu</a></td>
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<tr>
<td>IRVINE</td>
<td>Sam McCulloch 949-650-3569 <a href="mailto:emeriti@uci.edu">emeriti@uci.edu</a></td>
</tr>
<tr>
<td>LANL</td>
<td>N/A Mary Mariner 505-672-1950</td>
</tr>
<tr>
<td>LBNL</td>
<td>N/A Bud Larsh 510-724-1202 <a href="mailto:almonlarsh2@juno.com">almonlarsh2@juno.com</a></td>
</tr>
<tr>
<td>LLNL</td>
<td>N/A Lawrence Livermore Employee Services Association 925-422-9402</td>
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<tr>
<td>LOS ANGELES</td>
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Note to associations: To update a listing, write to New Dimensions.
Bulletin Board

Bulletin Board is for UC retiree and emeriti association announcements. The information contained herein does not necessarily represent the opinions of UC Human Resources and Benefits. UC HR/Benefits reserves the right to edit, correct errors, and/or decline to publish information submitted to New Dimensions. To post an announcement, write to New Dimensions or e-mail janie.kirsch@ucop.edu. Deadlines for submissions are one month before the mailing dates of February 1, May 1, August 1, and November 1.

Council of University of California Emeriti Associations (CUCEA)

Meetings and Activities

CUCEA held semi-annual meetings on October 29, 1998, at UCSF and on April 29, 1999, at UCSB. These meetings were attended by the CUCEA officers, campus Emeriti Association representatives and their alternates, the chair of the Council of UC Retirees Associations (CUCRA), Associate Vice President Judy Boyette, Director Judy Ackerhalt, and Director Michele French. Although much business was transacted at these meetings, far more was transacted during the year by mail, telephone, and e-mail. During 1999–2000, virtually all these persons will be reached by e-mail. In early March, a lengthy newsletter was prepared to update all members of activities to that date. Also, a memorandum was drafted suggesting ways officers and members may prepare for the semi-annual meetings.

Health care was a major topic of business throughout the year. The patient facilitator proposal, initiated the previous year by CUCEA, was approved as a pilot program. With the assistance of Judy Boyette, funds were made available to select two persons, one each on the UC Berkeley and UC Irvine campuses, to be trained for this role. The effectiveness of the UCB and UCI health care facilitators in resolving the health care issues for users will be carefully reviewed. If the pilot program is found to be successful, efforts will be made to extend the program to other campuses.

UCOP decided that competitive bids for the majority of medical plans could offer significant benefits in meeting goals for the program and addressing issues raised by plan members. Among these issues were: more flexible access to certain types of specialty care by HMOs; services to improve member satisfaction and health status; specific lists of formularies; and detailed information on access to mental health care and level of such care. An advisory group consisting of diverse representatives, including the chair of CUCEA, worked with Human Resources and Benefits in this process. The chair was then a member of the team of persons who visited the sites of the various bidders. Ultimately, the same medical plan carriers were selected except for the carrier for UC Care’s behavioral health services. United Behavioral Health was chosen for that service.

Almost one third of all retirees are enrolled in the High Option Supplement to Medicare plan. This plan will continue; however, some members expressed concern about its cost and wondered if benefit changes could be made to lessen future increases in premiums. Over a number of weeks many CUCEA members participated in revising the initial draft of the questionnaire that was sent to all enrollees. An overwhelming number of respondents preferred to continue the plan as currently structured even though its costs will continually increase at a relatively high rate compared to the Medicare coverage under HMO plans. Immediately after these results were tabulated, the Health Care Subcommittee of the University Committee Faculty Welfare (UCFW) began working on ways the program might be improved while still holding down costs as much as possible.

The first Emeriti University-wide Biobibliographic Survey of all nine campuses covering various time periods between July 1955 and June 1998 was completed. A committee chaired by Moses A. Greenfield, UCLA, and the information gathered by teams on each campus, led the work. The final report was sent to President Atkinson, key administrators (including the Chancellor of each campus), and campus Emeriti Associations. Planning is under way to prepare a second report covering the period through June 1999 and to prepare future reports thereafter on a biennial schedule. The initial survey indicates an impressive level of academic and professional activity on the part of many emeriti.
Meetings and Activities of CUCEA (continued)

With the assistance of Director Judy Ackerhalt, monthly reports of retiree deaths for University locations will be prepared and sent to the CUCEA Chair, Secretary, Archivist, and each Campus Representative.

