

Use this task to enroll in benefits in UCPath.

Dashboard Navigation:

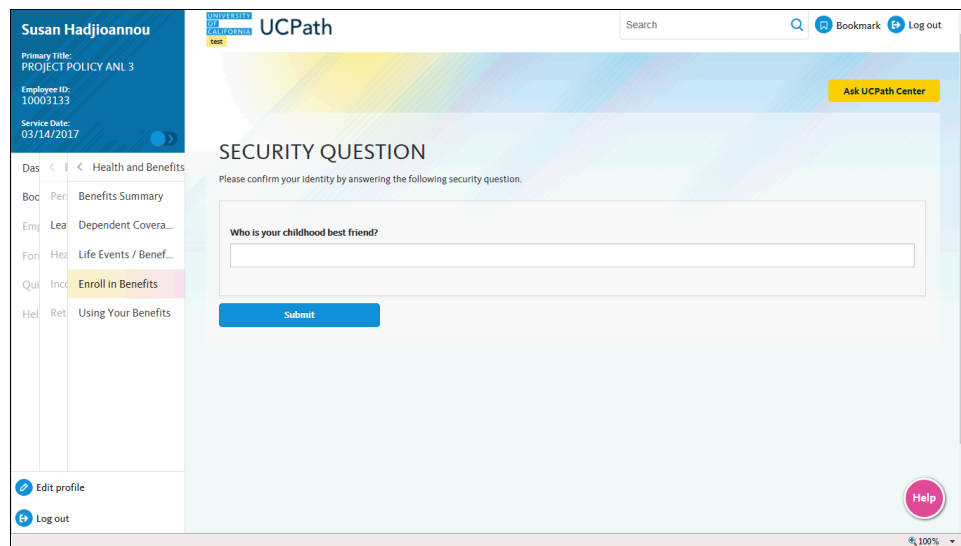
Health and Welfare > **Enroll in Benefits**

or

Menu Navigation:

Employee Actions > Health and Welfare > **Enroll in Benefits**

Note: This example uses sample images as seen on a computer. Sample images appear differently on a tablet or smartphone, but the steps remain the same.



Step	Action
1.	<p>Before you enroll in benefits, you must validate your identity. UCPath randomly displays one of the security questions set up on your profile. Click in the Security Question field.</p> <p>For this example click in the Who is your childhood best friend? field.</p>
2.	<p>Enter the desired information into the Security Question field.</p> <p>For this example, enter Molly.</p>
3.	<p>Your answer appears as a series of dots.</p> <p>Click the Submit button.</p> <div>Submit</div>

Susan Hadjoannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

BENEFITS ENROLLMENT
Susan Hadjoannou

Welcome to the benefits enrollment section. Congratulations! You and your family now have an opportunity to enroll in benefits based on one of the newly benefits eligible scenarios listed below. You have either been directed to this page or navigated here on your own because

- You are a new hire with a PIE to enroll in benefits initially, OR
- You are newly eligible for benefits, OR
- You have a life event that enables you to make enrollment changes, OR
- The annual Open Enrollment period is now open

Scroll down to view the list of your benefit events below. Do you see the **Select** button next to an event? If so, that indicates the event is currently open to you for enrollment. Click on **Select** to begin.

Take advantage of this opportunity now because your other options are limited to:

90-day Waiting Period
You may enroll yourself or eligible family members at any time in medical coverage only with a 90 consecutive calendar day waiting period; coverage is effective after the 90 days have elapsed. Your premiums may need to be paid on an after-tax basis.

Open Enrollment
Open Enrollment (OE) is the time each year (typically in the Fall) when you can change your medical plan and sign up for other benefits. Shortly before OE opens, UC will launch a dedicated website to guide you through the process. Changes you make during OE are effective January 1 of the following year.

Life Event
A *life event* provides an opportunity to enroll in, or make changes to, your UC benefits when family status changes occur (marriage, domestic partnership, birth, adoption or divorce) or, in some cases, after you or an eligible family member experience an involuntary loss of non-UC health & welfare coverage.

Step	Action
4.	<p>If you answer the question correctly, UCPath displays the Benefits Enrollment page, and you can enroll in benefits.</p> <p>If you answer incorrectly, an error message appears. You have three attempts to answer this question correctly. After three incorrect answers, UCPath displays the Security Questions Setup page. You must provide your date of birth and the last four digits of your Social Security number to validate your identity and then update your security questions and answers.</p>

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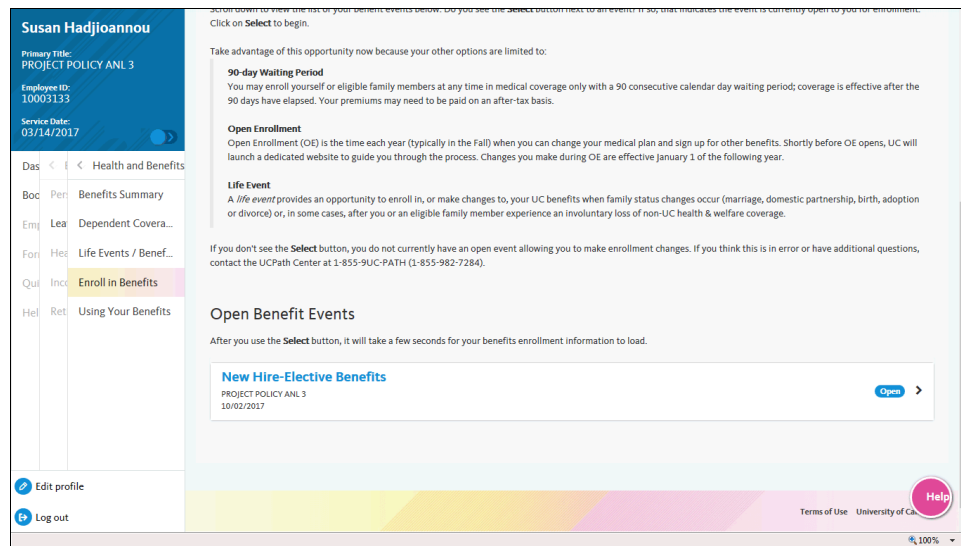
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Step	Action
5.	<p>In this scenario, you will enroll yourself and your dependents in benefits eligible to a new hire.</p> <p>Review the Benefits Enrollment page before you begin the enrollment task.</p> <p>You elect your benefits when you are first eligible for benefits during the hire process, if you become newly eligible due to a job change and annually during the open enrollment process.</p>
6.	Click the scroll bar.

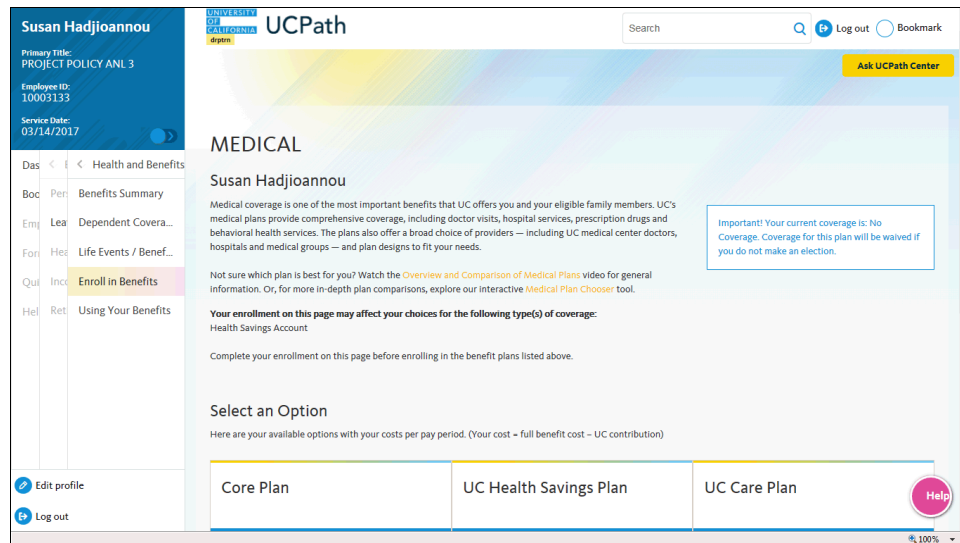


Step	Action
7.	<p>The Open Benefit Events section displays events for which you are eligible, such as the New Hire-Elective Benefits event that is Open in this example.</p> <p>Click the Open button.</p> <p> </p>

Step	Action
8.	<p>The New Hire-Elective Benefits page appears. You must complete your benefit elections within 31 days of eligibility.</p> <p>Click the scroll bar.</p>

Step	Action
9.	<p>The Current Enrollment Summary section displays your current elections for all eligible plan types. At new hire, most elections default to Waive.</p> <p>Click the Edit button for each benefit plan to make your benefit choices. As you make selections, the Before Tax and After Tax columns at the top of the page display your costs associated with the election for that plan.</p>

Step	Action
10.	To add Medical coverage, click the Edit button. 



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MEDICAL

Susan Hadjioannou

Medical coverage is one of the most important benefits that UC offers you and your eligible family members. UC's medical plans provide comprehensive coverage, including doctor visits, hospital services, prescription drugs and behavioral health services. The plans also offer a broad choice of providers — including UC medical center doctors, hospitals and medical groups — and plan designs to fit your needs.

Important! Your current coverage is: No Coverage. Coverage for this plan will be waived if you do not make an election.

Not sure which plan is best for you? Watch the [Overview and Comparison of Medical Plans](#) video for general information. Or, for more in-depth plan comparisons, explore our interactive [Medical Plan Chooser](#) tool.

Your enrollment on this page may affect your choices for the following type(s) of coverage:
Health Savings Account

Complete your enrollment on this page before enrolling in the benefit plans listed above.

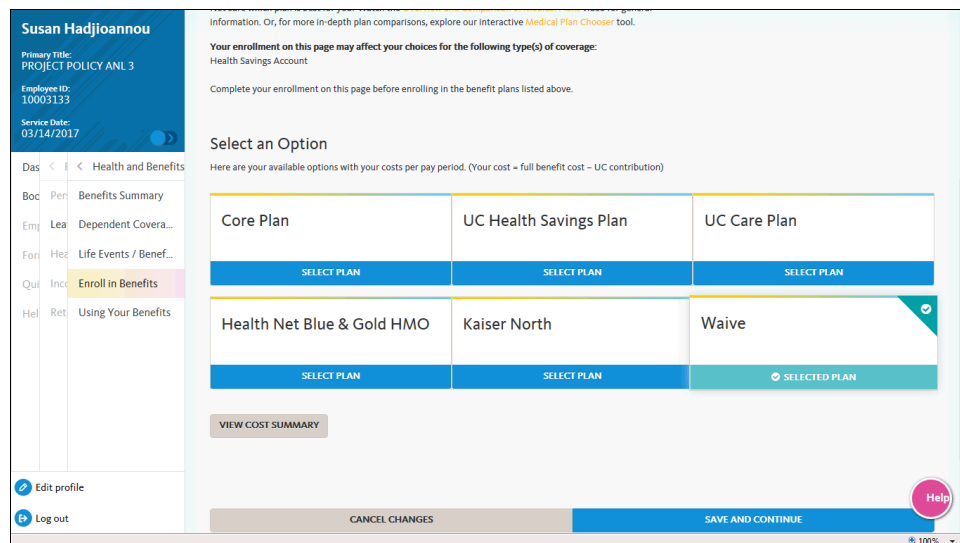
Select an Option

Here are your available options with your costs per pay period. (Your cost = full benefit cost – UC contribution)

Core Plan	UC Health Savings Plan	UC Care Plan
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Help

Step	Action
11.	If you need information about the medical plans before you make your selection, click the links to watch the Overview and Comparison of Medical Plans video or to use the interactive Medical Plan Chooser tool.
12.	Click the scroll bar.



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Select an Option


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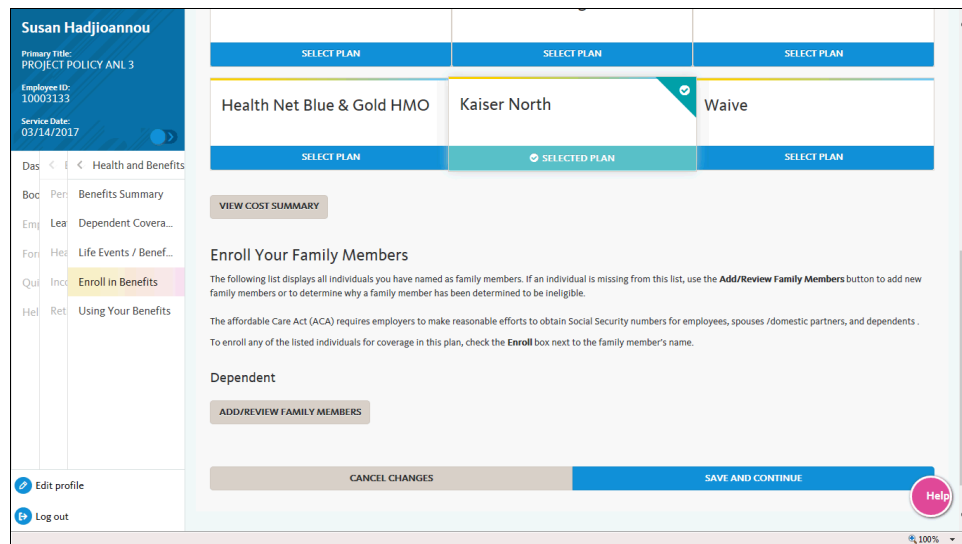
Core Plan	UC Health Savings Plan	UC Care Plan
SELECT PLAN	SELECT PLAN	SELECT PLAN
Health Net Blue & Gold HMO	Kaiser North	Waive
SELECT PLAN	SELECT PLAN	SELECTED PLAN

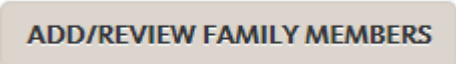
VIEW COST SUMMARY

CANCEL CHANGES SAVE AND CONTINUE

Help

Step	Action
13.	<p>In the Select an Option section, choose your medical plan or waive coverage.</p> <p>For this example select the Kaiser North option.</p> <p>Click the Select Plan button.</p> 
14.	Click the scroll bar.



Step	Action
15.	Use the Enroll Your Family Members section to cover dependents with the selected plan.
16.	<p>Dependents you already entered in UCPath appear in the Dependent list. You also can add or modify dependents during the enrollment process.</p> <p>Click the Add/Review Family Members button.</p> 

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Ask UCPath Center

ADD/REVIEW DEPENDENT

Susan Hadjioannou

The people listed below may be eligible for Benefit Coverage. Select a name to view or modify personal information. To add a dependent or beneficiary, select the 'Add a dependent or beneficiary' button.

