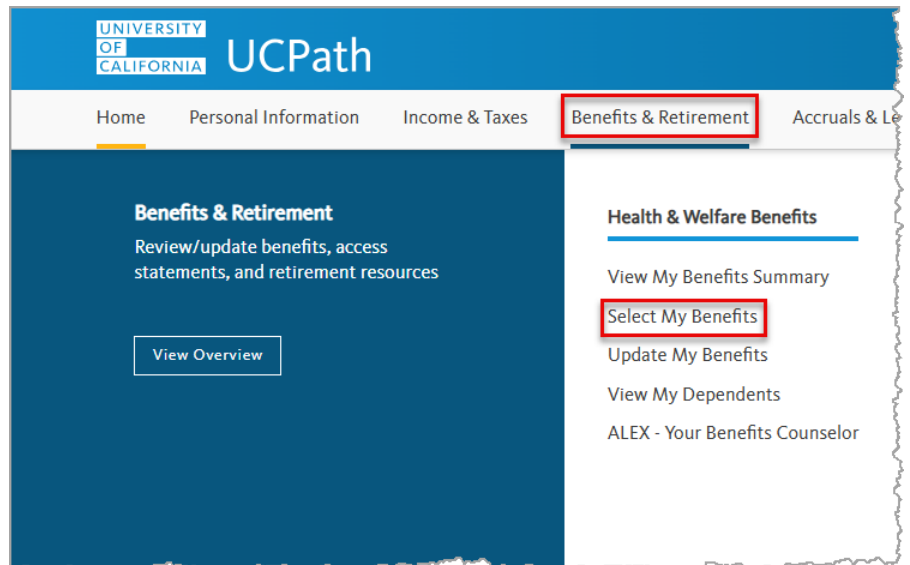


This Job Aid supports information learned in [EMP112: Benefits Information](#)

UCPath allows you to manage your benefits and enroll in coverage 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. You have 31 days from your date of eligibility to enroll in coverage.

### Navigation:

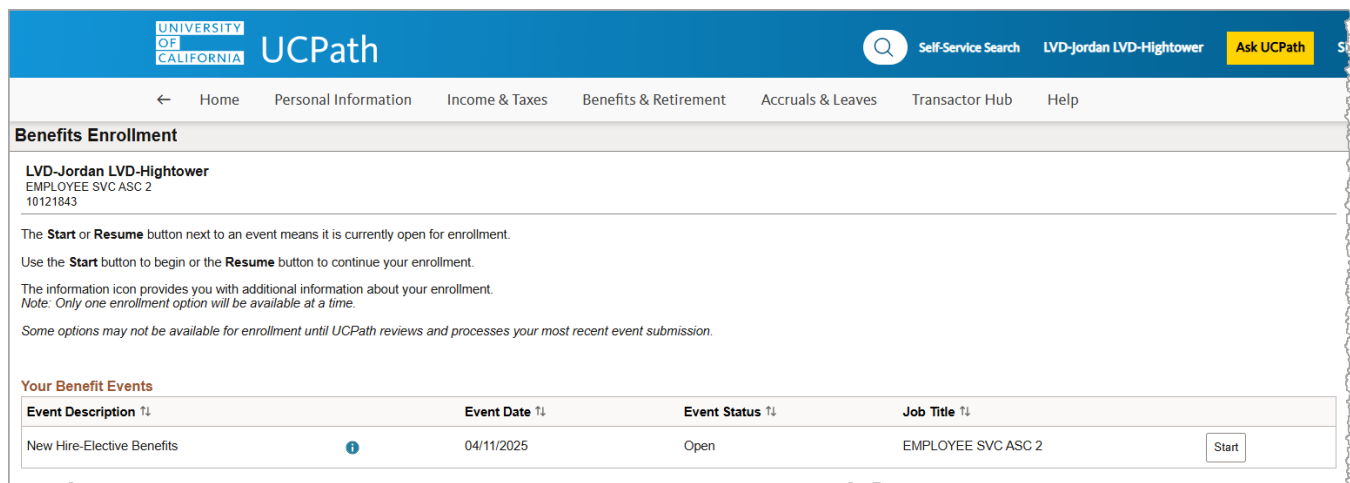
Menu > Benefits & Retirement >  
Health & Welfare Benefits >  
**Select My Benefits**



Before you access your personal information, you must validate your identity by answering one of the security questions you initially set up on your profile.

### Your Benefits Events

- If you are eligible to enroll in benefits and have an open benefit event, UCPath displays the Benefits Enrollment page.



- If you do not have an open benefit event, the following message appears.

UNIVERSITY OF CALIFORNIA UCPath

Self-Service Search LVD-R

Home Personal Information Income & Taxes Benefits & Retirement Accruals & Leaves Manager Hub Transactor Hi

### Benefits Enrollment


**LVD-Rory LVD-Sacks**  
PROF-AY  
10146224

**You currently cannot make self-service benefit enrollments in UCPath.**

This page allows self-service benefit enrollments during available enrollment periods, such as Open Enrollment, New Hires, or job/address changes affecting eligibility.

If you **believe you should be able to enroll**, contact your local HR representative to confirm the status of any job changes submitted to UCPath.

If you have not had a job/address change affecting your eligibility and are interested in enrolling or updating your UC benefits, visit the [Update My Benefits](#) page for more information and options.

 **Note:** If you believe you should be eligible to enroll in coverage, contact your Location for further assistance.

- The **Your Benefits Events** section displays your Benefits Events open for review/changes. The page includes the **Event Description**, **Event Date**, **Event Status** and your **Job Title**.
- Select the **Event Information** icon to review important information about your event.
- Select the **Start** button when you are ready to begin your elections.

