

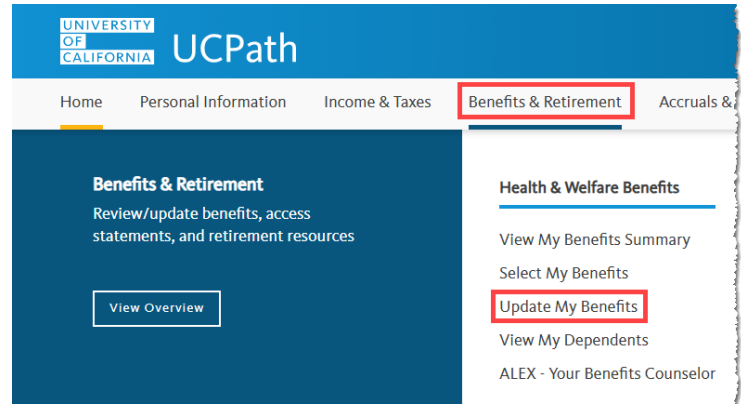
This Job Aid supports the information shown in [EMP112: Benefits Information](#)

UCPath allows you to manage your benefits and make plan changes within 31 days of a qualifying event. Life event options include marriage, birth or adoption, establishing a domestic partnership, finalizing divorce/legal separation/annulment or terminating a domestic partnership.

Benefit changes for AD&D, Health Savings Plan (HSA) and life insurance are available through the Self-Service Event Options.

### Navigation:

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



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

- In the **Self-Service Event Options** section, select the appropriate life event.
- Enter or select the **As Of** date.
- Select the **Start Life Event** button.

A screenshot of the 'Life Events' form in the UCPath system. The form title is 'Life Events' with a sub-header 'LVD-Tod LVD-Bradren (HoHim-His)'. It includes a note: '\* Indicates required field'. The main text states: 'UCPath allows you to manage your benefits and make plan changes within 31 days of a qualifying life event'. Below this, there are sections for 'Self-Service Life Event', 'Life Events & Plan Changes Requiring Alternative Action', 'Disability Changes', 'Loss/Gain of Coverage Outside of UC', 'Death of a Dependent', and 'Newly Eligible'. The 'Self-Service Event Options' section is highlighted with a red box and contains a list of radio button options: 'I've had a marriage within the last 31 days', 'I've had a birth or adoption within the last 31 days', 'I've established a domestic partnership in the last 31 days', 'I want to change my Health Savings (HSA), AD&D or Life plan.', 'Finalized divorce/legal separation/annulment within 31 days', and 'I've terminated a domestic partnership in the last 31 days'. Below this list, there is an 'As Of' date field with a calendar icon and a 'Start Life Event' button, which is also highlighted with a red box and an arrow.

UCPath displays the **Benefit Enrollment** activity guide.

## Step 1: Welcome to the Self-Service Enrollment

- Review the **Self-Service Enrollment Instructions**.
- Select the **Next** button.
- **Note:** Select the **Cancel Life Event** button to exit the life event without saving. Select the **Exit** button to return to the **Life Events** page. The life event remains active, and you can return to complete the life event.

UCPath

Birth/Adoption - Benefit Enrollment

10595506

Qualifying Period 5/1/2025-6/1/2025

Cancel Life Event **Next >**

**1 Welcome to the Self-Service Enrollment**  
Validated

**2 Self-Service Acknowledgements**  
Not Started

**3 View Current Benefits**  
Not Started

**4 Make Benefit Selections**  
Not Started

**5 View Benefits Statements**  
Not Started

**6 Complete the Self-Service Process**  
Not Started

**Step 1 of 6: Welcome to the Self-Service Enrollment**

**Self-Service Enrollment Instructions**

Congratulations! Updating your benefits is an important step to ensure your coverage reflects your current needs and life changes. You can make benefit changes to update your coverage and contributions, such as enrolling your new family member(s) or updating your spending or savings account contributions.

