

Open Enrollment

October 30–November 25 for **2009**
Faculty & Staff

Open Enrollment is from 8:00 a.m. on Thursday, October 30, through midnight on Tuesday, November 25, 2008 (PT).

If you make Open Enrollment changes, your new coverage will be effective January 1, 2009.

Open Enrollment is online. Go to atyourservice.ucop.edu

Welcome to the Open Enrollment season, the time of year to review your health and welfare benefits and make changes, if you choose to do so. The following is information about your health insurance rates for next year, and what the University has done to help preserve good employee health benefits and control costs.

As you probably know, health care costs throughout the country continue to rise, including for UC. Total premium costs for UC in 2009 will increase 8.9 percent (\$91 million) over 2008 costs, bringing UC's annual total cost for employee health benefits to nearly \$1 billion.

As UC President Mark Yudof announced earlier this month, UC has worked very hard to develop a plan that helps shield employees, especially lower-paid staff, from escalating health care costs, while not cutting benefits. In fact, some employees will see a decrease in their monthly premiums.

In addition to continuing to pay 87.5 percent of employee premium costs, UC will contribute a special one-time subsidy of \$5.2 million for 2009, which will further defray a portion of employees' increases. With the additional one-time subsidy, approximately 36,000 of UC's 110,000 employees covered by medical plans, including some 21,000 lower-paid staff, will see a decrease in their 2009 net monthly rates as compared to 2008. Most other employees will see only slight increases in their premiums.

UC will also continue its salary-based approach to health insurance whereby lower-paid employees pay lower monthly premiums than other UC employees, and UC health benefits, including expanded programs for wellness, behavioral and preventive care introduced last year, will not change in 2009. Out-of-pocket costs (copays and deductibles) also will not increase, and your dental and vision benefits will continue to be fully paid by UC.

Please review the information in this booklet. There are few changes in store for 2009, however, please note that UC has selected a new vendor for the Flexible Spending Accounts (see page 6).

Now is the time to consider whether your enrollments are the right choices for you and your eligible family members. Open Enrollment is your opportunity to take charge of your health care benefits.

Open Enrollment Actions You Can Take

- Change to a different medical plan
- Change to a different dental plan
- Enroll eligible family members in your health plans
- Enroll or re-enroll in a Flexible Spending Account (FSA)—the Health FSA or Dependent Care FSA. See page 6. Even if you are currently enrolled in these plans, you **must re-enroll** to participate in 2009, as these plans do not automatically roll over to the following year.
- Change participation in the Tax Savings on Insurance Premiums (TIP) program. Enrollment is automatic unless you opt out.

If you are satisfied with your current enrollments and have no plan changes to make, you do not need to do anything.

Inside:

Recap of 2008 Programs—page 2

Plan Changes for 2009—page 3

Employee Medical Plan Costs—pages 4–5

Flexible Spending Accounts—New Names, New Administrator—page 6

Reminders, Things to Consider—page 7

Continuing Expanded Health and Wellness Programs

For 2009, there will be minimal changes to UC health and welfare plans, except for those who are enrolled in UC's Flexible Spending Accounts (see page 6). This is partly because significant changes were made in 2008 to the medical programs. They included expanded programs for wellness and behavioral health, options to encourage staff and faculty to become more engaged in their own health care, and preventive care benefit improvements.

The following are some of the programs introduced last year and which will continue in 2009:

StayWell Health Management

As part of the launch of UC Living Well, UC's wellness initiative, UC offered the StayWell program to employees and their adult family members enrolled in UC-sponsored medical plans. It features an annual health assessment, online health resources, interactive tools, and wellness coaching. Again in 2009, StayWell will offer an incentive for completing an online or paper health assessment. Employees will receive a \$100 gift certificate and spouses/domestic partners a \$50 certificate if they complete the health assessment by April 15.

The StayWell program is available to those enrolled in UC medical plans except Kaiser, which provides similar wellness resources to its members via its

HealthWorks program. In 2008, employees represented by some UC unions were not eligible for StayWell because participation was not agreed to on behalf of their members during the collective bargaining process.

