

UC Retiree Medical Plans

UCDAVIS

Health Care Facilitator Program

Presented by Guerren Solbach

-Agenda-

- Your Options
- Making Changes
- ◆ Medicare and UC
- Plan Overviews
- **♦** Conclusion

—Your Options—

—Your options—

- UC offers a menu of medical plan options
 - ♦ HMO plans
 - ♦ PPO plans
- Availability determined by zip code/county
 - HMOs not available outside urban CA
 - See Medical Plan Availability Tool (Excel) on HCF site



-UC medical plans-

♦ HMOs

- Kaiser Permanente
- Kaiser PermanenteSenior Advantage
- UC Blue & Gold HMO

PPOs

- ♦ CORE
- ♦ UC Care
- UC High Option
- UC Medicare Choice
- ♦ UC Medicare PPO
- UC Medicare PPO w/o Prescription Drugs

-Medical plan premiums-

- ◆ 100% of UC contribution: see rate chart
- Graduated Eligibility:
 - During OE, Log on to UCRAYS (password)
 - Or, use Retiree Premium Estimator (Excel) on HCF Program site (year round)
 - Or, call Customer Service at 1-800-888-UCOP
- % of UC contribution is printed above address stamp

85 IMA RETIREE 1 SHIELDS AVE DAVIS CA 95616-9999



-Medical plan premiums-

- Retirees age 65+ not eligible for Medicare
 - ♦ Last year of 3-year rate increase
- Medicare Part B reimbursement
 - Will you have a net premium to pay?



-About UC medical plans-

- Preventive care generally provided at no cost
- Medical benefits can be separate from Mental Health benefits and Pharmacy benefits
- For details, see Plan Booklets (Evidence of Coverage documents)
 - ♦ ucal.us/oe

-Making Changes-

-Making changes-



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

—Open Enrollment for 2020—

- ◆ Changes made on UCRAYS: ucal.us/oe
- ◆ Remember to get a Confirmation Number
- No online access? Locked out of the website? Call the Retirement Administration Service Center at 1-800-888-UCOP
- Additional paperwork may be required if Medicare-eligible, due 11/30/2020

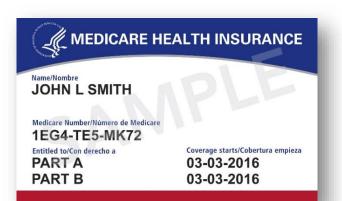
Carefully consider your options

If you like what you have, do nothing...



...except read your Open Enrollment booklet!

This includes UC Health Savings Plan members who will be 65 next year



-Medicare and UC-



-Medicare and UC-

- Medicare is the federal health insurance program for those over 65 and some disabled
 - ♦ Part A: Hospital Insurance
 - Premium-free for most
 - ♦ Part B: Medical Insurance
 - ◆ \$144.60/month if newly enrolled in 2020
 - Less for those enrolled previously and getting SS income
 - More if MAGI >\$87K/year (\$174K for couples)

-UC's Medicare requirements-

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

-Medicare and UC plans-

Two ways to coordinate:

- Original Medicare with a plan that pays secondarily, or:
- 2. Medicare Advantage

-Medicare and Anthem Blue Cross-

- 1. Original Medicare primary
- 2. Anthem Blue Cross plans are secondary
- Medicare providers must be used
 - Exception: behavioral health providers
 - Ask if accepting new Medicare patients
 - ⋄ ~96% of U.S. physicians "participate" in Medicare
 - Providers that do not accept "assignment" can charge up to 15% more
- Preauthorization rarely required

-Medicare Advantage-

- **♦** Kaiser Senior Advantage, UC Medicare Choice
 - You must sign over your Medicare benefits to the plan (usually by form)
- Use plan ID card instead of Medicare card
- Medicare pays a flat monthly fee to the insurance company
- Medicare cannot be used separately from the Medicare Advantage plan
- Plans can require Preauthorization

-Medicare Part D-

- Subsidizes medical plan premiums
- UC Part D plans: no "doughnut hole"
- Form required if choosing a new insurance company