To update your current benefits, follow the steps provided in the enrollment menu.

You will not be required to submit a copy of documentation at this time. Within a few weeks of enrolling new dependents, you will receive a request, sent via postal mail from UnifyHR, to submit documentation to verify your family members' eligibility. Then you must complete the verification process by the due date provided by UnifyHR or your family member(s) will lose coverage.

**Your benefit selection(s) need to be submitted before your qualifying period ends.**

Look for the header labeled **"Qualifying Period"** near the top of this page. Complete this enrollment process within 31 days of your birth/adoption to ensure your changes are submitted successfully.

**Additionally, we created a roadmap** to help guide you through a list of changes you should consider during this life change.

UC Residents & Fellows, a quick reminder that UCPath manages only your Flexible Spending Accounts.

## Step 2: Self Service Acknowledgements

- Review the **Self Service Acknowledgements**.
- Select the **I have read and acknowledged the above reminders** check box.
- Select the **Save** button.

Birth/Adoption - Benefit Enrollment

Qualifying Period 5/1/2025-6/1/2025

Cancel Life Event **Save**

**1 Welcome to the Self-Service Enrollment**  
Validated

**2 Self Service Acknowledgements**  
In Progress

**3 View Current Benefits**  
Not Started

**4 Make Benefit Selections**  
Not Started

**5 View Benefits Statements**  
Not Started

**6 Complete the Self-Service Process**  
Not Started

**Step 2 of 6: Self Service Acknowledgements**

**Important Information About Your Elections**

Please read the following as they are important steps to keep in mind as you continue with your enrollment process:

**Self-Service Submission**

- Please ensure all selections are correct before submitting. Your selections will be saved until you are ready to click **"Submit"**.
- Submission is final. Once you **"Submit"**, your choices will be processed, and you will not be able to make additional changes until you have experienced an additional qualified family status or employment change, or the next Open Enrollment period.
- Your benefit selection(s) need to be submitted before your qualifying period ends. Look for the header labeled **"Qualifying Period"** near the top of this page.

**Plan Deductions & Effective Dates**

- Changes to a different plan are effective the first of the month, following the event date.
- Additions of newly eligible family members are retroactive to the date the life event occurred.
- Removal of family members from coverage is effective the last day of the month in which changes are made.
- Changes to benefit plans may result in retroactive benefit premium adjustments and deductions from future pay.

**UC Policy**

- Enrollment in duplicate University sponsored coverage is not allowed. You cannot enroll in coverage if you are already covered as a dependent under another employee's UC sponsored coverage. Please contact UCPath for additional information regarding duplicate coverage.
- You will not need to provide proof of family relationship at the time of enrollment. A few weeks after enrollment, you will be asked, via postal mail and email, to provide official documentation of a new family member's eligibility through the **Family Member Eligibility Verification process**.
- If your domestic partner is currently enrolled in your benefits and is now your spouse, their plan coverage must remain the same. Ensure to follow instructions found in your marriage welcome page, to submit a form to update their relationship status from "domestic partner" to "spouse." Submitting a marriage enrollment will not allow you to change their status or enrolled plans. **Any unauthorized changes will be denied, and your original coverage will be reinstated.**

**After Your Initial 31-Day Eligibility Period**

- After your initial 31-day period of eligibility, you can only enroll in **Voluntary Short- or Long-Term Disability** by submitting a health application (called Evidence of Insurability) directly to the insurance company. They must approve it before your coverage begins.
- If you request to enroll or increase your **Supplemental Life Insurance** after your initial 31 days of eligibility, the health review process (Statement of Health/Evidence of Insurability) with the insurance company will be initiated. They must approve your request before it takes effect. After you apply, they'll email you within a week with next steps. Once approved, UCPath will complete your enrollment and send you a confirmation.

☐ I have read and acknowledged the above reminders.

- After you save, UCPath displays a banner at the top of the page that reads **Your changes are successfully saved.**
- Select the **Next** button.