CIGNA Choice Fund

Last year, UC introduced a new plan to all employees—the CIGNA Choice Fund—which combines a Health Reimbursement Account (HRA), with a Preferred Provider Organization (PPO) plan. The CIGNA Choice Fund was designed to provide UC employees with a new and different approach to making and managing effective health care choices.

The CIGNA Choice Fund offers a wide network of physicians and hospitals. All in-network preventive care is covered at 100 percent.

A key component of this plan is the HRA. Funded annually by UC, this account can be used to help meet your annual deductible amount for medical and prescription drug expenses. At the end of each year, any unused HRA amounts are rolled forward to the next year. The 2009 HRA amounts are: \$1,000 for employee only; \$1,500 for employee and adult or employee and children; and \$2,000 for family.

Behavioral Health Benefits

In 2008, UC invested more funding for quality behavioral health services and

improved delivery of mental health and substance abuse for faculty, staff, and their families. These benefits, as well as outreach to those needing assistance, are now provided to non-Medicare members by United Behavioral Health (UBH) for Health Net, CIGNA Choice Fund and Western Health Advantage. UBH continues to provide benefits for Anthem Blue Cross PLUS and Anthem Blue Cross PPO plans. Kaiser Permanente—CA members have access to Kaiser's integrated behavioral services, and also have the option to access the UBH services and network.

Behavioral health benefits were added to the Core plan in 2008 and are offered by Anthem Blue Cross Life and Health Insurance Company.

Across all plans, under UBH, the first three in-network mental health visits are covered with no copayment required.

Preventive Care

Across all plans, UC in 2008 invested in preventive care benefit improvements, and these will continue in 2009. All in-network preventive care visits for non-Kaiser medical plans (except Core which has a 20 percent copayment) are available with no copay from you. Kaiser members have access to preventive care for minimal copayment.

Detailed information about these plans is available on the Open Enrollment website (atyourservice.ucop.edu).

What's Online

Go online to the At Your Service website (atyourservice.ucop.edu) and select the Open Enrollment 2009 icon to read about Open Enrollment and plan details for 2009. On the website, you can link to the following important detailed information:

- Eligibility—what family members are eligible for plan coverage.
- Summaries of UC health and welfare plan benefits/services and changes for 2009.
- Special tools to help you find health plans best suited to you and your family—*Plan Chooser* (compares medical and dental plans) and *Medical Plan Summaries*.
- Links to the medical plans' *Find a Doctor* tools.
- Contact information and website links for all health and welfare plan carriers.
- Links to UC summary plan descriptions, carrier evidence of coverage
- booklets, and other publications about the plans.
- Important Terms and Conditions governing your participation in UC-sponsored plans.
- Certificate of Creditable Coverage when leaving a UC plan.
- Schedule of benefits fairs at your location.

Plan Changes for 2009

Below is a summary of changes to the benefits described in the most recent booklet (or Evidence of Coverage) for your plan. The most recent integrated version is available at the Open Enrollment website (atyourservice.ucop.edu) or you can request a copy from the plan carrier.

Medical Plans

There are no plan changes for **Anthem Blue Cross PLUS***, **Anthem Blue Cross PPO***, **CIGNA Choice Fund**, **Core**, **Health Net**, and **United Behavioral Health** for 2009. See below for important notes and 2009 changes for other plans.

Health Net

Although there are no plan changes for 2009, you should note that effective December 1, 2008, CVS/Caremark will be the new prescription drug mail order vendor. You may refill existing mail order prescriptions with Express Scripts through November 30, 2008. Open prescription refills will be automatically transferred to CVS/Caremark as of December 1 (except for certain controlled drugs). Those with no remaining refills or expired prescriptions will require new prescriptions. You will need to register with CVS/Caremark in order to refill open prescriptions after December 1.

Kaiser Permanente—CA

The 50 percent coinsurance payment for infertility services will be excluded from the annual out-of-pocket maximum.

Staywell Health Management Program

The incentive for completing StayWell's health assessment will be a \$100 gift card for employees and \$50 for spouse/domestic partner. To receive the incentive, you must complete the health assessment by April 15, 2009.

Children and other family members (other than spouse/domestic partner) are not eligible for StayWell program in 2009.