UNIVERSITY OF CALIFORNIA UCPath

Self-Service Search LVD-Jordan LVD-Hightower Ask UCPath







Home Personal Information Income & Taxes Benefits & Retirement Accruals & Leaves Transactor Hub Help

### Benefits Enrollment

**LVD-Jordan LVD-Hightower**  
EMPLOYEE SVC ASC 2  
10121843

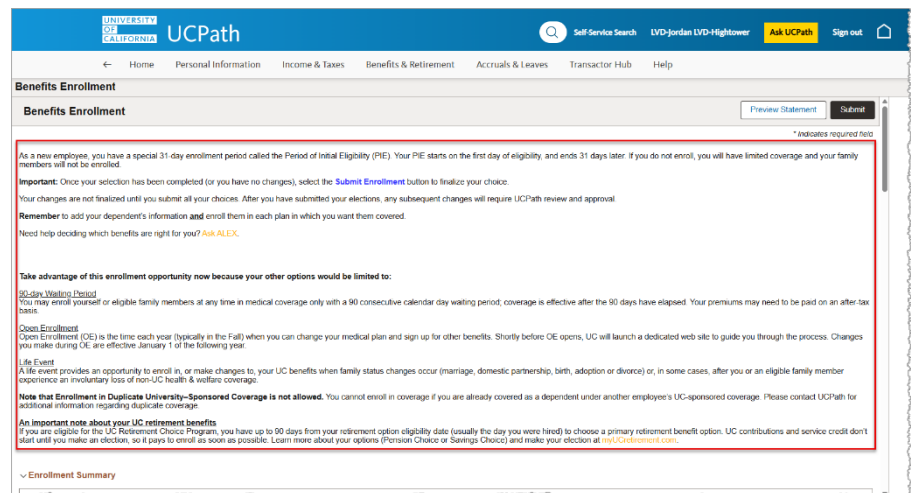
The **Start** or **Resume** button next to an event means it is currently open for enrollment.  
Use the **Start** button to begin or the **Resume** button to continue your enrollment.  
The information icon provides you with additional information about your enrollment.  
*Note: Only one enrollment option will be available at a time.*  
Some options may not be available for enrollment until UCPath reviews and processes your most recent event submission.

#### Your Benefit Events

Event Description 	Event Date 	Event Status 	Job Title 
New Hire-Elective Benefits 	04/11/2025	Open	EMPLOYEE SVC ASC 2 

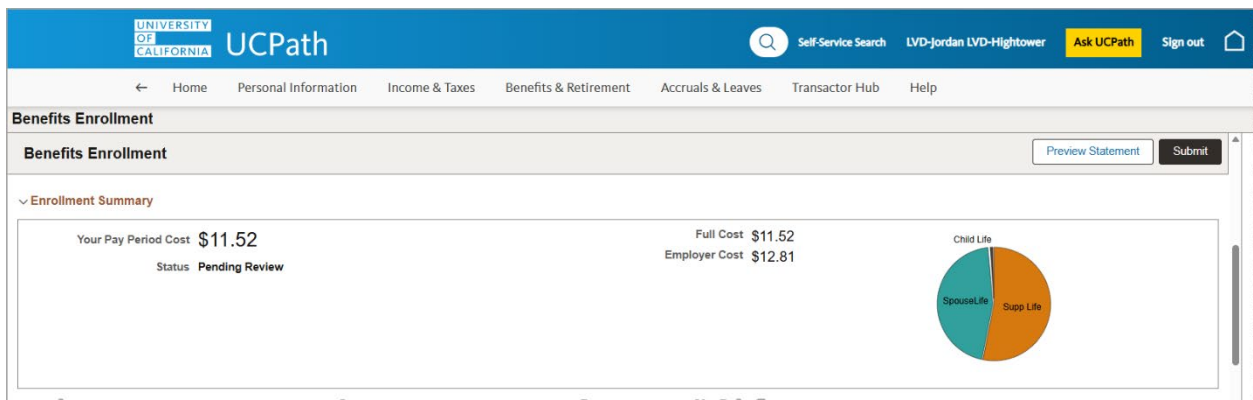
## Benefits Enrollment

The **Benefits Enrollment** page appears. Take a moment to review the important disclosures at the top of this page. Scroll down the page when you are ready to continue.



## Enrollment Summary

The **Enrollment Summary** section displays the cost of the benefits you have selected.




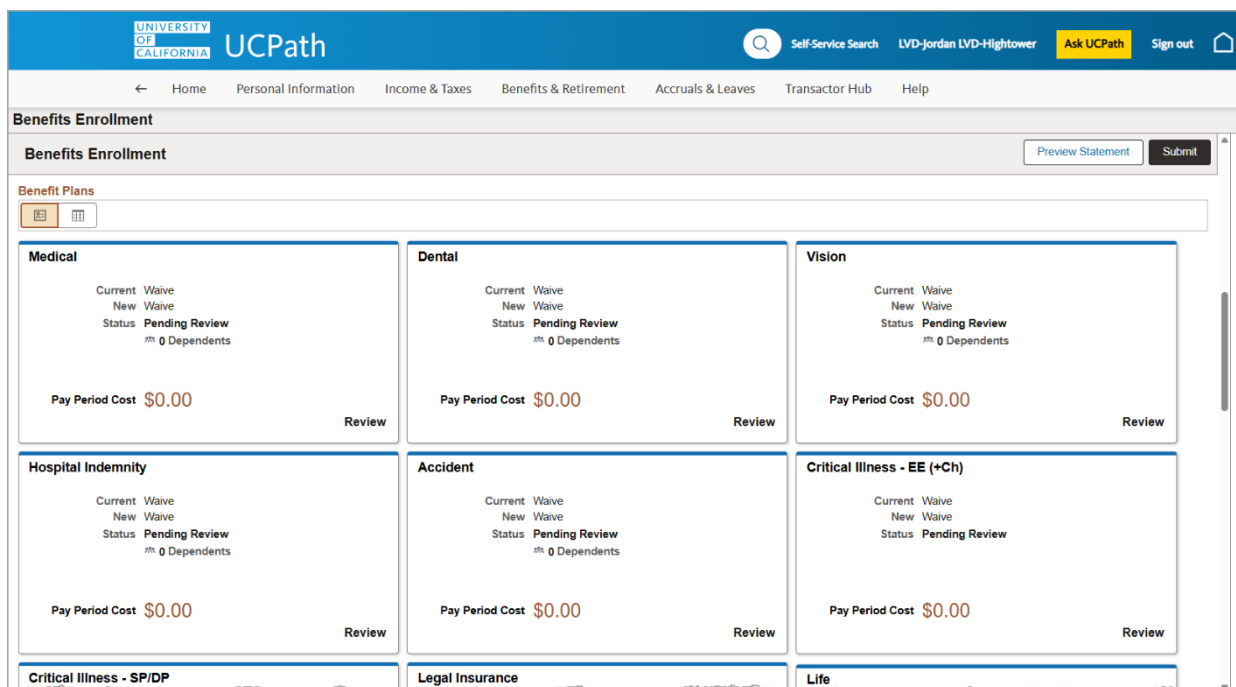
The pie chart displays a breakdown of your costs per plan. The chart below provides additional details about the fields in this section.