The screenshot shows the 'Birth/Adoption - Benefit Enrollment' page. A green banner at the top states 'Your changes are successfully saved.' Below the banner, there are buttons for 'Cancel Life Event', '< Previous', and 'Next >'. The 'Next >' button is highlighted with a red box. On the left, a progress bar shows six steps: 1. Welcome to the Self-Service Enrollment (Visited), 2. Self Service Acknowledgements (Complete), 3. View Current Benefits (Visited), 4. Make Benefit Selections (Not Started), 5. View Benefits Statements (Not Started), and 6. Complete the Self-Service Process (Not Started). The main content area is titled 'Step 2 of 6: Self Service Acknowledgements' and includes a 'Save' button.

### Step 3: View Current Benefits

- Review your current benefits coverage.
- Optionally, select the **Dependents** link in any plan tile to review your dependents.
- Select the **Next** button.

The screenshot shows the 'Birth/Adoption - Benefit Enrollment' page at 'Step 3 of 6: View Current Benefits'. The page displays a grid of benefit plan tiles. The 'Medical' tile shows 'Plan: UC Health Savings Plan' and 'Coverage: Self + Adult (NA)' with a '1 Dependents' link. The 'Dental' tile shows 'Plan: Delta Dental PPO' and 'Coverage: Self + Adult (NA)' with a '1 Dependents' link. The 'Vision' tile shows 'Plan: Vision Service Plan (VSP)' and 'Coverage: Self + Adult (NA)' with a '1 Dependents' link. The 'Hospital Indemnity' tile shows 'Coverage: Waived'. The 'Accident' tile shows 'Coverage: Waived'. The 'Critical Illness - EE (+Ch)' tile shows 'Coverage: Waived'. The 'Critical Illness - SP/DP' tile shows 'Coverage: Waived'. The 'Legal Insurance' tile shows 'Plan: ARAG Legal' and 'Coverage: Self + Adult (NA)' with a '1 Dependents' link. The 'Life' tile shows 'Plan: Basic Life' and 'Coverage: Salary'. Each tile has a 'Review' button. The 'Next >' button is highlighted with a red box.

## Step 4: Make Benefit Selections

- Select the **Start My Enrollment** button to begin your benefit enrollment.

**Birth/Adoption - Benefit Enrollment**  
10595506  
Qualifying Period 5/1/2025-8/1/2025

Cancel Life Event [Previous](#)

1 Welcome to the Self-Service Enrollment Visited

2 Self Service Acknowledgements Complete

3 View Current Benefits Visited

4 Make Benefit Selections In Progress

5 View Benefits Statements Not Started

6 Complete the Self-Service Process Not Started


### Step 4 of 6: Make Benefit Selections

Begin your self-service benefit enrollment by clicking the **'Start My Enrollment'** button.

UCPath will prepare your self-service benefit enrollment options, based upon the Life Event and date you have selected. The options prepared for you will be based on your benefits eligibility, current benefit coverage and job information. If certain plan options are *Not Available*, this means that changes to these plans are not permitted through this self-service life event.

**Start My Enrollment**

## Benefits Enrollment

The **Benefits Enrollment** page 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.

- When you first enter the Benefits Enrollment page, your plan Status displays as **Pending Review**.
- After you review the plans, the next time you return to the **Benefits Enrollment** page, the status displays as **Visited**.