No Dependents on Record

RETURN TO EVENT SELECTION

ADD A DEPENDENT

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Help

Step	Action
17.	<p>In this example, add your spouse and child.</p> <p>Click the Add a Dependent button.</p>

Susan Hadjioannou

Primary Title: PROJECT POLICY ANL 3

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Service Date: 03/14/2017

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DEPENDENT PERSONAL INFORMATION

Select Save once you have added your Dependent personal information. This information will go into effect as of Oct 2, 2017.

Personal Information

* First Name

Middle Name

* Last Name

Name Prefix

Name Suffix

* Date of Birth

* Gender


Male

SSN

Help

Step	Action
18.	<p>Use the Dependent Personal Information page to enter key information for your dependent.</p> <p>Click in the First Name field.</p>
19.	<p>Enter the desired information into the First Name field. For this example, enter Rafa.</p>
20.	<p>Click in the Last Name field.</p>

Step	Action
21.	Enter the desired information into the Last Name field. For this example, enter Hadjoannou .
22.	Click in the Date of Birth field.
23.	Use the calendar to enter the dependent's date of birth. For this example, the date will be entered for you.
24.	The Gender field defaults to Male . Update the gender, if necessary.
25.	Click the scroll bar.

Step	Action
26.	While the SSN filed is not required, you should enter the dependent's Social Security number, if known. Click in the SSN field.
27.	Enter the Social Security number in the SSN field with dashes between the digits. For this example, enter 123-13-3121 .
28.	Click the button to the right of the What Relationship do you have with this dependent? field. 
29.	Choose the dependent's relationship to you. For this example, click the Spouse list item.
30.	Click the scroll bar.

Susan Hadjioannou
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What Relationship do you have with this dependent?

Address and Telephone

☒ Same Address as Employee

Country: United States
Address: 300 Lakeside Dr
Dummy 100
Oakland, CA 94612

☐ Same Phone as Employee
Phone:

RETURN TO DEPENDENT SUMMARY SAVE

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Step	Action
31.	The address for the dependent defaults to your address. Deselect the Same Address as Employee check box if you need to enter a different address for the dependent. For this example, do not change the address.
32.	Click in the Phone field. <div></div>
33.	Enter the desired information into the Phone field. For this example, enter 5125559144 .

Susan Hadjioannou
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What Relationship do you have with this dependent?

Address and Telephone

☒ Same Address as Employee

Country: United States
Address: 300 Lakeside Dr
Dummy 100
Oakland, CA 94612

☐ Same Phone as Employee
Phone: 5125559144 X

RETURN TO DEPENDENT SUMMARY SAVE

Edit profile Log out

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Step	Action
34.	Click the Save button.

Susan Hadjioannou
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SAVE CONFIRMATION
The Save was successful.

OK

Das < < Health and Benefits
Boc Per Benefits Summary
Emj Lea Dependent Covera...
Fori Hes Life Events / Benef...
Qui Inco **Enroll in Benefits**
Hel Ret Using Your Benefits

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Help

100%

Step	Action
35.	A confirmation message appears. Click the OK button.

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Ask UCPath Center

ADD/REVIEW DEPENDENT
Susan Hadjioannou

The people listed below may be eligible for Benefit Coverage. Select a name to view or modify personal information. To add a dependent or beneficiary, select the 'Add a dependent or beneficiary' button.

Rafa Hadjioannou
Spouse (Opposite/Same Sex) NA
Date of Birth: 03/11/1980
Dependent: Yes

RETURN TO EVENT SELECTION ADD A DEPENDENT

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Help

100%

Step	Action
36.	Your spouse appears in the list. Now add a child as another dependent. Click the Add a Dependent button.

Susan Hadjioannou
Primary Title: PROJECT POLICY ANL 3
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Service Date: 03/14/2017

UCPath

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Ask UCPath Center

DEPENDENT PERSONAL INFORMATION

Select Save once you have added your Dependent personal information. This information will go into effect as of Oct 2, 2017.

Personal Information

* First Name

Middle Name

* Last Name

Name Prefix

Name Suffix

* Date of Birth


* Gender Male

SSN

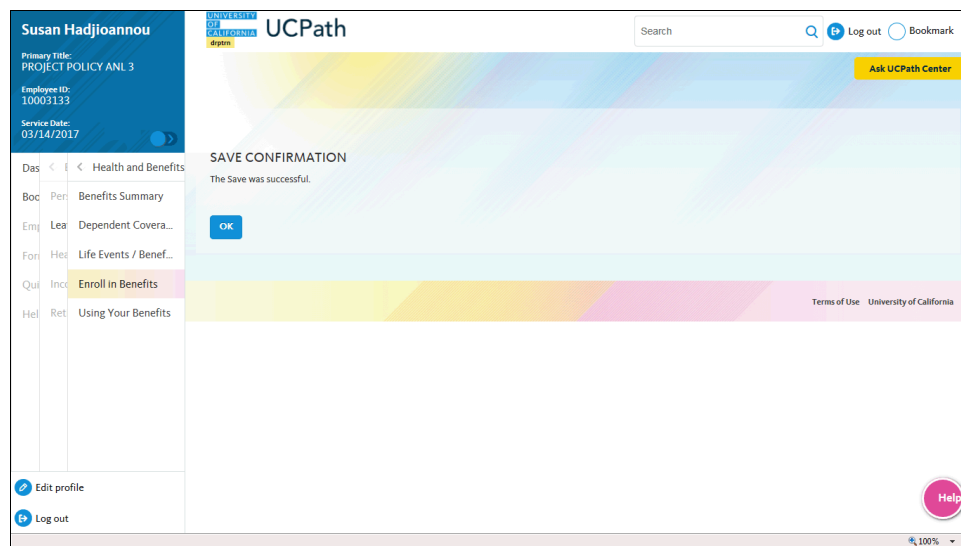
Edit profile Log out


Help

Step	Action
37.	Click in the First Name field.
38.	Enter the desired information into the First Name field. For this example, enter Cada .
39.	Click in the Last Name field.
40.	Enter the desired information into the Last Name field. For this example, enter Hadjioannou .
41.	Click in the Date of Birth field.
42.	Use the calendar to enter the dependent's date of birth. In this example, the date will be entered for you.
43.	Update the gender, if necessary. For this example, accept the default.
44.	Click the scroll bar.

Step	Action
45.	Click in the SSN field.
46.	Enter the desired information into the SSN field. For this example, enter 137-97-3197 .
47.	Click the button to the right of the What Relationship do you have with this dependent? field. 
48.	Select the dependent's relationship to you. Click the Child (Biological or Adopted) list item. <u>Child (Biological or Adopted)</u>

Step	Action
49.	Deselect the Same Address as Employee check box if you need to enter a different address for the dependent. For this example, accept the default address.
50.	Click in the Phone field. <input type="text"/>
51.	Enter the desired information into the Phone field. For this example, enter 5125551100 .
52.	Click the Save button.



Step	Action
53.	A confirmation message appears. Click the OK button. 

Susan Hadjioannou
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Employee ID: 10003133
Service Date: 03/14/2017

ADD/REVIEW DEPENDENT
Susan Hadjioannou

The people listed below may be eligible for Benefit Coverage. Select a name to view or modify personal information. To add a dependent or beneficiary, select the 'Add a dependent or beneficiary' button.

Rafa Hadjioannou Spouse (Opposite/Same Sex) NA	Date of Birth: 03/11/1980 Dependent: Yes	>
Cada Hadjioannou Child EE Biological/Adopted NC	Date of Birth: 01/12/2002 Dependent: Yes	>

RETURN TO EVENT SELECTION ADD A DEPENDENT

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Step	Action
54.	<p>Details for the newly added dependent appear in the list. Click the Add a Dependent button to add another dependent or return to the enrollment event to enroll the dependents in coverage.</p> <p>Click the Return to Event Selection button.</p>

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MEDICAL
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Medical coverage is one of the most important benefits that UC offers you and your eligible family members. UC's medical plans provide comprehensive coverage, including doctor visits, hospital services, prescription drugs and behavioral health services. The plans also offer a broad choice of providers — including UC medical center doctors, hospitals and medical groups — and plan designs to fit your needs.

Important! Your current coverage is: No Coverage. Coverage for this plan will be waived if you do not make an election.

Not sure which plan is best for you? Watch the [Overview and Comparison of Medical Plans](#) video for general information. Or, for more in-depth plan comparisons, explore our interactive [Medical Plan Chooser](#) tool.

Your enrollment on this page may affect your choices for the following type(s) of coverage:
Health Savings Account

Complete your enrollment on this page before enrolling in the benefit plans listed above.

Select an Option
Here are your available options with your costs per pay period. (Your cost = full benefit cost – UC contribution)

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Step	Action
55.	<p>The Medical page appears again.</p> <p>Click the scroll bar.</p>

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Health Net Blue & Gold HMO | Kaiser North | Waive

SELECT PLAN | SELECTED PLAN | SELECT PLAN

VIEW COST SUMMARY

Enroll Your Family Members

The following list displays all individuals you have named as family members. If an individual is missing from this list, use the **Add/Review Family Members** button to add new family members or to determine why a family member has been determined to be ineligible.

The affordable Care Act (ACA) requires employers to make reasonable efforts to obtain Social Security numbers for employees, spouses /domestic partners, and dependents . To enroll any of the listed individuals for coverage in this plan, check the **Enroll** box next to the family member's name.

Dependent

☐ Rafa Hadjoannou - Spouse (Opposite/Same Sex) NA
☐ Cada Hadjoannou - Child EE Biological/Adopted NC

ADD/REVIEW FAMILY MEMBERS

CANCEL CHANGES | SAVE AND CONTINUE

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Step	Action
56.	The newly entered dependents appear in the Dependent list but are not yet enrolled in coverage. To enroll a dependent in this plan, click the check box next to the dependent's name. Click the Spouse (Opposite/Same Sex) NA option. <input type="checkbox"/>
57.	Click the Child EE Biological/ Adopted NC option. <input type="checkbox"/>

If you choose the Health Net Blue & Gold HMO medical plan, you are required to enter a Primary Care Provider. The Choose a Primary Care Provider ID section appears on the Medical page. Click the **Select a Provider** link to specify your provider. Click the **Dependent Provider List** to specify the dependent's providers. Select other check boxes based on your information.

Choose a Primary Care Provider ID

Enrollment in this plan requires that you select a primary care provider. You must indicate whether or not you have already established a relationship with this provider, since some providers are not accepting new patients.

Dependent/beneficiary error

Specify a Primary Care Provider ID | Select a Provider

☐ Check here if you have previously seen this provider
☐ Click here to have the vendor select a Primary Care Provider ID on your behalf
☐ Check here to use the same provider for all your dependents


[Dependent Provider List](#)

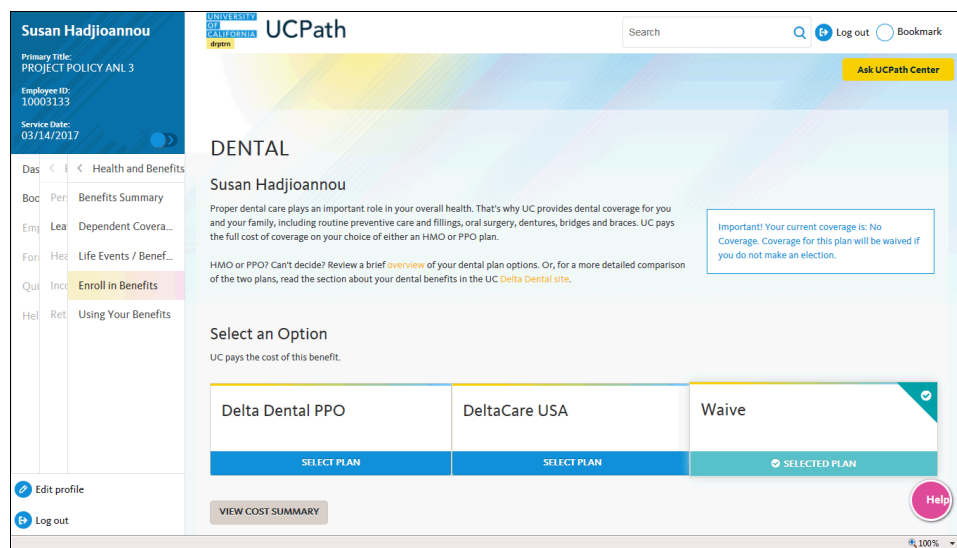
Step	Action
58.	Some medical plans require that you specify a primary care provider. This is an example of the Choose a Primary Care Provider ID section so that you can see the fields, but it is not required for this enrollment example.

Step	Action
59.	After you complete all medical enrollments, click the Save and Continue button to submit your changes or click the Cancel Changes button to exit this page without saving your changes. Click the Save and Continue button.

Step	Action
60.	UCPath displays the details for your election, including the plan, the estimated pay period cost for the benefit election and the covered dependents.
61.	Click the Save Changes button to submit your changes or click the Back button to make changes. Click the Save Changes button.

Step	Action
62.	Click the scroll bar.

Step	Action
63.	The Current Enrollment Summary page appears again. The details for your medical election have been updated.
64.	To add Dental coverage, click the Edit button. 



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UCPath

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Ask UCPath Center

DENTAL

Susan Hadjoannou

Proper dental care plays an important role in your overall health. That's why UC provides dental coverage for you and your family, including routine preventive care and fillings, oral surgery, dentures, bridges and braces. UC pays the full cost of coverage on your choice of either an HMO or PPO plan.

Important! Your current coverage is: No Coverage. Coverage for this plan will be waived if you do not make an election.

HMO or PPO? Can't decide? Review a brief [overview](#) of your dental plan options. Or, for a more detailed comparison of the two plans, read the section about your dental benefits in the UC [Delta Dental site](#).

Select an Option


UC pays the cost of this benefit.

Delta Dental PPO	DeltaCare USA	Waive
SELECT PLAN	SELECT PLAN	SELECTED PLAN

VIEW COST SUMMARY

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Help []

Step	Action
65.	If you need information about the dental plans before you make your selection, click the links to watch the overview video or review the UC Delta Dental site .
66.	In the Select an Option section, choose your dental plan or waive coverage. For this example select the Delta Dental PPO option. Click the Select Plan button. 
67.	Click the scroll bar.

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Delta Dental PPO | DeltaCare USA | Waive

SELECTED PLAN | SELECT PLAN | SELECT PLAN

VIEW COST SUMMARY

Enroll Your Family Members

The following list displays all individuals you have named as family members. If an individual is missing from this list, use the **Add/Review Family Members** button to add new family members or to determine why a family member has been determined to be ineligible.

The affordable Care Act (ACA) requires employers to make reasonable efforts to obtain Social Security numbers for employees, spouses /domestic partners, and dependents. To enroll any of the listed individuals for coverage in this plan, check the **Enroll** box next to the family member's name.

