Family and Medical Leave Fact Sheet

UNIVERSITY OF CALIFORNIA

KEY DEADLINES

BEFORE YOUR LEAVE

As soon as you know you want to take a leave

• Let your supervisor and Human Resources know so they can provide information on your eligibility and options.

If you plan on continuing or disenrolling from benefits

• To continue benefits while you are on leave and no longer on pay status, make payment arrangements with UCPath.

DURING YOUR LEAVE

As soon as possible after your last day on pay status:

 Make arrangements to continue or suspend payments on any 403(b) loan you have outstanding, or to repay the loan in full.

Within 31 days of the date that a family member becomes eligible for, or loses eligibility for, UC-sponsored benefits:

• Enroll or disenroll your family member.

AFTER YOUR LEAVE

Within 31 days of the date you return to work:

- Contact UCPath as soon as you return to work. At a minimum, you'll need to review your benefits within 31 days after you return to work. When you return, you'll need to follow the appropriate process to restart any benefits you chose not to continue during your leave.
- Contact UCPath to make sure that any deductions from your paycheck for 403(b) loan repayments will resume.

Soon after you return to work:

- Contact your leave coordinator to find out if you need to restart payments on any previous UCRP service credit purchase you have in progress.
- Consider a service credit purchase for your leave time (see page 13 for details)

IF YOU DON'T RETURN FROM YOUR LEAVE

Within 31 days after your medical plan, AD&D plan, legal plan, supplemental life insurance and dependent life insurance coverage ends:

- Apply to make your supplemental life insurance and/or dependent life insurance portable, if you wish to.
- Apply to convert your medical plan, AD&D plan, legal plan, and/or life insurance to an individual plan, if you wish to.

Within 60 days of receiving a Notice of a COBRA qualifying event:

• Apply for COBRA continuation, if you wish to.

We all have times when we need to put family responsibilities first. If you need to take time off from work to care for a family member who needs your help—or because of a serious health condition of your own—then you may be eligible to take Family and Medical Leave (FML). FML can provide a respite from work obligations so you can focus on what you and your family need.

This fact sheet covers how Family and Medical Leave works, eligibility requirements, how to arrange for a leave, what happens to your benefits during a leave and how to make the transition back to work.

If you're represented by a union, your Family and Medical Leave rights are governed by the terms of the collective bargaining agreement that applies to you, which may differ from the terms in this booklet.

How Family and Medical Leave Works

Family and Medical Leave (FML) can be complicated, with variations in the policies for staff and academic personnel and in collective bargaining agreements for represented employees. For full details, refer to the specific policy or agreement that applies to your position.

ELIGIBILITY

In general, to be eligible for any reason other than disability due to pregnancy, childbirth, or a related medical condition, you need to have worked at UC for at least 12 cumulative months, and worked at least 1,250 hours during the 12 months immediately before the date you wish to begin an FML.

If you meet these eligibility requirements, you may take Family and Medical Leave for any of the following reasons:

- Your own serious health condition;
- To care for a family member (spouse, domestic partner, child, parent, parent-in-law, grandparent, grandchild, sibling or designated person¹) who has a serious health condition;
- To bond with your newborn, adopted child or foster child, or to take care of responsibilities related to the birth, adoption or placement of your new child (FML taken as Parental Bonding Leave);
- To address "qualifying exigencies" such as legal, financial or other matters that result from the active duty (or the call to active duty) of your spouse, domestic partner, child, parent or parent-in-law who is a military member (FML taken as Qualifying Exigency Leave);
- To care for a family member—spouse, domestic partner, son, daughter, parent, or next of kin—who is a covered service member with a serious injury or illness incurred or aggravated in the line of active duty (FML taken as Military Caregiver Leave).

The eligibility requirements above do not apply if you need FML for disability due to pregnancy, childbirth or related medical condition (FML taken as Pregnancy Disability Leave).

HOW FAMILY AND MEDICAL LEAVE WORKS

If you're eligible for FML, you may take up to 12 workweeks of this leave per calendar year. There are also at least three situations when you may be entitled to more than 12 workweeks of FML:

- 1. If you are taking FML as Pregnancy Disability Leave, you may take up to 4 months per pregnancy.
- 2. If you are a birth mother, you may be able to take up to 12 workweeks of FML as Parental Bonding Leave in addition to the FML leave already taken for Pregnancy Disability Leave.
- 3. If you're taking FML as Military Caregiver Leave, you may take up to 26 workweeks in a single 12-month period.