[X Exit](#) [Home](#) [Personal Information](#) [Income & Taxes](#) [Benefits & Retirement](#) [Accruals & Leaves](#) [Help](#)

**Birth/Adoption - Benefit Enrollment**  
10043309  
Qualifying Period 5/1/2025-8/1/2025

Cancel Life Event [Previous](#)

1 Welcome to the Self-Service Enrollment Visited

2 Self Service Acknowledgements Complete

3 View Current Benefits Visited

4 Make Benefit Selections In Progress

5 View Benefits Statements Not Started

6 Complete the Self-Service Process Not Started

### Benefits Enrollment

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

<b>Medical</b> Current UC Health Savings Plan New UC Health Savings Plan Status <b>Pending Review</b> 1 Dependents Pay Period Cost <b>\$237.79</b> Review	<b>Dental</b> Current Delta Dental PPO New Delta Dental PPO Status <b>Pending Review</b> 1 Dependents Pay Period Cost <b>\$0.00</b> Review	<b>Vision</b> Current Vision Service Plan (VSP) New Vision Service Plan (VSP) Status <b>Pending Review</b> 1 Dependents Pay Period Cost <b>\$0.00</b> Review
<b>Hospital Indemnity</b> Current Waive New Waive Status <b>Pending Review</b> 0 Dependents Pay Period Cost <b>\$0.00</b> Review	<b>Accident</b> Current Waive New Waive Status <b>Pending Review</b> 0 Dependents Pay Period Cost <b>\$0.00</b> Review	<b>Critical Illness - EE (+Ch)</b> Current Waive New Waive Status <b>Pending Review</b> Pay Period Cost <b>\$0.00</b> Review

If you update a plan, the status changes to **Changed**, a green checkmark icon appears, and the tile has a green bar at the top.

### 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.

**Medical**

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

Pay Period Cost **\$0.00**

Review

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 new 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.

Birth/Adoption - Benefit Enrollment

10043309  
Qualifying Period 5/1/2025-8/1/2025

Cancel Life Event < Previous

1 Welcome to the Self-Service Enrollment Visited

2 Self Service Acknowledgements Complete

3 View Current Benefits Visited

4 Make Benefit Selections In Progress

5 View Benefits Statements Not Started

6 Complete the Self-Service Process Not Started

Benefits Enrollment

Preview Statement Submit

**Medical**

Current UC Health Savings Plan  
New UC Health Savings Plan  
Status Pending Review  
# 1 Dependents

Pay Period Cost \$237.79 Review

**Dental**

Current Delta Dental PPO  
New Delta Dental PPO  
Status Pending Review  
# 1 Dependents

Pay Period Cost \$0.00 Review

**Vision**

Current Vision Service Plan (VSP)  
New Vision Service Plan (VSP)  
Status Pending Review  
# 1 Dependents

Pay Period Cost \$0.00 Review

**Hospital Indemnity**

Current Waive  
New Waive  
Status Pending Review  
# 0 Dependents

Pay Period Cost \$0.00 Review

**Accident**

Current Waive  
New Waive  
Status Pending Review  
# 0 Dependents

Pay Period Cost \$0.00 Review

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

Current Waive  
New Waive  
Status Pending Review

Pay Period Cost \$0.00 Review

- 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.

Cancel Medical Done

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 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 type="checkbox"/> Elpidio D Duines	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 Employees 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 04/15/2025. Deductions for this choice will start with the pay period beginning 04/15/2025.

Plan Name	Employer Cost	Employee Cost
Select Core Plan	\$202.23	\$12.96
Select UC Health Savings Plan	\$436.58	\$43.20
Select UC Care Plan	\$654.44	\$116.06
Select UC Blue & Gold HMO	\$460.15	\$54.33
Select Kaiser North	\$389.85	\$19.89
✓ Waive		\$0.00

Overview of All Plans

Resources

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

## Add/Review Dependent

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

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.

Cancel

Medical

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	Employee Cost	Employee Cost
Select Core Plan	\$702.23	\$12.96
Select UC Health Savings Plan	\$436.58	\$43.28

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

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.

**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.

**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 **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  

\*Gender

Relationship to Employee

**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.

**Phone**

No Phone exists.

