Data Element Definitions Public Agency & Schools Retirement Enrollment Reporting File

Overview

This document outlines the data elements within a CalPERS Public Agency or School retirement enrollment XML file. Descriptions, conditions for which they are used, field values, and character requirements are outlined for each element.

This document **does not** describe the file structure for developing the retirement enrollment XML file. The following page includes information about the resources available within the Employer Technical Toolkit to assist you in developing an XML file for reporting.

Employer Technical Toolkit

Within the *myCalPERS Technical Resources* page on the CalPERS website, you will find the <u>Employer Technical Toolkit</u> (ZIP) that contains several documents needed to construct an XML file. The XML Schema Definition (XSD) documents (including the common utilities and SOAP envelope file) identify the required file structure layout. Employers can use the schema to develop or alter their systems to ensure adherence to CalPERS standards. In addition, the <u>Encryption/Decryption & File Naming</u> (PDF) document provides instruction for the naming convention needed to create the XML file.

File Structure

An XML file is organized in a hierarchical structure, much like a standard outline; the XSD provides the file structure as an indication of how the data elements are related to each other. The following is an outline of the XML file structure:

File Header – i.e. the type of file, Employer ID, and report begin and end dates

- A. Transaction Information i.e. Transaction Type, Unique Identifier, Effective Date
 - 1. Demographics i.e. Person Information, Address Information, Communication Information
 - 2. Appointment i.e. Employer Information, Employment Information, Job Position
 - a. Employer Information i.e. Employer CalPERS ID, County
 - b. Employment Information i.e. Original Hire Date, Collective Bargaining Unit
 - c. Job Position Information i.e. Position Code, Appointment ID, Tier
 - 3. Retirement Enrollment i.e. Program, SSA designation, ARP designation

This outline can be repeated so there can be multiple programs, reports, and participants in a single file.

In addition to the XSDs, sample XML files are provided within the Retirement folder of the Employer Technical Toolkit. The sample files can be used as a model as you produce files; however, they should not be used as the main source of development or validation but to identify possible scenarios and act as a visual representation which may aid in the development of an XML file.

Note: XML technologies define an extensible messaging framework applicable to a variety of underlying protocols. This framework is designed to be independent of programming language, platforms, and other technical criteria.

For more information about all documents found within the toolkit and how to utilize the information provided, please review the Employer's Guide to the Technical Toolkit (PDF) document published on the CalPERS Technical Resources web page.

Retirement Enrollment Reporting Data Elements

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
1	Program Type	Description:	California Public Employees' Retirement System (PERS) = CPE	3
		Identifies the program for the transaction record sent by the employer.	recircinent system (i Ens)	
		Conditions:		
		Required—when transaction type is New Appointment.		
		Note:		
		This data is accepted for Appointment Change transaction type.		
		Supplemental Income Plan (SIP) enrollments are not reportable through this file.		

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
2	Employer's CalPERSId	Description: A unique 10-digit identifier created by myCalPERS to identify the reporting organization. For schools, review the following: County Office of Education—if you report for other school districts, use your Employer's CalPERS ID. Districts who report independently from the County Office of Education—use your Employer's CalPERS ID. Conditions: Required—to identify which myCalPERS account is submitting the XML file. The submitting organization must be a PERS/SIP contracted data owner.	#########	10
3	Transaction Type	Description: Indicates the transaction type of a qualifying event. Conditions: Required—to identify the transaction type of a qualifying event. Note: For definitions of the Transaction Types, see Appendix A1.	 New Appointment = NAP Appointment Change = ACH Begin Leave = BEL End Leave = ENL Permanent Separation = PSP To Local ARP = TLA From Local ARP = FLA Address Change = ADC Profile Change = PRC Membership Inquiry = MIQ 	3

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
4	Unique Transaction Identifier	Description: A memo field to record text for tracking purposes. Employers uploading files can use this field to record a text memo for tracking purposes. Conditions:	Free form field up to 36 characters	36
		Required—for transaction types when the file is submitted using FTP.		
		Optional—for transaction types when the file is submitted using File Upload.	tion types when the file is submitted using File	
		Note:		
		When using File Upload this field is not required for successful submission of the file but can be used as a free-text memo field for tracking purposes by the file submitter.		
		For FTP-based submissions, CalPERS will return the Universally Unique Identifier (UUID) provided by the employer, with each transaction's success or failure. Employers who choose this integration style must be able to programmatically match the UUIDs on the CalPERS response with the transaction submitted to CalPERS on the input file. This number must be created by a UUID generator.		