Dependent

☐ Rafa Hadjoannou - Spouse (Opposite/Same Sex) NA
☐ Cada Hadjoannou - Child EE Biological/Adopted NC

ADD/REVIEW FAMILY MEMBERS

CANCEL CHANGES | SAVE AND CONTINUE

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Step	Action
68.	<p>Previously entered dependents appear in the Dependent list but are not yet enrolled in the plan. If necessary, click the Add/Review Family Members button to create or modify dependents. For this example, enroll both dependents.</p> <p>Click the Spouse (Opposite/Same Sex) NA option.</p> <p><input type="checkbox"/></p>
69.	<p>Click the Child EE Biological/ Adopted NC option.</p> <p><input type="checkbox"/></p>

If you choose the **DeltaCare USA** dental plan, the **Choose a Primary Care Provider ID** sections appears on the **Dental** page. Click the **Select a Provider** link to specify your provider. Click the **Dependent Provider List** to specify the dependent's providers. Select other check boxes based on your information.

Choose a Primary Care Provider ID

Enrollment in this plan requires that you select a primary care provider. You must indicate whether or not you have already established a relationship with this provider, since some providers are not accepting new patients.

Dependent/beneficiary error

Specify a Primary Care Provider ID | Select a Provider

☐ Check here if you have previously seen this provider
☐ Click here to have the vendor select a Primary Care Provider ID on your behalf
☐ Check here to use the same provider for all your dependents

[Dependent Provider List](#)

Step	Action
70.	Some dental plans require that you specify a primary care provider. This is an example of the Choose a Primary Care Provider ID section so that you can see the fields, but it is not required for this enrollment example.

Step	Action
71.	After you complete all dental enrollments, click the Save and Continue button to submit your changes or click the Cancel Changes button to exit this page without saving your changes. Click the Save and Continue button.

Step	Action
72.	<p>UCPath displays the details for your election, including the plan, the estimated pay period cost for the benefit election and the covered dependents.</p> <p>Click the Save Changes button to submit your changes or click the Back button to make changes.</p> <p>Click the Save Changes button.</p>

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NEW HIRE-ELECTIVE BENEFITS

Susan Hadjoannou

As a new employee, you have a special 31-day enrollment period called the Period of Initial Eligibility (PIE). Your PIE starts on the first day of eligibility, and ends 31 days later. If you do not enroll, you will have limited coverage and your family members will not be enrolled.

Take advantage of this enrollment opportunity now because your other options would be limited to:

90-day Waiting Period
You may enroll yourself or eligible family members at any time in medical coverage only with a 90 consecutive calendar day waiting period; coverage is effective after the 90 days have elapsed. Your premiums may need to be paid on an after-tax basis.

Open Enrollment
Open Enrollment (OE) is the time each year (typically in the Fall) when you can change your medical plan and sign up for other benefits. Shortly before OE opens, UC will launch a dedicated web site to guide you through the process. Changes you make during OE are effective January 1 of the following year.

Life Event
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Important: Make each of your benefits choices by selecting the **Edit** button. When you have completed your selections, use the Submit button to finalize your choices. Once you submit, you cannot change your selections.

Current Enrollment Summary

Step	Action
73.	Click the scroll bar.

Important: Make each of your benefits choices by selecting the **Edit** button. When you have completed your selections, use the Submit button to finalize your choices. Once you submit, you cannot change your selections.

Current Enrollment Summary

This table summarizes estimated costs per pay period for your new benefit choices. (The Employer column displays the amount UC contributes to the UC Retirement Plan on your behalf.)

Election Summary

Summarized estimates for new Benefit Elections	Before Tax	After Tax	Total	Employer
Costs	164.28	0.00	164.28	1,729.52
Your Costs	164.28	0.00	164.28	

Current Benefits Details

Medical
Kaiser North:Fam NA+NC
New
164.28 Before Tax


Dental
Delta Dental PPO:Fam NA+NC
New
0.00 Before Tax

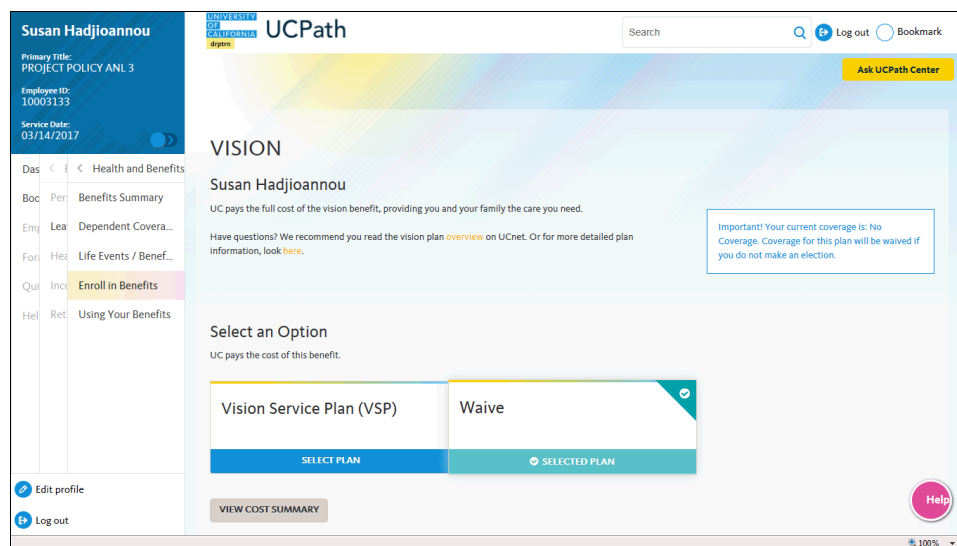
Vision
Waive
New

Legal Services
Waive
New

Behavioral Health
Optum Behavioral Health-OPTKP:Fam

Supplemental Life
Waive

Step	Action
74.	The Current Enrollment Summary page appears again. The details for your dental election have been updated.
75.	To add Vision coverage, click the Edit button. 



Susan Hadjoannou

Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

UCPath

VISION

Susan Hadjoannou

UC pays the full cost of the vision benefit, providing you and your family the care you need.

Have questions? We recommend you read the vision plan [overview](#) on UCNet. Or for more detailed plan information, look [here](#).

Important! Your current coverage is: No Coverage. Coverage for this plan will be waived if you do not make an election.

Select an Option

UC pays the cost of this benefit.


Vision Service Plan (VSP) Waive

SELECT PLAN SELECTED PLAN

VIEW COST SUMMARY

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Step	Action
76.	If you need information about the vision plans before you make your selection, click the link to read the overview or, for more detailed plan information, click the here link.
77.	In the Select an Option section, choose your vision plan or waive coverage. For this example select the Vision Service Plan (VSP) option. Click the Select Plan button. 
78.	Click the scroll bar.

Susan Hadjioannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

Health and Benefits
Benefits Summary
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Using Your Benefits

Vision Service Plan (VSP) Waive
SELECTED PLAN SELECT PLAN
VIEW COST SUMMARY

Enroll Your Family Members
The following list displays all individuals you have named as family members. If an individual is missing from this list, use the **Add/Review Family Members** button to add new family members or to determine why a family member has been determined to be ineligible.
The affordable Care Act (ACA) requires employers to make reasonable efforts to obtain Social Security numbers for employees, spouses /domestic partners, and dependents .
To enroll any of the listed individuals for coverage in this plan, check the **Enroll** box next to the family member's name.

Dependent
☐ Rafa Hadjioannou - Spouse (Opposite/Same Sex) NA
☐ Cada Hadjioannou - Child EE Biological/Adopted NC
ADD/REVIEW FAMILY MEMBERS
CANCEL CHANGES SAVE AND CONTINUE

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100%

Step	Action
79.	<p>Previously entered dependents appear in the Dependent list but are not yet enrolled in the plan. If necessary, click the Add/Review Dependents button to create or modify dependents. For this example, enroll both dependents.</p> <p>Click the Spouse (Opposite/Same Sex) NA option.</p> <p><input type="checkbox"/></p>
80.	<p>Click the Child EE Biological/ Adopted NC option.</p> <p><input type="checkbox"/></p>
81.	<p>After you complete all vision enrollments, click the Save and Continue button to submit your changes or click the Cancel Changes button to exit this page without saving your changes.</p> <p>Click the Save and Continue button.</p>

Susan Hadjoannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

VISION
Susan Hadjoannou

Your Choice
You have chosen Vision Service Plan (VSP) with Family (NA+NC) coverage. You are also covering Family (NA+NC).

Your estimated cost per pay period
\$0.00

Your Covered Dependents
Dependent Information

Name	Relationship
Rafa Hadjoannou	Spouse (Opposite/Same Sex) NA
Cada Hadjoannou	Child EE Biological/Adopted NC

Notes
Once submitted, this choice will take effect on 10/02/2017. Deductions for this choice will start with the pay period beginning 10/02/2017.

BACK **SAVE CHANGES**

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Step	Action
82.	<p>UCPath displays the details for your election, including the plan, the estimated pay period cost for the benefit election and the covered dependents.</p> <p>Click the Save Changes button to submit your changes or click the Back button to make changes.</p> <p>Click the Save Changes button.</p>

Susan Hadjoannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

UCPath

NEW HIRE-ELECTIVE BENEFITS
Susan Hadjoannou

As a new employee, you have a special 31-day enrollment period called the Period of Initial Eligibility (PIE). Your PIE starts on the first day of eligibility, and ends 31 days later. If you do not enroll, you will have limited coverage and your family members will not be enrolled.

Take advantage of this enrollment opportunity now because your other options would be limited to:

90-day Waiting Period
You may enroll yourself or eligible family members at any time in medical coverage only with a 90 consecutive calendar day waiting period; coverage is effective after the 90 days have elapsed. Your premiums may need to be paid on an after-tax basis.

Open Enrollment
Open Enrollment (OE) is the time each year (typically in the Fall) when you can change your medical plan and sign up for other benefits. Shortly before OE opens, UC will launch a dedicated web site to guide you through the process. Changes you make during OE are effective January 1 of the following year.

Life Event
A life event provides an opportunity to enroll in, or make changes to, your UC benefits when family status changes occur (marriage, domestic partnership, birth, adoption or divorce) or, in some cases, after you or an eligible family member experience an involuntary loss of non-UC health & welfare coverage.

Important: Make each of your benefits choices by selecting the **Edit** button. When you have completed your selections, use the Submit button to finalize your choices. Once you submit, you cannot change your selections.

Current Enrollment Summary

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Step	Action
83.	Click the scroll bar.

Susan Hadjoannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

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Fori Hec Life Events / Benef...
Qui Inco **Enroll in Benefits**
Hel Ret Using Your Benefits

Edit profile
Log out

This table summarizes estimated costs per pay period for your new benefit choices. (The Employer column displays the amount UC contributes to the UC Retirement Plan on your behalf.)

Election Summary

Summarized estimates for new Benefit Elections	Before Tax	After Tax	Total	Employer
Costs	164.28	0.00	164.28	1,742.27
Your Costs	164.28	0.00	164.28	

Current Benefits Details

Medical

Kaiser North:Fam NA+NC
[New](#)

164.28
Before Tax

Dental

Delta Dental PPO:Fam NA+NC
[New](#)

0.00
Before Tax

Vision

Vision Service Plan (VSP):Fam NA+NC
[New](#)

0.00
Before Tax

Legal Services

Waive
[New](#)


Behavioral Health

Optum Behavioral Health-OPTKP:Fam NA+NC
[New](#)

Supplemental Life

Waive

Help

Step	Action
84.	The Current Enrollment Summary page appears again. The details for your vision election have been updated.
85.	To add Legal Services , click the Edit button. 

Susan Hadjoannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

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LEGAL SERVICES

Susan Hadjoannou

You may need legal advice at one time or another, but high legal fees could prevent you from getting the necessary assistance. When you enroll, you'll have access to easy, affordable solutions to common legal problems with a plan that provides comprehensive assistance with routine preventive or defensive matters and covers most basic legal services, including traffic tickets, divorce, bankruptcy, and ID theft.

Important! Your current coverage is: No Coverage. Coverage for this plan will be waived if you do not make an election.

How can I benefit from having legal insurance? UC provides an overview of the legal insurance plan [here](#). Or, visit the plan [website](#) to learn more.

Select an Option

These are your available options, including cost:


ARAG Legal

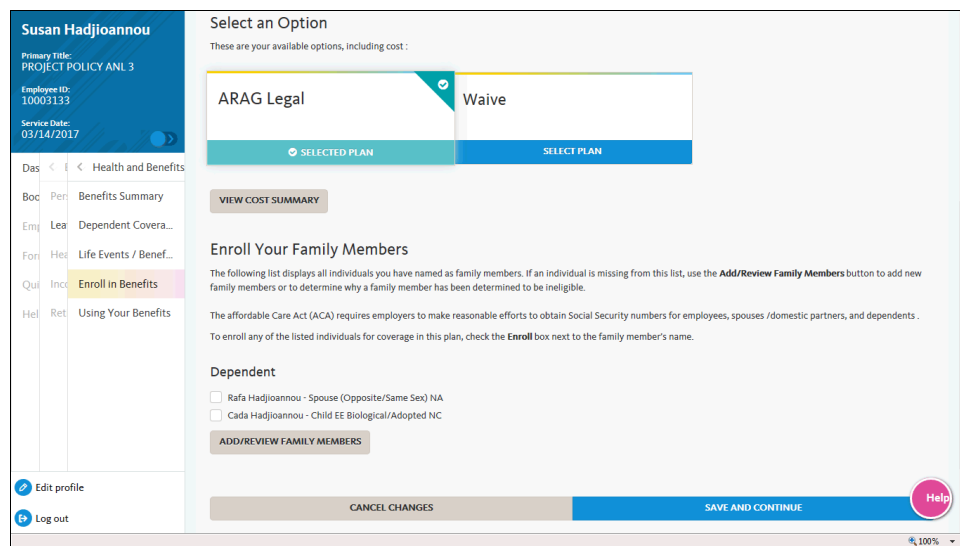
Waive

VIEW COST SUMMARY

Help

Step	Action
86.	If you need information about the legal services plan before you make your selection, click the here link to see an overview or click the plan website link.

Step	Action
87.	<p>In the Select an Option section, choose your legal services plan or waive coverage.</p> <p>For this example select the ARAG Legal option.</p> <p>Click the Select Plan button.</p> 
88.	Click the scroll bar.



Step	Action
89.	<p>Previously entered dependents appear in the Dependent list but are not yet enrolled in the plan. If necessary, click the Add/Review Dependents button to create or modify dependents. For this example, enroll both dependents.</p> <p>Click the Spouse (Opposite/Same Sex) NA option.</p> <input type="checkbox"/>
90.	<p>Click the Child EE Biological/ Adopted NC.</p> <input type="checkbox"/>
91.	<p>After you complete all legal services enrollments, click the Save and Continue button to submit your changes or click the Cancel Changes button to exit this page without saving your changes.</p> <p>Click the Save and Continue button.</p>

Susan Hadjoannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

LEGAL SERVICES

Susan Hadjoannou

Your Choice
You have chosen ARAG Legal with Family (NA+NC) coverage. You are also covering Family (NA+NC).