-More on Part D-

- Duplicate Part D coverage not allowed
- Enrollment in a non-UC Part D plan may result in loss of coverage
 - Exception: UC Medicare PPO without R_x

-Medicare "Partner Plans"-

Non-Medicare plan	Medicare Partner Plan
CORE	UC Medicare PPO
(Anthem Blue Cross)	(Anthem Blue Cross)
Kaiser Permanente	Kaiser Permanente Senior Advantage
UC Blue & Gold HMO	UC Medicare Choice
(Health Net)	(UnitedHealthcare)
UC Care	UC Medicare PPO
(Anthem Blue Cross)	(Anthem Blue Cross)

-Medicare retirees outside CA-



- Insurance broker (formerly OneExchange)
 - ♦ Sells local Medicare supplement plans inside U.S.A.
- All covered family members must have Medicare
- Does not affect Dental/Vision/Legal coverage



- UC provides premium support
 - Health Reimbursement Account (HRA)
 - ♦ \$3,000 per covered person
 - Subject to graduated eligibility
- Use HRA money to buy Medigap or Medicare Advantage plans, pay for Medicare Parts B/D
- Catastrophic Coverage Special Payments for R_x

-HMO Plan Overview-

-About HMOs-

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

-HMO coverage: Copayments-

- Physician office visit: \$20
- ◆ ER: **\$75**→**\$125** (Medicare: **\$65**)
 - Emergencies covered worldwide
- Outpatient surgery: \$100
- Inpatient hospitalization: \$250
- ◆ Behavioral health outpatient: \$20
- Behavioral health inpatient: \$250

-HMO behavioral health-

Medical Plan	Behavioral Health Plan
Kaiser Permanente	Go through PCP and/or Optum
Kaiser Permanente Senior Advantage	Go through PCP
UC Blue & Gold HMO (Health Net)	MHN (Managed Health Network)

-Non-Medicare HMO R_x-

R _x 30-day supplies	UC Blue & Gold HMO (Health Net)	Kaiser Permanente
<u>Tier 1</u> (generic, formulary)	\$5	\$5
Tier 2 (brand name, formulary)	\$25	\$25
<u>Tier 3</u> (non-formulary)	\$40	N/A

Some meds require prior authorization

—HMO R_x 90-day supplies for 2 copays—

- UC pharmacies
 - Does not apply to Kaiser
- Mail-order
 - ♦ Kaiser: 100-day supply
- Local retail pharmacies
 - ♦ UC Blue & Gold HMO (Health Net): CVS

-HMO copayment maximums-

Out-of-pocket maximum

Includes medical, mental health, R_x

UC Blue & Gold HMO (Health Net)	Kaiser Permanente*
\$1,000/person	\$1,500/person
\$3,000/family	\$3,000/family

^{*} Kaiser maximum does not include Optum copayments

-HMO R_x: Medicare Part D-

R _x 30-day supplies	Kaiser Senior Advantage
Tier 1 (generic, formulary)	\$5
Tier 2 (brand name, formulary)	\$25
R _x Out-of-Pocket Max	New: \$6,550

—HMO R_x: Part D 90-day supplies—

- Kaiser Senior Advantage:
 - Local Kaiser pharmacies: 3 copayments
 - Mail order: 2 copayments
 - ◆ 100-day supplies

-Kaiser Senior Advantage copay limits-

Out-of-pocket maximum* Includes medical & mental health \$1,500/person \$3,000/family

^{*} Maximums do not include R_x copayments

-UC Blue & Gold HMO-



- Large provider network
- Available in most of urban California
- Health coach (nurse, respiratory therapist, dietitian)
- ◆ 24-hour nurse line, case managers
- Healthy discounts
- myStrength mood-improving resources

—UC Blue & Gold HMO—



- Disease Management programs
- Omada Health weight loss and management program (for those with diabetes and heart risks)
- Quit for Life program: Smoking cessation phone based behavioral coaching
- ◆ Telehealth no copay consults 24/7 through Teladoc→Babylon
 - Offers scheduled appointments and more diagnostic follow-up



