

2010 UCSC INSURANCE CONTINUATION INSTRUCTIONS FOR EMPLOYEES ON FURLOUGH

When you are on furlough you are eligible to continue to receive the UC contributions for medical, dental, and optical; however, you ***must take action*** in order to continue your University insurance plans. The University contribution is not automatic. You must complete and return the Insurance Continuation Form, with payment for your portion of the premium(s).

INSTRUCTIONS FOR COMPLETING THE INSURANCE CONTINUATION FORM

Print or type your name, ID number, home address, home phone number and unit name on the appropriate lines. Fill in the dates of your furlough. ***If you do not know these dates, call your HR Service Team.*** Write in the names of your current medical and dental plans. Indicate whether or not you wish to continue coverage while you are on furlough for ***each*** of your current insurance plans. If you are enrolled in Health Net, Kaiser or Blue Cross Plus, and will be leaving their service area for two or more months, you may be eligible to change your medical insurance while you are away. Please contact the campus Benefits Office at (831) 459-2013 for more information.

If you wish to continue the coverage: Mark "Continue" and write in the monthly premium you will be paying. For the medical plan, the premium will be the employee deduction as reflected on your last earnings statement. The monthly employee premiums for each plan are also listed on the rate sheet following these instructions. Since the cost of dental and vision coverage is fully covered by the UC Contribution, write in \$0 for these plans. For all other plans, write in your payroll deduction amount, which can be found on your earnings statement. If you cannot find your earnings statement, or are unsure of your Medical Contribution Base, you may view this information on-line at: <http://atyourservice.ucop.edu>. If you wish to pay in a lump sum, write in the total premium you will owe for your entire furlough period.

If you do not want to continue coverage, mark "Cancel". It is very important that you indicate either continue or cancel for each of your insurance plans. **If you do not indicate whether coverage for one of your plans should be continued or cancelled, the plan will be subject to cancellation.**

Health FSA and DepCare FSA

If you are enrolled in the Health FSA and/or DepCare FSA and you are off pay-status, **your coverage will end automatically.** If you wish to reenroll upon your return from furlough, you must do so within 31 days of your return to work. It is your responsibility to contact the Benefits Office upon return from furlough to re-enroll in FSA's using UPAY919. Please refer to the Summary Plan Descriptions (available on atyourservice.ucop.edu) for each of these plans for more details about the impact of your furlough leave on these plans.

PREMIUM PAYMENT

If you elect to continue coverage, the University portion of premiums will continue for the medical, dental & optical plans. For your medical insurance, you will owe the employee portion of the premium for each month that you will not have a paycheck. You will also owe premiums for any other employee-paid plan you wish to continue during your furlough (i.e. life insurance). You may pay the premiums for the entire furlough in one lump sum, or on a monthly basis. To ensure continued coverage, your Insurance Continuation Form and payment must be received in the **Campus Payroll Office** by the 10th of the month following the beginning of your furlough. For example, if your furlough begins July 1, payment is due by July 10th. **If a payment has not been received by the 10th, coverage will be subject to cancellation.**

Note: Premiums are adjusted at the beginning of each calendar year. If your furlough will extend beyond the end of the calendar year, you should contact the campus Benefits Office in November to obtain a new rate sheet.

IF COVERAGE IS CANCELLED

If coverage is cancelled, **you will need to re-enroll** if you wish to reinstate coverage upon return from your furlough. It is your responsibility to contact the Benefits Office upon return from furlough to initiate re-enrollment. Your eligibility period for re-enrollment ends on the last *working* day of the 31-day period following your return from furlough. As long as the Benefits Office receives your enrollment forms by the last working day of this period, your coverage will be effective retroactive to the date you return from furlough.

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If coverage is cancelled, **coverage will end on the last day of the month for which a premium has been paid** (except Supplemental Disability*). Medical, dental, optical, Legal, Supplemental Life, Basic and Expanded Dependent Life, and AD&D premiums are paid in advance. For example, if you choose to cancel these coverages and you receive a paycheck on July 1, you will be covered through the end of July.

*If you choose to cancel Supplemental Disability coverage, you will be covered through your last day actively at work and **you will need to re-enroll** if you wish to reinstate coverage upon return from your furlough. **NO** benefits are payable for periods you are scheduled to be on furlough. However, if you cancel your disability insurance and you become disabled while on furlough and are not able to return to work on your regularly schedule workday, you will only be covered at the University Paid Disability (UPD) level of benefits. Your Supplemental Disability insurance cannot be reinstated until you are actively at work on your regularly scheduled workday.

OTHER DEDUCTIONS

For information on other payroll deduction items such as Credit Union, Auto/Home Insurance, etc., contact the appropriate vendor or office directly. If you have a 403(b) loan, you must contact Fidelity Retirement Services at 1-866-682-7787 to make arrangements for repayment of the loan while off pay status. If you do not take action, the outstanding amount may be reported as a taxable distribution. It may also be subject to federal and state early distribution penalties.

OTHER UCSC EMPLOYMENT

You must contact the Campus Payroll Office as soon as possible if you have other UCSC paid employment during your furlough.

COBRA

The Consolidated Omnibus Reconciliation Act of 1985 (COBRA) requires the University of California to offer continuation of University sponsored medical, dental and optical insurance to qualified employees and family members enrolled in the plans at the time of certain qualifying events, such as a furlough period. The COBRA continuation period runs concurrently with, and not in addition to, any University continuation provisions such as the continuation of UC paid contributions to medical, dental and optical premiums during a furlough period. If you terminate employment at the end of the furlough period, you may continue coverage for the remainder of the COBRA period by paying the entire premium plus 2% directly to the insurance provider. If you do not continue your insurance during a furlough period, you will not be eligible for continued coverage under COBRA at the time of termination. If you wish to request a COBRA Continuation form or need assistance, please call the campus Benefits Office at (831) 459-2013.

