UNIVERSITY OF CALIFORNIA

Faculty and staff

Open Enrollment Information

- Getting help
- Verify your family members' eligibility to protect their coverage
- Things to consider
- Important notices

Open Enrollment:
Oct. 30-Nov. 21, 2025

ucal.us/oe

If you or your covered family members have Medicare or will become eligible for Medicare in the next 12 months, you should understand which of UC's plans are considered "creditable coverage" under Medicare Part D (prescription drug) rules. Please see pages 8-10 for details.

The summaries in this booklet explain the plans' provisions and the policies and rules that govern them. If a conflict exists between these summaries and the plan documents, the plan documents govern. The Plan Administrator has the authority to interpret disputed provisions.

GETTING HELP

Call the plan directly if you need coverage information for a specific condition, service area or plan provider. For easy access to updates and information, register for an online account with your medical plan.

MEDICAL PLANS

HEALTHSAVINGS+, UC CARE
ucal.us/facultystaffppo

Blue Shield of California (Medical)
Navitus Health Solutions (Pharmacy)
HealthEquity (Health Savings Account paired with HealthSavings+)
866-212-4729
healthequity.com/uc
Accolade (Health care advocate)
866-406-1182
Call Accolade for all your health care questions. Blue Shield will process claims and provide ID cards, and Navitus remains the pharmacy benefit manager.

KAISER PERMANENTE
choose.kaiserpermanente.org/uc

Kaiser Permanente CA HMO
Current members: 800-464-4000
Pre-enrollment: 800-324-9208

Kaiser Permanente Mid-Atlantic HMO
(For UC Washington Center employees)
800-777-7902

Optum Behavioral Health
888-440-8225
liveandworkwell.com, enter 11280

UC BLUE & GOLD HMO
Health Net
healthnet.com/uc
Medical: 800-539-4072
Behavioral health: 800-663-9355

OTHER BENEFITS

ACCIDENT, CRITICAL ILLNESS, HOSPITAL INDEMNITY, LIFE & AD&D
Prudential
855-483-1438

CHILD AND ELDER CARE
Bright Horizons Care Advantage
clients.brighthorizons.com/universityofcalifornia

COBRA ADMINISTRATOR
WEX Health
844-561-1338

DENTAL
Delta Dental
www1.deltadentalins.com/group-sites/uc.html

DeltaCare® USA (Dental HMO)
800-422-4234

Delta Dental PPO
800-777-5854

DISABILITY
Lincoln Financial
800-838-4461
www.lincolnfinancial.com

FLEXIBLE SPENDING ACCOUNTS (FSA)
WEX Health
844-561-1338
uc-fsa.com

GETTING HELP

IDENTITY THEFT PROTECTION
Experian
855-797-0052

LEGAL INSURANCE
ARAG
800-828-1395
araglegal.com/ucinfo

PET INSURANCE
Nationwide
877-738-7874
petinsurance.com/uc

VISION
Vision Service Plan
866-240-8344
vsp.com

HEALTH CARE FACILITATORS

Your Health Care Facilitator (HCF) is here to help you better understand and use your UC benefits. Learn more and find contact information for your location at ucal.us/hcf.

UCPATH

855-982-7284, Monday – Friday, 8 a.m. – 5 p.m. (PT)
ucpath.universityofcalifornia.edu

REMEMBER TO REVIEW AND UPDATE YOUR BENEFICIARIES

Make sure your benefits will go to whom you intend by keeping your beneficiary designations up to date. A death, divorce or new spouse or domestic partner may require a beneficiary change.

Go to retirementatyourservice.ucop.edu (UCRAYS) to update your beneficiaries for your UCRP, life, AD&D, accident, critical illness and hospital indemnity benefits. Go to myUCretirement.com to update beneficiaries for your Retirement Savings Program accounts. For your Health Savings Account, call HealthEquity at 866-212-4729.

If you are married, your spouse may have a legal interest in benefits payable at your death. A beneficiary designation may be subject to challenge if it will result in your spouse receiving less than your spouse's share of that portion of the benefit that is considered community property.