Your estimated cost per pay period
\$15.62

Your Covered Dependents

Dependent Information	
Name	Relationship
Rafa Hadjoannou	Spouse (Opposite/Same Sex) NA
Cada Hadjoannou	Child EE Biological/Adopted NC

Notes
Once submitted, this choice will take effect on 10/02/2017. Deductions for this choice will start with the pay period beginning 10/02/2017.

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Step	Action
92.	UCPath displays the details for your election, including the plan, the estimated pay period cost for the benefit election and the covered dependents.
93.	Click the Save Changes button to submit your changes or click the Back button to make changes. Click the Save Changes button.

Susan Hadjoannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

NEW HIRE-ELECTIVE BENEFITS

Susan Hadjoannou

As a new employee, you have a special 31-day enrollment period called the Period of Initial Eligibility (PIE). Your PIE starts on the first day of eligibility, and ends 31 days later. If you do not enroll, you will have limited coverage and your family members will not be enrolled.

Take advantage of this enrollment opportunity now because your other options would be limited to:

90-day Waiting Period
You may enroll yourself or eligible family members at any time in medical coverage only with a 90 consecutive calendar day waiting period; coverage is effective after the 90 days have elapsed. Your premiums may need to be paid on an after-tax basis.

Open Enrollment
Open Enrollment (OE) is the time each year (typically in the Fall) when you can change your medical plan and sign up for other benefits. Shortly before OE opens, UC will launch a dedicated web site to guide you through the process. Changes you make during OE are effective January 1 of the following year.

Life Event
A *life event* provides an opportunity to enroll in, or make changes to, your UC benefits when family status changes occur (marriage, domestic partnership, birth, adoption or divorce) or, in some cases, after you or an eligible family member experience an involuntary loss of non-UC health & welfare coverage.

Important: Make each of your benefits choices by selecting the **Edit** button. When you have completed your selections, use the Submit button to finalize your choices. Once you submit, you cannot change your selections.

Current Enrollment Summary

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Step	Action
94.	Click the scroll bar.

Susan Hadjoannou

Primary Title:
PROJECT POLICY ANL 3

Employee ID:
10003133

Service Date:
03/14/2017

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Qui Inco **Enroll in Benefits**

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Current Enrollment Summary

This table summarizes estimated costs per pay period for your new benefit choices. (The Employer column displays the amount UC contributes to the UC Retirement Plan on your behalf.)

Election Summary

Summarized estimates for new Benefit Elections	Before Tax	After Tax	Total	Employer
Costs	164.28	15.62	179.90	1,742.27
Your Costs	164.28	15.62	179.90	

Current Benefits Details

Medical

Kaiser North:Fam NA+NC
[New](#)

164.28
Before Tax

Dental

Delta Dental PPO:Fam NA+NC
[New](#)

0.00
Before Tax

Vision

Vision Service Plan (VSP):Fam NA+NC
[New](#)

0.00
Before Tax

Legal Services

ARAG Legal:Fam NA+NC
[New](#)

15.62
After Tax

Behavioral Health

Optum Behavioral Health-OPTKP:Fam NA+NC
[New](#)

Supplemental Life

Waive

[Help](#)

Step	Action
95.	<p>The Current Enrollment Summary page appears again. The details for your legal services election have been updated.</p> <p>Notice that the system has also automatically enrolled you in the Optum Behavioral Health plan because you enrolled in a medical plan. The Edit button is not available for this plan type.</p>
96.	<p>To add Supplemental Life coverage, click the Edit button.</p>

Susan Hadjoannou

Primary Title:
PROJECT POLICY ANL 3

Employee ID:
10003133

Service Date:
03/14/2017

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SUPPLEMENTAL LIFE

Susan Hadjoannou

Life insurance provides financial protection for your dependents in the event of your death, and can be important to their future security. UC recognizes the importance of this safeguard and provides limited life insurance coverage (Basic Life) at no cost to you.

For greater security, in addition to your automatic enrollment in Basic Life, you may want to choose Supplemental Life from the list of options below; you will pay monthly premiums based on the coverage amount you select. Making this selection increases your plan enrollment options because you are then eligible to enroll in either the Basic Dependent Life or the Expanded Dependent Life plan, but not both.

Benefits are paid to your beneficiaries if you die while employed or on paid leave, or during the first four months of approved leave without pay or temporary layoff. Your beneficiaries receive these benefits in addition to any other death benefits for which you may qualify.

Not sure if you'd like to enroll? Visit UCNet for an [overview](#) of all UC life insurance plans. Or for more detailed plan information, review the [UC benefits booklet](#).

These are your available options, including cost per pay period:

Your enrollment on this page may affect your choices for the following type(s) of coverage:

Supp Dependent Life - Spouse
Supp Dependent Life - Child

Complete your enrollment on this page before enrolling in the benefit plans listed above.

[Help](#)

Step	Action
97.	If you need information about the supplemental life plans before you make your selection, click the links to see the overview on UCnet or review the UC benefits booklet .
98.	Click the scroll bar.

Susan Hadjoannou
Primary Title:
PROJECT POLICY ANL 3
Employee ID:
10003133
Service Date:
03/14/2017

Health and Benefits

Benefits Summary
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death benefits for which you may qualify.

Not sure if you'd like to enroll? Visit UCnet for an [overview](#) of all UC life insurance plans. Or for more detailed plan information, review the [UC benefits booklet](#).

These are your available options, including cost per pay period:

Your enrollment on this page may affect your choices for the following type(s) of coverage:
Supp Dependent Life - Spouse
Supp Dependent Life - Child

Complete your enrollment on this page before enrolling in the benefit plans listed above.

Select a Plan

Plan	Selection
Supplemental Life 20K (\$20,000) Cost: \$0.62	<input type="button" value="SELECT"/>
Supplemental Life 1x Annual (\$85,000) Cost: \$2.64	<input type="button" value="SELECT"/>
Supplemental Life 2x Annual (\$170,000) Cost: \$5.27	<input type="button" value="SELECT"/>
Supplemental Life 3x Annual (\$255,000) Cost: \$7.91	<input type="button" value="SELECT"/>
Supplemental Life 4x Annual (\$340,000) Cost: \$10.54	<input type="button" value="SELECT"/>
Waive Cost: \$	<input checked="" type="button" value="SELECT"/>

[Help](#)

Step	Action
99.	In the Select a Plan section, choose your supplemental life plan or waive coverage. For this example click the Supplemental Life 1x Annual (85,000) button. <input type="button" value="SELECT"/>
100.	Click the Continue button to submit your changes or click the Cancel button to exit this page without saving your changes. Click the Continue button.

Susan Hadjoannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

SUPPLEMENTAL LIFE
Susan Hadjoannou

Your Choice
You have chosen Supplemental Life 1x Annual (\$85,000) coverage.

Your estimated cost per pay period
\$2.64

Notes
The actual amount of coverage for this plan is based upon your salary, and may vary in accordance with any changes to your salary over time. Once submitted, this choice will take effect on 10/02/2017. Deductions for this choice will start with the pay period beginning 10/02/2017.

BACK **SAVE CHANGES**

Step	Action
101.	<p>After you complete all supplemental life selections, click the Save Changes button to submit your changes or click the Back button to make changes.</p> <p>Click the Save Changes button.</p>

Susan Hadjoannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

NEW HIRE-ELECTIVE BENEFITS
Susan Hadjoannou

As a new employee, you have a special 31-day enrollment period called the Period of Initial Eligibility (PIE). Your PIE starts on the first day of eligibility, and ends 31 days later. If you do not enroll, you will have limited coverage and your family members will not be enrolled.

Take advantage of this enrollment opportunity now because your other options would be limited to:

90-day Waiting Period
You may enroll yourself or eligible family members at any time in medical coverage only with a 90 consecutive calendar day waiting period; coverage is effective after the 90 days have elapsed. Your premiums may need to be paid on an after-tax basis.

Open Enrollment
Open Enrollment (OE) is the time each year (typically in the Fall) when you can change your medical plan and sign up for other benefits. Shortly before OE opens, UC will launch a dedicated web site to guide you through the process. Changes you make during OE are effective January 1 of the following year.

Life Event
A life event provides an opportunity to enroll in, or make changes to, your UC benefits when family status changes occur (marriage, domestic partnership, birth, adoption or divorce) or, in some cases, after you or an eligible family member experience an involuntary loss of non-UC health & welfare coverage.

Important: Make each of your benefits choices by selecting the **Edit** button. When you have completed your selections, use the Submit button to finalize your choices. Once you submit, you cannot change your selections.

Current Enrollment Summary

Step	Action
102.	Click the scroll bar.

Susan Hadjioannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

Health and Benefits

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Life Events / Benefits
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Election Summary
Summarized estimates for new Benefit Elections

	Before Tax	After Tax	Total	Employer
Costs	164.28	18.26	182.54	1,742.27
Your Costs	164.28	18.26	182.54	

Current Benefits Details

Medical
Kaiser North:Fam NA+NC
New
164.28 Before Tax

Dental
Delta Dental PPO:Fam NA+NC
New
0.00 Before Tax

Vision
Vision Service Plan (VSP):Fam NA+NC
New
0.00 Before Tax

Legal Services
ARAG Legal:Fam NA+NC
New
15.62 After Tax

Behavioral Health
Optum Behavioral Health-OPTKP:Fam NA+NC
New

Supplemental Life
SUPLIFE 1X
New
2.64 After Tax

Step	Action
103.	The Current Enrollment Summary page appears again. The details for your supplemental life election have been updated.
104.	Click the scroll bar.

Susan Hadjioannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

Health and Benefits

Benefits Summary
Dependent Coverage
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Legal Services
ARAG Legal:Fam NA+NC
New
15.62 After Tax

Behavioral Health
Optum Behavioral Health-OPTKP:Fam NA+NC
New

Supplemental Life
SUPLIFE 1X
New
2.64 After Tax

Basic Dependent Life
Waive

Supp Dependent Life - Spouse
Waive

Supp Dependent Life - Child
Waive

Employee & Dependent AD&D
Waive


Basic Disability
No Coverage

Voluntary ShortTerm Disability
Waive
New

Voluntary Long-Term

Flex Spending - Health

Flex Spending -

Step	Action
105.	To add Basic Dependent Life coverage, click the Edit button. 

Susan Hadjioannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

BASIC DEPENDENT LIFE
Susan Hadjioannou

UC offers two life insurance plans for insuring your eligible family members.
Basic Dependent Life and Expanded Dependent Life

Basic Dependent Life – provides \$5,000 coverage each for spouse or domestic partner and/or eligible children

*Expanded Dependent Life** – provides up to 50 percent of employee Supplemental Life benefit (maximum of \$200,000) for spouse or domestic partner; \$10,000 each for eligible children
* Enrollment in employee Supplemental Life is a requirement for Expanded Dependent Life coverage.

Not sure which plan or coverage level is best? Review the UCnet life insurance plans [overview](#) page, or the [benefits booklet](#).

This benefit plan requires enrollment in one of the following plans:
Life

Enroll in the benefit plans listed above before completing this page.

Select an Option

Your per pay period cost for this coverage is \$1.02.
Enrollment in this benefit plan requires enrollment in Life.

☒ NO, I DO NOT WANT TO ENROLL BASIC DEPENDENT LIFE (\$5,000)

Step	Action
106.	If you need information about the dependent life plans before you make your selection, click the links to see the overview on UCnet or review the UC benefits booklet .
107.	Click the scroll bar.

Susan Hadjioannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

BASIC DEPENDENT LIFE
Susan Hadjioannou

UC offers two life insurance plans for insuring your eligible family members.
Basic Dependent Life and Expanded Dependent Life

Basic Dependent Life – provides \$5,000 coverage each for spouse or domestic partner and/or eligible children

*Expanded Dependent Life** – provides up to 50 percent of employee Supplemental Life benefit (maximum of \$200,000) for spouse or domestic partner; \$10,000 each for eligible children
* Enrollment in employee Supplemental Life is a requirement for Expanded Dependent Life coverage.

Not sure which plan or coverage level is best? Review the UCnet life insurance plans [overview](#) page, or the [benefits booklet](#).

This benefit plan requires enrollment in one of the following plans:
Life

Enroll in the benefit plans listed above before completing this page.

Select an Option

Your per pay period cost for this coverage is \$1.02.
Enrollment in this benefit plan requires enrollment in Life.

☒ NO, I DO NOT WANT TO ENROLL BASIC DEPENDENT LIFE (\$5,000)

Step	Action
108.	In the Select an Option section, choose to enroll in the plan or accept the default option to not enroll in Basic Dependent Life . Click the Basic Dependent Life (\$5,000) button.

Susan Hadjioannou
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Fori Hea Life Events / Benef...
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\$200,000 for spouse or domestic partner; \$10,000 each for eligible children
* Enrollment in employee Supplemental Life is a requirement for Expanded Dependent Life coverage.

Not sure which plan or coverage level is best? Review the UCnet life insurance plans [overview page](#), or the [benefits booklet](#).

This benefit plan requires enrollment in one of the following plans:
Life

Enroll in the benefit plans listed above [before](#) completing this page.

Select an Option
Your per pay period cost for this coverage is \$1.02.
Enrollment in this benefit plan requires enrollment in Life.

Designate Your Dependents
The following list displays all individuals you have named as family members. If an individual is missing from this list, use the **Add/Review Family Members** button to add new family members or to determine why a family member has been determined to be ineligible.

The affordable Care Act (ACA) requires employers to make reasonable efforts to obtain Social Security numbers for employees, spouses /domestic partners, and dependents .

Your Covered Dependents

<input checked="" type="checkbox"/>	Rafa Hadjioannou - Spouse (Opposite/Same Sex)
<input checked="" type="checkbox"/>	NA
<input checked="" type="checkbox"/>	Cada Hadjioannou - Child EE Biological/Adopted
<input checked="" type="checkbox"/>	NC

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Step	Action
109.	Your dependents appear in the Your Covered Dependents list. Notice that the Covered check box is selected for all eligible dependents. If necessary, clear the check box for one or more dependents or click the Add/Review Dependents button to create or modify dependents.
110.	Click the Continue button to submit your changes or click the Cancel button to exit this page without saving your changes. Click the Continue button.

Susan Hadjioannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

Das < < < Health and Benefits
Boc Per Benefits Summary
Emj Lea Dependent Covera...
Fori Hea Life Events / Benef...
Quit Inco **Enroll in Benefits**
Hel Ret Using Your Benefits

Edit profile
Log out

BASIC DEPENDENT LIFE
Susan Hadjioannou

Your Choice
You have chosen Basic Dependent Life (\$5,000) coverage.