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
5	Leave of Absence Type	Description: The participant's leave of absence type. Conditions: Required—when transaction type is Begin Leave.	 Military Leave = MIL Industrial Disability Leave = IDL Non-Industrial DL = NDL State Disability Leave = SDL Sabbatical - Full Pay = SFP Sabbatical - Partial Pay = SPP Workers Comp = WC Family Medical Leave = FML Educational Leave = EDL Service Leave = SEL Maternity/Paternity Leave = MPL Other Leave = OTL Unpaid Leave = UNL 	3
6	Perm Sep Reason	Description: The reason for permanent separation. Conditions: Required—when transaction type is Perm Sep.	 Death = DEA Layoff = LAY Termination with Cause = TWC Retirement = RET Resigned = QIT Other = OTH 	3

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
7	Transaction	Description:	yyyy-mm-dd	10
	Effective Date	The CalPERS effective date for the specific transaction.		
		Conditions:		
		Required—for all transaction types except Member Inquiry.		
		Note:		
		 This date may differ from the original hire date if it takes time for the employee to meet eligibility requirements for entering membership. For a New Appointment, this date is the date the employer begins reporting contributions for the employee. For an Appointment Change this is the first day the reported change takes effect. For Begin Leave, this is the first day the leave of absence begins. For End Leave, this is the day the leave of absence ends. For To Local ARP, this is the day the employer moves the employee into Local ARP and stops making CalPERS contributions. For From Local ARP, this is the day the employer moves the employee from Local ARP to making CalPERS contributions. For Permanent Separation, this is the day after the last day an employee works for your agency, which is often the day after the last day on payroll. For Address Change, this is the day the employee's address change is valid. For Profile Change, this is the day the employee's profile change is valid. 		

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
8	Deletion	Description:	true / false	5
	Indicator	Rescinds a previous transaction.		
		Conditions:		
		Optional—this element is not required.		
		Note:		
		The current transaction must have the same set of values as the transaction that should not have occurred.		
		This element must be reported in lowercase text only.		
9	Correction	Description:	true / false	5
	Indicator	Corrects a previous transaction.		
		Conditions:		
		Optional—this element is not required.		
		Note:		
		The current transaction must provide the updated values for the transaction you are correcting.		
		This element must be reported in lowercase text only.		

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
10	Prior Transaction	Description:	yyyy-mm-dd	10
	Effective Date	Changes the effective date of a prior transaction.		
		Conditions:		
		Required—when the correction indicator is set to 'true' and the Transaction Effective Date from the previous transaction requires correction. This is applicable for transaction types: New appointment Appointment Change Begin Leave End Leave Permanent Separation To Local ARP From Local ARP Note:		
		To locate the exact transaction you wish to correct, you must enter		
		the effective date (incorrect date) of that transaction.		
11	New SSN	Description:	########	9
		Denotes a correction to the Social Security Number.		
		Conditions:		
		Optional—this element is not required and is only applicable to transaction type Profile Change.		

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
12	Original Hire	Description:	yyyy-mm-dd	10
	Date	The first hire date recorded for this employee at this employer, regardless of whether the original hire led to membership.		
		Conditions:		
		Required—when transaction type is New Appointment and the first appointment with the employer.		
13	Appointment	Description:	#########	10
	ld	Uniquely identifies the job into which the employee has been hired. CalPERS will generate and store appointment IDs for employees at the time of enrollment.		10
		Conditions:		
		Required—for New Appointment Corrections/Deletions or for Appointment Updates when at least two appointments exist for this individual with the same employer.		
		This is not applicable for New Appointment.		
		Note:		
		For a list of appointment IDs, run the <i>Participant Appointment Details Report</i> COGNOS report in myCalPERS.		

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
14	Position Code	Description: A unique code representing the position title into which the employee has been hired (myCalPERS uses the value entered for Position Code to derive the division that the employee works in). Conditions: Required—when the employer has benefit distinctions at the position level and an appointment ID has not been provided. Note: This data is accepted for transaction types New Appointment and Appointment Change.	##########	10
15	Member Category	Description: The category assigned by the employer when an employee receives an appointment. This is used to determine benefit levels. Conditions: Required—when transaction type is New Appointment. Note: This data is accepted for transaction type Appointment Change.	 Miscellaneous = MIS Safety - Police = SPO Safety - Fire = SFI Safety - Police and Fire = SPF Safety - County Peace Officer = SCP Safety - Sheriff = SSH Safety - Prosecutor = SPR Safety - Other Safety = SOS 	3