PAY OPTIONS DURING FAMILY AND MEDICAL LEAVE

Family and Medical Leave is unpaid. If you accrue sick leave, vacation, Paid Time Off (PTO), and/or Compensatory Time Off (CTO), you may be able to use that during FML. If so, you'll remain on pay status during that time, and you'll continue to receive your regular pay and benefits. (Whether this is possible depends on the personnel policies and/or collective bargaining agreement that apply to you. Some of those agreements require that employees use accrued sick leave, vacation, and/or PTO before taking unpaid Family and Medical Leave.)

Your other options for replacing your income during your FML depend in part on the reason for your leave. Talk to the individual or office coordinating your leave as soon as possible to make sure you understand the options available to you.

FML TAKEN AS PREGNANCY DISABILITY LEAVE

If you're an employee with full, mid-level or core benefits, you're eligible for Basic Disability coverage at no cost to you. For expanded coverage, you must be enrolled in and paying premiums for Voluntary Short-Term Disability.

Under these plans, pregnancy disability is defined as the period that a person is unable to work due to pregnancy and/or childbirth. (If you're adopting, you're not eligible for pregnancy disability benefits.) Generally, disability benefits begin two weeks before your expected delivery date and continue for six weeks after the birth of your child (eight weeks if you have a caesarian section). You'll need to use up to 22 days of sick leave, if you have it, before you can begin receiving disability income.

The Basic Disability plan covers up to 55% of your eligible monthly earnings to a maximum of \$800 per month. The Voluntary Short-Term Disability plan offers 60% of your eligible earnings, with a maximum benefit of \$15,000 per month. Voluntary Long-Term Disability doesn't provide pay for the first six months of disability, so it will not offer benefits during a standard pregnancy leave.

¹ For FML purposes, a "designated person" is any individual related by blood or whose association with the employee is the equivalent of a family relationship. The employee may identify the designated person at the time the employee requests the leave, and employees are limited to one designated person per calendar year.

How to Arrange For a Family and Medical Leave

PAY FOR FAMILY CARE AND BONDING (PFCB)

Through the PFCB program, employees who are approved for certain types of Family and Medical Leaves (FML) may opt to receive 100% of their eligible earnings for up to eight workweeks per calendar year.

PFCB is available for use during FML taken for the purpose of:

- Caring for a family member (not including a "designated person") with a serious health condition
- · Bonding with a new child
- Military Caregiver Leave
- Qualifying Exigency Leave

To qualify, you must take your FML in a block of at least one workweek.

If you elect to use PFCB during a qualifying FML block leave rather than using paid leave accruals or taking the leave without pay, you must continue to use PFCB until you either exhaust your full eight workweeks of PFCB for the calendar year or that qualifying FML block leave ends. If your leave ends before you have used the full eight workweeks of PFCB for the calendar year, the remainder is available to use during a qualifying FML block leave later in the calendar year.

CATASTROPHIC LEAVE DONATION

Under this program, if you're coping with your own or a family member's catastrophic illness or injury and have used all of your accrued paid leave, you may be able to take paid leave (such as vacation days) that other employees have donated to you for this purpose.

You can learn more about the types of leaves and pay options mentioned here in the Absence from Work policy (policy.ucop. edu/doc/4010406/PPSM-2-210), in collective bargaining agreements (ucnet.universityofcalifornia.edu/labor/bargaining-units/index.html) and in the Academic Personnel Manual (ucop.edu/academic-personnel-programs/academic-personnel-policy/benefits-and-privileges/index.html).

Got questions?

If you still have questions after reviewing the information here, check out the Compensation and Benefits section of UCnet (ucnet.universityofcalifornia.edu/compensation-andbenefits). You'll find general information, UC publications and forms, and details on benefit plans.

To review your benefits, sign in to your your UCPath account (ucpath.universityofcalifornia.edu). You can also contact your local Benefits Office for help.

As soon as the need for a leave arises, let your department head or supervisor and your leave coordinator know. Your leave coordinator or Benefits Office can verify that you meet the eligibility requirements for Family and Medical Leave.

If requested, provide documentation to support your request for FML, which may include a certification from a health care provider and, if you are taking leave to care for a family member, verification of your relationship to that family member. Under most circumstances, you'll need to do this within 15 calendar days of receiving the request. The university will notify you if your leave qualifies as FML within five business days of receiving the requested documentation, absent extenuating circumstances.