Field	Description
Your Pay Period Cost	You will pay this amount each pay period for the benefit coverage you elect. The cost is automatically deducted from your paycheck.
Status	This field indicates the current status of your benefits enrollment.

Field	Description
<b>Full Cost</b>	The total cost of the benefit coverage, including both your share and the portion paid by the University.
<b>Employer Cost</b>	The portion of the full cost that the University pays on your behalf toward your benefit coverage.

## Benefits Plans

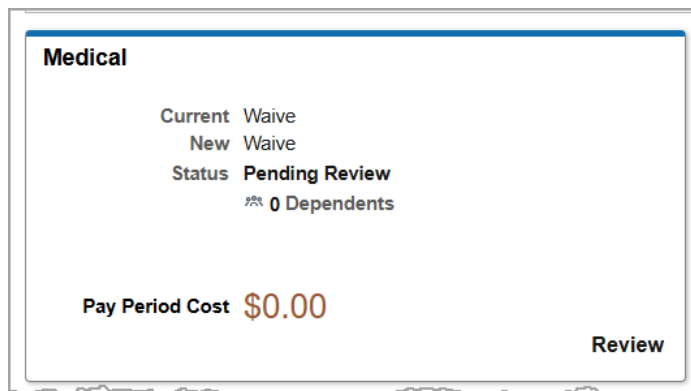
The **Benefit Plans** section displays the benefit plans for which you are eligible. You can view your benefits plans either as tiles or in a list. Use the **List View** button  to switch to the list.




The screenshot shows the UCPath interface with the 'Benefits Enrollment' section active. The 'Benefit Plans' tab is selected, displaying a grid of tiles for various benefit plans. Each tile includes options to 'Current', 'Waive', or 'New', a 'Status' of 'Pending Review', and a 'Pay Period Cost' of '\$0.00'. A 'Review' button is located at the bottom right of each tile. The plans shown are Medical, Dental, Vision, Hospital Indemnity, Accident, Critical Illness - EE (+Ch), Critical Illness - SP/DP, Legal Insurance, and Life.

## Understanding the Benefit Plans Tiles

- Each benefit plan is displayed on a tile.
- Refer to the following table for a description of the fields on each tile.



This image shows a detailed view of a 'Medical' benefit plan tile. It contains the following information:

- Medical** (Tile Title)
- Current Waive
- New Waive
- Status **Pending Review**
-  **0 Dependents**
- Pay Period Cost **\$0.00**
- Review** (Button)

Field	Description
<b>Current</b>	This field displays an already existing enrollment in the benefit plan, if any. If no enrollment exists, then the field displays <b>Waive</b> .
<b>New</b>	This field displays the default election of <b>Waive</b> when you start the enrollment process. When you select a different plan option, your plan choice appears in this field.
<b>Status</b>	This field displays the status of the benefit plan. The possible values are <b>Pending Review</b> , <b>Visited</b> , <b>Changed</b> , <b>Not Available</b> and <b>Error</b> . If you update a plan, the status displays <b>Changed</b> , a green checkmark icon appears, and the blue border at the top of the tile changes to green.
<b>Dependents</b>	For plans that allow enrolling dependents or beneficiaries, the tile displays a dependent or a beneficiary icon and the number of dependents or beneficiaries enrolled in the plan.
<b>Pay Period Cost</b>	This field displays the cost of the benefit per pay period.
<b>Review</b>	Select this button on the list view to review your benefit plan elections.

## Select Your Benefits

- When you are ready to make your elections, select the appropriate plan tile or the **Review** button on the list view to access the plan.

The screenshot displays the UCPath Benefits Enrollment interface. At the top, the navigation bar includes the UCPath logo, a search bar, and user information (LVD-Jordan LVD-Hightower). Below the navigation bar, the 'Benefits Enrollment' section is active, showing a list of benefit plans. The plans are displayed in a grid of tiles, each with a title, current status, new status, and a 'Review' button. The 'Medical' tile is highlighted with a red border. The 'Pay Period Cost' for all plans is \$0.00.

Benefit Plan	Current	New	Status	Dependents	Pay Period Cost	Review
Medical	Waive	Waive	Pending Review	0	\$0.00	Review
Dental	Waive	Waive	Pending Review	0	\$0.00	Review
Vision	Waive	Waive	Pending Review	0	\$0.00	Review
Hospital Indemnity	Waive	Waive	Pending Review	0	\$0.00	Review
Accident	Waive	Waive	Pending Review	0	\$0.00	Review
Critical Illness - EE (+Ch)	Waive	Waive	Pending Review	0	\$0.00	Review
Critical Illness - SP/DP						
Legal Insurance						
Life						

Use the **Plan** page to select a plan and add or remove your dependents from a plan. For additional plan details, select the **Resources** links in the upper right corner of the page.

Medical

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, for doctor visits, urgent and emergency care, hospital services, prescription drugs and behavioral health services. The plans also offer a broad choice of providers — including UC Health doctors, hospitals and medical groups — and plan designs to fit your needs.