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
16	Work Calendar	Description: The position's yearly work schedule defining the number of months worked versus months paid. Conditions: Required—when transaction type is New Appointment. Note: This data is accepted for transaction type Appointment Change. If work calendar cannot be determined, Work 12 Months/Paid 12 Months should be chosen.	 Work 9/Paid 9 Months = 001 Work 9/Paid 10 Months = 002 Work 9/Paid 11 Months = 003 Work 9/Paid 12 Months = 004 Work 10/Paid 10 Months = 005 Work 10/Paid 11 Months = 006 Work 10/Paid 12 Months = 007 Work 11/Paid 11 Months = 008 Work 11/Paid 12 Months = 009 Work 12/Paid 12 Months = 010 	3
17	CBU	Description: The number of the collective bargaining unit representing the participant. Conditions: Required—when the employer provides benefit distinctions by Collective Bargaining Unit (CBU) and the employer is reporting transaction type New Appointment. Note: This data is accepted for transaction type Appointment Change.	XXXXXXXXX	10

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
18	Enrollment Reason	Description: Reason for enrolling a CalPERS member. Conditions: Optional—when the employer is reporting a transaction type for a new appointment a reason must also be provided. Note: This is currently optional but may be required in the future. If using Enrollment Reason—Other (OTH) then field length can be up to 50 characters.	 MEM = Already a member FTM = Full time for 6 months or more HTM = At least half time or more for 1 year or longer THO = Completed 1000 hours in a fiscal year SEM = Completed two consecutive semesters or 3 consecutive quarters-CSU ELT = Elected CalPERS membership OTH = Other 	3
19	Subject to Local ARP	Description: Indicates that a local or school miscellaneous participant who works for an agency with a qualified Alternate Retirement Plan (ARP) will be subject to reporting to the ARP if the time base for the participant falls below the specified threshold. Conditions: Required—when transaction type is New Appointment. Note: In the schema this element is referred to as simply "Local ARP." This element must be reported in lowercase text only.	true / false	5

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
20	Optional Member Position	Description: Indicates the position a participant holds if they are not required to participate in CalPERS retirement program and have elected to enroll voluntarily. Conditions: Optional—this data element is not required. Note: This data is accepted for transaction types New Appointment or Appointment Change.	 City Council = CYC County Board of Supervisors = CBS Other = OTH 	3
21	Optional Date of Entry	Description: Indicates the date the participant entered the optional member position. Conditions: Optional—this data element is not required. Note: This data is accepted for transaction types New Appointment or Appointment Change.	yyyy-mm-dd	10

	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
1 1	Covered by '59	Description:	true / false	5
	Survivor	Indicates the participant has elected 1959 Survivor Benefits coverage.		LENGTH
		Conditions:		
		Optional—this data element is not required.		
		Note:		
		This data element cannot be marked 'true' if Covered by SSA is 'true.'		
		If not submitted in the xml the value will default to 'false.'		
		This element must be reported in lowercase text only.		
23 (Covered by SSA	Description:	true / false	5
		Indicates the participant is covered by Social Security.		5
		Conditions:		
		Required—when transaction type is New Appointment.		
		Note:		
		This data element cannot be marked 'true' if Covered by '59 Survivor is 'true.'		
		This element must be reported in lowercase text only.		

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
24	SSA Exclusion Reason	Description: Indicates the reason the participant is not covered by Social Security. Conditions: Required—when Covered by SSA is marked 'false.'	 Transportation Systems Employees = TSE Non-Resident Alien with F-1, J-1, M-1, or Q-1 Visas = NRA Individuals hired solely to be relieved from unemployment = RUN Services performed in a hospital, home or other institution = HHO Workers hired temporarily to handle disaster emergencies = DEM Elective Positions = ELP Part-Time Positions = PTD Fee-Basis Positions = FEB Agricultural Labor = ALR Election Worker Services = EWS Student Services = STD Division Election = DVE Other = OTH 	3
25	SSA Other Reason	Description: Indicates the reason for the SSA Exclusion Conditions: Required—when the SSA Exclusion Reason is marked Other. Note: This is a variable field.	Free form text up to 36 characters	36

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
26	CalSTRS	Description:	true / false	5
	Covered Electing CalPERS	Indicates enrollment is for a position typically covered by CalSTRS, for which an existing CalSTRS participant is electing to receive CalPERS service credit.		
		Conditions:		
		Required—when transaction type is New Appointment for schools only.		
		Note:		
		This element must be reported in lowercase text only.		
27	Member Indicator	Description:	true / false	5
		Indicates whether the member is a certificated member.		
		Conditions:		
		Required—as of June 2021, this field is mandatory for schools.		
		Note:		
		This field is only applicable for schools.		
		Document upload is required in pre-processing.		
		This element must be reported in lowercase text only.		
28	Court Level	Description:	N/A	3
		This is not applicable for public agencies and schools.		
29	County/District	Description:	For a list of field values, refer to	3
		This is not applicable for public agencies and schools.	Appendix A3.	
30	Assignment	Description:	N/A	3
	Туре	This is not applicable for public agencies and schools.		