Review your benefits and decide which ones you wish to continue during your leave.

For benefits you choose to continue, make arrangements in advance to pay the premiums while you are taking unpaid FML. You can cover your dependents as well as yourself. You have a minimum of 30 days (from the date you make the arrangements) to make the payments.

OTHER OPTIONS FOR FAMILY-RELATED LEAVE

Family obligations come in all shapes and sizes; the options below may help you augment the standard Family and Medical Leave provisions if you need to. You may also have other options, depending on your appointment and your situation. Check with the person or office coordinating your leave to learn more.

STAFF SUPPLEMENTAL FAMILY AND MEDICAL LEAVE

If you find that you need more leave after exhausting the time allowed for FML, and you're covered by UC's Personnel Policies for Staff Members, you may be able to take Supplemental FML for up to 12 additional workweeks or until the end of the calendar year, whichever is less. UC's contributions to health insurance premiums will continue during Supplemental FML if you use vacation or sick time, or if it overlaps with another form of leave (such as FMLA or CFRA) that requires the UC contribution to continue. If not, you will be responsible for both the UC contribution and your share of the premium. For more information, please see policy.ucop.edu/doc/4010406/ PPSM-2-210 or consult with your leave administrator.

LEAVE WITHOUT PAY

If you need additional time, you may be able to take leave without pay. Please see the *Leave Without Pay Fact Sheet* (ucal.us/leavewithoutpay).

What Happens to Your Benefits During Family and Medical Leave

If you are being paid by UC during an approved Family and Medical Leave (FML)—by using Pay for Family Care and Bonding, accrued sick leave, vacation, Paid Time Off (PTO) and/or Compensatory Time Off (CTO)—you are considered to be "on pay status." Your benefits will continue and your premiums will continue to be deducted by UCPath.

The information in Tables 1 and 2 explains what happens to your benefits if you are on an approved FML. You're eligible to continue many of your UC benefits while on an approved FML, even if you're not being paid by UC. Since you won't be receiving a paycheck from UC, though, you'll need to make arrangements with UCPath before your leave to pay any premiums while you are on leave.

For benefits you choose not to continue (or if you don't pay your premiums on time while you're on FML and not being paid by

UC), your coverage will end on the last day of the last month for which premiums or contributions have been paid. (For information about continuing your benefits under COBRA, please see the "More Options for Continuing Your Benefits" section on page 14.)

You don't accrue vacation or sick leave if you're on FML and not being paid by UC. For more details, see the personnel policy or collective bargaining agreement that applies to you.

Remember that when you're making changes to your benefits, it's your responsibility to meet the deadlines set by UC and the insurance carriers. Be sure to leave yourself enough time to do this.

Benefit	Length of time	Cost to you	What you need to know
Medical, Dental, Vision	Length of your FML This is typically up to 12 workweeks per calendar year but may be longer in some FML situations, including: For Pregnancy Disability Leaves, up to 4 months per pregnancy For Parental Bonding Leave, up to 12 additional workweeks For Military Caregiver Leave, up to 26 workweeks in a single 12-month period. If you follow your FML with a Leave Without Pay, you may continue medical, dental and vision coverage for up to a combined maximum of two years.	For the duration of your FML, your portion of the premium. If you continue your benefits during a leave without pay following your FML, you will need to pay both your portion of the premium and UC's portion.	If you are off pay status while on FML, you will need to pay your portion of premiums through UCPath. If you're enrolled in the UC Health Savings Plan, you can continue to use the funds from your Health Savings Account (HSA) to pay eligible expenses. You may also continue to contribute to your HSA while you are enrolled in the plan.
Accident, Critical Illness and Hospital Indemnity	Up to two years	Your premium	N/A
Legal	Up to two years	Your premium	N/A
Basic Life, Core Life	Up to 4 months, beginning the month after your leave begins	None	N/A