—UC Blue & Gold HMO—



- Hearing aids: 2 aids every 36 months; \$2,000 benefit max
- ◆ Allergy shots: \$20
- ◆ Pharmacy Benefit Manager: CVS/Caremark
- ◆ Be sure to specify a PCP when choosing this plan

-New for UC Blue & Gold HMO-



- Copayment maximum will exclude copayments for hearing aids and infertility treatments
- Annual flu shot is covered with \$0 copayment at any Health Net contracted pharmacy
 - Or, obtain flu shot at your doctor's office

-Kaiser Permanente/Senior AdvantageKAISER PERMANENTE®

- Kaiser Foundation Health Plan contracts with one large group, the Permanente Medical Group
- Members must use Permanente doctors, Kaiser pharmacies, Kaiser hospitals
- Available in most of urban California
- Clinics tend to offer pharmacies, imaging, laboratories, urgent care all at one location

-Kaiser Permanente/Senior AdvantageKAISER PERMANENTE®

- Advanced electronic medical records, online tools, My Health Manager mobile app
- ◆ Calm and myStrength behavioral health tools
- Classes, pamphlets, videos on a wide variety of health topics
- Disease Management programs
- \bullet R_x: 30-/60-/100-day supplies at 1x/2x/3x copays
 - Must use Kaiser pharmacies
 - Mail order: 100-day supply for 2x copays

—Kaiser Permanente vs. Senior Advantage—

Kaiser Permanente

- \$1,500 out of pocket limit includes R_x
- Hearing aids: \$1,000 allowance per aid per ear, every 36 months
- Eye exam: \$0
- Allergy shots: \$5
- + Optum behavioral health
- Acupuncture/chiropractic 24 visit limit (American Specialty network)

Senior Advantage

- R_x out of pocket limit: \$6,550
- Hearing aids: \$2,500 allowance per aid per ear, every 36 months
- \$150 allowance for eye glass frames and lenses every 24 months
- ♦ Eye exam \$20
- No American Specialty acupuncture
- Allergy shots: \$3

-New for Kaiser Permanente/Senior Advantage-



- ◆ ClassPass special rate
 - On-demand video workouts at no cost
 - Reduced rates on livestream and in-person fitness classes

-PPO Plan Overview-

—University of California PPOs—

- Anthem
 - ♦ CORE, UC Care



♦ UC High Option, UC Medicare PPO +/- R_x

UHC



UC Medicare Choice



- ◆ Large Preferred Provider network:
 - In California: 60,000+ <u>Blue Cross</u> network **Anthem Preferred** providers (87% of doctors) including 400+ network hospitals (90% of facilities)
 - More than 96% of hospitals and 92% of physicians across the country are <u>Blue Cross/Blue Shield</u> (BlueCard) providers
 - ♦ Preferred providers in 200+ foreign countries
- ucppoplans.com/nh/find-care
- Medicare members: medicare.gov



- UC-dedicated customer service
- ◆ 24/7 nurse line & behavioral health resource center
- Variety of online tools
 - Engage mobile app replaced by Sydney Health
 - Castlight personalized cost estimator to be replaced in 2021
 - LiveHealth Online medical and psychology care
 - myStrength behavioral health site
- Pharmacy Benefit Manager: IngenioRx

-CORE-

—CORE Medical—

Anthem.