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
31	Retired Annuitant	Description: Indicates the individual being reported is retired, with qualification to work under a certain limit. Conditions: Required—when transaction type is New Appointment. Note: This data is accepted for transaction type Appointment Change. This element must be reported in lowercase text only.	true / false	5
32	Retired Annuitant Info Type	Description: Indicates the type of retired annuitant. Conditions: Recommended—when line 31 (Retired Annuitant) is 'true.'	 EHP - Extra Help FER - FERP VPS - Vacant Position ELT - Earnings Limit 	3
33	180 Day Exception	Description: Indicates if a retired annuitant was hired before the mandatory 180 day wait period Conditions: Recommended—when line 31 (Retired Annuitant) is 'true.' This element must be reported in lowercase text only.	true/false	5
34	180 Day Exception Reason	Description: Indicates the exception reason. Conditions: Recommended—when line 31 (Retired Annuitant) is 'true.'	 AGB = Appointed by Governing Body FER = CSU-Faculty Early Retirement Program SAR = Senate or Assembly Rules 	3

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
35	Unused Sick Leave	Description: The remaining hours of sick leave at the time of separation from employment, as reported by the employer. Conditions: Optional—this data element is not required. Note: This is only applicable for transaction type Perm Sep. The system will convert hours submitted into days.	#####.###	9
36	Unused Education Leave	Description: The remaining hours of educational leave at the time of separation from employment, as reported by the employer. Conditions: Optional—this data element is not required. Note: This is only applicable for transaction type Perm Sep. The system will convert hours submitted into days.	#####.###	9
37	Person Id Type	Description: A type of unique person identifier. When first reporting for a person, this ID can be a Social Security Number (SSN). On all subsequent transactions for the person, the CalPERSID must be the ID type provided. Conditions: Required—to identify the person.	 Social Security Number = SSN CalPERS Identification = PID 	3

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
38	Person Id	Description:	• ######## (SSN)	10
		The unique identifier of the individual who qualifies for health enrollment.	• ######## (CalPERSId)	
		Conditions:		
		Required—to identify the individual who qualifies for health enrollment.		
		Note:		
		When a Social Security Number (SSN) is selected as the Person ID Type, the number should be submitted using the following format: The SSN must be nine digits The SSN cannot start with 9 or 666 Each section of the SSN cannot be all zeroes (e.g., 000######, ###00####, and #####0000 are prohibited)		
		The CalPERSID, which is 10-digits, will be created and stored by myCalPERS during enrollment, and will be used to identify participants when data is shared with CalPERS. It will be used in place of the SSN in subsequent enrollment files.		

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
39	Prefix	Description: The participant's title. Conditions: Optional—this data element is not required.	 Assembly Member = ASM Chief = CHI Councilman = COU Councilwoman = CCW Dean = DEA Doctor = DR Judge = JUD Mayor =MAY Miss = MIS Mister = MR Mrs = MRS Ms = MS President = PRE Professor = PRO Senator = SEN Superintendent = SUP Supervisor = SVR The Honorable = HON Justice = JUS Chief Justice = CHJ 	3
40	First Name	Description: The participant's first name. Conditions: Required—for all transaction types except Member Inquiry. Note: Only alpha characters, blank spaces, hyphens (-), and apostrophes (') will be accepted. • Must be a minimum of one alpha character • Cannot begin with a blank space	Xxxxxxxxxxxxxxx	20

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
41	Middle Name	Description:	Xxxxxxxxxxxxxxx	20
		The participant's middle name.		
		Conditions:		
		Optional—this data element is not required.		
		Note:		
		Only alpha characters, blank spaces, hyphens (-), and apostrophes (') will be accepted. No character minimum is required		
42	Last Name	Description:	Xxxxxxxxxxxxxxxxxxx	30
		The participant's last name.		
		Conditions:		
		Required—for all transaction types except Member Inquiry.		
		Note:		
		Only alpha characters, blank spaces, hyphens (-), and apostrophes (') will be accepted.		
		Must be a minimum of one alpha characterCannot begin with a blank space		