Benefit	Length of time	Cost to you	What you need to know
Supplemental Life	Up to 2 years	Your premium	If you become totally disabled while enrolled, you may qualify to continue your coverage without paying the premium. Contact the carrier for information.
Basic or Expanded Dependent Life	Up to 4 months, beginning the month after your leave begins (up to 2 years if you continue Supplemental Life)	Your premium	N/A
Accidental Death and Dismemberment (AD&D)	Up to 2 years	Your premium	N/A
Health Flexible Spending Account	Your coverage continues while on paid FML, and eligible expenses you incur during your leave are reimbursable. If you exhaust FML, for monthly paid employees coverage ends the last day of the month in which FML is exhausted. For biweekly paid employees, coverage ends the last day of the pay period that includes the FML exhaustion date. If you are on unpaid FML, you are eligible to continue participating in the Health FSA. If you choose to continue, you can file claims for expenses incurred during the unpaid portion of your leave, as long as you return to work within the same plan year. Note that you cannot make contributions or change your annual election amount while on unpaid leave. If you exhaust FML while unpaid and do not continue coverage through COBRA, Health FSA coverage ends the last day of the month in which FML is exhausted. If you have a qualifying life event during your leave, when you return to paid status you may change your election in accordance with plan rules. If you cancel participation, only expenses incurred through the end of the last pay period in which you contributed are reimbursable.	If you are on an unpaid FML or transition from paid to unpaid FML your contributions will be suspended but you may opt to continue participation (so that you can claim eligible expenses) provided that you return to paid status in the same plan year. If you continue coverage under COBRA while on an unpaid leave, you may make aftertax contributions through the end of the plan year (Dec. 31).	Before your leave begins, you'll need to complete the appropriate form and elect to continue or cancel your coverage (obtain the form from your local Benefits Office and submit to UCPath once completed). You'll also need to choose a payment option for when you return to work—either keep the same monthly contribution, which will reduce the annual amount you put in, or increase your monthly contribution to make up for contributions you missed while on unpaid leave. Contact the individual or office coordinating your leave for details. ² Be sure to submit your claims to WEX by the filing deadline. If you are enrolled through the end of the plan year (Dec. 31), you may carry over up to \$660 of unused funds to the next plan year.
Pet/Auto/Home/ Renters insurance	To end of contract year	Your premium	You'll pay premiums to the insurance company directly. Contact the company for information.
Bright Horizons	Length of your leave	None	You pay only for the services of any caregiver

Caregiving Services

you hire.

Please note, Health FSA enrollment must be renewed annually to participate. If you happen to go on leave during the open enrollment period, you will have the chance to submit your open enrollment elections, including Health FSA, via UCPath online.

What Happens to Your Benefits During Family and Medical Leave

TABLE 2 — BENEFITS YOU CAN'T CONTINUE WHILE ON FML AND NOT BEING PAID BY UC

Benefit	When coverage ends	What you need to know
Basic Disability, Voluntary Short-Term Disability, Voluntary Long-Term Disability (for coverage of disabilities other than that causing the FML, if applicable)	Coverage ends the last day of "active employment" as defined in the Basic, Voluntary Short-Term and Voluntary Long-Term Disability Plan booklets.	If your FML is for your own serious health condition or pregnancy, you may be eligible to receive disability benefits, as long as the disability began before you went off pay status. Be aware that approval of a request for FML doesn't constitute approval of a disability claim.
		You don't need to continue paying premiums for Voluntary Disability coverage while you are receiving disability benefits. Your payments will be discontinued when you're placed onto an unpaid leave or a paid leave that does not allow for continuation of these plans.
Business Travel Accident Insurance, Workers Compensation	Last active day at work before FML begins	N/A
Dependent Care Flexible Spending Account	Contributions and coverage stop when you go off pay status.	You can still be reimbursed for eligible expenses you incurred through the end of the pay period for which you made your last contribution. Be sure to submit your claims to WEX by the filing deadline for the plan year; otherwise you'll lose any money left in your account. ³
Tax Savings on Insurance Premiums (TIP)	Pretax contributions stop when you go off pay status.	Monthly premiums you may be paying to continue health coverage during your FML will be made on an after-tax basis. Check with your accountant about whether they can be deducted from your taxes.
Parking/Commuter Benefits	Contributions and coverage stop when you go off pay status.	N/A
Unemployment Insurance	Last active day at work	N/A
ScholarShare	Your payroll deductions stop when you go off pay status	N/A

Tip:

If you're on Family and Medical Leave and you don't return to UC employment, you could be liable for the health plan premiums (medical, dental and/or vision) that UC paid during any unpaid portion of your leave. See the "Repayment of Health Insurance Premiums" section on page 15 for more details.

³ Please note, DepCare enrollment must be renewed annually to participate. If you happen to go on leave during the open enrollment period, you will have the chance to submit your open enrollment elections, including DepCare FSA, via UCPath online.