**Email**

No Email exists

- 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**

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

The 'Name' form contains the following fields: Name Format (English), Legal Name Prefix, \*Legal First Name, Legal Middle Name, \*Legal Last Name, and Legal Name Suffix. A red box highlights the fields from \*Legal First Name to Legal Name Suffix. Below these fields are sections for 'Name', 'Legal Name', 'PS Format - Legal Name', and 'Formal Name PS Format', each with a 'Refresh Name' button. The 'Done' button is in the top right corner.

This screenshot shows the 'Name' form after data entry. The fields now contain: Name Format (English), Legal Name Prefix, \*Legal First Name (Ginger), Legal Middle Name, \*Legal Last Name (Lee), and Legal Name Suffix. The 'Done' button in the top right corner is highlighted with a red box. The summary section at the bottom 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 includes the \*Date of Birth field (MM/DD/YYYY) with a calendar icon, the \*Gender dropdown menu, and the Relationship to Employee dropdown menu with a 'Derive Relationship' button. The 'Name' section above shows 'Ginger Lee'. The 'Address' section is partially visible at the bottom. A red box highlights the \*Date of Birth field. A message at the top states: 'To add a new dependent, select the Save button after you have added your dependent information. The changes will go into'.

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

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 01/18/2015

\*Gender

Relationship to Employee Derive Relationship

Address

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

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

Cancel Address Done

Same as mine ☒

Address Type Home

Country United States

Address 1 300 Lakeside Dr

Address 2 Dummy 100

Address 3

City Oakland

State California

Postal 94612

County Riverside

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

National ID

No National ID exists.

Add National ID

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

Cancel National ID Done

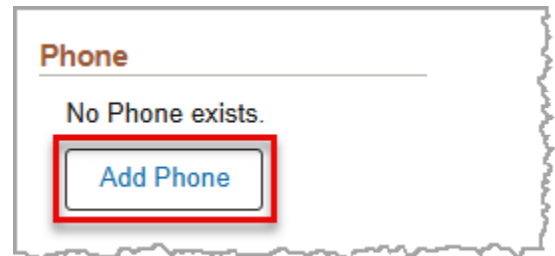
\*Country United States

\*National ID Type Social Security Number

\*National ID 123321233

Primary ☒

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

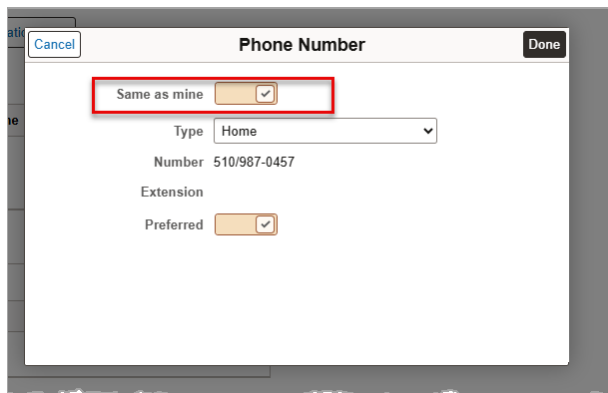


**Phone**

No Phone exists.

[Add Phone](#)

- 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.