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
43	Suffix	Description: The participant's suffix, if applicable. Conditions: Optional—this data element is not required.	 Senior = SR Junior = JR I = I II = II IV = IV V = V Doctor of Philosophy = PHD Doctor of Medicine = MD Certified Public Accountant = CPA Doctor of Education = EDD Esquire = ESQ Doctor of Dental Surgery = DDS 	3
44	Gender	Description: The participant's gender identification. Conditions: Required—when transaction type is New Appointment or Profile Change.	 Female = F Male = M Nonbinary = N Unknown = U 	3
45	Birth Date	Description: The participant's date of birth. Conditions: Required—when transaction type is New Appointment or Profile Change.	yyyy-mm-dd	10

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
46	Address Type	Description:	Mailing Address = MAI	3
		The participant's address type. This will be one of two types, though physical address is preferred.	Physical Address = PHY	
		Conditions:		
		Required—when transaction type is New Appointment or Address Change.		
47	Address Line 1	Description:	Free form text up to 30 characters	30
	The first address line of the address to be entered. This is typically used for the participant's street address or "In care of" information.			
		Conditions:		
		Required—when transaction type is New Appointment or Address Change.		
		Note:		
		This element is identified in the XML as <addressline> (see CommonUtilities.xsd, in the Technical Toolkit), which can occur up to three times. If entered as <addressline1> it will generate a Level 1 error.</addressline1></addressline>		

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
48	Address Line 2	Description:	Free form text up to 30 characters	30
		The second address line. This is typically used for the participant's street address if Address Line 1 was used for "In care of" information; otherwise it would be used for address information that does not fit on Address Line 1 (e.g., suite number, building name, room number, apartment number, etc.).		
		Conditions:		
		Optional—this data element is not required.		
		Note:		
		This data is accepted if Address Line 1 is supplied and applicable to transaction types New Appointment and Address Change.		
49	Address Line 3	Description:	Free form text up to 30 characters	30
		The third address line. This is typically used for any address data that does not fit on Address Line 1 and 2.		
		Conditions:		
		Optional—this data element is not required.		
		Note:		
		This data is accepted if Address Line 1 is supplied, and applicable to transaction types New Appointment and Address Change.		
		This element is identified in the XML as <addressline> (see CommonUtilities.xsd, in the Technical Toolkit), which can occur up to three times. If entered as <addressline3> it will generate a Level 1 error.</addressline3></addressline>		

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
50	City	Description:	Free form text up to 30 characters	30
		The city applicable to the address entered.		
		Conditions:		
		Required— when Address Line 1 is supplied.		
		Note:		
		This data is accepted if Address Line 1 is supplied.		
		This data element accepts alpha and numeric characters.		
51	State	Description:	Free form text up to 30 characters	30
		The code value for the state applicable to the address entered, if country selected is USA or Mexico.	For a list of field values, refer to Appendix A2.	
		Conditions:		
		Required— when country is USA or Mexico, and Address Line 1 is supplied.		
		Note:		
		This data is accepted for transaction types New Appointment and Address Change.		

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
52	Zip Code 5	Description:	#####	5
		The first five digits of the Zip code for the address designated in Address Type.		
		Conditions:		
		Required—when the country is USA and Address Line 1 is supplied.		
		 If the country is USA, the following are required: Use numeric format The first five numbers of the Zip code 		
		Note:		
		This data is accepted for transaction type New Appointment and Address Change.		
53	Zip Code 4	Description:	####	4
		The next four digits of the Zip code or the address designated in Address Type.		
		Conditions:		
		Optional—this data element is not required.		
		Note:		
		This data is accepted if Zip Code 5 is supplied and for transaction types New Appointment and Address Change.		

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
54	Country	Description: The code value for the country address. Conditions: Required—when transaction type is New Appointment, Address Change or Address Line 1 is supplied. Note: This data is accepted for transaction types New Appointment and Address Change.	For a list of field values, refer to Appendix A4.	3
55	Province	Description: The province or territory which coincides with the Address Type. Conditions: Required—when country is neither USA nor Mexico and the transaction type is New Appointment or Address Change. Optional— when the country is not USA, Mexico, or Canada. Note: This data is accepted for transaction type New Appointment and Address Change. If country is Canada use one of the code values to the right.	Free form text up to 50 characters For State/Province and Territories code values, refer to Appendix A2. Alberta = AB British Columbia = BC Manitoba = MB New Brunswick = NB Newfoundland = NF Northwest Territories = NT Nova Scotia = NS Ontario = ON Prince Edward Island = PE Quebec = PQ Saskatchewan = SK Yukon = YT	50