THINGS TO CONSIDER

The summaries in this booklet explain the plans' provisions and the policies and rules that govern them. If a conflict exists between these summaries and the plan documents, the plan documents govern. The Plan Administrator has the authority to interpret disputed provisions.

VERIFY YOUR FAMILY MEMBERS' ELIGIBILITY TO PROTECT THEIR COVERAGE

To ensure UC's benefits resources are used wisely, anyone who enrolls new family members in their health and welfare benefit plans must provide documents to verify their family members' eligibility for coverage. UnifyHR administers the verification and reverification program for UC.

You will receive a packet of verification materials from UnifyHR in early 2026 if you enroll a new family member or members in your UC coverage during Open Enrollment. You must respond by the deadline shown on the letter to protect your family members' coverage.

Help is available if you have any questions or concerns about the process. Learn more on UCnet at ucal.us/fmv.

TAX-ADVANTAGED ACCOUNTS: 2026 CONTRIBUTION LIMITS AND OPTIONS

In 2026, the maximum contribution to the Health Savings Account (HSA) is $4,400 (or $8,750 for a family). This maximum includes the contribution from UC. The maximum contribution to the Health Flexible Spending Account (Health FSA) is $3,300. For most employees, the annual maximum for the Dependent Care Flexible Spending Account (DepCare FSA) is $7,500. If you're married and filing separate tax returns, each spouse may contribute $3,750 annually to the DepCare FSA. In order to comply with IRS regulations, employees who are defined as highly-compensated (those earning $160,000 and over in 2025) may contribute no more than $3,200 to the DepCare FSA in 2026. The University may reduce or stop contributions to the plan and adjust your taxable income as needed to satisfy IRS nondiscrimination requirements. See ucal.us/fsa for important FSA rules and deadlines.

IF YOU OR A FAMILY MEMBER BECOME ELIGIBLE FOR MEDICARE IN 2026

If you continue working at UC past age 65 and you have a UC-sponsored employee medical plan, you are not required to sign up for Medicare Parts A, B or D. Any family member covered by your employee plan, with the exception of your domestic partner in some cases, who becomes eligible for Medicare may also defer signing up for Medicare. Domestic partners covered by a UC medical plan are advised to contact the Social Security Administration to determine if they are eligible to defer

THINGS TO CONSIDER

enrollment into Medicare without incurring a penalty. They may be able to defer signing up for Medicare under their employer plan.

If you and/or any covered family members lose eligibility for the UC-sponsored employee plan, you and/or your Medicare-eligible family members should immediately enroll in Medicare or another employer group health plan to avoid any penalties from the Centers for Medicare and Medicaid Services (CMS).

BECOMING ELIGIBLE FOR MEDICARE IN 2026

Over 65 and working for UC?
You can delay Medicare enrollment if you are covered by a UC medical plan. The same applies to family members other than domestic partners – they may defer signing up for Medicare if they're covered by your UC plan. The rules for domestic partners are more complicated, so it's a good idea to contact the Social Security Administration to determine if they are eligible to defer enrollment into Medicare without incurring a penalty.

Important: When you lose your employer coverage, enroll in Medicare immediately to avoid penalties.

Planning to retire in 2026?
Choose your 2026 medical plan carefully during Open Enrollment. You cannot change plans mid-year just because you become Medicare-eligible.

Plan transitions
When you retire or turn 65, your current plan will automatically transfer to its corresponding Medicare plan, if it has one. HealthSavings+ does not have a corresponding Medicare plan, so you will have a 31-day Period of Initial Eligibility (PIE) opportunity when you turn age 65 to select any UC-sponsored Medicare plan in your service area.

IF ENROLLED IN	YOU'LL TRANSFER TO THIS MEDICARE PLAN (WHEN/IF ELIGIBLE)
UC Care (Blue Shield)	UC Medicare PPO (Anthem)
Kaiser Permanente CA HMO*	Kaiser Senior Advantage (CA)
UC Blue & Gold HMO (Health Net)	UC Medicare Choice (UnitedHealthcare)
HealthSavings+ (Blue Shield)	Period of Initial Eligibility (PIE) to enroll in any UC-sponsored Medicare plans in your service area

* If you are enrolled in Kaiser Permanente Mid Atlantic HMO and you retire and will be eligible for Medicare, you'll transfer either to a Via Benefits plan or to UC Medicare PPO, depending on your eligibility.