Continuing Your Benefits: What You Need to Do

MAKE ARRANGEMENTS TO CONTINUE COVERAGE

For any benefits you choose to continue while you're on leave and not being paid, you will need to pay your portion of premiums through UCPath. You should make these arrangements as soon as you know you want to continue your benefits.

If you remain on pay status during your FML (by using PFCB or accrued sick leave, vacation, PTO and/or CTO), your monthly premiums will continue to be deducted from your paycheck.

ENROLL NEWLY ELIGIBLE FAMILY MEMBERS

If you're taking a leave because you're adding a new child to your family, you have 31 days after the birth to add your child to your benefits. (This is called a PIE, or Period of Initial Eligibility.)

For adopted children, the 31-day PIE starts on the date you take physical custody of the child or the day you have the legal right to control the child's health care, whichever is earlier. If you don't enroll your child during the first PIE, a second PIE begins with the date the adoption decree is final. Coverage for your child will start on his or her date of birth or, for adopted children, the first day of the PIE in which you enroll the child.

To learn more about the details of enrolling a new child in your benefits, please see the *Pregnancy*, *Newborn Child and Adopted Child Fact Sheet* (ucal.us/pregnancy) and/or the *Family Changes Fact Sheet* (ucnet.universityofcalifornia.edu/forms/pdf/family-changes.pdf).

Note also that if a family member loses eligibility for benefits during your leave, you're responsible for disenrolling that person through UCPath. If you don't do this, you or your family member may be liable for any premiums for coverage after eligibility is lost.

LET UC KNOW YOUR CURRENT ADDRESS

If your health plan covers only a certain service area, a change in your permanent address could affect your eligibility for that plan. So be sure to keep UC posted on your correct address: Update it online, or let your local Benefits Office know of any changes.

TRANSFER TO A NEW PLAN, IF YOU MOVE

If you'll be living elsewhere for more than two months during your leave and your medical or dental plan has a service area, you must transfer to a UC-sponsored medical or dental plan in your new location; contact your local Benefits Office to make those arrangements. You'll need to transfer within 31 days of the date you leave the original service area. And check with your medical and dental plan carrier about whether you and/or eligible family members need to select a new primary care physician or dentist.

How Family and Medical Leave Affects Retirement & Savings

PRIMARY RETIREMENT BENEFITS, CAP AND SERVICE CREDIT

During any portion of FML when you are receiving pay from UC, contributions toward your primary retirement benefits will continue and you will continue to accrue retiree health service credit and University of California Retirement Plan (UCRP) service credit, if applicable.

During any portion of FML when you are not receiving pay, contributions toward your primary retirement benefits will stop. You will also stop accruing retiree health service credit and UCRP service credit, if applicable.

During your leave, your UCRP or Savings Choice contributions and any Capital Accumulation Provision (CAP) balance you may have will remain on deposit. You don't have the option to withdraw them. You'll still be eligible for any UCRP benefits that you were eligible for when your leave began.

If you have a UCRP service credit purchase in progress, your payroll deductions will stop if you go off pay status.

Once you return to pay status, your retirement plan contributions and retirement savings deductions will start up again automatically, and you will start accruing service credit again. At some locations, deductions for a UCRP service credit purchase in progress resume automatically. At other locations, you may need to reactivate them. Check with your Benefits Office about the requirements at your location.

RETIREMENT SAVINGS PROGRAM

Contributions to the Retirement Savings Program (the DC Plan, 403(b) Plan and the 457(b) Plan) stop with your last paycheck.

If you're receiving benefits from a UC-sponsored disability plan during the unpaid portion of FML, you may be eligible to take total or partial distributions from the 403(b) Plan. Contact Fidelity Retirement Services at myUCretirement.com, or 866-682-7787 to learn more.

403(B) LOANS

If you have taken a loan through the 403(b) Plan, within 90 days of your last day on pay status, you may:

- · Make monthly payments
- Make a full payment covering the period you'll be off pay status
- Repay the total outstanding amount of the loan before you go off pay status

• Suspend 403(b) loan repayments for up to 12 months during your leave

For details on how to arrange these options, contact Fidelity Retirement Services at myUCretirement.com, or 866-682-7787.