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
56	Postal Code	Description:	Free form text up to 12 characters	12
		The (alphanumeric) international postal code for the address.		
		Conditions:		
		Required—when the country indicated is not USA.		
		Note:		
		This data is accepted for transaction types New Appointment and Address Change.		
57	Mailing Equals	Description:	true / false	5
	Physical Indicator	This allows the ability to submit a mailing address and duplicate this to a physical address.		
		Conditions:		
		Optional—this data element is not required.		
		Note:		
		When marked "true" the system will update the physical address to be the same as the mailing address.		
		This element must be reported in lowercase text only.		
58	Additional	Description:	Mailing Address = MAI	3
	Address Type	The participant's secondary address type. This will be one of two types, though physical address is preferred.	Physical Address = PHY	
		Conditions:		
		Required—when transaction type is New Appointment or Address Change.		

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
59	Additional Address Line 1	Description:	Free form text up to 30 characters	30
	Address Line 1	The first address line of the address to be entered. This is typically used for the participant's street address or "In care of" information.		
		Conditions:		
		Required—when transaction type is New Appointment or Address Change.		
		Note:		
		This element is identified in the XML as <addressline> (Refer to the CommonUtilities.xsd, in the Technical Toolkit), which can occur up to three times. If entered as <addressline1> it will generate a Level 1 error.</addressline1></addressline>		
60	Additional Address Line 2	Description:	Free form text up to 30 characters	30
		The second address line. This is typically used for the participant's street address if Address Line 1 was used for "In care of" information; otherwise it would be used for address information that does not fit on Address Line 1 (e.g., suite number, building name, room number, apartment number, etc.).		
		Conditions:		
		Optional—this data element is not required.		
		Note:		
		This data is accepted if Address Line 1 is supplied and applicable to transaction types New Appointment and Address Change.		

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
61	Additional	Description:	Free form text up to 30 characters	30
	Address Line 3	The third address line. This is typically used for any address data that does not fit on Address Line 1 and 2.		
		Conditions:		
		Optional—this data element is not required.		
		Note:		
		The data is accepted if Address Line 1 is supplied, and applicable to transaction types New Appointment and Address Change.		
		This element is identified in the XML as <addressline> (Refer to the CommonUtilities.xsd, in the Technical Toolkit), which can occur up to three times. If entered as <addressline3> it will generate a Level 1 error.</addressline3></addressline>		
62	Additional City	Description:	Free form text up to 30 characters	30
		The city applicable to the address entered.		
		Conditions:		
		Required— when Address Line 1 is supplied.		
		Note:		
		This field accepts alpha and numeric characters.		

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
63	Additional	Description:	Free form text up to 30 characters	30
	State	The code value for the state applicable to the address entered, if country selected is USA or Mexico.	For a list of field values, refer to Appendix A2.	
		Conditions:		
		Required—when country is USA or Mexico, and Address Line 1 is supplied.		
		Note:		
		This data is accepted for transaction types New Appointment and Address Change.		
64	· '	Description:	#####	5
		The first five digits of the Zip code for the address designated in Address Type.		
		Conditions:		
		Required—when the country is USA and Address Line 1 is supplied.		
		If the country is USA, the following are required:		
		Use numeric formatThe first five numbers of the Zip code		
		Note:		
		This data is accepted for transaction type New Appointment and Address Change.		

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
65	Additional Zip	Description:	####	4
		The next four digits of the Zip code or the address designated in Address Type.		
		Conditions:		
		Optional—this data element is not required.		
		Note:		
		This data is accepted if Zip Code 5 is supplied for transaction types New Appointment and Address Change.		
66	Country	Description:	For a list of field values, refer to	3
		The code value for the country address.	Appendix A4.	
		Conditions:		
		Required—when transaction type is New Appointment, Address Change or Address Line 1 is supplied.		
		Note:		
		This data is accepted for transaction types New Appointment and Address Change.		

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
67	Additional Province	Description: The province or territory which coincides with the Address Type. Conditions: Optional—when the country is not USA, Mexico, or Canada. Note: This data is accepted for transaction type New Appointment and Address Change. If country is Canada use one of the code values to the right.	Free form text up to 50 characters For a list of field values, refer to Appendix A2. Alberta = AB British Columbia = BC Manitoba = MB New Brunswick = NB Newfoundland = NF Northwest Territories = NT Nova Scotia = NS Ontario = ON Prince Edward Island = PE Quebec = PQ Saskatchewan = SK Yukon = YT	50
68	Additional Postal Code	Description: The international postal code for the address. Conditions: Required—when the country indicated is not USA. Note: This data is alphanumeric and accepted for transaction types New Appointment and Address Change.	Free form text up to 12 characters	12