- Custom PPO for UC
- No cost preventive care
- For everything else:
 - "Catastrophic" coverage

—CORE coverage—



Anthem Preferred Providers

- 1. \$3,000 deductible
 - Per person per year
- 2. 20% coinsurance
- 3. \$6,350 out-of-pocket limit
 - Per person, per year
 - ◆ \$12,700 per family

Out-of-network providers

- 1. \$3,000 deductible
 - Per person, per year
- 2. 20% coinsurance
- 3. \$6,350 out-of-pocket limit
 - Per person, per year
 - ♦ \$12,700 per family
- ♦ Balance billing

-CORE coverageAnthem BlueCross



Self Only Coverage	Preferred Providers	Out-of-Network Providers
1: Deductible	\$3,000	\$3,000
2: Coinsurance	20%	20% + balance
3: Out-of-Pocket Limit	\$6,350	\$6,350 + balance



- No flat copays;
 covered like medical
- Drug expenses apply toward your deductible/out-ofpocket limit



-CORE mental health-



- Behavioral health covered the same way medical and pharmacy are covered
 - Coverage not "carved out"
- Use Anthem Preferred providers

-Advantages of CORE @-

- No monthly premium
- One deductible, out-of-pocket limit whether in-or outof-network
- No PCP, self-refer to specialists
- ◆ Large, national preferred provider network
- Out-of-network/world-wide coverage
- ◆ LiveHealth Online 24/7 telemedicine
 - \$49/visit until deductible is met

—Limits of CORE ⊗—

- High deductible per person & per family
- High out-of-pocket limit per person & per family
- No coverage for hearing aids
- Out-of-network coverage severely limited
 - Outpatient surgery @ surgery center: 80% of \$350
 - ♦ Hospital: 80% of \$600/day
- Chiropractic/acupuncture 24 visit limit
- Preauthorization required for imaging, inpatient services, inoffice injections, bariatric surgery, transplants & more

-CORE: Family members w/ Medicare-



Medicare partner plan:

UC Medicare PPO

-UC Care-

-UC Care-



- Custom plan for UC
- Like a standard PPO, but with two levels of in-network providers
 - ♦ Choose regular Anthem Preferred providers and pay 20%→30%
 - Or, access a special **UC Select** provider network for low copayments

-UC Care coverage-

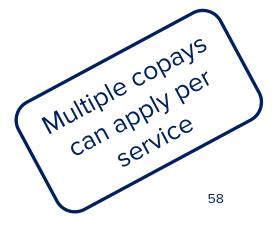


- Tier 2: Anthem Preferred
 - 1. \$250**→\$500** deductible
 - Per person per year
 - \$1,000 for 3 or more
 - 2. $20\% \rightarrow 30\%$ coinsurance
 - 3. $\$6,600 \rightarrow \$7,600$ Out-of-pocket limit (includes R_x)
 - Per person, per year
 - ♦ \$13,200 → 14,200 per family

- ♦ Tier 3: Out-of-Network
 - 1. \$500**→\$750** deductible
 - ♦ Per person, per year
 - ♦ \$1,750 for 3 or more
 - 2. 50% coinsurance
 - 3. $\$8,600 \rightarrow \$9,600$ Out-of-pocket limit (includes R_x)
 - Per person, per year
 - \$20,200 per family
- **♦** Balance billing

-UC Care Tier 1: UC Select providers-

- All UC medical centers and select other providers located near UC campuses (CA only)
- Certain services for <u>flat copayments</u>:
 - Physician office visit: \$20
 - ♦ Urgent Care (not just UC Select): \$30→\$20
 - ♦ ER (not just UC Select): \$200→\$300
 - Ambulance: \$200
 - ♦ Outpatient surgery: \$100
 - Inpatient hospitalization: \$250
 - ♦ LiveHealth Online 24/7 telemedicine: \$20



-UC Care coverage-





Self only coverage	UC Select	Anthem Preferred	Out-of- Network
1: Deductible	None	\$250 →\$500	\$500 →\$750
2: Coinsurance	Flat copayments	20% →30%	50% + balance
3: Out-of-Pocket Limit	\$5,100 ■ →\$6,100	\$6,600 →\$7,600	\$8,600 →\$9,600 + balance

−UC Care R_x−

- **1. Generic: \$5**/30-day supply
- **2. Brand name: \$25**/30-day supply
- **3. Non-formulary: \$40**/30-day supply
- Specialty R_x: 30% up to \$150/script (UC pharmacies or Accredo)