When you return to work, you'll need to resume payments. Depending on the terms of your loan, your payment amount may change, as you may need to repay the same amount over a shorter timeframe. At some locations, your payments will restart automatically. At others, you'll need to contact your local Payroll Office to get them started again.

If you leave UC employment, you must repay your loan in full or arrange to make payments within 90 days from the date your employment ends.

Returning to Work

When you return from Family and Medical Leave, you have the right to come back to the same or an equivalent position as long as you return to work right after the leave ends.

You begin accruing vacation and sick leave again once you return to pay status if you are eligible.

RESTARTING YOUR BENEFITS

As soon as you return to work, review your benefits on UCPath to make sure they continue or get restarted the way you want them to.

The chart on pages 12 and 13 shows what happens to benefits once you're back at work and what actions you need to take to restart them or make other changes. Be aware that if you return to work in a new appointment, that appointment may impact your eligibility for benefits.

For many benefits, there's a deadline for re-enrollment: within 31 days after returning to work. If you miss this deadline, you may be able to enroll in some benefits during Open Enrollment. Some plans allow you to enroll at any time if you submit a statement of health, but there's no guarantee that you'll be accepted. Contact UCPath if you have questions.

Please note that the rules for re-enrolling in benefits are different if you choose to discontinue your benefits while you remain on pay status (for example, during a paid sabbatical). If you discontinue benefits while you are being paid by UC, you may not be able to re-enroll in those plans until Open Enrollment or without an approved Statement of Health.

Tip: Check your pay stub

Once you get your first paycheck after returning to work, check your pay stub to make sure that you're enrolled in the benefits you chose. If questions or problems crop up, contact UCPath right away.

Returning to Work

Benefit	What happens when you return	What you need to do	Deadline
Medical, Dental, Vision	If you retained coverage while on leave, it should continue when you return to work. If you didn't continue coverage, you may reenroll in the same plans with the same coverage as before if your leave was less than 120 days and it ends in the same plan year in which it began. If your leave was 120 days or more, you may enroll in any UC-sponsored plans for which you're eligible. You may be asked to document family members' eligibility. If you're enrolled in the UC Health Savings Plan, contributions to the Health Savings Account	Contact UCPath to confirm the appropriate process to restart your benefits. At a minimum, you'll need to review your benefits within 31 days after you return to work. If you've been out of your medical or dental plan's service area, you may transfer back to your previous plan. You may also need to choose a new physician and/or dentist. You can confirm, change or stop your Health Savings Account contributions on	Within 31 days after your return to work
	resume automatically. Health savings Account Contributions on UCPath.	_	
Accident, Critical Illness and Hospital Indemnity	If you continued coverage during your leave, it should continue. If you didn't and your leave was less than 120 days, you may re-enroll in the same plans with the same coverage as before. If your leave was 120 days or more, you may enroll in any UC-sponsored plans for which you're eligible.	Contact UCPath to find out if you need to re-enroll.	Within 31 days after your return to work
Legal	If you continued coverage while on leave, it should continue. If you didn't continue coverage, you may re-enroll when you return.	Contact UCPath to re-enroll.	Within 31 days after your return to work
Basic Life, Core Life	Coverage resumes automatically	No action needed	None
Supplemental Life, Basic Dependent Life, Expanded Dependent Life	If you continued coverage during your leave, it should continue. If you didn't and your leave was less than 120 days, you may re-enroll in the same plans with the same coverage as before. If your leave was 120 days or more, you may enroll in any UC-sponsored plans for which you're eligible. You may be asked to document family members' eligibility.	Contact UCPath to find out if you need to re-enroll.	Within 31 days after your return to work
Accidental Death and Dismemberment	If you continued coverage, it should continue. If you didn't, you may re-enroll at any time.	Contact UCPath to find out if you need to re-enroll.	None
Health Flexible Spending Account	If you continued participation, your contributions for the rest of the plan year will be automatically adjusted according to the contribution option you chose before your leave. If you didn't, and your leave was less than 120 days, you may re-enroll for the rest of the plan year and your annual contribution must be the same as before your leave. If your leave was 120 days or more, you may enroll for the rest of the year and choose a new annual contribution.	Contact UCPath to re-enroll.	Within 31 days after your return to work
Auto/Home/ Renters insurance	If you continued coverage, you may resume payroll deductions. If not, you may re-enroll at any time.	To resume payroll deductions, contact UCPath. To re-enroll, contact the insurance company.	None