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
69	Phone Type	Description: The phone type used (e.g. cellular, fax, office). Conditions: Optional—this data element is not required. Note: This data is accepted for transaction types New Appointment and Profile Change.	 Office = WOR FAX = FAX TDD = TTY Cellular = MOB Home = HOM 	3
70	US Phone	Description: The participant's US contact phone number. Conditions: Optional—this data element is not required. Note: This data is accepted for transaction types New Appointment and Profile Change.	#########	10
71	International Phone	Description: The participant's international contact phone number. Conditions: Optional—this data element is not required. Note: This data is accepted for transaction types New Appointment and Profile Change. When this field is used, it must have a minimum of three and up to 24 digits; and plus signs (+), dashes (-), spaces and parentheses () are allowed.	###	24

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
72	Extension	Description:	#####	5
		The extension of the participant's phone number provided.		
		Conditions:		
		Optional—this data element is not required.		
		Note:		
		This field will only accept numeric values.		
73	Email	Description:	xxxxx@xxxxx.xxx xxxxx@xxxxx.xx.xxx[xxxxx.ca.gov] xxxxx@xxxxx.xx.xx [xxxxx.ca.us]	50
		The participant's email address.		
		Conditions:		
		Optional—this data element is not required.		
		Note:		
		This data is accepted for transaction types New Appointment and Profile Change.		
74	Reciprocal	Description:	true / false	5
	Agency Indicator	Designates this participant previously attained membership in a reciprocal retirement system.		
		Conditions:		
		Optional—this data element is not required.		
		Note:		
		This element must be reported in lowercase text only.		

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
75	Agency CalPERSId	Description: Identifies the most recent reciprocal retirement system in which the participant attained membership. Conditions: Required—when Reciprocal Member Indicator is 'true.' If provided, Reciprocal Member Indicator must be set to 'true.' Note: The provided CalPERSID must belong to an agency with a reciprocal agreement in effect on the enrollment eligibility date.	#########	10
76	Reciprocal Membership Date	Description: The participant's earliest date of membership in a reciprocal retirement system. Conditions: Required—when Reciprocal Member Indicator is 'true.'	yyyy-mm-dd	10
77		Description: The participant's most recent separation date from a reciprocal retirement system. Conditions: Required—when Reciprocal Member Indicator is 'true.' If provided, Reciprocal Member Indicator must be set to 'true.'	yyyy-mm-dd	10

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
78	Retired Reciprocal Member Indicator	Description:	true / false	5
		 Designates this participant previously retired from a reciprocal retirement system. 		
		Conditions:		
		Required—when Reciprocal Member Indicator is 'true.'		
		If provided, Reciprocal Member Indicator must be set to 'true.'		
		Note:		
		This element must be reported in lowercase text only.		
79	Retired	Description:	yyyy-mm-dd	10
	Reciprocal Retirement Date	The date the participant retired from a reciprocal retirement system.		
		Conditions:		
		Required—when Retired Reciprocal Member Indicator is 'true'		
80	Refunded Reciprocal Member Indicator	Description:	true / false	5
		Designates this participant previously refunded from a reciprocal retirement system.		
		Conditions:		
		Required—when a Reciprocal Member has refunded from a previous Reciprocal Retirement System.		
		If provided, Refunded Reciprocal Member Indicator must be set to 'true.'		
		Note:		
		This element must be reported in lowercase text only.		

#	DATA ELEMENT NAME	DESCRIPTION/CONDITIONS	FIELD VALUES	MAX LENGTH
81	Reciprocal Refund Date	Description: The date the participant refunded from a reciprocal retirement system.	yyyy-mm-dd	10
		Conditions: Required—when Refund Reciprocal Member Indicator is 'true.'		