The chair of CUCRA attends CUCEA meetings and the chair of CUCEA attends CUCRA meetings. The chair and chair elect of CUCEA are regular members of the University Committee on Faculty Welfare (UCFW). During the year, the Chair of CUCRA requested that UCFW grant membership to CUCRA leaders. This request was denied, but UCFW hereafter will send minutes of their meetings to CUCRA as soon as they have been approved.

Since 1995, CUCEA has endeavored to amend Senate By-Law 55 by removing a particular provision. This provision requires a two-thirds vote of active faculty for emeriti to be notified of departmental meetings on personnel actions, to have access to agenda materials, and to be permitted to speak at these meetings. Regental Standing Order 105.1(a) states: “Membership in the Senate shall not lapse by virtue of transference to emeritus status.”

Academic Senate By-Law 45.D states: “Academic Senate members who have retired and transferred to emeritus/a status retain departmental membership.” This proposed amendment does not change the existing requirement that a two-thirds vote of active Academic Senate members is required to grant emeriti the right to vote on personnel matters and a majority vote to grant emeriti the right to vote on all other matters.

This amendment was approved by UCFW and presented by its Chair at the May 1999 meeting of the Academic Assembly. Because the discussion was overwhelmingly negative, the motion was withdrawn. CUCEA must decide in the coming year how it wants to proceed on this long-standing issue.

Fred Spiess, UCSD, was elected to serve as Chair Elect of CUCEA during 1998–1999. Soon after he resigned because he was appointed to a job which would consume much of his time during the next three years. Majorie Caserio, UCSD, was then elected as Chair Elect. She is now serving as Chair and Sheldon L. Messinger, UCB, has been elected as Chair Elect.

Submitted by Richard W. Gable
UCD, Past Chair, CUCEA

CUCRA Meetings and Activities
(Council of University of California Retiree Associations)

Chaired by Adrian Harris, CUCRA held its semi-annual meeting on September 24 at the University Club on the UCI campus. The meeting included representatives from Retiree Associations at all nine campuses except UC Santa Cruz, UCOP/Regents, the three national laboratories, as well as the Council of UC Emeriti Associations (CUCEA) and the Joint CUCRA/CUCEA Benefits Committee.

The initial discussion centered on the Joint Benefits Committee report of their September 21 meeting (copies were distributed to the council). The committee pointed out a need for increasingly closer communication between CUCRA, CUCEA, the UCRP Advisory Committee, the University Faculty Welfare Committee, the Health Care Subcommittee, and the Office of UC Associate Vice President for Human Resources and Benefits.

The Chair alerted the council of the importance of two bills before the current Legislature:

- SB 234—guarantees CalPERS retiree allowances will maintain at least 80% of the original purchasing power; and
- SB 400—provides a number of changes that includes a COLA increase for CalPERS retirees.

It was noted that the results of the legislative action on both bills could result in a concomitant reaction for UCRS annuitants, something which CUCRA and CUCEA have urged for some time. Chair Harris pointed out that individuals who have Internet access can obtain the latest information on the status of various legislation by going to the California State Senate website: www.senate.ca.gov and clicking on “legislation.”

continued on next page
The committee also recommended that the University be asked to provide annuitants with the equivalent of the currently offered Flexible Spending Accounts for active employees, allowing pre-tax dollars to be used to cover the costs of dependent care. The committee noted that, in its studied opinion, there would be no IRS prohibitions to such a procedure.

We should strive for equality in our HMO Supplement to Medicare and Medicare Managed Care Plan member copayment benefits at least equal to that which CalPERS makes available to CSU and other state agency annuitants.

A request has been made to UC to work out the necessary arrangements with Delta Dental so that the total cost of cleanings is covered regardless of how individual dentists bill for such services.