- 90-day supplies for 2 copays:
 - ♦ UC pharmacies
 - Costco, CVS,Safeway/Vons, Walgreens
 - ♦ Mail order: *IngenioRx*

-UC Care mental health coverage-



- Use Anthem Preferred providers
- Outpatient visits 1-3, no copay; additional visits \$20

-Advantages of UC Care @-

- Low copays for care from UC Select providers, network urgent care providers, and LiveHealth Online
- Low deductible for Anthem Preferred providers
- ♦ No PCP, self-refer to medical providers
- ◆ Large, national preferred provider network
- Out-of-network/world-wide coverage
- ◆ Low copayments for R_x compared to other PPOs

—Limits of UC Care ⊗—

- Highest premiums & out of pocket limits per person & per family
- Many services not available at UC Select level of coverage
- UC Select tier: multiple copayments can apply per service
- Acupuncture/chiropractic limited to 24 visits combined
- Out-of-network coverage severely limited
 - ♦ Outpatient surgery @ surgery center: 50% of \$350
 - ♦ Hospital: 50% of \$600/day
- Preauthorization required for imaging, inpatient services, in-office injections, bariatric surgery, transplants & more
- Specialty drugs have especially high copays

-UC Care: Family w/ Medicare-



Medicare partner plan:

UC Medicare PPO

PPO best case scenario: no claims ©

Single Coverage	Annual Premium (100% UC contribution)	Out-of-Pocket Maximum	Total Expense
CORE	\$0	\$0	\$0
UC Care	\$3,734.04	\$0	\$3,734.04

PPO worst case scenario: high claims 🕲

Single Coverage	Annual Premium (100% UC contribution)	Out-of-Pocket Maximum	Total Expense
CORE	\$0	\$6,350	\$6,350
UC Care	\$3,734.04	\$7,600	\$11,334.04

PPO best case scenario: no claims @@@

Family Coverage	Annual Premium (100% UC contribution)	Out-of-Pocket Maximum	Total Expense
CORE	\$0	\$0	\$0
UC Care	\$11,391.72	\$0	\$11,391.72

PPO worst case scenario: high claims ⊗⊗⊗

Family Coverage	Annual Premium (100% UC contribution)	Out-of-Pocket Maximum	Total Expense
CORE	\$0	\$12,700	\$12,700
UC Care	\$11,391.72	\$14,200	\$25,591.72

-UC Medicare PPO-

-About UC Medicare PPO-



- Medicare pays first for covered services
- Anthem Blue Cross pays second
- You pay the balance
 - ~4% if covered by Medicare (20% of the 20% Medicare didn't pay)
 - 20% after \$100 deductible if not covered by Medicare
- ◆ LiveHealth Online telemedicine/psychology: \$20

—UC Medicare PPO coverage—

- Medicare-covered services
 - Deductible N/A
 - 2. 4% (20% of the 20% balance left after Medicare pays first)
 - 3. \$1,500 out-of-pocket limit
 - Per person, per year

- Services <u>not</u> covered by Medicare
 - 1. \$100 deductible
 - ◆ Per person, per year
 - 2. 20% coinsurance
 - 3. \$1,500 out-of-pocket limit
 - Per person, per year

—UC Medicare PPO coverage—

- Original Medicare primary, Medicare PPO secondary
- Caution: <u>must use Medicare providers</u> (exception: mental health providers) unless not covered by Medicare
- Deductible only applies if not covered by Medicare (but covered by plan)

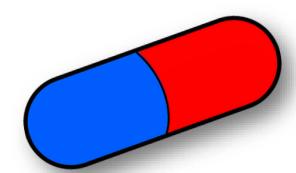
Self only coverage	Not covered by Medicare*
1: Deductible	\$100
2: Coinsurance	20%
3: Out-of-Pocket Limit	\$1,500

Examples:				
*	Acupuncture			
*	Hearing aids	V		
*	<i>MFT</i> s			
*	Services outsia	le U.S.A.		