TABLE 3 — YOUR BENEFITS WHEN YOU RETURN TO WORK*			
Benefit	What happens when you return	What you need to do	Deadline
Bright Horizons Caregiving Services	You may use this benefit again when you return to an eligible position.	No action needed	None
Basic Disability	Coverage resumes automatically on your first full day actively at work.	No action needed	None
Voluntary Short-Term and/or Long-Term Disability	If your leave is less than 120 days, you will be automatically re-enrolled into your previous Basic and Voluntary Disability plans. If your leave is 120 days or longer, you will have a Period of Initial Eligibility (PIE) to enroll via UCPath online in Voluntary Short-Term Disability, Long-Term Disability or both.	If you need to re-enroll, you can do so via UCPath online.	Within 31 days after your return to work
Business Travel Accident Insurance, Workers Compensation	Coverage resumes automatically on your first full day actively at work.	Nothing	None
Dependent Care Flexible Spending Account	If your leave was less than 120 days, you may re-enroll for the rest of the year and your annual contribution must be the same as before. If your leave was 120 days or more, you may	If you need to re-enroll, contact UCPath.	Within 31 days afte your return to work
	enroll for the rest of the year with a new annual contribution.		
Tax Savings on Insurance Premiums (TIP)	Contributions resume automatically when you return to pay status, unless you opt out.	To opt out, contact UCPath.	Within 31 days of your return to work or during the next Open Enrollment.
Parking/Commuter Benefits	Contributions resume automatically when you return to pay status, unless you opt out.	To opt out, contact your local Payroll Office.	None
Unemployment Insurance	Coverage resumes automatically your first day actively back at work.	Nothing	None
ScholarShare	Contributions resume automatically when you return to pay status, unless you opt out.	To opt out, contact your Payroll Office.	None
UCRP service credit purchases	If you had a service credit purchase via payroll deduction in progress when you went on leave, contact UCPath to ensure the deductions restart upon your return to work.	Contact UCPath to find out if you need to restart your service credit purchase payments. Contact your leave coordinator or check	Restart service crec purchase payments as soon as you retu to work.
	If you owe additional interest for your leave period on a service credit purchase that was in progress before your leave began, UC will add it to your balance. Your payroll deductions won't go up; instead, the payment period will be extended.	the UCRP Service Credit Purchase Guide if you want to purchase service credit for the time you were on leave. The cost depends on when the leave occurred, its length, your age, and when you start the service credit	No fixed deadline for purchasing service credit, but the soon you start, the less it will cost you.

^{*} Different rules apply if you choose to discontinue your benefits while you remain on pay status (for example, during a paid sabbatical). If you discontinue benefits while you are being paid by UC, you may not be able to re-enroll in those plans until Open Enrollment or without an approved Statement of Health.

You may be able to purchase service credit for

the time you were on leave.

purchase.

More Options for Continuing Your Benefits

COBRA AND CALCOBRA

If you don't return to work, you (and/or eligible family members) may have the option to continue medical, dental, vision, employee assistance program and health flexible spending account benefits under COBRA or CalCOBRA. (The only way to continue Health FSA participation during a non-FML leave without pay is through COBRA).

The federal COBRA period runs for 18 months; if you have exhausted this coverage period, you and/or eligible family members may be able to extend your UC-sponsored medical coverage (CORE, UC Care and UC Health Savings Plan are not eligible) under CalCOBRA for up to an additional 18 months. (For the health FSA, you may continue your coverage only through the end of the current plan year, by making after-tax payments to your account.)

You may also want to explore your options through the health insurance marketplace established under the Affordable Care Act. In California, you can find information at coveredca.com or call 800-300-1506.

Though it's not required, UC will offer COBRA continuation coverage to eligible enrolled domestic partners, domestic partners' children and/or grandchildren. See the "Eligible Family Members" chart on pages 13–14 of *A Complete Guide to Your UC Health and Welfare Benefits* (ucal.us/healthguide) for details on family members who may qualify.

Deadlines: You'll need to apply no later than 60 days from the date you lose coverage by reason of a qualifying event or 60 days from the date you receive notice of your continuation rights—whichever is later. Talk with your local Benefits Office about how to apply, or go to ucal.us/COBRA.

CONVERTING OR PORTING TO AN INDIVIDUAL POLICY

For certain plans—medical, accident, critical illness, hospital indemnity, legal, life, pet and Accidental Death and Dismemberment (AD&D) insurance—you may be able to convert your UC- or COBRA-sponsored coverage to an individual policy. You can't convert or port dental or vision benefits to an individual policy.