Your estimated cost per pay period
\$1.02

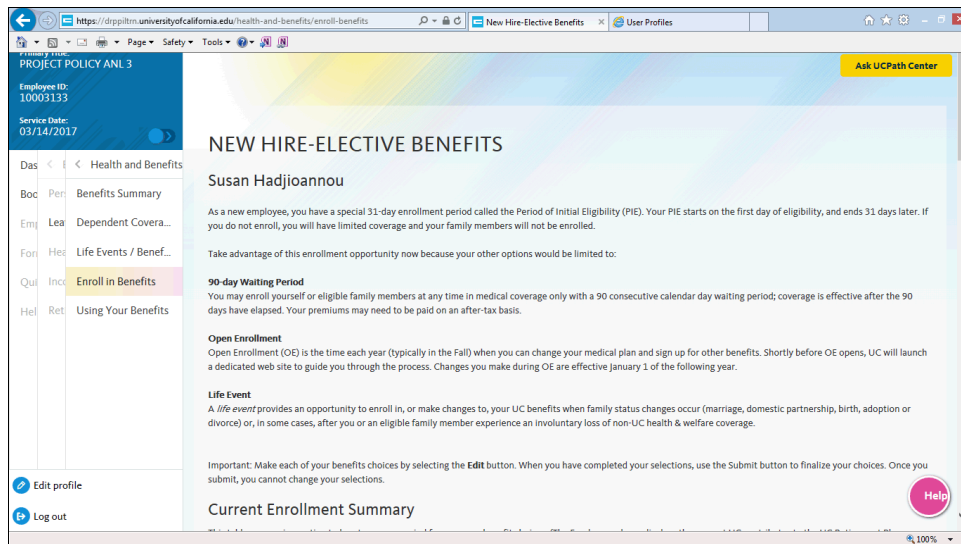
Your Covered Dependents

Name	Relationship
Rafa Hadjioannou	Spouse (Opposite/Same Sex) NA
Cada Hadjioannou	Child EE Biological/Adopted NC

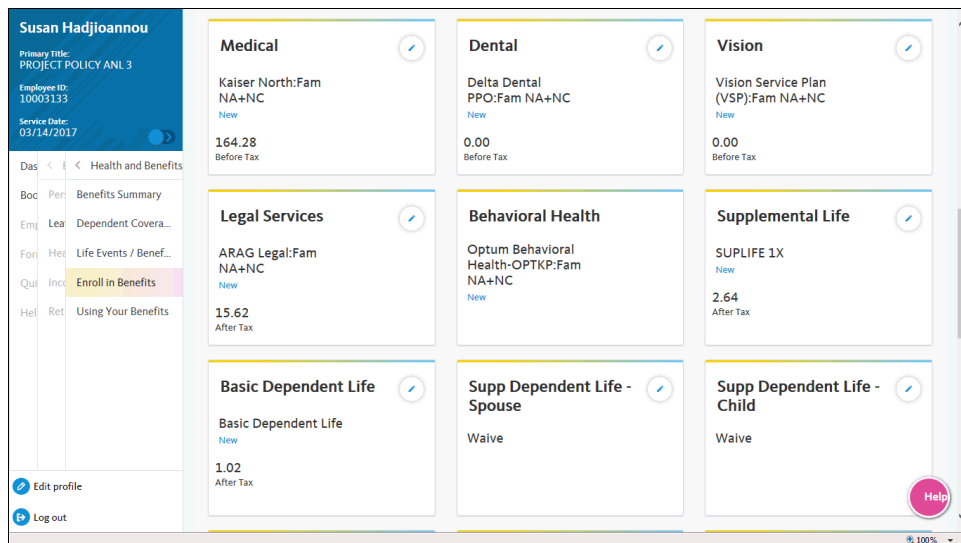
Notes
The actual amount of coverage for Expanded Dependent Life - Spouse and Expanded Dependent Life - Family is based upon your salary, and may vary in accordance with any changes to your salary over time. Once submitted, this choice will take effect on 10/02/2017. Deductions for this choice will start with the pay period beginning 10/02/2017.


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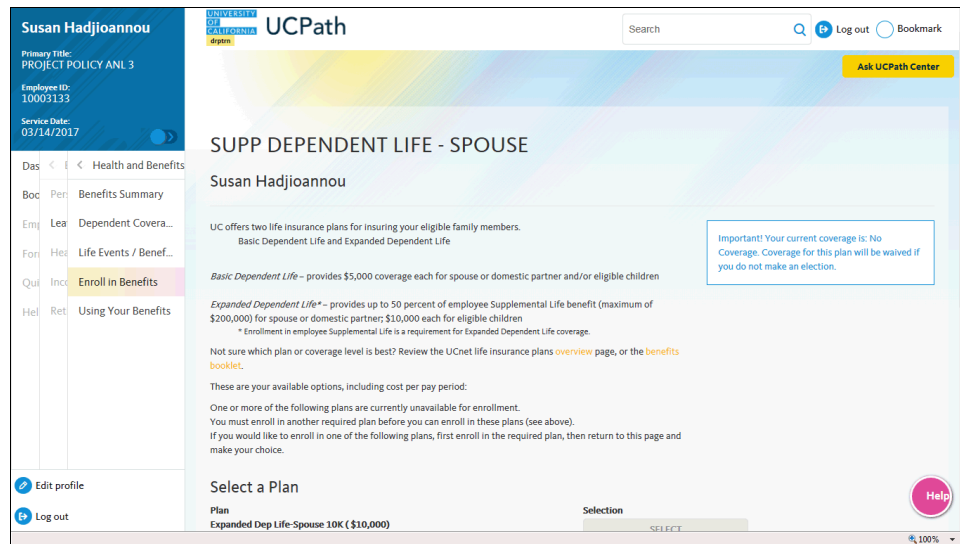
Step	Action
111.	<p>UCPath displays the details for your election, including the plan, the estimated pay period cost for the benefit election and the covered dependents.</p> <p>Click the Save Changes button to submit your changes or click the Back button to make changes.</p> <p>Click the Save Changes button.</p>



Step	Action
112.	Click the scroll bar.



Step	Action
113.	<p>To add Supp Dependent Life - Spouse coverage, click the Edit button.</p> <p>Click the Edit button.</p> 



Susan Hadjoannou

Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

UCPath

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Ask UCPath Center

SUPP DEPENDENT LIFE - SPOUSE

Susan Hadjoannou

UC offers two life insurance plans for insuring your eligible family members.
Basic Dependent Life and Expanded Dependent Life

Important! Your current coverage is: No Coverage. Coverage for this plan will be waived if you do not make an election.

Basic Dependent Life – provides \$5,000 coverage each for spouse or domestic partner and/or eligible children

*Expanded Dependent Life** – provides up to 50 percent of employee Supplemental Life benefit (maximum of \$200,000) for spouse or domestic partner; \$10,000 each for eligible children
* Enrollment in employee Supplemental Life is a requirement for Expanded Dependent Life coverage.

Not sure which plan or coverage level is best? Review the UCnet life insurance plans [overview](#) page, or the [benefits booklet](#).

These are your available options, including cost per pay period:

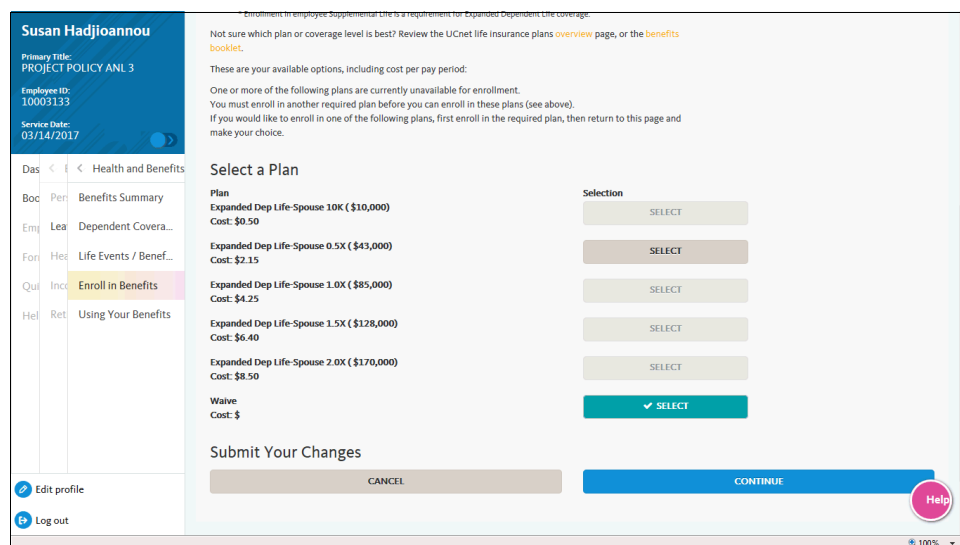
One or more of the following plans are currently unavailable for enrollment.
You must enroll in another required plan before you can enroll in these plans (see above).
If you would like to enroll in one of the following plans, first enroll in the required plan, then return to this page and make your choice.

Select a Plan

Plan	Selection
Expanded Dep Life-Spouse 10K (\$10,000)	SELECT

100%

Step	Action
114.	If you need information about the supplemental dependent life - spouse plans before you make your selection, click the links to see the overview on UCnet or review the UC benefits booklet .
115.	Click the scroll bar.



Susan Hadjoannou

Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

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Ask UCPath Center

SUPP DEPENDENT LIFE - SPOUSE

Susan Hadjoannou

UC offers two life insurance plans for insuring your eligible family members.
Basic Dependent Life and Expanded Dependent Life

Important! Your current coverage is: No Coverage. Coverage for this plan will be waived if you do not make an election.

Basic Dependent Life – provides \$5,000 coverage each for spouse or domestic partner and/or eligible children

*Expanded Dependent Life** – provides up to 50 percent of employee Supplemental Life benefit (maximum of \$200,000) for spouse or domestic partner; \$10,000 each for eligible children
* Enrollment in employee Supplemental Life is a requirement for Expanded Dependent Life coverage.

Not sure which plan or coverage level is best? Review the UCnet life insurance plans [overview](#) page, or the [benefits booklet](#).

These are your available options, including cost per pay period:

One or more of the following plans are currently unavailable for enrollment.
You must enroll in another required plan before you can enroll in these plans (see above).
If you would like to enroll in one of the following plans, first enroll in the required plan, then return to this page and make your choice.

Select a Plan

Plan	Selection
Expanded Dep Life-Spouse 10K (\$10,000) Cost: \$0.50	SELECT
Expanded Dep Life-Spouse 0.5X (\$43,000) Cost: \$2.15	SELECT
Expanded Dep Life-Spouse 1.0X (\$85,000) Cost: \$4.25	SELECT
Expanded Dep Life-Spouse 1.5X (\$128,000) Cost: \$6.40	SELECT
Expanded Dep Life-Spouse 2.0X (\$170,000) Cost: \$8.50	SELECT
Waive Cost: \$	✓ SELECT

Submit Your Changes

CANCEL CONTINUE

100%

Step	Action
116.	<p>In the Select a Plan section, choose your dependent life plan or waive coverage.</p> <p>For this example click the Expanded Dep Life-Spouse 0.5X (\$43,000) button.</p> <p>SELECT</p>

Susan Hadjioannou
Primary Title: PROJECT POLICY ANL 3
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Das < < Health and Benefits
Boc Per: Benefits Summary
Emg Lea: Dependent Covera...
Fori Hes: Life Events / Benef...
Qui Inco: **Enroll in Benefits**
Hel Ret: Using Your Benefits

Expanded Dep Life-Spouse 1.0X (\$10,000)
Cost: \$0.50
SELECT

Expanded Dep Life-Spouse 0.5X (\$43,000)
Cost: \$2.15
✓ SELECT

Expanded Dep Life-Spouse 1.0X (\$85,000)
Cost: \$4.25
SELECT

Expanded Dep Life-Spouse 1.5X (\$128,000)
Cost: \$6.40
SELECT

Expanded Dep Life-Spouse 2.0X (\$170,000)
Cost: \$8.50
SELECT

Waive
Cost: \$
SELECT

Designate Your Dependents
The following list displays all individuals you have named as family members. If an individual is missing from this list, use the **Add/Review Family Members** button to add new family members or to determine why a family member has been determined to be ineligible.

The affordable Care Act (ACA) requires employers to make reasonable efforts to obtain Social Security numbers for employees, spouses /domestic partners, and dependents .

Your Covered Dependents
☒ Rafa Hadjioannou - Spouse (Opposite/Same Sex)
 NA
 + ADD/REVIEW DEPENDENTS

Submit Your Changes
 CANCEL CONTINUE

Edit profile
Log out

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Step	Action
117.	<p>Your dependents appear in the Your Covered Dependents list. Notice that the Covered check box is selected for eligible dependents. If necessary, clear the check box for one or more dependents or click the Add/Review Dependents button to create or modify dependents.</p>
118.	<p>Click the Continue button to submit your changes or click the Cancel button to exit this page without saving your changes.</p> <p>Click the Continue button.</p>

Susan Hadjoannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

UCPath

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Ask UCPath Center

SUPP DEPENDENT LIFE - SPOUSE

Susan Hadjoannou

Your Choice
You have chosen Expanded Dep Life-Spouse 0.5X (\$43,000) coverage.

Your estimated cost per pay period
\$2.15

Your Covered Dependents

Name	Relationship	Amount
Rafa Hadjoannou	Spouse (Opposite/Same Sex) NA	\$43,000

Notes
The actual amount of coverage for this plan is based upon your salary, and may vary in accordance with any changes to your salary over time. Once submitted, this choice will take effect on 10/02/2017. Deductions for this choice will start with the pay period beginning 10/02/2017.

BACK **SAVE CHANGES** **Help**

Edit profile **Log out**

Step	Action
119.	UCPath displays the details for your election, including the plan and the estimated pay period cost for the benefit election.
120.	Click the Save Changes button to submit your changes or click the Back button to make changes. Click the Save Changes button.

Susan Hadjoannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
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UCPath

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Ask UCPath Center

NEW HIRE-ELECTIVE BENEFITS

Susan Hadjoannou

As a new employee, you have a special 31-day enrollment period called the Period of Initial Eligibility (PIE). Your PIE starts on the first day of eligibility, and ends 31 days later. If you do not enroll, you will have limited coverage and your family members will not be enrolled.

Take advantage of this enrollment opportunity now because your other options would be limited to:

90-day Waiting Period
You may enroll yourself or eligible family members at any time in medical coverage only with a 90 consecutive calendar day waiting period; coverage is effective after the 90 days have elapsed. Your premiums may need to be paid on an after-tax basis.

Open Enrollment
Open Enrollment (OE) is the time each year (typically in the Fall) when you can change your medical plan and sign up for other benefits. Shortly before OE opens, UC will launch a dedicated web site to guide you through the process. Changes you make during OE are effective January 1 of the following year.