Review your options carefully during open enrollment. The Medicare version or partner plan of your medical plan may have different benefits or a different service area, and not all providers accept Medicare. To learn more:

- Contact the plan or visit its website
- Review the Medicare Fact Sheet and "Enrolling in Medicare" on UCnet (ucal.us/medicare)
- Call the UC Retirement Administration Service Center (RASC) at 800-888-8267

For Medicare-eligible retirees who live outside of California, UC offers the Medicare Coordinator Program, administered by Via Benefits. If you become eligible for this program because you're turning 65, Via Benefits will notify you and explain the actions you need to take. If you become eligible because you move outside California or experience a life event, submit a UBEN 100 form to RASC and contact Via Benefits for enrollment. Make sure to keep your address and other contact information current so UC can reach out with important benefits information.

IDENTITY VERIFICATION FOR HEALTH SAVINGS ACCOUNT

If you enroll in HealthSavings+, HealthEquity will be required by law to verify your identity when establishing the Health Savings Account that is paired with the plan. To comply with this requirement, UC will provide information including your full legal name, residential address in the U.S., date of birth and Social Security number or other U.S. government-issued identification number.

TRANSITION-OF-CARE SUPPORT

If you choose to enroll in a new medical plan for 2026 and you or a family member has ongoing health care needs, you should understand how your plan change will affect your ability to continue with your current health care providers or proceed with planned care.

If you voluntarily change plans and your current plan is still being offered, your new plan is not required to provide transition-of-care assistance. You should verify that your providers and facilities are part of your new plan network and will be accessible to you in the new year. Your costs for continuing care with your current providers after January 1 will depend on the plan you select.

You should review your new plan information to understand your copays and/or coinsurance, and any prior authorization requirements. Check the plan's website for information on how to take the right steps so you're covered (see pages 3-4 for contact information).

Things to consider

IMPORTANT NOTICES

IMPORTANT NOTICE ABOUT YOUR PRESCRIPTION DRUG COVERAGE AND MEDICARE

Medicare requires individuals enrolled in Medicare plans to have "creditable coverage" for prescription drugs. The required information below explains all options available.

MEDICARE PART D CREDITABLE AND NON-CREDITABLE COVERAGE UNDER UC-SPONSORED GROUP PLANS

Plans with Creditable Coverage
Kaiser Senior Advantage (CA)
UC Medicare Choice
UC Medicare PPO
UC High Option Supplement to Medicare
Kaiser Permanente CA HMO
Kaiser Permanente Mid-Atlantic HMO
UC Blue & Gold HMO
UC Care
HealthSavings+

Plan with Non-Creditable Coverage
UC Medicare PPO without Prescription Drugs

WHAT DOES CREDITABLE COVERAGE MEAN?

If you are Medicare-eligible and enrolled in 2026 in Kaiser Senior Advantage (CA), UC Medicare Choice, UC Medicare PPO, UC High Option Supplement to Medicare, HealthSavings+, Kaiser Permanente HMO (CA and Mid-Atlantic), UC Blue & Gold HMO or UC Care, your prescription drug coverage is expected to pay out as much as the standard level of coverage set by the federal government under Medicare Part D. This qualifies as creditable coverage under Medicare Part D.

WHAT DOES NON-CREDITABLE COVERAGE MEAN?

If you are Medicare-eligible and enrolled in UC Medicare PPO without Prescription Drugs, the plan is NOT expected to pay out as much as standard Medicare prescription drug coverage pays. Therefore, your coverage is considered Non-Creditable Coverage.

You can keep your current coverage from UC Medicare PPO Plan without Prescription Drugs. However, because this coverage is non-creditable, you must have and maintain creditable prescription drug coverage from another, non-UC source. UC may ask you to verify your enrollment.