Deadline: You need to apply to convert or port no later than 31 days after your UC-sponsored coverage ends. If you've extended your medical coverage under COBRA and want to apply for conversion after the COBRA period, you need to do so within 31 days after your COBRA coverage ends. (This assumes your coverage has been continuous; if you no longer have coverage, then you're not eligible to convert to an individual policy.)

To learn about applying for conversion coverage, see ucnet.universityofcalifornia.edu.

PORTING SUPPLEMENTAL HEALTH AND LIFE INSURANCE

If you're enrolled in Supplemental Health insurance, Supplemental Life insurance, Basic Dependent Life insurance and/or Expanded Life insurance, you may be eligible to port your coverage. This allows you to buy coverage directly from the insurance carrier for the same premium as the UC plan.

Deadline: You'll need to apply for the portability benefit within 31 days after your coverage ends. For details about how to apply, see ucal.us/lifeinsurance

If You Don't Return to UC Employment

If you end employment after a Family and Medical Leave, most of what you need to know, and do, is covered in the *Termination of Employment Fact Sheet* available at ucnet. universityofcalifornia.edu/forms/pdf/termination-of-employment.pdf. See "More Options for Continuing Your Benefits," on page 14, for information about COBRA continuation and conversion coverage.

REPAYMENT OF HEALTH INSURANCE PREMIUMS

If you're on an approved Family and Medical Leave and you don't return to work, you could be liable for the health plan premiums (medical, dental and/or vision) that UC paid during any unpaid portion of your leave. (You'll be considered to have returned to work if you work for at least 30 calendar days, starting with your scheduled return date.)

You won't, though, be liable for these premiums if you haven't returned to work because of a serious health condition or other reasons beyond your control. If you have any questions about this, please contact UCPath.

SERVICE CREDIT PURCHASE

If you have a service credit purchase in progress and have completed 12 or more monthly payments, you may make a lump sum payment within 60 days after your separation from UC employment to complete the purchase.

UNEMPLOYMENT INSURANCE

For California Unemployment Insurance, your coverage stops the last day you are actively at work. Depending on your circumstances, you may or may not be eligible for unemployment insurance benefits. Contact your local office of the California State Employment Development Department. If you work outside California, contact the state agency for your location.

IF YOU DECIDE TO RETIRE

If you don't return to UC employment because you retire, you will want to retire within 120 days of your separation from UC if you want to continue any medical, dental, vision or legal coverage you are eligible for as a retiree. For more information, please see the *Retirement Handbook*, available online at ucal.us/retirementhandbook. Or contact the UC Retirement Administration Service Center at 800-888-8267.

By authority of the Regents, University of California Human Resources, located in Oakland, administers all benefit plans in accordance with applicable plan documents and regulations, custodial agreements, University of California Group Insurance Regulations, group insurance contracts, and state and federal laws. No person is authorized to provide benefits information not contained in these source documents, and information not contained in these source documents cannot be relied upon as having been authorized by the Regents. Source documents are available for inspection upon request (800-888-8267). What is written here does not constitute a guaranteeof plan coverage or benefits—particular rules and eligibility requirements must be met before benefits can be received. The University of California intends to continue the benefits described here indefinitely; however, the benefits of all employees, retirees, and plan beneficiaries are subject to change or termination at the time of contract renewal or at any other time by the University or other governing authorities. The University also reserves the right to determine new premiums, employer contributions and monthly costs at any time. Health and welfare benefits are not accrued or vested benefit entitlements. UC's contribution toward the monthly cost of the coverage is determined by UC and may change or stop altogether, and may be affected by the state of California's annual budget appropriation. If you belong to an exclusively represented bargaining unit, some of your benefits may differ from the ones described here. For more information, employees should contact their Human Resources Office and retirees should call the UC Retirement Administration Service Center (800-888-8267).

In conformance with applicable law and University policy, the University is an affirmative action/equal opportunity employer. Please send inquiries regarding the University's affirmative action and equal opportunity policies for staff to Systemwide AA/EEO Policy Coordinator, University of California, Office of the President, 1111 Franklin Street, 5th Floor, Oakland, CA 94607, and for faculty to the Office of Academic Personnel and Programs, University of California, Office of the President, 1111 Franklin Street, Oakland, CA 94607.