Life Event
A life event provides an opportunity to enroll in, or make changes to, your UC benefits when family status changes occur (marriage, domestic partnership, birth, adoption or divorce) or, in some cases, after you or an eligible family member experience an involuntary loss of non-UC health & welfare coverage.

Important: Make each of your benefits choices by selecting the **Edit** button. When you have completed your selections, use the Submit button to finalize your choices. Once you submit, you cannot change your selections.

Current Enrollment Summary

Edit profile **Log out**

Step	Action
121.	Click the scroll bar.

Susan Hadjioannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

Important: Make each of your benefits choices by selecting the **Edit** button. When you have completed your selections, use the Submit button to finalize your choices. Once you submit, you cannot change your selections.

Current Enrollment Summary

This table summarizes estimated costs per pay period for your new benefit choices. (The Employer column displays the amount UC contributes to the UC Retirement Plan on your behalf.)

Election Summary

	Before Tax	After Tax	Total	Employer
Costs	164.28	21.43	185.71	1,742.27
Your Costs	164.28	21.43	185.71	

Current Benefits Details

Medical
Kaiser North:Fam NA+NC
New
164.28 Before Tax

Dental
Delta Dental PPO:Fam NA+NC
New
0.00 Before Tax

Vision
Vision Service Plan (VSP):Fam NA+NC
New
0.00 Before Tax

Legal Services
ARAG Legal:Fam

Behavioral Health
Optum Behavioral

Supplemental Life
SUPLIFE 1X

Step	Action
122.	The Current Enrollment Summary page appears again. The details for your supplemental dependent life -spouse election have been updated.
123.	Click the scroll bar.

Susan Hadjioannou
Primary Title: PROJECT POLICY ANL 3
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164.28 Before Tax

0.00 Before Tax

0.00 Before Tax

Legal Services
ARAG Legal:Fam NA+NC
New
15.62 After Tax

Behavioral Health
Optum Behavioral Health-OPTKP:Fam NA+NC
New

Supplemental Life
SUPLIFE 1X
New
2.64 After Tax

Basic Dependent Life
Basic Dependent Life
New
1.02 After Tax

Supp Dependent Life - Spouse
SpolIF0.5X: Salary X 0.5 : \$43,000
New
2.15 After Tax

Supp Dependent Life - Child
Waive

Employee & Dependent AD&D

Basic Disability
No Coverage

Voluntary ShortTerm Disability

Step	Action
124.	To add Supp Dependent Life - Child coverage, click the Edit button.

Susan Hadjoannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

UCPath

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Ask UCPath Center

SUPP DEPENDENT LIFE - CHILD

Susan Hadjoannou

UC offers two life insurance plans for insuring your eligible family members.
Basic Dependent Life and Expanded Dependent Life

Important! Your current coverage is: No Coverage. Coverage for this plan will be waived if you do not make an election.

Basic Dependent Life -- provides \$5,000 coverage each for spouse or domestic partner and/or eligible children

*Expanded Dependent Life** -- provides up to 50 percent of employee Supplemental Life benefit (maximum of \$200,000) for spouse or domestic partner; \$10,000 each for eligible children
* Enrollment in employee Supplemental Life is a requirement for Expanded Dependent Life coverage.

Not sure which plan or coverage level is best? Review the UCnet life insurance plans [overview](#) page, or the [benefits booklet](#).

This benefit plan requires enrollment in one of the following plans:
Supplemental Life

Changing your choices for any of the benefit plans listed above, may invalidate your enrollment on this page.

Select an Option

Your per pay period cost for this coverage is \$0.33.
Enrollment in this benefit plan requires enrollment in Supplemental Life.

Edit profile [] Log out []

Help []

Step	Action
125.	If you need information about the supplemental dependent life - child plans before you make your selection, click the links to see the overview on UCnet or review the UC benefits booklet .
126.	In the Select an Option section, choose to enroll in the plan or accept the default option to not enroll in expanded dependent life. Click the Expanded Dep Life-Child 10K (\$10,000) button.
127.	Click the scroll bar.

Susan Hadjoannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

UCPath

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Ask UCPath Center

SUPP DEPENDENT LIFE - CHILD

Susan Hadjoannou

UC offers two life insurance plans for insuring your eligible family members.
Basic Dependent Life and Expanded Dependent Life

Important! Your current coverage is: No Coverage. Coverage for this plan will be waived if you do not make an election.

Basic Dependent Life -- provides \$5,000 coverage each for spouse or domestic partner and/or eligible children

*Expanded Dependent Life** -- provides up to 50 percent of employee Supplemental Life benefit (maximum of \$200,000) for spouse or domestic partner; \$10,000 each for eligible children
* Enrollment in employee Supplemental Life is a requirement for Expanded Dependent Life coverage.

Not sure which plan or coverage level is best? Review the UCnet life insurance plans [overview](#) page, or the [benefits booklet](#).

This benefit plan requires enrollment in one of the following plans:
Supplemental Life

Changing your choices for any of the benefit plans listed above, may invalidate your enrollment on this page.

Select an Option

Your per pay period cost for this coverage is \$0.33.
Enrollment in this benefit plan requires enrollment in Supplemental Life.

Designate Your Dependents

The following list displays all individuals you have named as family members. If an individual is missing from this list, use the **Add/Review Family Members** button to add new family members or to determine why a family member has been determined to be ineligible.

The affordable Care Act (ACA) requires employers to make reasonable efforts to obtain Social Security numbers for employees, spouses /domestic partners, and dependents .

Your Covered Dependents

☒ Coda Hadjoannou - Child EE Biological/Adopted NC

Edit profile [] Log out []

Help []

Step	Action
128.	Your dependents appear in the Your Covered Dependents list. Notice that the Covered check box is selected for eligible dependents. If necessary, clear the check box for one or more dependents or click the Add/Review Dependents button to create or modify dependents.
129.	Click the Continue button to submit your changes or click the Cancel button to exit this page without saving your changes. Click the Continue button.

Susan Hadjoannou
Primary Title: PROJECT POLICY ANL 3
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UCPath

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SUPP DEPENDENT LIFE - CHILD

Susan Hadjoannou

Your Choice
You have chosen Expanded Dep Life-Child 10K (\$10,000) coverage.

Your estimated cost per pay period
\$0.33

Your Covered Dependents

Name	Relationship	Amount
Cada Hadjoannou	Child EE Biological/Adopted NC	\$10,000

Notes
The actual amount of coverage for this plan is based upon your salary, and may vary in accordance with any changes to your salary over time. Once submitted, this choice will take effect on 10/02/2017. Deductions for this choice will start with the pay period beginning 10/02/2017.

BACK SAVE CHANGES Help

Step	Action
130.	UCPath displays the details for your election, including the plan, the estimated pay period cost for the benefit election and the covered dependents. Click the Save Changes button to submit your changes or click the Back button to make changes. Click the Save Changes button.

Susan Hadjioannou

Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

NEW HIRE-ELECTIVE BENEFITS

Susan Hadjioannou

As a new employee, you have a special 31-day enrollment period called the Period of Initial Eligibility (PIE). Your PIE starts on the first day of eligibility, and ends 31 days later. If you do not enroll, you will have limited coverage and your family members will not be enrolled.

Take advantage of this enrollment opportunity now because your other options would be limited to:

90-day Waiting Period
You may enroll yourself or eligible family members at any time in medical coverage only with a 90 consecutive calendar day waiting period; coverage is effective after the 90 days have elapsed. Your premiums may need to be paid on an after-tax basis.

Open Enrollment
Open Enrollment (OE) is the time each year (typically in the Fall) when you can change your medical plan and sign up for other benefits. Shortly before OE opens, UC will launch a dedicated web site to guide you through the process. Changes you make during OE are effective January 1 of the following year.

Life Event
A life event provides an opportunity to enroll in, or make changes to, your UC benefits when family status changes occur (marriage, domestic partnership, birth, adoption or divorce) or, in some cases, after you or an eligible family member experience an involuntary loss of non-UC health & welfare coverage.

Important: Make each of your benefits choices by selecting the **Edit** button. When you have completed your selections, use the **Submit** button to finalize your choices. Once you submit, you cannot change your selections.

Current Enrollment Summary

Step	Action
131.	Click the scroll bar.

Susan Hadjioannou

Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

Current Enrollment Summary

This table summarizes estimated costs per pay period for your new benefit choices. (The Employer column displays the amount UC contributes to the UC Retirement Plan on your behalf.)

Election Summary

Summarized estimates for new Benefit Elections	Before Tax	After Tax	Total	Employer
Costs	164.28	21.76	186.04	1,742.27
Your Costs	164.28	21.76	186.04	

Current Benefits Details

Medical

Kaiser North:Fam NA+NC
New

164.28
Before Tax

Dental

Delta Dental PPO:Fam NA+NC
New

0.00
Before Tax

Vision

Vision Service Plan (VSP):Fam NA+NC
New

0.00
Before Tax

Legal Services

ARAG Legal:Fam NA+NC
New

15.62

Behavioral Health


Optum Behavioral Health-OPTKP:Fam NA+NC
New

Supplemental Life

SUPLIFE 1X
New

2.64
After Tax

Step	Action
132.	The Current Enrollment Summary page appears again. The details for your supplemental dependent life - child election have been updated.
133.	Click the scroll bar.

Step	Action
134.	To add Employee & Dependent AD&D coverage, click the Edit button. 

Step	Action
135.	If you need information about the employee and dependent accidental death and dismemberment plans before you make your selection, click the rate chart online link, click the here link for general plan information or click the link to review the UC benefits booklet .
136.	Click the scroll bar.

Susan Hadjioannou
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Fori Hes Life Events / Benef...
Qui Inco **Enroll in Benefits**
Hel Reti Using Your Benefits

you do not make an election.

Your cost depends on the plan option and coverage amount you choose, which can range from \$10,000 to \$500,000. Use the [rate chart online](#) to determine your monthly premium.

General plan information is available [here](#). Detailed plan information is available in the [UC benefits booklet](#).

These are your available options, including cost per pay period:

Select a Plan

- AD & D Employee**
After-Tax
- AD & D Employee + Spouse/DP**
After-Tax
- AD & D Employee + Children**
After-Tax
- AD & D Family**
After-Tax
- Waive**

Submit Your Changes

Edit profile
Log out

Step	Action
137.	<p>In the Select a Plan section, choose your coverage level or waive coverage.</p> <p>For this example, click the AD & D Family button.</p> <div>SELECT</div>
138.	Click the scroll bar.

Susan Hadjioannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
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Fori Hes Life Events / Benef...
Qui Inco **Enroll in Benefits**
Hel Reti Using Your Benefits

AD & D Family
After-Tax

Waive

Enter a Coverage Amount
The selected plan requires that you specify a coverage amount. Enter an amount to indicate your desired coverage. Your per pay period premium rate for this plan is \$0.0170 per \$1,000 of coverage.

Coverage Amount

Designate Your Dependents
The selected plan requires that you specify a coverage amount. Enter an amount to indicate your desired coverage. Your per pay period premium rate for this plan is \$0.0170 per \$1,000 of coverage.

Your Covered Dependents

Name	Relationship	Covered
Rafa Hadjioannou	Spouse (Opposite/Same Sex) NA	<input checked="" type="checkbox"/>
Cada Hadjioannou	Child EE Biological/Adopted NC	<input checked="" type="checkbox"/>

Submit Your Changes

Edit profile
Log out

Step	Action
139.	<p>Click the button to the right of the Coverage Amount field.</p> <div><input type="button" value="v"/></div>

Step	Action
140.	Select your coverage amount. For this example, click the \$10,000 list item.
141.	Your dependents appear in the Your Covered Dependents list. Notice that the Covered check box is selected for all eligible dependents. If necessary, click the Add/Review Dependents button to create or modify dependents.
142.	Click the scroll bar.

Susan Hadjoannou
Primary Title: PROJECT POLICY ANL 3
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Enter a Coverage Amount
The selected plan requires that you specify a coverage amount. Enter an amount to indicate your desired coverage. Your per pay period premium rate for this plan is \$0.0170 per \$1,000 of coverage.
Coverage Amount: **\$10,000**

Designate Your Dependents
The selected plan requires that you specify a coverage amount. Enter an amount to indicate your desired coverage. Your per pay period premium rate for this plan is \$0.0170 per \$1,000 of coverage.
ADD/REVIEW FAMILY MEMBERS

Your Covered Dependents

Name	Relationship	Covered
Rafa Hadjoannou	Spouse (Opposite/Same Sex) NA	<input checked="" type="checkbox"/>
Cada Hadjoannou	Child EE Biological/Adopted NC	<input checked="" type="checkbox"/>

Submit Your Changes
CANCEL **CONTINUE**

Edit profile
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Step	Action
143.	Click the Continue button to submit your changes or click the Cancel button to exit this page without saving your changes. Click the Continue button.

Susan Hadjoannou

Primary Title: PROJECT POLICY ANL 3
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UCPath

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Ask UCPath Center

EMPLOYEE & DEPENDENT AD&D

Susan Hadjoannou

Your Choice
You have chosen AD & D Family coverage for \$10,000.

Your estimated cost per pay period
\$0.17

Your Covered Dependents

Name	Relationship
Rafa Hadjoannou	Spouse (Opposite/Same Sex) NA
Cada Hadjoannou	Child EE Biological/Adopted NC

Notes
Once submitted, this choice will take effect on 10/02/2017. Deductions for this choice will start with the pay period beginning 10/02/2017.

Edit profile Log out

BACK SAVE CHANGES Help

Step	Action
144.	<p>Click the Save Changes button to submit your changes or click the Back button to make changes.</p> <p>Click the Save Changes button.</p>

Susan Hadjoannou

Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

UCPath

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Ask UCPath Center

NEW HIRE-ELECTIVE BENEFITS

Susan Hadjoannou

As a new employee, you have a special 31-day enrollment period called the Period of Initial Eligibility (PIE). Your PIE starts on the first day of eligibility, and ends 31 days later. If you do not enroll, you will have limited coverage and your family members will not be enrolled.

Take advantage of this enrollment opportunity now because your other options would be limited to:

90-day Waiting Period
You may enroll yourself or eligible family members at any time in medical coverage only with a 90 consecutive calendar day waiting period; coverage is effective after the 90 days have elapsed. Your premiums may need to be paid on an after-tax basis.

Open Enrollment
Open Enrollment (OE) is the time each year (typically in the Fall) when you can change your medical plan and sign up for other benefits. Shortly before OE opens, UC will launch a dedicated web site to guide you through the process. Changes you make during OE are effective January 1 of the following year.

Life Event
A life event provides an opportunity to enroll in, or make changes to, your UC benefits when family status changes occur (marriage, domestic partnership, birth, adoption or divorce) or, in some cases, after you or an eligible family member experience an involuntary loss of non-UC health & welfare coverage.


Important: Make each of your benefits choices by selecting the **Edit** button. When you have completed your selections, use the Submit button to finalize your choices. Once you submit, you cannot change your selections.