▼ Enroll Your Dependents

The following list displays all individuals you have currently named as family members.

Ensure you check the box below to add each dependent to coverage for this plan. If an individual is missing from this list, use the **Add/Review Dependent** button to add new eligible family members.

Dependents who were previously enrolled in UC Benefits and did not complete Family Member Eligibility Verification (FMEV) will be grayed out and unable to be selected.

To enroll your unenrolled dependent(s) into UC BENEFITS, you will need to complete the FMEV process. Instructions on how to complete the FMEV Process for your dependent(s) are posted on UCnet.

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

Dependents	Relationship
<input type="checkbox"/> Elpidio D Daines	Spouse (Opposite/Same Sex) NA
<input type="checkbox"/> Alina Monroe	Child EE Biological/Adopted NC
<input type="checkbox"/> Aubrey V Yang	Child EE Biological/Adopted NC

**Add/Review Dependent**

▼ Enroll in Your Plan

The Employee Only cost shown for each plan is based on the dependents enrolled. Plans that do not offer coverage for the dependents enrolled are not available to select.

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

- Health Savings Account requires Health Savings Plan

Once submitted, this choice will take effect on 04/11/2025. Deductions for this choice will start with the pay period beginning 04/11/2025.

Plan Name	Employer Cost	Employee Cost
Select Core Plan	\$202.23	\$12.96
Select UC Health Savings Plan	\$436.58	\$43.29
Select UC Core Plan	\$654.44	\$116.06
Select UC Blue & Gold HMO	\$460.15	\$54.33
Select Kaiser North	\$389.65	\$19.69
✓ Wative		\$0.00

**Resources**

- Core Plan (PPO) | UCnet
- UC Blue & Gold (HMO) | UCnet
- Kaiser (HMO) | UCnet
- Health Savings Plan | UCnet
- UC Core Plan (PPO) | UCnet

**Overview of All Plans**

## Add/Review Dependent

- To add or review dependent information, select the **Add/Review Dependent** button.

Medical

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, for doctor visits, urgent and emergency care, hospital services, prescription drugs and behavioral health services. The plans also offer a broad choice of providers — including UC Health doctors, hospitals and medical groups — and plan designs to fit your needs.

▼ Enroll Your Dependents

The following list displays all individuals you have currently named as family members.

Ensure you check the box below to add each dependent to coverage for this plan. If an individual is missing from this list, use the **Add/Review Dependent** button to add new eligible family members.

Dependents who were previously enrolled in UC Benefits and did not complete Family Member Eligibility Verification (FMEV) will be grayed out and unable to be selected.

To enroll your unenrolled dependent(s) into UC BENEFITS, you will need to complete the FMEV process. Instructions on how to complete the FMEV Process for your dependent(s) are posted on UCnet.

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

Dependents	Relationship
<input type="checkbox"/> Elpidio D Daines	Spouse (Opposite/Same Sex) NA
<input type="checkbox"/> Alina Monroe	Child EE Biological/Adopted NC
<input type="checkbox"/> Aubrey V Yang	Child EE Biological/Adopted NC

**Add/Review Dependent**

▼ Enroll in Your Plan

The Employee Only cost shown for each plan is based on the dependents enrolled. Plans that do not offer coverage for the dependents enrolled are not available to select.

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

- Health Savings Account requires Health Savings Plan

Once submitted, this choice will take effect on 04/11/2025. Deductions for this choice will start with the pay period beginning 04/11/2025.

Plan Name	Employer Cost	Employee Cost
Select Core Plan	\$202.23	\$12.96
Select UC Health Savings Plan	\$436.58	\$43.29

**Resources**

- Core Plan (PPO) | UCnet
- UC Blue & Gold (HMO) | UCnet
- Kaiser (HMO) | UCnet
- Health Savings Plan | UCnet
- UC Core Plan (PPO) | UCnet

- To review current dependent information, select the **View or Update Detail** icon.

Dependent Information

**Add Individual**

Name	Relationship	Dependent
Elpidio Daines	Spouse (Opposite/Same Sex) NA	Yes
Alina Monroe	Child EE Biological/Adopted NC	Yes
Aubrey Yang	Child EE Biological/Adopted NC	Yes

The **Individual Dependent Information** page displays your dependent's information. **Note:** This page is read-only. To update your dependent's information, select the **Update Dependent eForm** link at the top of the page.

- Select the **Cancel** button to return to the **Dependent Information** page.

Cancel

Individual Dependent Information

\* Indicates required field

Please confirm the information listed below. If any changes need to be made to your current dependents information please submit an [Update Dependent eForm](#)

**Name**

Elpidio Daines

**Personal Information**

Date of Birth 01/01/1983

Relationship to Employee Spouse (Opposite/Same Sex) NA [Derive Relationship](#)

Gender Female

**Address**

Address	Address Type	Same Address as mine
300 Lakeside Dr Dummy 100 Oakland, CA 94612 Riverside	Home	Same as mine

**National ID**

+

Country	National ID Type	National ID	Primary
United States	Social Security Number	564-62-2098	✓

**Phone**

+

Number	Extension	Phone Type	Same as Mine	Preferred
510/987-0457		Home	✓	✓

- On the **Dependent Information** page, select the **Add Individual** button to add a new dependent.

Add Individual

Dependent Information

Name	Relationship	Dependent
Elpidio Daines	Spouse (Opposite/Same Sex) NA	Yes >
Ailma Monroe	Child EE Biological/Adopted NC	Yes >
aubrey Yang	Child EE Biological/Adopted NC	Yes >

- The **Add Individual Dependent Information** page appears. Here, you can enter your dependent's information.

Cancel

Add Individual Dependent Information

Save

*\* Indicates required field*

To add a new dependent, select the Save button after you have added your dependent information. The changes will go into effect on 2025-04-28

**Name**

Add Name

**Personal Information**

\*Date of Birth

MM/DD/YYYY

\*Gender

Relationship to Employee

Derive Relationship

**Address**

Address	Address Type	Same Address as mine
300 Lakeside Dr Dummy 100 Oakland, CA 94612 Riverside	Home	Same as mine >

**National ID**

No National ID exists.