-UC Medicare PPO R_x-

- 1. **Generic: \$10**/30-day supply
- **2. Brand name: \$30**/30-day supply
- **3.** Non-formulary: \$45/30-day supply
- 90-day supplies available for 2 copays:
 - Output
 UC pharmacies
 - Costco, CVS, Safeway/Vons, Walgreens
 - ♦ Mail order: *IngenioRx*
- Some meds require prior authorization
- ♦ Out-of-pocket limit: *New:* \$6,550





Select Generics: \$0

-UC Medicare PPO mental health-

- Behavioral health coverage not "carved out"
- Use Medicare providers for better coverage
 - ♦ Or, use non-Medicare providers (pay 20%)

—Advantages of UC Medicare PPO ©—

- Use any Medicare provider for Medicarecovered services
- Use any licensed provider for behavioral health
- ◆ Low, 4% coinsurance
- ◆ Comprehensive, world-wide coverage
- Acupuncture coverage
- ◆ Hearing aid coverage at 80%

—Limits of UC Medicare PPO ⊗—

- Acupuncture visits limited to 24 visits per year
- Must use Medicare providers for non-behavioral health services
- ◆ \$6,550 R_x out-of-pocket max only helpful for expensive specialty medication
- Local Sutter primary care physicians (not specialists) not accepting new Medicare patients
- 100-day limit per benefit period in Skilled Nursing Facility, 3day prior hospitalization required

—UC High Option—

-About UC High Option-



- For most services, plan pays 100% of balance after Medicare; you pay nothing
- ◆ \$50 annual deductible, 20% coinsurance applies only to services not covered by Medicare
 - ♦ Example: Acupuncture
- ◆ LiveHealth Online telemedicine/psychology: \$20

—UC High Option coverage—

- Original Medicare primary, High Option secondary
- Caution: <u>must use Medicare providers</u> unless not covered by Medicare (exception: mental health providers)
- Deductible only applies if not covered by Medicare (but covered by plan)

Self only coverage	Not covered by Medicare*
1: Deductible	\$50
2: Coinsurance	20%
3: Out-of-Pocket Limit	\$1,050

Examples: * Acupuncture * Hearing aids * MFTs * Services outside U.S.A.

—UC High Option behavioral health—

- Behavioral health coverage not "carved out"
- No coinsurance for services covered by Medicare
 - Use Medicare providers for better coverage
 - Or, use non-Medicare providers (pay 20%)

-UC High Option R_x

- 1. **Generic: \$10**/30-day supply
- **2. Brand name: \$30**/30-day supply
- 3. Non-formulary: \$45/30-day supply
- 90-day supplies available for 2 copays:
 - UC pharmacies, Costco, CVS,
 Safeway/Vons, Walgreens
 - ♦ Mail order: *IngenioRx*
- Some meds require prior authorization
- Out-of-pocket limit: \$1,000





Select Generics: \$0

—Advantages of UC High Option ⊕—

- Pay nothing for most services
- Use any Medicare provider
- Use any licensed provider for behavioral health
- Comprehensive, world-wide coverage
- ♦ Hearing aid coverage at 80%
- Acupuncture coverage
- ◆ Lowest R_x out-of-pocket limit (\$1,000)

—Limits of UC High Option ⊗—

- Highest monthly premium
- Must use Medicare providers for non-behavioral health services
- 24-visit annual limit on acupuncture
- Local Sutter primary care physicians (not specialists) not accepting new Medicare patients
- 100 day limit per benefit period in Skilled Nursing Facility, 3-day prior hospitalization required

—UC Medicare Choice—

—UC Medicare Choice—



- Ultra-low premium
- "Partner Plan" to UC Blue & Gold HMO (Health Net)
- uhcretiree.com/uc

-About UC Medicare Choice-



- Use any Medicare provider who will bill UnitedHealthcare
 - 90% of U.S. physicians contract with UnitedHealthcare
- New benefits beyond Medicare
 - ♦ SilverSneakers
 - Post-hospital-discharge meals and transportation
 - Solutions for Caregivers