Current Enrollment Summary

Edit profile Log out

Help

Step	Action
145.	Click the scroll bar.

Step	Action
146.	You are automatically enrolled in Basic Disability coverage. The Edit button is not available for this plan.
147.	To add Voluntary ShortTerm Disability coverage, click the Edit button. 

Step	Action
148.	Review the Voluntary ShortTerm Disability plan information before you make your selection. Click the scroll bar.

Susan Hadjoannou
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Forj Hea Life Events / Benef...
Quit Inco **Enroll in Benefits**
Hel Ret Using Your Benefits

may not qualify. This is especially important if you're considering becoming pregnant; if you wait to enroll until after you're pregnant (outside of this year's Open Enrollment), your application won't be approved.

Consider these highlights of the new 2017 Voluntary Disability Plans:

- New name- UC's Supplemental Disability Insurance (employee-paid) is now called Voluntary Disability Insurance Coverage.
- Options- choose both Voluntary Short-Term Disability along with Voluntary Long-Term Disability for comprehensive coverage.
- New eligibility rules- all employees with full, mid-level or core benefits are eligible to enroll in Voluntary Short-Term Disability.
- One standard waiting period - the waiting period will be 14 days for everyone with coverage. Benefits begin at the end of the standard 14-day waiting period or after you use up to 22 days of sick leave, whichever is later.
- New definition of disability - the definition of disability under UC's new plans will allow more people to qualify for coverage.

Go here if you'd like more information about UC's New Voluntary Disability plan before making your coverage choices.

Important! Your current coverage is: No Coverage. Coverage for this plan will be waived if you do not make an election.

Select a Plan

✓ NO, I DO NOT WANT TO ENROLL VOLUNTARY SHORTTERM DISABILITY

CANCEL CONTINUE

Edit profile
Log out

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Step	Action
149.	In the Select a Plan section, choose to enroll in the plan or accept the default option to not enroll in Voluntary ShortTerm Disability . For this example, click the Voluntary Shortterm Disability button.
150.	Click the Continue button to submit your changes or click the Cancel button to exit this page without saving your changes. Click the Continue button.

Susan Hadjoannou
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Forj Hea Life Events / Benef...
Quit Inco **Enroll in Benefits**
Hel Ret Using Your Benefits

UCPath

Search Log out Bookmark

Ask UCPath Center

VOLUNTARY SHORTTERM DISABILITY

Susan Hadjoannou

Your Choice
You have chosen Voluntary ShortTerm Disability coverage.
The cost per pay period for this plan is \$24.79.

Notes
Once submitted, this choice will take effect on 10/02/2017. Deductions for this choice will start with the pay period beginning 10/02/2017.

BACK SAVE CHANGES

Edit profile
Log out

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Step	Action
151.	<p>UCPath displays the details for your election, including the plan and the estimated pay period cost for the benefit election.</p> <p>Click the Save Changes button to submit your changes or click the Back button to make changes.</p> <p>Click the Save Changes button.</p>
152.	Click the scroll bar.

Susan Hadjioannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

Important: Make each of your benefits choices by selecting the **Edit** button. When you have completed your selections, use the Submit button to finalize your choices. Once you submit, you cannot change your selections.

Current Enrollment Summary

This table summarizes estimated costs per pay period for your new benefit choices. (The Employer column displays the amount UC contributes to the UC Retirement Plan on your behalf.)

Election Summary		Before Tax	After Tax	Total	Employer
Summarized estimates for new Benefit Elections					
Costs		164.28	46.72	211.00	1,750.31
Your Costs		164.28	46.72	211.00	

Current Benefits Details

Medical
Kaiser North:Fam NA+NC
New
164.28 Before Tax

Dental
Delta Dental PPO:Fam NA+NC
New
0.00 Before Tax

Vision
Vision Service Plan (VSP):Fam NA+NC
New
0.00 Before Tax

Edit profile Log out Help

Step	Action
153.	The Current Enrollment Summary page appears. The details for your voluntary shortterm disability election have been updated.
154.	Click the scroll bar.

Susan Hadjoannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

Das < < Health and Benefits

Boc Per Benefits Summary

Em Lea Dependent Covera...

For Hea Life Events / Benef...

Qui Inco **Enroll in Benefits**

Hel Ret Using Your Benefits

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1.02 After Tax

New

2.15 After Tax

New

0.33 After Tax

Employee & Dependent AD&D

AD & D Family

New

0.17 After Tax

Basic Disability

Basic Disability

Voluntary Short-Term Disability

Voluntary Short-Term Disability: 60.00% of Salary

New

24.79 After Tax

Voluntary Long-Term Disability

Waive

New

0.00 Before Tax

Flex Spending - Health

Waive

New

0.00 Before Tax


Flex Spending - Dependent Care

Waive

New

0.00 Before Tax

Help

Step	Action
155.	To add Voluntary Long-Term Disability , click the Edit button. 

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Qui Inco **Enroll in Benefits**

Hel Ret Using Your Benefits

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Ask UCPath Center

VOLUNTARY LONG-TERM DISABILITY

Susan Hadjoannou

UC offers Voluntary Disability Insurance to help you cover your expenses if you're out of work for an extended period of time because of illness, injury or pregnancy by replacing a portion of your eligible earnings. UC's Basic employer-paid disability insurance offers some protection – a benefit capped at \$800 per month for six months – it probably won't be enough to cover your expenses. For a modest monthly premium, UC's Voluntary Disability Insurance replaces much more of your income.

The Voluntary plans provide up to 60% of your eligible earnings, to a max of \$15,000 per month. Although you have to pay the premiums yourself, it's well worth it for the income and peace of mind. The time to enroll is now, during your PIE, because you cannot be denied coverage due to an existing medical condition. However, if you enroll outside of your PIE, you must submit an [Evidence of Insurability application](#) (which includes a Statement of Health) to the insurance company – and you may not qualify.

The start date and duration of your benefits depends on the level of coverage you choose:

- **Long-Term only**– Benefits begin after six months, and could continue until your Social Security retirement age if you remain disabled. This might be a good option for employees with a lot of sick leave accrued, academic employees eligible for paid medical leave, or those who can cover household expenses without much income for up to six months.
- **Short and Long-Term** – Benefits begin at the end of a standard 14-day waiting period or after you use up to 22 days of available sick leave, whichever is later, and continue up to your Social Security retirement age for most disabling conditions. Choosing both short- and long- term coverage provides the most comprehensive protection for all types of disability leaves.

You'll find an overview of UC's disability insurance coverage here and more detailed plan information here.

Open Enrollment 2016 - Voluntary Long -Term Disability

UC is making significant changes to its disability insurance program for 2017, so if you've never thought about disability insurance, this is the year to take a look. During this

Help

Step	Action
156.	Review the voluntary long-term disability plan information before you make your selection. Click the scroll bar.

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Quit Inco **Enroll in Benefits**
Hel Ret Using Your Benefits

year's Open Enrollment Oct. 27-Nov. 22, 2016, you cannot be denied coverage due to an existing medical condition. Later, you'll need to submit a statement of health, and you may not qualify. This is especially important if you're considering becoming pregnant; if you wait to enroll until after you're pregnant your application won't be approved.

Consider these highlights of the new 2017 Voluntary Disability Plans:

- New name- UC's Supplemental Disability Insurance (employee-paid) is now called Voluntary Disability Insurance Coverage.
- Options- choose both Voluntary Short-Term Disability along with Voluntary Long-Term Disability for comprehensive coverage.
- New eligibility rules- all employees with full, mid-level or core benefits are eligible to enroll in Voluntary Short-Term Disability.
- One standard waiting period – the waiting period will be 14 days for everyone with coverage. Benefits begin at the end of the standard 14-day waiting period or after you use up to 22 days of sick leave, whichever is later.
- New definition of disability – the definition of disability under UC's new plans will allow more people to qualify for coverage.

Go [here](#) if you'd like more information about UC's New Voluntary Disability plan before making your coverage choices.

Important! Your current coverage is: No Coverage. Coverage for this plan will be waived if you do not make an election.

Select a Plan

✓ NO, I DO NOT WANT TO ENROLL VOLUNTARY LONGTERM DISABILITY2

CANCEL CONTINUE

Edit profile
Log out

Terms of Use University of California Help

Step	Action
157.	In the Select a Plan section, choose to enroll in the plan or accept the default option to not enroll in Voluntary Long Term Disability2 . For this example, click the Voluntary LongTerm Disability2 button.
158.	Click the Continue button to submit your changes or click the Cancel button to exit this page without saving your changes. Click the Continue button.

Susan Hadjoannou
Primary Title: PROJECT POLICY ANL 3
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Ask UCPath Center

VOLUNTARY LONG-TERM DISABILITY

Susan Hadjoannou

Your Choice
You have chosen Voluntary LongTerm Disability2 coverage.
The cost per pay period for this plan is \$12.75.

Notes
Once submitted, this choice will take effect on 10/02/2017. Deductions for this choice will start with the pay period beginning 10/02/2017.

BACK SAVE CHANGES

Edit profile
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Step	Action
159.	<p>UCPath displays the details for your elections, including the plan and the estimated pay period cost for the benefit election.</p> <p>Click the Save Changes button to submit your changes or click the Back button to make changes.</p> <p>Click the Save Changes button.</p>

Susan Hadjioannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

NEW HIRE-ELECTIVE BENEFITS

Susan Hadjioannou

As a new employee, you have a special 31-day enrollment period called the Period of Initial Eligibility (PIE). Your PIE starts on the first day of eligibility, and ends 31 days later. If you do not enroll, you will have limited coverage and your family members will not be enrolled.

Take advantage of this enrollment opportunity now because your other options would be limited to:

90-day Waiting Period
You may enroll yourself or eligible family members at any time in medical coverage only with a 90 consecutive calendar day waiting period; coverage is effective after the 90 days have elapsed. Your premiums may need to be paid on an after-tax basis.

Open Enrollment
Open Enrollment (OE) is the time each year (typically in the Fall) when you can change your medical plan and sign up for other benefits. Shortly before OE opens, UC will launch a dedicated web site to guide you through the process. Changes you make during OE are effective January 1 of the following year.

Life Event
A life event provides an opportunity to enroll in, or make changes to, your UC benefits when family status changes occur (marriage, domestic partnership, birth, adoption or divorce) or, in some cases, after you or an eligible family member experience an involuntary loss of non-UC health & welfare coverage.

Important: Make each of your benefits choices by selecting the **Edit** button. When you have completed your selections, use the Submit button to finalize your choices. Once you submit, you cannot change your selections.

Current Enrollment Summary

Step	Action
160.	Click the scroll bar.

Susan Hadjioannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

Current Enrollment Summary

This table summarizes estimated costs per pay period for your new benefit choices. (The Employer column displays the amount UC contributes to the UC Retirement Plan on your behalf.)

Election Summary				
Summarized estimates for new Benefit Elections				
	Before Tax	After Tax	Total	Employer
Costs	164.28	59.47	223.75	1,750.31
Your Costs	164.28	59.47	223.75	

Current Benefits Details

Medical
Kaiser North:Fam NA+NC
New

Dental
Delta Dental PPO:Fam NA+NC
New

Vision
Vision Service Plan (VSP):Fam NA+NC
New

Step	Action
161.	The Current Enrollment Summary page appears. The details for your voluntary long term disability election have been updated.
162.	Click the scroll bar.

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Das < < < Health and Benefits

Boc Per Benefits Summary

Emj Lea Dependent Covera...

Fori Hes Life Events / Benef...

Qui Inco **Enroll in Benefits**

Hel Ret Using Your Benefits

Edit profile

Log out

Employee & Dependent AD&D
AD & D Family
New
0.17
After Tax

Basic Disability
Basic Disability
New

Voluntary ShortTerm Disability
Voluntary ShortTerm Disability: 60.00% of Salary
New
24.79
After Tax

Voluntary Long-Term Disability
Voluntary LongTerm Disability2: 60.00% of Salary
New
12.75
After Tax

Flex Spending - Health
Waive
New
0.00
Before Tax

Flex Spending - Dependent Care
Waive
New
0.00
Before Tax

Health Savings Account
Waive
New
0.00
Before Tax

UC Retirement Plan
Tier 2013-SSCoord
NCL
New

Help

Step	Action
163.	To add Flex Spending - Health , click the Edit button.

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Primary Title: PROJECT POLICY ANL 3
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Das < < < Health and Benefits

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Ask UCPath Center

FLEX SPENDING - HEALTH
Susan Hadjioannou

Flexible Spending Accounts (FSA) allow you to set aside pre-tax money each year for eligible health or **dependent** care expenses, helping you budget for these costs and saving you money on taxes. You may enroll in the Health Flexible Spending Account (Health FSA) during your PIE. To continue participating each year, re-elect the benefit during the annual Open Enrollment period. If you do not re-enroll in the Health FSA, you must have a minimum of \$25 remaining in your account after the run-out period (April 15 of the next plan year) to be able to carry over funds (up to \$500) to the next plan year. Remaining funds in your account will only be carried over for one plan year.

Important! Your current coverage is: No Coverage. Coverage for this plan will be waived if you do not make an election.

Health-related expenses come in many forms -- and not all of them are covered by your medical, dental and vision plans. Fortunately, UC's Health FSA allows you to set aside money to pay for a wide variety of expenses, including co-pays, co-insurance or deductibles, prescription drug payments, medical tests, physical exams, or hospital bills.

Each year, you decide how much you want to contribute and the amount you specify is taken in installments (either monthly or bi-weekly depending on your pay frequency) from your paycheck, before federal, Social Security (FICA) and most state taxes are calculated. Remember that any money you don't use during the year or the grace period will be forfeited -- so it is important to estimate your expenses carefully.

How am I reimbursed? Pay your eligible expense as usual, then complete a claim form and, in some cases, provide appropriate documentation to substantiate the expense. Once your request has been reviewed and approved, you will be reimbursed from the funds in your Health FSA account.

The UCNet Health FSA [overview](#) will help orient you. Then, if you need greater detail, UC's [benefit booklet](#) and the plan's [website](#) provide more comprehensive information.

Help

Step	Action
164.	If you need information about the flex spending - health plans before you make your selection, click the UCnet health FSA overview , review the UC benefits booklet or the plan's website links.
165.	Click the scroll bar.

Step	Action
166.	In the Select an Option section, choose to enroll in the plan or accept the default option to not enroll in Health FSA . For this example, click the Health FSA button.
167.	Click in the Annual Contribution Amount field.
168.	Notice the minimum and maximum amounts listed above the field. Remember that the amount entered in this field is the annual amount, not the pay period amount. Enter the desired information into the Annual Contribution Amount field. For this example, enter 200.00 .
169.	Click the Continue button to submit your changes or click the Cancel button to exit this page without saving your changes. Click the Continue button.