**Phone Number**

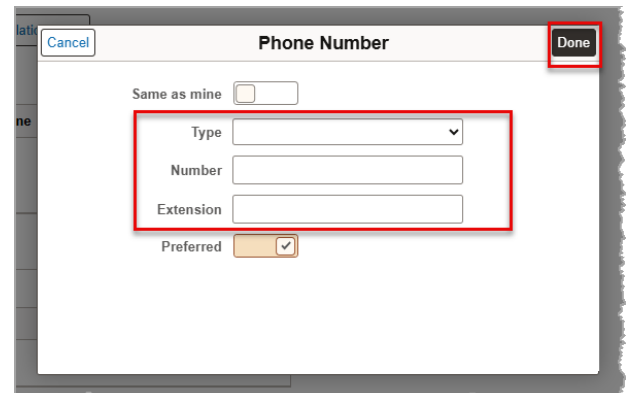
Same as mine ☒

Type Home

Number 510/987-0457

Extension

Preferred ☒



**Phone Number**

Same as mine ☐

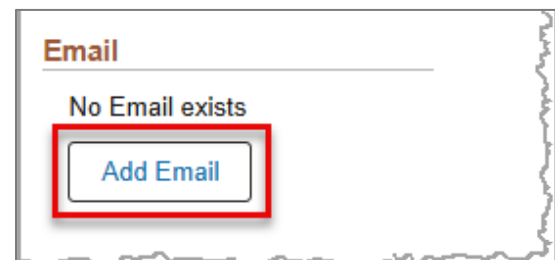
Type

Number

Extension

Preferred ☒

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

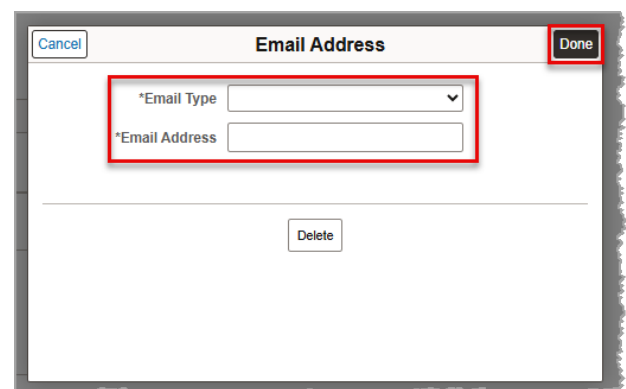


**Email**

No Email exists

[Add Email](#)

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



**Email Address**

\*Email Type

\*Email Address

Delete

- Carefully review your dependent's information and 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. Select the **Overview of All Plans** button for more information about the plans.

▼ 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.

**Medical**

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](#)

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

## Enrollment Summary

- On the **Benefits Enrollment** page, the **Enrollment Summary** section displays to show 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.

[X Exit](#) [Home](#) [Personal Information](#) [Income & Taxes](#) [Benefits & Retirement](#) [Accruals & Leaves](#) [Manager Hub](#) [Help](#)

**Birth/Adoption - Benefit Enrollment**

10012249  
Qualifying Period 5/19/2025-6/19/2025

[Cancel Life Event](#) [Previous](#)

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

\* Indicates required field

**Self-Service Enrollment Instructions**

To update your current benefits:

- Review each available plan tile and make your selections.
- All changes made through the plan tiles will be saved until you are ready to submit.
- You can manage your changes and progress through the status on the plan tiles.
- Once completed, select the [Submit](#) button to finalize your choice(s) and proceed to the next step in the self-service enrollment process.

To enroll a dependent, you must add your dependent's information and also enroll them in each plan in which you want them covered.

Your benefit selection(s) need to be submitted before your qualifying period ends. Look for the header labeled "Qualifying Period" near the top of this page.

**Important: The self-service plan options available to you are listed below.**

These options are based on the self-service life event you selected, your benefits eligibility and job information. If certain plan options have the status of *Not Available*, this means that changes to these plans are not permitted through this self-service event.

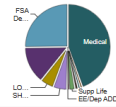
Need help deciding which benefits are right for you? [Ask ALEX](#).

Reminder: Your changes are not final until you [Submit](#) all your choices.

▼ **Enrollment Summary**

Your Pay Period Cost **\$1,241.22**  
Status **Pending Review**

Full Cost **\$1,241.22**  
Employer Cost **\$1,977.58**



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

## 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 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
<input checked="" type="checkbox"/> 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.