—UC Medicare Choice coverage—

- Physician office visit: \$20
- Virtual visits (Amwell, Doctor on Demand): \$0
 - \$20 for behavioral health
- ◆ ER: **\$65**
- Outpatient surgery: \$100
- Inpatient hospitalization: \$250
- Out of Pocket Maximum: \$1,500

-UC Medicare Choice behavioral health-

- Behavioral health coverage not "carved out"
- Use Medicare and non-Medicare providers
- Behavioral health outpatient: \$20
- Behavioral health inpatient: \$250

—UC Medicare Choice R_x—

- 1. **Generic: \$5**/30-day supply
- **2. Brand name: \$25**/30-day supply
- 3. Non-formulary: \$40/30-day supply
- 90-day supplies available for 2 copays:
 - UC pharmacies, Costco, CVS, Rite Aid, Safeway/Vons, Walmart, Walgreens
 - ♦ Mail order: OptumRx
- Some meds require prior authorization





- Select Generics: \$0
- Out-of-pocket limit:\$2,000

-Advantages of UC Medicare Choice ©-

- ◆ Low premium
- Use any Medicare provider who will bill UHC
- Use any licensed provider for behavioral health
- ◆ Comprehensive, world-wide coverage
- Unique benefits beyond Medicare
- Some local Sutter primary care physicians accepting new patients
- No 3-day hospitalization required prior to use of skilled nursing facilities, with unlimited days covered
- Foot orthotics, no diagnosis of diabetes necessary

-Limits of UC Medicare Choice 8-

- Must use Medicare providers for non-behavioral health services
- Hearing aid benefit limited to \$2,000
- ◆ 24-visit annual limit on acupuncture, chiropractic
- Some doctors will not bill Medicare Advantage plans
- Prior authorization required for many services

-Conclusion-

—Choosing a plan—

- Every plan has a different drug formulary
- Match your priorities with the services available
- Do a cost/benefit analysis based on plan premiums and your expected medical, behavioral and pharmacy needs
- Review the Plan Booklets (Evidence of Coverage)
 - ♦ ucal.us/oe

-Making a change-

- ◆ Open Enrollment is online until 5 p.m. on 11/24/2020.
 - You can request a form or make changes over the phone by calling 1-800-888-UCOP (8267)
- Remember to get a confirmation number
- Remember, you can always change again during the next Open Enrollment...

-Help is available-

Health Care Facilitator Program

- Guerren Solbach:
 - ♦ (530) 752-4264
- Erika Castillo:
 - ♦ (530) 752-7840

hr.ucdavis.edu/hcf

UCDAVIS

Health Care Facilitator Program

Guerren Solbach, Health Care Facilitator

(530) 752-4264 / (916) 734-8880 (phone)

(530) 752-1993 / (916) 734-5338 (fax) gpsolbachducdavis.edu Normal office hours: 7:00 a.m.-4:00 p.m.

Davis campus:

260 Cousteau Place, Suite 150 Davis, CA 95618-5497 Mondays, Wednesdays & Fridays

Sacramento campus:

Ticon III Building, 2rd Floor 2730 Stockton Boulevard Sacramento, CA 95817-2212 Tuesdays & Thursdays

Erika Castillo, Health Care Facilitator Assistant

(530) 752-7840 / (916) 734-4341 (phone)

(530) 752-1993 (fax) ecastillo@ucdavis.edu

Normal office hours: 7:30 a.m.—4:00 p.m.

Davis campus:

260 Cousteau Place, Suite 150 Davis, CA 95618-5497 Monday—Friday

2 Due to the complexity of health coverage, facilitators prefer to correspond by phone. 2

If you wish to visit the Health Care Facilitator or HCF Assistant in person, please call ahead to schedule an appointment. When you arrive, be sure to check in with the receptionist at the front desk of 260 Cousteau Place, Suite 150, or with UCDHS Benefits on the 2^{sq} floor of the Ticon III Building.

http://hr.ucdavis.edu/hcf



UC Retiree Medical Plans

UCDAVIS

Health Care Facilitator Program

Presented by Guerren Solbach