By enrolling in a non-UC prescription drug plan, you will receive help with your drug costs, as there is no prescription drug coverage under the UC Medicare PPO without Prescription Drugs plan. If you do not enroll in a Medicare drug plan when you are first eligible, you may pay a higher premium (a penalty) for a Medicare drug plan. When you make your decision about whether to choose the UC Medicare PPO without Prescription Drugs plan, you should take into account this plan's coverage, which does not include prescription drugs, with the coverage and cost of the plans offering Medicare prescription drug coverage in your area.

WHEN WILL YOU PAY A HIGHER PREMIUM (PENALTY) TO JOIN A MEDICARE DRUG PLAN?

If, in the future, you or a Medicare-eligible dependent terminate(s) or lose(s) Medicare Part D coverage and you go without coverage, you may be assessed a penalty. UC's evidence of creditable coverage will prevent you from incurring penalties charged by the federal government for late enrollment in Medicare Part D for up to 63 days if you decide to re-enroll in a Medicare Part D plan.

You must enroll in Medicare Part D no more than 63 days after you or a Medicare-eligible dependent are eligible for Medicare Part D. In addition, if your Medicare Part D is terminated for any reason, you must re-enroll in a Medicare Part D plan within 63 days of the termination. In either scenario, anyone who fails to act within that time period will incur a late enrollment penalty of at least 1% per month for each month after May 15, 2006, that the person did not have creditable coverage or enrollment in Part D.

For example, if 23 months passed between the time a person terminated creditable coverage with UC and that person's enrollment in Medicare Part D, that person's Medicare Part D premium would always be at least 23% higher than what most other people pay. That person might also be required to pay a non-Medicare premium until UC can obtain Medicare approval of their Part D re-enrollment or wait until the following October, when the federal government conducts Open Enrollment for Medicare, in order to sign up for Medicare Part D prescription coverage.

If a person loses creditable prescription drug coverage through no fault of their own, that person may also be eligible for a Special Enrollment Period (SEP) to join a Medicare drug plan.

WHEN CAN YOU JOIN A MEDICARE DRUG PLAN?

If you are eligible for UC-sponsored coverage, you can join a UC Medicare drug plan during a period of initial eligibility, UC's annual Open Enrollment period each fall or midyear if you lose other creditable coverage. If you are interested in non-UC insurance and are eligible for Medicare, you can join a non-UC Medicare drug plan each year from Oct. 15 to Dec. 7 (Medicare's Open Enrollment Period).

WHAT HAPPENS TO YOUR CURRENT PRESCRIPTION COVERAGE IF YOU DECIDE TO JOIN A NON-UC COMMERCIALLY AVAILABLE MEDICARE DRUG PLAN?

Each plan handles your decision to join a Medicare drug plan differently. UC offers one plan, the UC Medicare PPO without Prescription Drugs plan, that allows you to keep your current UC medical coverage and coordinate with Medicare for a non-

Important notices

IMPORTANT NOTICES

UC drug plan. UC's other plans do not. Before you make a change, contact the UC Retirement Administration Service Center at 800-888-8267 to get information on how your current plan coverage will be affected by your decision to join a commercially available Medicare drug plan. More information about Medicare plans through UC can be found in the UC Medicare Fact Sheet (ucal.us/medicarefacts).

Detailed information about non-UC commercially available Medicare Part D Plans can be found in the "Medicare & You" handbook. You'll get a copy of this handbook in the mail every year from Medicare. For more information about Medicare prescription drug coverage, visit medicare.gov.

Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help, or call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit the Social Security Administration on the web at www.socialsecurity.gov, or call them at 1-800-772-1213 (TTY 1-800-325-0778).

VIA BENEFITS

Plans obtained through Via Benefits are individual plans, and vary in offering creditable and non-creditable coverage for Medicare Part D. For more information about the type of coverage offered by your plan, visit my.viabenefits.com/uc.

MORE INFORMATION

For more information about this notice or your current prescription drug coverage, contact the UC Retirement Administration Service Center at 800-888-8267. You can also find coverage details on UCnet at ucnet.universityofcalifornia.edu/retirees/retiree-benefits/

LANGUAGE ASSISTANCE SERVICES FOR SELF-FUNDED PPO PLANS

English: Language assistance services, free of charge, are available to answer any questions you may have about our health or drug plan. Call 1-844-437-0486 (UC Medicare PPO, UC High Option Supplement to Medicare)/1-866-406-1182 (UC Care, HealthSavings+). TTY Users Call 711.