Add National ID

**Phone**

No Phone exists.

Add Phone

**Email**

No Email exists

Add Email

- Select the **Add Name** button.

Cancel

Add Individual D

*\* Indicates required field*

To add a new dependent, select the Save button after you have added your dependent information. The changes will go into effect on 2025-04-28

**Name**


Add Name



- Enter your dependent's **Legal Name** details, and then select the **Done** button. Fields with an asterisk are required.

The 'Name' form has a 'Cancel' button on the top left and a 'Done' button on the top right. A red box highlights the following fields: 'Name Format' (dropdown menu showing 'English'), 'Legal Name Prefix' (dropdown menu), '\*Legal First Name' (text input), 'Legal Middle Name' (text input), '\*Legal Last Name' (text input), and 'Legal Name Suffix' (dropdown menu). Below these fields, the form displays 'Name', 'Legal Name', 'PS Format - Legal Name', and 'Formal Name PS Format'. A 'Refresh Name' button is located at the bottom left.

This screenshot shows the 'Name' form after some data has been entered. The 'Legal First Name' field now contains 'Ginger' and the '\*Legal Last Name' field contains 'Lee'. The 'Done' button in the top right corner is highlighted with a red box. The summary section at the bottom now shows 'Name: Ginger', 'Legal Name: Ginger', 'PS Format - Legal Name: ,Ginger', and 'Formal Name PS Format: ,Ginger'.

- In the **Personal Information** section, enter your dependent's **Date of Birth**. You can type this information or select the **Calendar** icon  to choose the date.

The 'Personal Information' section of the form is shown. The 'Name' field above contains 'Ginger Lee'. The 'Date of Birth' field, marked with an asterisk, is highlighted with a red box and contains the placeholder 'MM/DD/YYYY'. To its right is a calendar icon. Below it is the '\*Gender' dropdown menu. A 'Derive Relationship' button is located below the gender field. The 'Relationship to Employee' label is also visible.

- From the **Gender** list of values, select the appropriate option.

This screenshot shows the 'Personal Information' section with the 'Date of Birth' field now containing '01/18/2015'. The '\*Gender' dropdown menu is highlighted with a red box. The 'Derive Relationship' button remains visible below it.

- Select the **Derive Relationship** button to designate your dependent's relationship to you.

Cancel

To add a new dependent, select the Save button after you have added your dependent information. The changes will go into

**Name**

Ginger Lee

**Personal Information**

\*Date of Birth MM/DD/YYYY

\*Gender

Relationship to Employee **Derive Relationship**

**Address**

- From the list of values, select your dependent's relationship to you

**Derive Relationship**

What Relationship do you have with this dependent?

Child (Biological or Adopted)

Domestic Partner

Grand Child / Step Grand Child

Legal ward

Overage Disabled Child

Spouse

Step Child

Done

- Select the **Done** button.

**Derive Relationship**

What Relationship do you have with this dependent?

Child (Biological or Adopted)

Done

- Your dependent's address defaults to your address. To change their address, select the **Select** icon in the **Address** section.

**Address**

Address	Address Type	Same Address as mine
300 Lakeside Dr Dummy 100 Oakland, CA 94612 Riverside	Home	Same as mine

- Deselect the **Same as mine** checkbox and then enter your dependent's address. Select the **Done** button.

The screenshot shows the 'Address' form in UCPath. At the top left is a 'Cancel' button and at the top right is a 'Done' button. Below these is a 'Same as mine' checkbox, which is currently checked and highlighted with a red rectangle. The form contains the following fields: 'Address Type' (a dropdown menu set to 'Home'), 'Country' (a text field with 'United States'), 'Address 1' (a text field with '300 Lakeside Dr'), 'Address 2' (a text field with 'Dummy 100'), 'Address 3' (an empty text field), 'City' (a text field with 'Oakland'), 'State' (a text field with 'California'), 'Postal' (a text field with '94612'), and 'County' (a text field with 'Riverside').

- Select the **Add National ID** button to enter your dependent's National ID details such as their Social Security number (SSN).

The screenshot shows the 'National ID' form. At the top left is a 'Cancel' button and at the top right is a 'Done' button. The form displays the text 'National ID' in orange, followed by 'No National ID exists.' in black. Below this text is a blue button labeled 'Add National ID', which is highlighted with a red rectangle.

- Complete the fields on this page and then select the **Done** button.

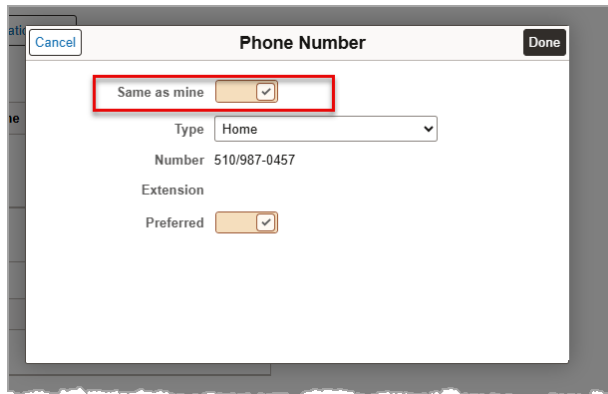
The screenshot shows the 'National ID' form. At the top left is a 'Cancel' button and at the top right is a 'Done' button. The form contains the following fields: '\*Country' (a dropdown menu), '\*National ID Type' (a dropdown menu), '\*National ID' (a text field), and 'Primary' (a checkbox that is checked and highlighted with a red rectangle).

The screenshot shows the 'National ID' form. At the top left is a 'Cancel' button and at the top right is a 'Done' button. The form contains the following fields: '\*Country' (a dropdown menu set to 'United States'), '\*National ID Type' (a dropdown menu set to 'Social Security Number'), '\*National ID' (a text field with '123321233'), and 'Primary' (a checkbox that is checked and highlighted with a red rectangle).