Western Health Advantage (WHA)

Sutter-Solano Regional Medical Foundation (SRMF) is no longer available after December 31, 2008. WHA members who want to remain with this medical group will need to select another plan during Open Enrollment.

Dental Plans

Delta Dental

Coverage increased to 100 percent for pit and fissure sealants available to children at PPO dentists.

DeltaCare USA® HMO

No major plan changes.

DepCare FSA

The new name for the plan is Dependent Care Flexible Spending Account (DepCare FSA). New participants may enroll; current participants must re-enroll for 2009. UC has a new vendor for the DepCare FSA. See page 6

Health FSA

The new name for the plan is Health Flexible Spending Account (Health FSA). New participants may enroll; current participants must re-enroll for 2009. UC has a new vendor for the Health FSA. A new spending account card will be issued by January 1, 2009. See page 6.

Legal Plan

The ARAG Legal Plan is not open for new enrollment this year. No plan or rate changes for 2009.

Life and Disability Plans

Accidental Death & Dismemberment

This plan is open for enrollment year round. No plan changes. Rates for employees are decreasing in 2009.

Life Insurance

Plan not open for enrollment. No plan or rate changes in 2009.

Supplemental Disability

Plan not open for enrollment. There will be rate increases in 2009. See "Things to Consider" section on page 7.

Vision Service Plan

No plan changes.

* Anthem Blue Cross is the trade name of Blue Cross of California. Anthem Blue Cross and Anthem Blue Cross Life and Health Insurance Company are independent licensees of the Blue Cross Association.

Enrolling, Making Your Changes Online—atyourservice.ucop.edu

When you are ready to do so, go to "Make Changes Now" and select the "Sign in" button, located at the top of any page of the Open Enrollment website. You will be taken to a web page where you may view your personalized benefits summary, which shows current health and welfare plan enrollments for yourself and family. You will make and confirm your enrollment changes on this site.

New for 2009 Open Enrollment: You can click "Make Quick Changes," if you are only changing your medical or dental plan or enrolling in a Flexible Spending Account. This new feature will help speed up your online enrollment process.

If you do not have Internet access, contact your local Benefits Office.

If you are satisfied with your current coverage and do not need to make any changes for 2009, you do not need to take any action during Open Enrollment, except if you wish to enroll or re-enroll in a Flexible Spending Account.

Employee Medical Plan Costs

UC will continue to pay the greater portion of monthly medical plan premiums in 2009, and employees will pay the balance as shown in the tables on this page and the next.

Four Rate Levels Based on Salary

Four rate tables (“pay bands”) are shown on this page and the next. Your pay band, and thus your contribution, is based on your full-time salary rate as of January 1, 2008, excluding any pay increases you might have received later during 2008. This pay band structure has been used since 2004. It allows UC to provide larger monthly employer contributions for those earning less to help alleviate a disproportionate premium burden on them.

UC pay increases occurred last fall. For employees whose salaries were near the current band thresholds last year, increasing salaries could result in their moving up a pay band. To minimize this effect, the four pay bands for 2009 have been re-indexed to reflect the increase in the California Consumer Price Index (CPI) from 2007 to 2008. This approach allows continued favorable treatment for employees in the lowest pay band. In future years, the pay bands will be examined in relation to CPI movement and re-indexed as appropriate.

The impact of premium costs on take-home pay for all levels is lessened because employee contributions, if any, are deducted from pay before taxes under the Tax Savings on Insurance Premiums (TIP) program.

Medicare Information

For those nearing retirement: Information on Medicare (including UC’s enrollment requirements and how UC plans coordinate with Part A—Hospital, Part B—Medical, and Part D—Prescription Drugs) is available online (atyourservice.ucop.edu). You may also contact your Benefits Office for more information.