Arabic: تتوفر لكم خدمات المساعدة اللغوية مجانًا للإجابة على أي أسئلة قد تكون لديكم حول خطتنا الصحية أو الدوائية. شخص يتحدث العربية يمكنه أ ن يساعدكم. اتصلوا بالرقم 1-844-437-0486 (UC Medicare PPO, UC High Option Supplement to Medicare)/1-866-406-1182 (UC Care, HealthSavings+). مستخدمو أجهزة الهواتف النصية الاتصال على الرقم 711.

Important notices

Armenian: Լեզվական աջակցության անվճար ծառայությունները հասանելի են ձեզ առողջության կամ դեղորայքի ծրագրի վերաբերյալ ձեր ցանկացած հարցի պատասխանելու համար: Ինչ-որ մեկը, ով խոսում է հայերեն, կարող է օգնել ձեզ: Զանգահարեք՝ 1-844-437-0486 (UC Medicare PPO, UC High Option Supplement to Medicare)/1-866-406-1182 (UC Care, HealthSavings+): Հեռագրից օգտվողները կարող են զանգահարել՝ 711:

Chinese: 我們提供免費的語言協助服務，解答您對我們的健康或藥物計劃的任何問題。講中文的員工會為您提供協助。請致電1-844-437-0486 (UC Medicare PPO, UC High Option Supplement to Medicare)/1-866-406-1182 (UC Care, HealthSavings+). ◦聽障人士請撥打711◦

Farsi: خدمات کمک زبان به صورت رایگان در دسترس شما است تا به هر سؤالی که ممکن است در مورد طرح سلامت یا داروی ما داشته باشید پاسخ دهیم. کسی که فارسی صحبت می کند می تواند به شما کمک کند. با شماره 1-844-437-0486 (UC Medicare PPO, UC High Option Supplement to Medicare) 1-866-406-1182 (UC Care, HealthSavings+). با 711 تماس می گیرند TTY تماس بگیرید. کاربران.

French: Des services d'assistance de traduction, gratuits, sont à votre disposition pour répondre à toutes vos questions concernant notre régime de santé ou d'assurance pharmacie. Quelqu'un qui parle le Français peut vous aider. Appelez le 1-844-437-0486 (UC Medicare PPO, UC High Option Supplement to Medicare)/1-866-406-1182 (UC Care, HealthSavings+) Utilisateurs de téléimprimeur appelez le 711.

French Creole: Sèvis asistans nan lang, gratis, disponib pou reponn nenpòt kesyon ou ta genyen sou plan sante oswa medikaman nou an. Yon moun ki pale kreyol franse ka ede w. Rele 1-844-437-0486 (UC Medicare PPO, UC High Option Supplement to Medicare)/1-866-406-1182 (UC Care, HealthSavings+). Itilizatè TTY yo rele nan 711.

German: Sprachunterstützungsdienste stehen Ihnen kostenlos zur Verfügung, um alle Fragen zu beantworten, die Sie zu unserem Gesundheits- oder Arzneimittelplan haben könnten. Jemand, der Deutsch spricht, kann Ihnen helfen. Rufen Sie 1-844-437-0486 (UC Medicare PPO, UC High Option Supplement to Medicare)/1-866-406-1182 (UC Care, HealthSavings+) an. TTY-Benutzer wählen die Nummer 711.

Hindi: हमारी स्वास्थ्य या औषधि योजना के बारे में आपके किसी भी प्रश्न का उत्तर देने के लिए भाषा सहायता सेवाएँ निःशुल्क उपलब्ध हैं, हिंदी बोलने वाला कोई व्यक्ति आपकी मदद कर सकता है। कॉल 1-844-437-0486 (UC Medicare PPO, UC High Option Supplement to Medicare) /1-866-406-1182 (UC Care, HealthSavings+). TTY उपभोक्ता कॉल 711.

