

## **FACULTY WELFARE ALERT!**

### **Open Enrollment and Medical Plan Changes**

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#### **Medical Plan Changes for 2008**

The UC Health Plans have changed so as to maintain access, quality, sustainability, and choice. Overall average costs to employees have been reduced slightly. Please review your current health care choices and study the plans carefully before making any enrollment changes. Key changes for 2008 include:

**(1) Consolidation from two Network HMOs (Health Net and PacifiCare), to a single Network HMO (Health Net).** Enrollees in PacifiCare will have to choose a new plan; if they do not make a choice during Open Enrollment, they will automatically be transferred to Health Net in 2008. Some may have to change primary care doctors.

**(2) Addition of a new consumer-directed HRA (Health Reimbursement Account) PPO plan, the CIGNA Choice Fund.** This plan features a Health Reimbursement Account (HRA) funded by UC that you can use to pay eligible medical and prescription drug claims, *plus* a PPO plan. A similar plan (Definity) was offered as a pilot at UCSB and UCSF for the past few years. This new CIGNA Choice Fund HRA PPO plan is similar to the Blue Cross PPO in many ways: both plans have wide networks in California, both plans allow the member to choose any physician or hospital in the network with similar approval requirements, both plans pay 80% of the 'allowed' charge for in-network physicians and hospitals after the deductible has been met, and both plans pay 60% of the allowed charge for most out-of-network services after the deductible has been met. However, the monthly premium for the CIGNA plan is lower than for the Blue Cross PPO, the out-of-pocket maximum for CIGNA is lower, and the University also contributes \$1,000 to \$2,000 to the employee's CIGNA Health Reimbursement Account every year, depending on coverage level (Employee only, family, etc). This account can be used to meet annual deductibles; unused funds can be rolled forward to the next year provided you remain enrolled in the CIGNA Choice Fund.

**(3) Addition of a wellness program, StayWell,** to most medical plans, except Kaiser. This includes programs for smoking cessation and weight control with a health coach, health risk assessments, and other great resources and tools for your health and wellness.

**(4) Consolidation to a standardized behavioral health plan, United Behavioral Health, with most Medical plans,** replacing prior in-plan coverage, except for Blue Cross Core Indemnity. This includes new mental health and substance abuse benefits. This plan is added to existing benefits for Kaiser enrollees. Transition benefits are available.

#### **Resources**

- **Compare plans using the "At Your Service" website before making changes:**

[http://atyourservice.ucop.edu/open\\_enrollment/employees/e\\_medical.html](http://atyourservice.ucop.edu/open_enrollment/employees/e_medical.html)

Use the "Planning Tools" and "2008 Plans" toolbars. The "Medical Plan Chooser" helps you to get some idea about your out-of-pocket liability under each plan.

- **Cost savings analysis from one of our colleagues** shows that *if* your doctors and hospitals are in the CIGNA network, your medical care costs (premium plus out-of-pocket costs) may be \$1,000 to \$2,000 less per year in the CIGNA plan than in the Blue Cross PPO plan; see details at [www.kronick.ucsd.edu/](http://www.kronick.ucsd.edu/)

- **You will have to change doctors if your new plan's provider networks don't overlap.** Find your doctor using [http://atyourservice.ucop.edu/directories\\_contacts/find\\_doctor\\_employee.html](http://atyourservice.ucop.edu/directories_contacts/find_doctor_employee.html) or through the plans' own websites.

- **Changing plans involves learning** to deal with new claims processing procedures, and transferring prescriptions to a new prescription drug vendor. You should balance the potential financial savings from switching with the expected hassles created by learning how to deal with a new plan. Also, plan costs may vary from year to year.

- **Before making changes, carefully examine the many differences in how even apparently similar plans may work with regard to deductibles, family out of pocket maximums, prescription drug co-payments, etc.**