Medical Plans—Employee Monthly Costs for 2009

For Those With Full-Time Salary Rate of \$ 46,000 or Less

Plan	Self	Self + Child(ren)	Self + Adult	Self + Adult + Child(ren)
Anthem Blue Cross PLUS	\$ 31.07	\$ 55.91	\$100.92	\$125.79
Anthem Blue Cross PPO	27.31	49.14	93.03	114.88
Core	0.00	0.00	0.00	0.00
CIGNA Choice Fund	29.07	52.31	96.72	119.99
Health Net	17.73	31.90	72.91	87.10
Kaiser Permanente—California	6.06	10.29	10.99	15.48
Kaiser Permanente—Mid-Atlantic	41.08	73.93	121.95	154.81
Kaiser Umbrella	262.00	471.58	585.88	795.48
Western Health Advantage (WHA)	6.06	10.29	10.99	15.48

For Those With Full-Time Salary Rate of \$46,001–\$92,000

Plan	Self	Self + Child(ren)	Self + Adult	Self + Adult + Child(ren)
Anthem Blue Cross PLUS	\$ 58.70	\$105.65	\$164.17	\$211.14
Anthem Blue Cross PPO	54.94	98.88	156.28	200.23
Core	0.00	0.00	0.00	0.00
CIGNA Choice Fund	56.70	102.05	159.97	205.34
Health Net	45.36	81.64	136.16	172.45
Kaiser Permanente—California	33.90	60.41	74.72	101.48
Kaiser Permanente—Mid-Atlantic	68.71	123.67	185.20	240.16
Kaiser Umbrella	289.63	521.32	649.13	880.83
Western Health Advantage (WHA)	33.90	60.41	74.72	101.48

If You Plan to Retire in 2009

Your monthly contributions may change if you retire in 2009. Contributions for retirees who are eligible for Medicare are different than those for other retirees. Additionally, contributions for all retirees, regardless of income, are based on the second pay band table (\$46,001–\$92,000).

UC may pay from 50 percent to 100 percent of the monthly employer contribution for eligible retirees, based on when retirement plan membership began, service credit, and other factors.

For Those With Full-Time Salary Rate of \$92,001–\$137,000

Plan	Self	Self + Child(ren)	Self + Adult	Self + Adult + Child(ren)
Anthem Blue Cross PLUS	\$ 86.88	\$156.38	\$220.37	\$289.88
Anthem Blue Cross PPO	83.12	149.61	212.48	278.97
Core	0.00	0.00	0.00	0.00
CIGNA Choice Fund	84.88	152.78	216.17	284.08
Health Net	73.54	132.37	192.36	251.19
Kaiser Permanente—California	62.33	111.59	131.41	180.91
Kaiser Permanente—Mid-Atlantic	96.89	174.40	241.40	318.90
Kaiser Umbrella	317.81	572.05	705.33	959.57
Western Health Advantage (WHA)	62.33	111.59	131.41	180.91

For Those With Full-Time Salary Rate Greater Than \$137,000

Plan	Self	Self + Child(ren)	Self + Adult	Self + Adult + Child(ren)
Anthem Blue Cross PLUS	\$116.62	\$209.91	\$279.49	\$372.79
Anthem Blue Cross PPO	112.86	203.14	271.60	361.88
Core	0.00	0.00	0.00	0.00
CIGNA Choice Fund	114.62	206.31	275.29	366.99
Health Net	103.28	185.90	251.48	334.10
Kaiser Permanente—California	92.85	166.52	192.08	265.99
Kaiser Permanente—Mid-Atlantic	126.63	227.93	300.52	401.81
Kaiser Umbrella	347.55	625.58	764.45	1,042.48
Western Health Advantage (WHA)	92.85	166.52	192.08	265.99

Notice to Employees in Bargaining Units

Medical plan contributions for represented employees are subject to collective bargaining negotiations.

Changes in employee contributions for 2009 will not become effective for employees in bargaining units with expired collective bargaining agreements until the University and their unions' representatives reach agreement or until the rates are in effect in accordance with the requirements of HEERA.

Due to operational requirements, the medical plan options made available on the website and in written communication to all employees during Open Enrollment will reflect the new employee contribution rate for all participants.

However, employees in bargaining units with expired collective bargaining agreements can make enrollment changes during Open Enrollment, and they will be charged the applicable employee contribution rate until the University and their unions' representatives reach agreement or until the rates are in effect in accordance with the requirements of HEERA.

Do you Live Outside California?