Also it was noted that the CalPERS-VERIP (Voluntary Early Retirement Incentive Program) Trust Fund is currently overfunded. It was suggested that UCOP should develop a set of criteria and a plan that would allow for future COLAs for those in the program who were denied such COLAs originally because of funding limitations, despite The Regents desire to provide a generally comparable VERIP program.

Chair Harris introduced Associate Vice President Judith Boyette who gracefully was in attendance during our entire meeting and who provided significant input to the ongoing discussions. She noted that over 8000 UC annuitants were covered by CalPERS and that CalPERS membership is down to less than 200 among employees. She discussed in detail the Open Enrollment programs for our many and varied insurance programs. She also reviewed, in depth, the various elements of the health care and other programs to be offered for 2000.

Boyette noted that her committees would be reviewing the entire issue of drug prescriptions for the forthcoming 2000 carrier renewals. They will try to remove “limits” in behavioral health managed care programs. All of these items will be presented in detail in the Open Enrollment materials. Chair Harris pointed out details from the CalPERS Open Enrollment packet which include greater HMO Supplements to Medicare and Medicare HMO Managed Care Plan benefits for annuitants at basically no cost or a very small cost to those covered by the program.

Boyette also noted that staff is working on medical and dental problems—even to the extent of handling calls to her office regarding individual problems with the various aspects of medical and dental care. Julian Feldman of the Joint Benefits Committee commented on the Health Care Facilitator Pilot Programs currently in operation at UCB and UCI. The programs are now operational and the staff at each location is working hard to develop programs and support throughout the campus and surrounding communities. So far, most of the calls have been requests for information.

During lunch, the council heard a presentation of the UCI ARTSBRIDGE program by Associate Dean of Fine Arts, Professor Alan Terricciano.

Reports were heard from the Financial/Audit/Budget, the Historian, and the Nomination Committees. The council approved the 2000 budget and voted the election of Richard Jensen, UCSB, as Vice Chair/Chair-Elect commencing on January 1, 2000, and the continuing service of Rosemary Norling, UCSD, as Secretary.

Majorie Caserio, CUCEA Chair, gave a report on the operations of CUCEA and the continuing excellent cooperation and coordination of programs and activities with CUCRA.

Old Business—Ad Brugger, UCOP/Regents, expressed the need for a subcommittee of “experts” to study, in depth, with CUCEA, Associate Vice President Boyette’s office, etc., the promulgation of 75%+ purchasing power guarantee and/or comparable alternatives or suggestions. He stated that we should also establish better communications links with CalPERS and have a CUCRA officer assigned the responsibility for following and reporting on legislation and its progress through the state capitol. Boyette responded, with respect to a commitment for purchasing power guarantee, that she was interested in whether CUCRA was thinking of such issues for current retirees and not for “future” retirees—since there is a difference. Further development of these issues will be necessary.
Bulletin Board

Lawrence Livermore’s Retiree Program Initiative

(Note: New Dimensions—Summer 1999. The website listed for the Retiree Program Initiative was incorrect. The correct web address is www.llnl.gov/aadp/retiree.)

In the last issue of New Dimensions, we told you about the new retiree program at Lawrence Livermore Laboratory. We encourage you to get acquainted with this unique program. If you are a LLNL retiree, you might find it worthy of your participation. Currently, it is for LLNL retirees and employees; however, if it proves to be effective and popular it could be extended to include other UC retirees and employees as well. This is a win-win program in which both the retiree volunteers and the young employees mutually benefit from participating.

The program is still evolving. You can view the program’s website from a non-LLNL computer; however, if you wish to register to become a retiree volunteer, you must use a LLNL computer. Richard Dong (founder of the program) is looking into ways to make registration possible from off-site computers. In the meantime, if you want to become a retiree volunteer, receive a written program description, or if you wish to give us your ideas and suggestions for the program, please call Kathleen Martinez, Affirmative Action & Diversity Program (AADP), LLNL, at 925-423-4142, or write to her at LLNL, P.O. Box 808, L-716, Livermore, CA 94551-0808.