Hmong: Muab kev pab txhais lus pub dawb rauu koj los teb txhua nqe lus nug uas koj muaj txog rau ntawm peb qhov kev npaj duav nqi rau kev noj qab haus huv los sis tshuaj. Yuav muaj ib tug neeg uas hais tau lus Hmoob los pab koj. Hu rau 1-844-437-0486 (UC Medicare PPO, UC High Option Supplement to Medicare)/1-866-406-1182 (UC Care, HealthSavings+). Cov neeg TTY ces hu rau 711.

IMPORTANT NOTICES

Italian: Servizi di assistenza in lingua, offerti gratuitamente, sono disponibili per rispondere a qualsiasi domanda lei possa avere riguardo ai piani di salute o dei farmaci. Un assistente che parla italiano sarà disponibile ad aiutarla. Chiami i numeri 1-844-437-0486 (UC Medicare PPO, UC High Option Supplement to Medicare) / 1-866-406-1182 (UC Care, HealthSavings+). Gli utenti di dispositivi telefonici per sordi possono chiamare il 711.

Japanese: 言語支援サービスが無料でご利用いただけ、あなたの健康あるいは薬計画に関する質問に回答いたします。日本語を話せる方がサポートいたします。1-844-437-0486 (UC Medicare PPO, UC High Option Supplement to Medicare) /1-866-406-1182 (UC Care, HealthSavings+). にお電話ください。TTYユーザーは711にお電話ください

Khmer: សវោជំនួយភាសាឥតគិតថ្លៃមានសម្រាប់អ្នកដឹមូបីឆ្លើយសំណួរណាមួយដលែអ្នកបុរហាលែជាមានអំពីផនែការសុខភាព ឬផនែការថ្នាំ។ មានវាគុមីនខ្មែរដលែអាចជួយអ្នកបាន។ ទូរស័ព្ទទៅ 1-844-437-0486 (UC Medicare PPO, UC High Option Supplement to Medicare) / 1-866-406-1182 (UC Care, HealthSavings+).។ អ្នកប្រើប្រាស់ TTY សូមទូរស័ព្ទទៅលខេ 711។

Korean: 건강 또는 의약품 보험에 관해 궁금한 사항이 있으실 경우, 무료로 이용할 수 있는 언어 지원 서비스가 제공됩니다. 한국어를 구사하는 담당자가 도와드릴 것입니다. 1-844-437-0486 (UC Medicare PPO, UC High Option Supplement to Medicare) / 1-866-406-1182 (UC Care, HealthSavings+). 로 전화주세요. TTY 사용자는 711로 전화주세요.

Polish: Darmowe usługi pomocy w różnych wersjach językowych są dostępne, jeśli chce Pan/i uzyskać odpowiedzi na dowolne pytania odnośnie do swojego zdrowia lub planu lekowego. Osoba mówiąca po polsku służy Panu/i pomocą. Zadzwoń na numer 1-844-437-0486 (UC Medicare PPO, UC High Option Supplement to Medicare)/1-866-406-1182 (UC Care, HealthSavings+). Użytkownicy TTY dzwonią pod numer 711.

Portuguese: Serviços de assistência linguística, gratuitos, estão à sua disposição para responder a qualquer dúvida que possa ter sobre nosso plano de saúde ou de medicamentos. Alguém que fale português pode te ajudar. Ligue para 1-844-437-0486 (UC Medicare PPO, UC High Option Supplement to Medicare)/1-866-406-1182 (UC Care, HealthSavings+). Usuários TTY ligam para 711.