You'll find a special section online that gives your medical plan choices for 2009 if you live in:

- [Washington DC, Maryland, Virginia](#) Anthem Blue Cross PPO, CIGNA Choice Fund, Core, Kaiser Mid-Atlantic
- [Other states and outside U.S.](#) Anthem Blue Cross PPO, CIGNA Choice Fund (U.S. residents only, except Hawaii), Core

Flexible Spending Accounts—New Names, New Administrator for 2009

New Plan Names

UC is changing the names of the Flexible Spending Account (FSA) plans—currently Health Care Reimbursement Account (HCRA) and Dependent Care Reimbursement Account (DepCare)—to the Health FSA and Dependent Care (DepCare) FSA.

New Administrator for FSAs

UC has chosen a new vendor, CONEXIS, for the FSAs, beginning January 1, 2009.

UC believes that partnering with CONEXIS, a national leader in benefits administration, will result in improved services to you. Service highlights include: up-to-the-minute online account information; ability to submit claims online, via fax or U.S. mail; option for direct deposit reimbursements to your bank account to speed claims processing; claim reimbursements made daily; and an improved Health FSA benefit card process.

If you enroll in the Health or DepCare FSA for 2009, CONEXIS will mail you a welcome kit and confirmation letter. These materials will include instructions for accessing your account online after January 1, 2009 and how to easily monitor your account activity.

New Health FSA Benefit Card

If you enroll in the Health FSA for 2009, CONEXIS will mail a new Health FSA benefit card to you in late December. This debit card may be used for expenses beginning January 1, 2009. The CONEXIS benefit card may only be used at healthcare providers (doctors, dentists, hospitals, optometrists, etc) and a preferred network of pharmacies and retail stores allowed by the IRS. If you try to use your card at a retail store that is not allowed, your card will be denied.

A link to the list of preferred merchants is available online via the CONEXIS website at www.conexis.com.

If you use your CONEXIS FSA benefit card, **keep in mind that you should always save all receipts for FSA purchases in the event of future requests**

by CONEXIS (or the IRS) to verify that a purchase is valid.

The benefit card previously distributed by SHPS will not be valid after December 31, 2008.

If CONEXIS requests a receipt and you do not provide it, your benefit card will be inactivated.

For 2008 HCRA and DepCare Participants

SHPS will continue to handle claims for any funds in your 2008 accounts. Please

be sure to review your claims and balances for 2008 and submit necessary paperwork as soon as possible.

The final deadline to submit claims is July 15, 2009 and only limited service will be available from SHPS after that date. In November, UC will send to all current FSA participants a letter with detailed information regarding the transition from SHPS to CONEXIS. The transition information will also be on the Open Enrollment website (atyourservice.ucop.edu).



Why FSAs are a Plus

The Open Enrollment period is the time to enroll or re-enroll in Flexible Spending Accounts. For the FSA plans, those who expect to have between \$180 and \$5,000 of out-of-pocket expenses in 2009 should consider enrolling.

Advantages of a Health FSA:

- **A planned approach to paying expenses**—You set aside money that you will have to pay anyway in a pre-tax account from which you can draw to pay eligible health expenses for yourself, your legal spouse and those whom you claim as federal tax dependents.
- **Affordable pre-tax contributions**—You contribute an equal portion of the total annual amount of your account by pretax deductions each pay period.
- **Total account access**—You can use the total annual amount you elected any time during the year when you need it.
- **Tax savings**—Because your deductions are taken before taxes, your tax liability is reduced.
- **Benefit card convenience**—You will have a card that you can use for qualified expenses at participating providers' offices, drug stores and most pharmacies where credit cards are accepted, so you won't have to pay out-of-pocket or file reimbursement claim forms. (Be sure, however, to always save your receipts in the event of future requests by the FSA vendor or the IRS to verify that the purchase is valid.)

Advantages of the Dependent Care FSA:

- **A planned approach to paying dependent care expenses**—You set aside money that you will have to pay anyway in a pre-tax account from which you can draw to pay eligible dependent care expenses for your children or dependent adult family members.
- **Affordable pre-tax contributions**—You contribute an equal portion of the total annual amount of your account by pretax deductions each pay period.
- **Tax savings**—Because your deductions are taken before taxes, your tax liability is reduced.