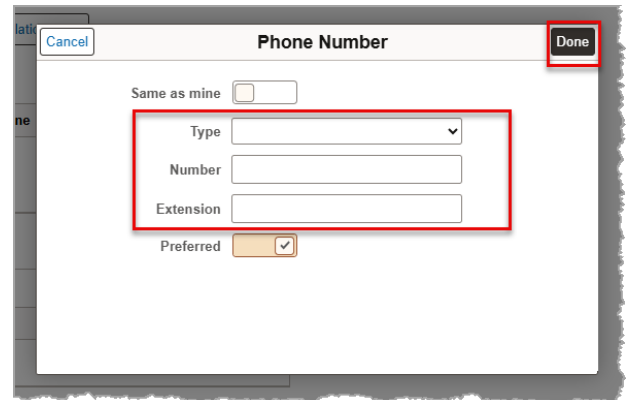
- To edit your dependent's phone number, select the **Add Phone** button.

The screenshot shows the 'Phone' form. At the top left is a 'Cancel' button and at the top right is a 'Done' button. The form displays the text 'Phone' in orange, followed by 'No Phone exists.' in black. Below this text is a blue button labeled 'Add Phone', which is highlighted with a red rectangle.

- Your dependent's phone number defaults to your number. To update it, deselect the **Same as mine** check box. Enter the dependent's phone number details and then select the **Done** button.

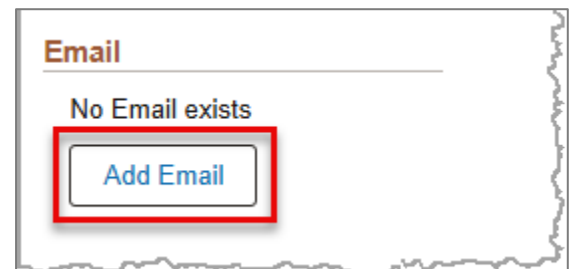


The 'Phone Number' form has a 'Same as mine' checkbox that is checked. Below it, the 'Type' is set to 'Home', the 'Number' is '510/987-0457', and the 'Preferred' checkbox is also checked. The 'Done' button is in the top right corner.



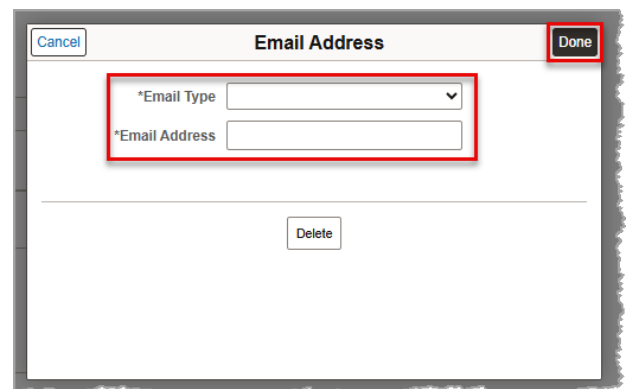
The 'Phone Number' form has the 'Same as mine' checkbox unchecked. The 'Type', 'Number', and 'Extension' fields are empty, and the 'Preferred' checkbox is checked. The 'Done' button is in the top right corner.

- If you want to add an email address for your dependent, select the **Add Email** button.



The 'Email' form displays the message 'No Email exists' and a blue 'Add Email' button. The button is highlighted with a red box.

- Enter your dependent's email address, and then select the **Done** button.



The 'Email Address' form has two input fields: '\*Email Type' (a dropdown menu) and '\*Email Address' (a text box). Both fields are highlighted with a red box. A 'Delete' button is located below the input fields. The 'Done' button is in the top right corner.

- Carefully review your dependent's information, and then select the **Save** button to complete your entry.

Cancel

Add Individual Dependent Information

Save


\* Indicates required field

To add a new dependent, select the Save button after you have added your dependent information. The changes will go into effect on 2025-05-09

**Name**

Ginger Lee >

**Personal Information**

\*Date of Birth 01/18/2015 

\*Gender Female ▾

Relationship to Employee Child EE Biological/Adopted NC [Derive Relationship](#)

**Address**

Address	Address Type	Same Address as mine
300 Lakeside Dr Dumny 100 Oakland, AZ 95038	Home	Same as mine >

**National ID**

+

Country	National ID Type	National ID	Primary
United States	Social Security Number	123-12-1231	✓ >

**Phone**

+

Number	Extension	Phone Type	Same as Mine	Preferred
510/987-0457		Home	✓	✓ >

**Email**

gingerlee@gmail.com	Home >
---------------------	--------

- Repeat these steps until all your dependents have been added.

## Selecting Dependents

Your newly entered dependents appear on the **Dependent List** but are not yet enrolled in coverage. Select the check box next to the dependent's name to add them to your plan.

Enroll Your Dependents

The following list displays all individuals you have currently named as family members.

Ensure you check the box below to add each dependent to coverage for this plan. If an individual is missing from this list, use the [Add/Review Dependent](#) button to add new eligible family members.

Dependents who were previously enrolled in UC Benefits and did not complete Family Member Eligibility Verification (FMEV) will be grayed out and unable to be selected.

To enroll your unverified dependent(s) into UC BENEFITS, you will need to complete the FMEV process. Instructions on how to complete the [FMEV Process](#) for your dependent(s) are posted on UCnet.

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

Dependents	Relationship
<input checked="" type="checkbox"/> Elpidio D Daines	Spouse (Opposite/Same Sex) NA
<input type="checkbox"/> Alina Monroe	Child EE Biological/Adopted NC
<input type="checkbox"/> aubrey V Yang	Child EE Biological/Adopted NC
<input type="checkbox"/> Ginger Lee	Child EE Biological/Adopted NC

[Add/Review Dependent](#)

**Note:** UC requires all faculty, staff and retirees who enroll family members in their medical, dental and/or vision insurance plans to complete the **Family Member Eligibility Verification (FMEV)** process with UC's third-party vendor. This involves submitting documentation to confirm their family members' eligibility for coverage.