Step	Action
170.	<p>UCPath displays the details for your election, including the estimated pay period cost and the date the election will take effect.</p> <p>Click the Save Changes button to submit your changes or click the Back button to make changes.</p> <p>Click the Save Changes button.</p>

Step	Action
171.	Click the scroll bar.

Step	Action
172.	<p>After you complete all benefit selections, click the Submit button at the bottom of the Current Enrollment Summary section to finalize your choices. After you submit your choices, you cannot change your selections.</p> <p>Click the Submit button.</p>

Step	Action
173.	<p>If you receive any errors or warnings, review the message and correct your errors.</p> <p>In this example, there are conflicts with dependent life coverages.</p>
174.	<p>Return to the Current Enrollment Summary page and edit your benefits choices.</p> <p>Click the scroll bar.</p>

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For He Life Events / Benef...
Qui Inco **Enroll in Benefits**
Hel Ret Using Your Benefits

Edit profile
Log out

Error
Coverage in this benefit requires enrollment in another benefit plan. Go to the appropriate benefit page and make the necessary corrections.
You may not select both Basic Dependent Life and Expanded Dependent Life - Spouse. Please de-select one of those plans.
You may not select both Basic Dependent Life and Expanded Dependent Life - Child. Please de-select one of those plans.

Supp Dependent Life - Spouse

Error
Coverage in this benefit requires enrollment in another benefit plan. Go to the appropriate benefit page and make the necessary corrections.
You may not select both Basic Dependent Life and Expanded Dependent Life - Spouse. Please de-select one of those plans.
You may not select both Basic Dependent Life and Expanded Dependent Life - Child. Please de-select one of those plans.

Supp Dependent Life - Child

Error
Coverage in this benefit requires enrollment in another benefit plan. Go to the appropriate benefit page and make the necessary corrections.
You may not select both Basic Dependent Life and Expanded Dependent Life - Spouse. Please de-select one of those plans.
You may not select both Basic Dependent Life and Expanded Dependent Life - Child. Please de-select one of those plans.

BACK

Terms of Use University of California Help

Step	Action
175.	Click the Back button.

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Employee ID: 10003133
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Ask UCPath Center

NEW HIRE-ELECTIVE BENEFITS

Susan Hadjioannou

As a new employee, you have a special 31-day enrollment period called the Period of Initial Eligibility (PIE). Your PIE starts on the first day of eligibility, and ends 31 days later. If you do not enroll, you will have limited coverage and your family members will not be enrolled.

Take advantage of this enrollment opportunity now because your other options would be limited to:

90-day Waiting Period
You may enroll yourself or eligible family members at any time in medical coverage only with a 90 consecutive calendar day waiting period; coverage is effective after the 90 days have elapsed. Your premiums may need to be paid on an after-tax basis.

Open Enrollment
Open Enrollment (OE) is the time each year (typically in the Fall) when you can change your medical plan and sign up for other benefits. Shortly before OE opens, UC will launch a dedicated web site to guide you through the process. Changes you make during OE are effective January 1 of the following year.

Life Event
A life event provides an opportunity to enroll in, or make changes to, your UC benefits when family status changes occur (marriage, domestic partnership, birth, adoption or divorce) or, in some cases, after you or an eligible family member experience an involuntary loss of non-UC health & welfare coverage.

Important: Make each of your benefits choices by selecting the **Edit** button. When you have completed your selections, use the Submit button to finalize your choices. Once you submit, you cannot change your selections.

Current Enrollment Summary

Help

Step	Action
176.	Click the scroll bar.


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Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
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https://ipiltn.universityofcalifornia.edu/pages/Benefits-BS3/open_enrollment_summary.aspx

Benefit Option	Cost (After Tax)
Basic Dependent Life	1.02
Supp Dependent Life - Spouse	2.15
Supp Dependent Life - Child	0.33
Employee & Dependent AD&D	0.17
Basic Disability	100.00
Voluntary ShortTerm Disability	24.79
Voluntary Long-Term Disability	Waive
Flex Spending - Health	100.00
Flex Spending - Dependent Care	Waive

Step	Action
177.	<p>The error stated you cannot select both Basic Dependent Life and Expanded Dependent Life - Spouse. Also, you cannot select both Basic Dependent Life and Expanded Dependent Life - Child.</p> <p>For this example, waive basic coverage and keep the expanded coverage.</p> <p>Click the Edit Basic Dependent Life button.</p> 

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BASIC DEPENDENT LIFE
Susan Hadjioannou

UC offers two life insurance plans for insuring your eligible family members.
Basic Dependent Life and Expanded Dependent Life

Important! Your current coverage is: No Coverage. Coverage for this plan will be waived if you do not make an election.

Basic Dependent Life – provides \$5,000 coverage each for spouse or domestic partner and/or eligible children

*Expanded Dependent Life** – provides up to 50 percent of employee Supplemental Life benefit (maximum of \$200,000) for spouse or domestic partner; \$10,000 each for eligible children
* Enrollment in employee Supplemental Life is a requirement for Expanded Dependent Life coverage.

Not sure which plan or coverage level is best? Review the UCnet life insurance plans [overview](#) page, or the [benefits booklet](#).

This benefit plan requires enrollment in one of the following plans:
Life

Enroll in the benefit plans listed above **before** completing this page.

Select an Option

Your per pay period cost for this coverage is \$1.02.
Enrollment in this benefit plan requires enrollment in Life.

☐ NO, I DO NOT WANT TO ENROLL ☒ BASIC DEPENDENT LIFE (\$5,000)

Help

Step	Action
178.	Select the No, I do not want to enroll option to waive coverage.

Susan Hadjioannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

BASIC DEPENDENT LIFE
Susan Hadjioannou

UC offers two life insurance plans for insuring your eligible family members.
Basic Dependent Life and Expanded Dependent Life

Important! Your current coverage is: No Coverage. Coverage for this plan will be waived if you do not make an election.

Basic Dependent Life – provides \$5,000 coverage each for spouse or domestic partner and/or eligible children

*Expanded Dependent Life** – provides up to 50 percent of employee Supplemental Life benefit (maximum of \$200,000) for spouse or domestic partner; \$10,000 each for eligible children
* Enrollment in employee Supplemental Life is a requirement for Expanded Dependent Life coverage.

Not sure which plan or coverage level is best? Review the UCnet life insurance plans [overview page](#), or the [benefits booklet](#).

This benefit plan requires enrollment in one of the following plans:
Life

Enroll in the benefit plans listed above [before](#) completing this page.

Select an Option

Your per pay period cost for this coverage is \$1.02.
Enrollment in this benefit plan requires enrollment in Life.

☒ NO, I DO NOT WANT TO ENROLL

☐ BASIC DEPENDENT LIFE (\$5,000)

Edit profile
Log out

Terms of Use University of California Help

Step	Action
179.	Click the Continue button.

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UCPath

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BASIC DEPENDENT LIFE
Susan Hadjioannou

Your Choice
You have declined enrollment.

Your Covered Dependents

Name	Relationship	Percent of Benefit

Notes
Once submitted, this choice will take effect on 10/02/2017. Deductions for this choice will start with the pay period beginning 10/02/2017.

Edit profile
Log out

Ask UCPath Center

Terms of Use University of California Help

Step	Action
180.	Click the Save Changes button.

The screenshot shows the UCPath interface for a new hire. On the left is a navigation menu with options like 'Benefits Summary', 'Dependent Coverage', 'Life Events / Benefits', 'Enroll in Benefits' (highlighted), and 'Using Your Benefits'. The main content area is titled 'NEW HIRE-ELECTIVE BENEFITS' and includes a welcome message, a 90-day waiting period explanation, and details about Open Enrollment and Life Events. At the bottom, there is a 'Current Enrollment Summary' section. The user's profile information is visible in the top left, and a 'Help' button is in the bottom right.

Step	Action
181.	Click the scroll bar.

This screenshot shows the enrollment selection page. It features several cards for different benefit options: 'Voluntary LongTerm Disability' (60.00% of Salary), 'Health FSA' (\$200.00), 'Health Savings Account' (Waive), and 'UC Retirement Plan' (Tier 2013-SSCoord NCL). Each card has a 'New' button. Below the cards, there is a 'SUBMIT' button and a 'BACK' button. A 'Help' button is located in the bottom right corner. The user's profile information remains visible on the left.

Step	Action
182.	Click the Submit button.

Susan Hadjioannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
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UCPath

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Ask UCPath Center

CANCEL COUNTINUE LATER SHOW PROGRESS PREV NEXT

SUBMIT BENEFIT CHOICES

Susan Hadjioannou

You have almost completed your enrollment. If you have no further changes, select the **Submit** button on this page to finalize your benefit choices.

Select the **Cancel** button if you are not ready to submit your choices and wish to return to the Enrollment Summary.

Do not submit your benefit choices until you have completed your enrollment. You may store your choices on each page and return to the Enrollment Summary as many times as you'd like up until your enrollment deadline. However, once you select the **Submit** button your benefit choices will be processed.

Once your enrollment is processed, you may not be able to make any further benefit changes until the next Open Enrollment period or if you have a qualified family status change.

Terms and Conditions

I agree to the terms and conditions listed here.

☐ By checking this box I accept the above Terms and Conditions

HIPAA Statement Confirmation

☒ By selecting this checkbox, I am electing to receive an electronic HIPAA statement.

Authorize Elections

By submitting your benefit choices you are authorizing the University of California to take deductions from your paycheck to pay for your benefit costs. You are also authorizing the Benefits Department to send necessary personal information to your selected providers to initiate and support your coverage.

Edit profile Log out

Help

100%

Step	Action
183.	<p>The Submit Benefit Choices page appears. Review the Terms and Conditions, as well as the HIPAA Statement Confirmation.</p> <p>Click the scroll bar.</p>

Susan Hadjioannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

UCPath

Log out

Ask UCPath Center

CANCEL COUNTINUE LATER SHOW PROGRESS PREV NEXT

SUBMIT BENEFIT CHOICES

Susan Hadjioannou

You have almost completed your enrollment. If you have no further changes, select the **Submit** button on this page to finalize your benefit choices.

Select the **Cancel** button if you are not ready to submit your choices and wish to return to the Enrollment Summary.

Do not submit your benefit choices until you have completed your enrollment. You may store your choices on each page and return to the Enrollment Summary as many times as you'd like up until your enrollment deadline. However, once you select the **Submit** button your benefit choices will be processed.

Once your enrollment is processed, you may not be able to make any further benefit changes until the next Open Enrollment period or if you have a qualified family status change.

Terms and Conditions

I agree to the terms and conditions listed here.

☐ By checking this box I accept the above Terms and Conditions

HIPAA Statement Confirmation

☒ By selecting this checkbox, I am electing to receive an electronic HIPAA statement.

Authorize Elections

By submitting your benefit choices you are authorizing the University of California to take deductions from your paycheck to pay for your benefit costs. You are also authorizing the Benefits Department to send necessary personal information to your selected providers to initiate and support your coverage.

Cancel Submit

Edit profile Log out

Help

Terms of Use University of California

100%

Step	Action
184.	<p>Click the By checking this box I accept the above Terms and Conditions option.</p> <p><input type="checkbox"/> By checking this box I accept the above Terms and Conditions</p>
185.	<p>Click the Submit button.</p>

Susan Hadjoannou
Primary Title: PROJECT POLICY ANL 3
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Ask UCPath Center

ENROLLMENT SUBMIT CONFIRMATION

Once you select OK, your submission is FINAL. Any subsequent changes will require UCPath Center review and approval. If your elections are FINAL, click OK to proceed.

CANCEL OK

Das < < Health and Benefits
Boc Per Benefits Summary
Emj Lea Dependent Covera...
Fori Hec Life Events / Benef...
Qui Inco Enroll in Benefits
Hel Ret Using Your Benefits

Edit profile
Log out

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Help

Step	Action
186.	<p>Click the OK button to submit your changes or click the Cancel button to exit this page without saving your changes.</p> <p>Click the OK button.</p>

Susan Hadjoannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

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Ask UCPath Center

SUBMIT CONFIRMATION

Susan Hadjoannou

Your benefit choices have been successfully submitted.
You will receive a confirmation statement within one week to confirm your new hire enrollment.
To return to the Benefits Enrollment page, use the **OK** button.

OK

Das < < Health and Benefits
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Emj Lea Dependent Covera...
Fori Hec Life Events / Benef...
Qui Inco Enroll in Benefits
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Terms of Use University of California

Help

Step	Action
187.	<p>A confirmation message appears.</p> <p>Click the OK button.</p>

Susan Hadjoannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

BENEFITS ENROLLMENT
Susan Hadjoannou

Welcome to the benefits enrollment section. Congratulations! You and your family now have an opportunity to enroll in benefits based on one of the newly benefits eligible scenarios listed below. You have either been directed to this page or navigated here on your own because

- You are a new hire with a PIE to enroll in benefits initially, OR
- You are newly eligible for benefits, OR
- You have a life event that enables you to make enrollment changes, OR
- The annual Open Enrollment period is now open

Scroll down to view the list of your benefit events below. Do you see the **Select** button next to an event? If so, that indicates the event is currently open to you for enrollment. Click on **Select** to begin.

Take advantage of this opportunity now because your other options are limited to:

90-day Waiting Period
You may enroll yourself or eligible family members at any time in medical coverage only with a 90 consecutive calendar day waiting period; coverage is effective after the 90 days have elapsed. Your premiums may need to be paid on an after-tax basis.

Open Enrollment
Open Enrollment (OE) is the time each year (typically in the Fall) when you can change your medical plan and sign up for other benefits. Shortly before OE opens, UC will launch a dedicated website to guide you through the process. Changes you make during OE are effective January 1 of the following year.

Life Event
A *life event* provides an opportunity to enroll in, or make changes to, your UC benefits when family status changes occur (marriage, domestic partnership, birth, adoption or divorce) or, in some cases, after you or an eligible family member experience an involuntary loss of non-UC health & welfare coverage.

Edit profile
Log out

Ask UCPath Center

Help

Step	Action
188.	Click the scroll bar.

Susan Hadjoannou
Primary Title: PROJECT POLICY ANL 3
Employee ID: 10003133
Service Date: 03/14/2017

BENEFITS ENROLLMENT
Susan Hadjoannou

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If you don't see the **Select** button, you do not currently have an open event allowing you to make enrollment changes. If you think this is in error or have additional questions, contact the UCPath Center at 1-855-9UC-PATH (1-855-982-7284).

Open Benefit Events
After you use the **Select** button, it will take a few seconds for your benefits enrollment information to load.

New Hire- Elective Benefits
PROJECT POLICY ANL 3
10/02/2017

Submitted

Edit profile
Log out

Terms of Use University of California

Help

Step	Action
189.	The New Hire-Elective Benefits event is submitted.
190.	You have enrolled in benefits. A confirmation email is sent to the primary email address on your account. You can identify your primary email address under Employee Actions > Personal Information > Personal Information Summary . End of Procedure.