Go to the FSA section of the Open Enrollment website for more details about the FSAs. On the CONEXIS website, you will also find FSA calculators to help you estimate the amount you should contribute and your tax savings.

Reminders

- You'll receive plan I.D. cards, if applicable, by January.
- If you plan to add new family members to your medical plan, check whether the doctor they want is accepting new patients.
- If you are staying in your current plan and want to change only your primary care physician, phone your plan's member services department.
- At any time of the year, you may de-enroll a family member from health and welfare plans when he or she becomes ineligible.
- Employees who have been notified that they have been de-enrolled from their health plans as a result of the 2008 eligibility random audit **will not** be able to re-enroll during Open Enrollment.
- Under IRS rules, your taxable income may be affected if you have health plan coverage for any person who is not declared as your federal tax dependent. Details about imputed income are 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 (atyourservice.ucop.edu).
- The Creditable Coverage notice pertaining to Medicare Part D prescription drug coverage is available online.

Things to Consider

The Open Enrollment period is a good time to consider other insurance and benefits issues.

Supplemental Disability

The plan is not open for enrollment, and there are no benefit changes. In 2009, however, there will be rate increases, so UC employees may want to look at their current UC supplemental disability coverage, waiting period and current sick leave balance. You can always switch to a longer waiting period at any time, which could lower your monthly premium. A change to a shorter waiting period requires a statement of health and approval of the insurance company. More information, including a Disability Premium Calculator, is available on the Open Enrollment website.

Same-Sex Spouse

A same-sex spouse is eligible for health and welfare benefits at UC. A same-sex spouse who is not currently covered by UC's health and welfare programs may be enrolled within 31 days of the date of marriage or during Open Enrollment.

More information about benefits for a domestic partner or a same-sex spouse is available on the At Your Service website.

Selecting a Contracting Physician Group within the HMO/POS Service Area

If you reside outside an HMO or POS service area, you may also enroll based on your work address that is within the HMO/POS service area. If you choose a physician group based on its proximity to your work address, you will need to travel to that physician group for any non-emergency or non-urgent care that you receive. Some physician groups may decline to accept assignment of a member whose home or work address is not close enough to the physician group to allow reasonable care. Please contact the HMO or POS plans' member services if you have questions or need assistance with selecting a physician group.

Business Travel Accident Insurance

If you travel on official University business you are covered at no cost to you. The plan includes coverage for: out-of-country medical; lost luggage, personal property and trip cancellation or interruption; emergency medical evacuation and repatriation; security extraction; accidental death and dismemberment.

If you are traveling on UC business, you must register for all out-of-state and foreign country travel. For more information about business travel insurance and online registration visit the Business Travel website at www.uctrips-insurance.org.

Local Assistance & Open Enrollment Events

Contact the person in your department who handles benefits matters or your local Benefits Office if you need personal assistance.

Your location may be conducting a benefits fair, Open Enrollment meeting, or informational programs. Watch for announcements at your location. You may also check the Open Enrollment website for a schedule of events at UC locations.



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Open Enrollment for 2009

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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 (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, 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. Contact your Human Resources Office for more information.

The Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA) provides for continued coverage for a certain period of time at applicable monthly COBRA rates if you, your spouse/domestic partner, or your dependents lose group medical, dental, or vision coverage because you terminate employment (for reasons other than gross misconduct); your work hours are reduced below the eligible status for these benefits; you die, divorce, or are legally separated; or a child ceases to be an eligible dependent. Note: The continuation period is calculated from the earliest of these qualifying events and runs concurrently with any other UC options for continued coverage. See your Benefits Representative for more information.

In conformance with applicable law and University policy, the University is an affirmative action/equal opportunity employer. Please send inquiries regarding the University's affirmative action and equal opportunity policies for staff to Director of Diversity and Employee Programs, University of California Office of the President, 300 Lakeside Drive, Oakland, CA 94612 and for faculty to Director of Academic Affirmative Action, University of California Office of the President, 1111 Franklin Street, Oakland, CA 94607.

Website address: atyourservice.ucop.edu

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