Punjabi: ਸਾਡੀ ਸਹਿਤ ਜਾਂ ਡਰੱਗ ਯੋਜਨਾ ਬਾਰੇ ਤੁਹਾਡੇ ਕਸਿ ਵੀ ਸਵਾਲ ਦਾ ਜਵਾਬ ਦੇਣ ਲਈ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ, ਮੁਫ਼ਤ ਹਨ ਅਤੇ ਤੁਹਾਡੇ ਲਈ ਉਪਲਬਧ ਹਨ। ਕੋਈ ਵਅਿਕਤੀ ਜੋ ਪੰਜਾਬੀ ਬੋਲਦਾ ਹੈ ਤੁਹਾਡੀ ਮਦਦ ਕਰ ਸਕਦਾ ਹੈ। 1-844-437-0486 (UC Medicare PPO, UC High Option Supplement to Medicare)/1-866-406-1182 (UC Care, HealthSavings+). 'ਤੇ ਕਾਲ ਕਰੋ। ਟੀ.ਟੀ.ਵਾਇ ਉਪਭੋਗਤਾ 711 'ਤੇ ਕਾਲ ਕਰ ਸਕਦੇ ਹਨ

Russian: Вам доступны бесплатные услуги языковой помощи, в которых вы сможете найти ответы на любые ваши вопросы о нашем плане медицинского обслуживания или лекарств. Сотрудник, который владеет русским, может вам помочь. Звоните по телефону 1-844-437-0486. (UC Medicare PPO, UC High Option Supplement to Medicare)/1-866-406-1182 (UC Care, HealthSavings+). Пользователи TTY звонят по телефону 711.

Spanish: Los servicios de asistencia lingüística, gratuitos, están a tu disposición para responder cualquier pregunta que puedas tener sobre nuestro plan de salud o medicamentos. Alguien que hable español puede ayudarte. Llama al 1-844-437-0486 (UC Medicare PPO, UC High Option Supplement to Medicare)/ 1-866-406-1182 (UC Care, HealthSavings+). Los usuarios sordomudos pueden llamar al 711.

Tagalog: Ang mga serbisyong tulong sa linguahe, na walang bayad, ay maaari mong magamit para masagot ang anumang katanungan na mayroon ka patungkol sa iyong plano sa kalusugan o gamot. Mayroon kaming taong marunong mag-Tagalog na maaaring tumulong sa iyo. Tumawag sa 1-844-437-0486 (UC Medicare PPO, UC High Option Supplement to Medicare)/1-866-406-1182 (UC Care, HealthSavings+). Tumawag sa 711 kung TTY user.

Thai: หากท่านมีคำถามเกี่ยวกับแผนสุขภาพหรือแผนการใช้ยาของเรา ท่านสามารถใช้บริการให้ความช่วยเหลือด้านภาษาของเราได้โดยไม่มีค่าใช้จ่ายเพื่อรับความช่วยเหลือจากบุคลากรที่พูดภาษาไทยได้ โปรดติดต่อมายังหมายเลข 1-844-437-0486 (สำหรับแผน UC Medicare PPO, UC High Option Supplement to Medicare) หรือ 1-866-406-1182 (สำหรับแผน UC Care, HealthSavings+). สำหรับผู้ใช้งาน TTY โปรดติดต่อ 711.

Vietnamese: Các dịch vụ hỗ trợ ngôn ngữ, miễn phí, sẵn có cho quý vị để trả lời bất kỳ câu hỏi nào mà quý vị có thể có về chương trình sức khỏe hoặc chương trình thuốc của chúng tôi. Ai đó nói được tiếng Việt có thể giúp bạn. Gọi 1-844-437-0486 (UC Medicare PPO, UC High Option Supplement to Medicare)/1-866-406-1182 (UC Care, HealthSavings+). Người dùng TTY vui lòng gọi 711.

THE WOMEN'S HEALTH AND CANCER RIGHTS ACT ANNUAL NOTIFICATION OF RIGHTS

The Women's Health and Cancer Rights Act of 1998 (Women's Health Act) requires group medical plans such as those offered by UC that provide coverage for mastectomies to also provide certain related benefits or services.

Under a UC-sponsored medical plan, a plan member (employee, retiree or eligible family member) who receives a mastectomy and elects breast reconstruction in connection with the mastectomy must be eligible to receive coverage for the following: reconstruction of the breast on which the mastectomy was performed; surgery and reconstruction of the other breast to produce a symmetrical appearance; and prostheses and treatment of physical complications of the mastectomy, including lymphedema.

Coverage will be provided in a manner determined in consultation with the patient's 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 carrier's plan booklet for specific coverage.