## Enroll in Your Plan

When you have selected the dependents you wish to add, scroll to the **Enroll in Your Plan** section. This section displays the plan names and the cost based on your enrolled dependents. For more information about the plans, select the **Overview of All Plans** button.

▼ Enroll in Your Plan

The **Employee Only** cost shown for each plan is based on the dependents enrolled. Plans that do not offer coverage for the dependents enrolled are not available to select.

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

- Health Savings Account requires Health Savings Plan

Once submitted, this choice will take effect on 04/11/2025. Deductions for this choice will start with the pay period beginning 04/11/2025.

	Plan Name	Employer Cost	Employee Cost
Select	Core Plan	\$558.43	\$65.61
Select	UC Health Savings Plan	\$1267.14	\$124.22
Select	UC Care Plan	\$1862.23	\$372.21
Select	UC Blue & Gold HMO	\$1332.46	\$159.54
Select	Kaiser North	\$1120.07	\$68.15
✓	Waive		\$0.00

Overview of All Plans

- Select the **Select** button next to the plan you want to enroll in.

▼ **Enroll in Your Plan**

The **Employee Only** cost shown for each plan is based on the dependents enrolled. Plans that do not offer coverage for the dependents enrolled are not available to select.

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

- Health Savings Account requires Health Savings Plan

Once submitted, this choice will take effect on 04/11/2025. Deductions for this choice will start with the pay period beginning 04/11/2025.

	Plan Name	Employer Cost	Employee Cost
Select	Core Plan	\$558.43	\$65.61
Select	UC Health Savings Plan	\$1267.14	\$124.22
Select	UC Care Plan	\$1862.23	\$372.21
Select	UC Blue & Gold HMO	\$1332.46	\$159.54
Select	Kaiser North	\$1120.07	\$68.15
✓	Waive		\$0.00

[Overview of All Plans](#)

- When you have selected the appropriate plan and dependents, select the **Done** button to save your elections.

Cancel **Medical** Done

To enroll your unverified dependent(s) into UC BENEFITS, you will need to complete the FMEV process. Instructions on how to complete the FMEV Process for your dependent(s) are posted on UCnet.

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

Dependents	Relationship
<input checked="" type="checkbox"/> Elpidio D Daines	Spouse (Opposite/Same Sex) NA
<input checked="" type="checkbox"/> Alina Monroe	Child EE Biological/Adopted NC
<input checked="" type="checkbox"/> aubrey V Yang	Child EE Biological/Adopted NC
<input checked="" type="checkbox"/> Ginger Lee	Child EE Biological/Adopted NC

[Add/Review Dependent](#)

▼ **Enroll in Your Plan**

The **Family (NA+NC)** cost shown for each plan is based on the dependents enrolled. Plans that do not offer coverage for the dependents enrolled are not available to select.

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

- Health Savings Account requires Health Savings Plan

Once submitted, this choice will take effect on 04/11/2025. Deductions for this choice will start with the pay period beginning 04/11/2025.

	Plan Name	Employer Cost	Employee Cost
Select	Core Plan	\$558.43	\$65.61
Select	UC Health Savings Plan	\$1267.14	\$124.22
Select	UC Care Plan	\$1862.23	\$372.21
Select	UC Blue & Gold HMO	\$1332.46	\$159.54
✓	Kaiser North	\$1120.07	\$68.15
Select	Waive		\$0.00

[Overview of All Plans](#)

- On the **Benefits Enrollment** page, the **Enrollment Summary** section displays your new **Pay Period Cost**. The **Plan Tile** also displays your new election and, if applicable, the number of dependents you have added to the plan. You can also select the **Preview Statement** button to review a preliminary copy of your chosen elections, costs and dependent information.

**Benefits Enrollment**

**Benefits Enrollment** [Preview Statement](#) [Submit](#)

[Enrollment Summary](#)

Your Pay Period Cost **\$79.67** Full Cost **\$79.67**  
Status **Pending Review** Employer Cost **\$1,132.88**

Child  
Spou.  
Supp.

Medical

**Benefit Plans**

Card or List View

Medical

Current **Waive**  
New **Kaiser North**  
Status **Changed**  
4 Dependents

Pay Period Cost **\$68.15** [Review](#)

Dental

Current **Waive**  
New **Waive**  
Status **Pending Review**  
0 Dependents

Pay Period Cost **\$0.00** [Review](#)

Vision

Current **Waive**  
New **Waive**  
Status **Pending Review**  
0 Dependents

Pay Period Cost **\$0.00** [Review](#)

Hospital Indemnity

Current **Waive**

Accident

Current **Waive**

Critical Illness - EE (+Ch)

Current **Waive**

- Repeat the enrollment steps for the rest of the benefit plans you want to enroll in.

## Special Considerations

Special consideration should be made for the following plans:

### Enrolling in UC Blue & Gold HMO Medical Plan and DeltaCare USA Dental Plan

- If you select **UC Blue & Gold HMO** or **DeltaCare USA**, you must complete the **Select Primary Care Provider** section.
- Use the links on the page to search for your primary care provider's **Enrollment ID** number.
- When you have made your election, select the **Done** button.

[Cancel](#) **Dental** [Done](#)

Once submitted, this choice will take effect on 04/11/2025. Deductions for this choice will start with the pay period beginning 04/11/2025.

Plan Name	Employer Cost	Pay Period Cost
Select Delta Dental PPO	\$128.29	\$0.00
✓ DeltaCare USA	\$52.46	\$0.00
Select Waive		\$0.00

[Overview of All Plans](#)

▼ Select Primary Care Provider

The DeltaCare USA HMO plan is only available to residents of California, and coverage is not available for providers outside Delta Dental's HMO network. Some areas of the state have more network providers than others. Be sure there are network dentists available in your area before enrolling in this plan.