2008 medical plan rates are in effect for employees in Research Support Professionals (RX) and the Technical Unit (TX); 2009 medical plan rates are in effect for employees in CUE Clerical Unit (CX) and Residual Health Care Professionals (HX) bargaining units until the University and their unions' representatives reach agreement or until otherwise implemented in accordance with the requirements of HEERA.

MEDICAL PLANS: 2010 EMPLOYEE MONTHLY FURLOUGH PREMIUM

2008 medical plan rates are in effect for employees in Research Support Professionals (RX) and the Technical Unit (TX); 2009 medical plan rates are in effect for employees in CUE Clerical Unit (CX) and Residual Health Care Professionals (HX) bargaining units until the University and their unions' representatives reach agreement or until otherwise implemented in accordance with the requirements of HEERA.

Your 2010 MCB (Medical Contribution Base) is based on your January 2009 full-time equivalent salary, even if you work part-time or your salary changed after that date.

Medical Contribution Base of \$46,000 and under:

	Employee Only	Employee and Child(ren)	Employee and Adult	Family
Anthem Blue Cross Plus (POS)	29.47	53.05	102.26	125.82
Anthem Blue Cross PPO	88.61	159.50	226.45	297.33
Health Net	19.97	35.95	82.30	98.28
Kaiser	6.84	12.31	14.36	19.84
CIGNA Choice Fund	86.61	155.89	222.25	291.53
Core	.00	.00	.00	.00

Medical Contribution Base from \$46,001 to \$92,000:

Anthem Blue Cross Plus (POS)	60.68	109.23	173.51	222.04
Anthem Blue Cross PPO	119.82	215.68	297.70	393.55
Health Net	51.18	92.13	153.55	194.50
Kaiser	38.05	68.49	85.61	116.16
CIGNA Choice Fund	117.82	212.07	293.50	387.75
Core	.00	.00	.00	.00

Medical Contribution Base from \$92,001 to \$137,000:

Anthem Blue Cross Plus (POS)	92.71	166.88	237.37	311.52
Anthem Blue Cross PPO	151.85	273.33	361.56	483.03
Health Net	83.21	149.78	217.41	283.98
Kaiser	70.08	126.14	149.47	205.54
CIGNA Choice Fund	149.85	269.72	357.36	477.23
Core	.00	.00	.00	.00

Medical Contribution Base over \$137,000:

Anthem Blue Cross Plus (POS)	125.87	226.57	303.52	404.20
Anthem Blue Cross PPO	185.01	333.02	427.71	575.71
Health Net	116.37	209.47	283.56	376.66
Kaiser	103.24	185.83	215.62	298.22
CIGNA Choice Fund	183.01	329.41	423.51	569.91
Core	.00	.00	.00	.00

Other Plans

ARAG Legal Plan	\$10.02	\$13.78	\$13.78	\$15.03
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2010 UCSC INSURANCE CONTINUATION FORM FOR EMPLOYEES ON FURLOUGH

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Important Notice – UC contributions for medical, dental and optical *are not automatic*. Failure to return this form on time may result in a loss of coverage.

Participants in Health and/or DepCare FSA plans-Please contact Benefits Office at the beginning of your leave period for information on the impact of your leave on your FSA participation. (UCSC Benefits Office 831-459-2013)

When you are on furlough, you must take immediate action in order to continue or cancel your University insurance. You should complete this form, indicating the action you wish taken for each plan, and return it no later than the 10th of the month to:

UCSC PAYROLL OFFICE, 1156 HIGH STREET, SANTA CRUZ, CA 95064

Please read the attached sheet for important information regarding your insurance plans and instructions on how to complete this form. Please make a copy of this form for your records. If you do not list a particular insurance plan and/or indicate whether it should be continued or cancelled, **the plan will be subject to cancellation**. If you cannot remember which insurance plans you have, you may view them on-line at: <http://atyourservice.ucop.edu>.

UCSC ELECTION TO CONTINUE/CANCEL INSURANCE PLANS

Name: _____ ID#: _____

E-Mail: _____

Home Address: _____

Home Phone: _____ Unit: _____

Period of Furlough: From: _____ to _____

Insurance Plan	Continue	or	Cancel*	Monthly	Total Premium (Lump Sum)	Payroll Use
Medical: _____	()		()	\$ _____	\$ _____	_____
Dental: _____	()		()	\$ _____	\$ _____	_____
Vision Service Plan	()		()	\$ _____	\$ _____	_____
ARAG Legal	()		()	\$ _____	\$ _____	_____
Supplemental Life	()		()	\$ _____	\$ _____	_____
Basic Dependent Life	()		()	\$ _____	\$ _____	_____
Expanded Dependent Life	()		()	\$ _____	\$ _____	_____
AD&D	()		()	\$ _____	\$ _____	_____
Supplemental Disability	()		()	\$ _____	\$ _____	_____
Health FSA & DepCare FSA	n/a		Participation stops automatically. Contact Benefits for more information.*.			

Enclosed is my check/money order in the amount of \$ _____ (monthly) or \$ _____ (lump sum) made payable to "UC Regents" for the following payroll month(s):

() Jan. () Feb. () Mar. () April () May () June () July () Aug () Sept. () Oct. () Nov. () Dec.

***Note: If any plans are cancelled, you will need to re-enroll upon return from your leave.** It is your responsibility to contact the Benefits Office upon your return in order to initiate benefits enrollment in any coverage that is cancelled.

Employee Signature

Date