[X Exit](#) [Home](#) [Personal Information](#) [Income & Taxes](#) [Benefits & Retirement](#) [Accruals & Leaves](#) [Help](#)

**Birth/Adoption - Benefit Enrollment**

10043309  
Qualifying Period 5/1/2025-5/1/2025

[Cancel Life Event](#) [< Previous](#)

1 **Welcome to the Self-Service Enrollment**  
Visited

2 **Self Service Acknowledgements**  
Complete

3 **View Current Benefits**  
Visited

4 **Make Benefit Selections**  
In Progress

5 **View Benefits Statements**  
Not Started

6 **Complete the Self-Service Process**  
Not Started

**Benefits Enrollment** [Preview Statement](#) **Submit**  
\* Indicates required field

**Self-Service Enrollment Instructions**  
To update your current benefits:

- Review each available plan file and make your selections.
- All changes made through the process will be saved until you are ready to submit.
- You can manage your changes and progress through the status on the plan files.
- Once completed, select the **Submit** button to finalize your choice(s) and proceed to the next step in the self-service enrollment process.

To enroll a dependent, you must add your dependent's information and also enroll them in each plan in which you want them covered.  
**Your benefit selection(s) need to be submitted before your qualifying period ends.** Look for the header labeled "Qualifying Period" near the top of this page.  
**Important: The self-service plan options available to you are listed below.**  
These options are based on the self-service life event you selected, your benefits eligibility and job information. If certain plan options have the status of Not Available, this means that changes to these plans are not permitted through this self-service event.  
Need help deciding which benefits are right for you? [Ask ALEX](#).  
Reminder: Your changes are not final until you **Submit** all your choices.

**Enrollment Summary**

Your Pay Period Cost	<b>\$245.27</b>	Full Cost	\$245.27
Status	<b>Pending Review</b>	Employer Cost	\$886.86

- 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.

## Step 5: View Benefits Statements

- Your **Submitted Enrollment** statement becomes available. Select the **Statements** icon to view your submissions.

- Select the **Next** button to continue.

Birth/Adoption - Benefit Enrollment

10043309

Qualifying Period 5/1/2025-6/1/2025

Cancel Life Event Previous **Next**

1 Welcome to the Self-Service Enrollment Visited

2 Self Service Acknowledgements Complete

3 View Current Benefits Visited

4 Make Benefit Selections Complete

5 **View Benefits Statements Visited**

6 Complete the Self-Service Process Not Started

Statement Type

Event Date	Issue Date	Enrollment Event	Statement Type
05/01/2025	05/09/2025 4:35:19PM	Birth	Submitted Enrollment

## Step 6: Complete the Self-Service Process

- Review the **Steps** section that displays the enrollment **Status**, **Date Completed**, **Required** and **Go to Step** if needed.
- **Note:** Any **Steps** that are **Required** must show a **Status** of **Complete** to finalize your enrollment.
- If no updates are needed, select the **Complete** button to submit your enrollment.

Birth/Adoption - Benefit Enrollment

10043309

Qualifying Period 5/1/2025-6/1/2025

Cancel Life Event Previous **Complete**

1 Welcome to the Self-Service Enrollment Visited

2 Self Service Acknowledgements Complete

3 View Current Benefits Visited

4 Make Benefit Selections Complete

5 View Benefits Statements Visited

6 **Complete the Self-Service Process Visited**

**Step 6 of 6: Complete the Self-Service Process**

Please review the steps, status, and details below, including any required actions.  
Select the button labeled "Complete" to finalize the self-service enrollment process.

Once you have completed this process, we also recommend you review your **Personal Information** in UCPath. This can include verifying your home address, emergency contacts, tax withholding changes and other information.  
You may also want to consider updating your beneficiaries. You can do so outside of UCPath:

- UC Retirement Plan and insurance beneficiaries on [UC Retirement At Your Service \(UCRAVS\)](#).
- Retirement Savings Program beneficiaries on the [My UC Retirement](#) site.

Steps

Step	Status	Date Completed	Required	Go to Step
Welcome to the Self-Service Enrollment	Visited		No	Go to Step
Self Service Acknowledgements	Complete	05/09/2025	Yes	Go to Step
View Current Benefits	Visited		No	Go to Step
Make Benefit Selections	Complete	05/09/2025	Yes	Go to Step
View Benefits Statements	Visited		No	Go to Step