UC Riverside Retirees’ Association Announcements

Membership renewal time is here and our attention turns to those past members who have not renewed their membership as well as soliciting new members. Remember, if it is your first year of retirement, membership is free. The rest of us have to ante up $15.

Renewals: Please send your check to Betty Morton, 4423 Clio Court, Riverside, CA 92503-2714.

New Members: We would like to invite you to join the UCR Retirees’ Association. As a member, you will receive our quarterly newsletter, The Tower Talk, receive a membership roster, and be invited to participate in fun activities designed to provide members the opportunity of enjoying the company of other retirees and campus acquaintances.

We have luncheon meetings three times a year plus a holiday party in December. These meetings have previously been held on campus at the University Club. With the Club now officially closed, our September 17 luncheon was held at the Riverside Elks’ Club. The location of future meetings will be announced later.

Our Bridge Group and Investment Club each meet once a month. We recently began a Computer Club, a free self-help learning experience for any member who wants to know more about computers and/or the Internet.

To join, please forward your name, address, and phone number to the UCR Retirees’ Association, PO. Box 52635, Riverside, CA 92517. We look forward to your joining us.

What’s Happening: In addition to the activities mentioned above, another trip to the Palm Springs Follies is planned for January 22, 2000. Bus and show will cost $46 per person. A reservation form will be included in the November issue of The Tower Talk with reservations due by November 22. So mark your calendar for a very enjoyable day in Palm Springs.

For more information about the Association or to receive a free copy of the quarterly newsletter, The Tower Talk, write/call/or e-mail: Betty Morton, 4423 Clio Court, Riverside, CA 92503-2714, 909-689-4381, or TheMortons@aol.com or check in the next issue of New Dimensions.)
Our membership has been growing faster than usual since we heard that UCSD retirees who were members of the UCSD Retirement Association could subscribe to Internet access through UCSD for a moderate monthly charge. The number of members with e-mail has doubled since last year. Almost half of our members now have e-mail addresses and about half of them are with UCSD.edu.

Our volunteer committee was very busy this fall. Gwyneth Cooper chaired volunteers who played roles as victims for a Y2K disaster drill at the UCSD Medical Centers. Irene Serrano chaired volunteers who helped students register at UCSD’s Career Services Center during the back-to-school rush. With Martin Rachmeler as chair, we also hosted the first luncheon of the year for the UCSD International Center’s weekly International Cafe. Our members always enjoy serving the food and meeting with the foreign students and visiting researchers who come to eat. We will sponsor the cafe again in both Winter and Spring quarters.

Jan Robinson put together a team of walkers and spectators to participate in the annual Chancellor’s Challenge, a 5K walk/run, benefiting undergraduate scholarships. Again this year, the Retirement Association was one of the sponsors of this great event as well as encouraging our members to participate. Last year our members won three medals in the over sixty category. We’ll look forward to seeing how we do this year.

By the time this newsletter comes out our travelers will have returned from the Panama Canal Cruise. We were joined by over 160 people from all over the UC system.

More Travel. Jean Overstreet has arranged for us to go to the Rose Parade on January 1, 2000. Bleacher seats have been reserved in a very good location and the bus will drive us right to our seats. Cost is $99 per person. The bus leaves San Diego at 4:30 a.m.

We are working on plans for a bus trip to the Palm Springs Follies in March of 2000.

The big events being planned for the coming year include a Millennium Celebration sometime between Christmas and New Years, the Spring Luncheon probably in February, and our Annual Dinner in June. Dates and themes have yet to be set.

New Members: All UC retirees are invited to join the UCSD Retirement Association. Benefits of membership include a newsletter that comes out ten times a year with information on Association events, news of our members doings, schedules for University music, athletic, and other events, and volunteer opportunities. Members receive discounts on many campus events and services. Annual dues are $20 with a $30 couple membership available.

For more information on any of the above events or to receive a free copy of our newsletter and a membership application, call our office at 1-858-534-4724 or send an e-mail message to retireelink@ucsd.edu.
New Dimensions

Benefits Newsletter for UC Annuitants
Volume 14 Number 3, November 1999

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