Health Benefits
Circular Letter

January 02, 2018
Circular Letter: 600-002-18
Distribution: VI, XII, XVI

To: All Health Contracting School Districts and Public Agencies
Subject: 2018 Health Billing Cut-Off Dates and Payment Information

Purpose
The purpose of this Circular Letter is to provide information to Health Benefit Officers and other personnel staff on the 2018 health billing cut-off dates and how your payments are applied.

Health Billing Cut-Off Dates

Please be aware that as your agency’s Health Benefit Officer, you are responsible for ensuring all health enrollment transactions are keyed and uploaded in myCalPERS at my.calpers.ca.gov by 11:59 p.m. on the cut-off date for each billing month. You are also responsible for correcting and resubmitting any failed transactions returned to you. Any transactions, including corrections, you key in after the cut-off date will appear on the following month’s Health Premium Statement.

Attached to this Circular Letter is a copy of the 2018 Health Billing Cut-Off Dates for contracting school districts and public agencies.

Statement Availability

Typically, statements are available on the 15th of each month. However, when the 15th is on a holiday or weekend, the availability of statements will be at a later date. Please refer to the “Statement Available” date on the attachment.
Payment Submission
Log into my|CalPERS at my.calpers.ca.gov and follow the prompts on the Payment Summary page.

Typically, payments are due on the 10th of each month. However, when the 10th is on a holiday or weekend, the payment due date will be an earlier date. Please refer to the “Payment Due” date on the attachment.

Please note that effective January 1, 2018, employers are mandated to submit payments via Electronic Fund Transfer (EFT). Please see Circular Letters 200-044-17 and 200-042-15 for additional information regarding EFT.

Under-Payments
An underpayment occurs when the entire amount invoiced is not paid on or before the 10th of each month. If you underpay, interest will be assessed.

If you discover a billing discrepancy, please pay as billed and report the discrepancy to us ASAP. An adjustment will occur on a subsequent statement.

Please see Circular Letter 600-026-15 for additional information on interest and delinquency.

Over-Payments
If you overpay, the current receivable will be paid and closed and a credit will be applied to a future receivable.

Key Points to Ensure Billing Accuracy
We strongly encourage you to conduct a monthly reconciliation of your statement to ensure they correctly reflect all enrollments for employees and annuitants. Reconciliation ensures you are accurately billed and that only eligible members are receiving benefits. Below are helpful reminders for a successful reconciliation.

• Submit approved resolutions for contract changes timely.
• Report health enrollment transactions accurately and timely to ensure they will be reflected on the statement. Retain Health Benefits Plan Enrollment and Declaration of Health Coverage forms on file for all employees.
• Confirm health enrollment changes by reviewing the Monthly Employer Billing Roster in my|CalPERS. Ensure coverage of eligible members only and the accuracy of their retirement system and medical group enrollment.
• Key in permanent separation dates of members or deletion of dependents to my|CalPERS timely to receive the allowed maximum refund (6 months) of health premiums. For more information, refer to Circular Letter 600-215-05
Update the Health PA Billing contact in my CalPERS and select “Primary Contact” to ensure delivery of the monthly statement to the appropriate staff.

Questions

If you have any questions about this Circular Letter, please call our CalPERS Customer Contact Center at 888 CalPERS (or 888-225-7377).

Rob Jarzombek, Chief
Health Account Management Division