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.

To search for your network dentist follow the directions below:

Go to Primary Care Provider Search | Delta Dental

- Search by address, city or ZIP code.
- Select your network plan (DeltaCare USA).
- Click "Find a dentist".
- Narrow your search by location, specialty, network and language.

Your search results will include a six-digit "Facility" ID number with info about the dentist.

\*Select a Primary Care Provider by entering the six numeric characters of the Facility ID. Do not enter spaces or symbols.

I have visited this provider before ☐

PCP ID Default ☐

Use the same provider for all dependents ☐

[Primary Care Provider Search](#)

Dependents	Enrollment ID #	Visited this provider before
Elpidio D Daines	<input type="text"/>	<input type="checkbox"/>
aubrey V Yang	<input type="text"/>	<input type="checkbox"/>



## Retirement Elections

- Elections into the UC Retirement Plan (UCRP) and voluntary retirement savings plans (403(b), 403(b) Roth and 457(b) are not entered in UCPath. Visit [UCRAYS](#) to complete these elections.

**403(b)**

Current **Waive**

New **Waive**

Status **Waived**

Review

## Identity Theft Protection

- UC provides a comprehensive identity protection program through Experian for employees, retirees and their dependent children (up to age 18). Coverage in this plan is automatic; however, you must visit the Experian website to set up your account. No enrollment action is required in UCPath.

**Identity Theft Protection**

Current **Identity Theft Protection**

New **Identity Theft Protection**

Status **Not Available**

**Pay Period Cost** **\$0.00**

Review

## Finalizing Your Enrollments

After making changes to your enrollment plans, select the **Submit** button in the upper right corner to submit your benefit plan choices to UCPath.

**Benefits Enrollment**

**Benefits Enrollment**


Reminder: Your changes are not final until you **Submit** all your choices.

**Enrollment Summary**

Your Pay Period Cost **\$393.15**

Status Pending Review

Full Cost **\$393.15**  
Employer Cost **\$1,196.75**



**Benefit Plans**

Card or List View

**Medical**

Current **Waive**

New **Kaiser North**

Status **Changed**

4 Dependents

**Pay Period Cost** **\$68.15**

Review

**Dental**

Current **Waive**

New **DeltaCare USA**

Status **Changed**

4 Dependents

**Pay Period Cost** **\$0.00**

Review

**Vision**

Current **Waive**

New **Vision Service Plan (VSP)**

Status **Changed**

4 Dependents

**Pay Period Cost** **\$0.00**

Review

**Hospital Indemnity**

Current **Waive**

New **Waive**

Status **Pending Review**

0 Dependents

**Accident**

Current **Waive**

New **Accident**

Status **Changed**

4 Dependents

**Critical Illness - EE (+Ch)**

Current **Waive**

New **Critical Illness - EE (+Ch)10K \$10,000**

Status **Changed**

3 Dependents

- UCPath displays the **Terms & Conditions** pop-up window. Select the check boxes to accept the **Arbitration Terms** and the **Terms and Conditions**.
- Select the **Submit** button.

**Terms & Conditions**

You have almost completed your enrollment. If you have no further changes, accept the Arbitration statement and Terms and Conditions below, then select the **'Submit'** button to finalize your benefits choices.

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

**Participation Terms and Conditions**

Your Social Security number, and that of your enrolled family members, is required for purposes of benefit plan administration, for financial reporting, to verify your identity, and for legally required reporting purposes all in compliance with federal and state laws.

If you are confirmed as eligible for participation in UC-sponsored plans, you are subject to the Terms and Conditions of Participation

**ARBITRATION**

UC-sponsored medical plans require resolution of disputes through arbitration.

BY YOUR WRITTEN OR ELECTRONIC SIGNATURE, IT IS UNDERSTOOD AND YOU AGREE THAT ANY DISPUTE AS TO MEDICAL MALPRACTICE – THAT IS, AS TO WHETHER ANY MEDICAL SERVICES RENDERED UNDER THE CONTRACT WERE UNNECESSARY OR UNAUTHORIZED OR WERE IMPROPERLY, NEGLIGENTLY OR INCOMPETENTLY RENDERED – WILL BE DETERMINED BY SUBMISSION TO ARBITRATION AS PROVIDED BY CALIFORNIA LAW AND NOT BY A LAWSUIT OR RESORT TO COURT PROCESS, EXCEPT AS CALIFORNIA LAW PROVIDES FOR JUDICIAL REVIEW OF ARBITRATION PROCEEDINGS. BOTH PARTIES TO THE CONTRACT, BY ENTERING INTO IT, ARE GIVING UP THEIR CONSTITUTIONAL RIGHT TO HAVE ANY SUCH DISPUTE DECIDED IN A COURT OF LAW BEFORE A JURY AND INSTEAD ARE ACCEPTING THE USE OF ARBITRATION.

**NOTICE: BY SIGNING THIS CONTRACT YOU ARE AGREEING TO HAVE ANY ISSUE OF MEDICAL MALPRACTICE DECIDED BY NEUTRAL ARBITRATION AND YOU ARE GIVING UP YOUR RIGHT TO A JURY OR COURT TRIAL.**

☒ **BY CHECKING THIS BOX I AM ELECTRONICALLY SIGNING AND ACCEPTING THE ABOVE ARBITRATION TERMS PERTAINING TO ALL MEDICAL PLANS.**

☒ By checking this box I accept the [Terms and Conditions](#)

☒ By checking this box, I am electing to receive an electronic [HIPAA Notices](#)

**Authorize Elections**

By submitting your benefit choices elections 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, support and administer your coverage

**Submit** **Cancel**

- When the **Benefits Alerts** message appears, select the **Done** button.

**Done** **Benefits Alerts**

**Instructions**

Your benefit choices have been successfully submitted to UCPath.

You will **receive an email within 24-48 hours** confirming your benefit changes have been processed and are available to view in UCPath.

Click **Done** and proceed to view your Benefit Enrollment Statement.