Important notices

UNIVERSITY OF CALIFORNIA HEALTHCARE PLAN NOTICE OF PRIVACY PRACTICES — SELF-FUNDED PLANS

The University of California offers various health care options to its employees and retirees, and their eligible family members, through the UC Healthcare Plan. Several options are self-funded group health plans for which the University acts as its own insurer and provides funding to pay the claims; these options are referred to as the "Self-Funded Plans." The Privacy Rule of the federal Health Insurance Portability and Accountability Act of 1996, also known as HIPAA, requires the Self-Funded Plans to make a Notice of Privacy Practices available to plan members. The University of California Healthcare Plan Notice of Privacy Practices–Self-Funded Plans (Notice) describes the uses and disclosure of protected health information, members' rights and the Self-Funded Plans' responsibilities with respect to protected health information.

UC's Self-Funded Plans for 2026 include: Delta Dental PPO, UC Care, HeathSavings+, UC High Option Supplement to Medicare, UC Medicare PPO and UC Medicare PPO without Prescription Drugs.

A copy of the updated Notice is posted at ucal.us/hipaa or you may obtain a paper copy of this Notice by calling the UC Healthcare Plan Privacy Officer at 800-888-8267, press 9. The Notice was updated to reflect the current health care plan options effective Jan. 1, 2026.

If you have questions, or for further information regarding this privacy Notice, contact the UC Healthcare Plan HIPAA Privacy Officer at 800-888-8267, press 9.

COMPLAINTS

If you believe your privacy rights have been violated, you may file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 877-696-6775 or visiting hhs.gov/ocr/privacy/hipaa/complaints. You will not be retaliated against for filing a complaint.

TERMS AND CONDITIONS

The Terms and Conditions governing participation in UC-sponsored health and welfare plans can be found on the Open Enrollment website: ucal.us/oe. Ask your local benefits office for a copy if you don't have access to a computer.

OTHER NOTICES ONLINE

Under HIPAA (Health Insurance Portability and Accountability Act of 1996), you may have additional opportunities outside of Open Enrollment to enroll in a UC-sponsored medical plan — for instance, if you have lost eligibility for coverage in another plan. However, certain conditions apply. See the full HIPAA notice on the Open Enrollment website (ucal.us/oe).

IMPORTANT NOTICES

PREMIUM ASSISTANCE UNDER MEDICAID AND THE CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP)

If you or your children are eligible for Medicaid or CHIP and you are eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from its Medicaid or CHIP programs. If you or your children are not eligible for Medicaid or CHIP, you will not be eligible for these premium assistance programs, but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit healthcare.gov.

If you or your dependents are already enrolled in Medicaid or CHIP, you can contact your state Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial 877-KIDS NOW or insurekidsnow.gov to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under UC's plan, UC will permit you to enroll in UC's plan, if you are not already enrolled. This is called a "special enrollment" opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance.

Health Insurance Premium Payment (HIPP) Program
Website: dhcs.ca.gov/hipp, Phone: 916-445-8322, Fax: 916-440-5676
Email: hipp@dhcs.ca.gov

If you live outside of California, please visit ucal.us/chipra for a list of states that currently provide premium assistance. The list is effective as of July 31, 2025, and includes contact information.

To see if any other states have added a premium assistance program since July 31, 2025, or for more information on special enrollment rights, contact either:

U.S. Department of Labor
Employee Benefits Security Administration
dol.gov/agencies/ebsa
866-444-EBSA (3272)

U.S. Department of Health and Human Services
Centers for Medicare & Medicaid Services
cms.hhs.gov
877-267-2323, Menu Option 4, Ext. 61565

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 UC Retirement Administration Service Center (800-888-8267).

In conformance with applicable law and University policy, the University is an equal opportunity employer. Please send inquiries regarding the University's equal opportunity policies for staff to the Office of Systemwide Employee Relations, University of California, Office of the President, 1111 Franklin Street, CA 94607, and for faculty to the Office of Systemwide Academic Personnel, University of California, Office of the President, 1111 Franklin Street, Oakland, CA 94607.

FSC