Appendix A1 – Transaction Type Descriptions

TRANSACTION TYPE	DESCRIPTION
New Appointment	New employment. This includes a new position an employee takes with the employer, whether it's the first time employed with the employer, rehiring a person who worked for the employer at one point, or additional employment for a person who is currently employed by the same employer. Transactions should be reported upon reaching eligibility for CalPERS membership. Effective date is the first day of membership.
Appointment Change This could include one or more of the following changes: a position, group change and/or member category change. This could include one or more of the following changes: a position, group change and/or member category change. This could include one or more of the following changes: a position, group change and/or member category change. This could include one or more of the following changes: a position, group change and/or member category change. The change is a position, group change and/or member category change. The change is a position, group change and/or member category change. The change is a position, group change and/or member category change. The change is a position, group change and/or member category change. The change is a position of the change is a position, group change and/or member category change. The change is a position of the change is a posi	
Begin Leave	Indicates the beginning of a leave of absence (e.g. Military Leave). Effective date is the first day of the leave period.
End Leave	Indicates the end of a leave of absence. Effective date is the first day back on the job.
To Local ARP	Indicates the employer has changed a member's status from contributing to CalPERS to contributing to a Local ARP plan. Effective date is the first day the employer moves the employee into the Local ARP plan and stops making CalPERS contributions. This field applies only to PAs who have such a provision in their contract.
From Local ARP	Indicates the employer has changed a member's status from contributing to a Local ARP plan back to contribution to CalPERS. Effective date is the first day employer moves the employee from the Local ARP plan back to making CalPERS contributions. This field applies only to PAs who have such a provision in their contract.
Permanent Separation	The employee leaves the position with no expectation of returning. Effective date is the day <i>after</i> the last day an employee works for your agency, which is often the day after the last day on payroll.
Address Change	A change to the employee's address. Effective date is the first day that the address is valid.
Profile Change	A change to the employee's profile (name, gender, birth date, SSN). Effective date is the first day the change is valid.
Membership Inquiry	Used only to query the system for whether this person is eligible for CalPERS membership. The person must be a current active member in the system (not in a status of refunded or retired). Eligibility is strictly for the CalPERS program. This is only available for SFTP submitters.

Appendix A2 – State/Province & Territories Code Values

LONG NAME	CODE VALUE
California	CA
Alabama	AL
Alaska	AK
American Samoa	AS
Arizona	AZ
Arkansas	AR
Armed Forces Europe	AE
Armed Forces Pacific	AP
Armed Forces the Americas	AA
Colorado	СО
Connecticut	СТ
Delaware	DE
District of Columbia	DC
Federated States of Micronesia	FM
Florida	FL
Georgia	GA
Guam	GU
Hawaii	HI
Idaho	ID
Illinois	IL
Indiana	IN
Iowa	IA
Kansas	KS
Kentucky	КҮ

LONG NAME	CODE VALUE
Louisiana	LA
Maine	ME
Marshall Islands	МН
Maryland	MD
Massachusetts	MA
Michigan	MI
Minnesota	MN
Mississippi	MS
Missouri	МО
Montana	MT
Nebraska	NE
Nevada	NV
New Hampshire	NH
New Jersey	NJ
New Mexico	NM
New York	NY
North Carolina	NC
North Dakota	ND
North Mariana Islands	MP
Ohio	ОН
Oklahoma	ОК
Oregon	OR
Palau	PW
Pennsylvania	PA

LONG NAME	CODE VALUE
Puerto Rico	PR
Rhode Island	RI
South Carolina	SC
South Dakota	SD
Tennessee	TN
Texas	TX
Utah	UT
Vermont	VT
Virgin Islands	VI
Virginia	VA
Washington	WA
West Virginia	WV
Wisconsin	WI
Wyoming	WY
Aguascalientes	AG
Baja California, Norte	BJ
Baja California, Sur	BS
Campeche	СР
Chiapas	СНІ
Chihuahua	CI
Coahuila	CU
Colima	CL
Distrito Federal	DF
Durango	DG
Guanajuato	GJ
Guerrero	GR

LONG NAME	CODE VALUE
Hidalgo	HG
Jalisco	JA
Mexico	EM
Michoacan	МН
Morelos	MR
Nayarit	NA
Nuevo Leon	NL
Oaxaca	OA
Puebla	PU
Queretaro	QA
Quintana Roo	QR
San Luis Potosi	SL
Sinaloa	SI
Sonora	SO
Tabasco	TA
Tamaulipas	TM
Tlaxcala	TL
Veracruz	VZ
Yucatan	YC
Zacatecas	ZT

Appendix A3 – County/District Code Values

LONG NAME	CODE VALUE
1 - Alameda	001
2 - Alpine	003
3 - Amador	005
4 - Butte	007
5 - Calaveras	009
6 - Colusa	011
7 - Contra Costa	013
8 - Del Norte	015
9 - El Dorado	017
10 - Fresno	019
11 - Glenn	021
12 - Humboldt	023
13 - Imperial	025
14 - Inyo	027
15 - Kern	029
16 - Kings	031
17 - Lake	033
18 - Lassen	035
19 - Los Angeles	037
20 - Madera	039
21 - Marin	041
22 - Mariposa	043
23 - Mendocino	045
24 - Merced	047
25 - Modoc	049

LONG NAME	CODE VALUE
26 - Mono	051
27 - Monterey	053
28 - Napa	055
29 - Nevada	057
30 - Orange	059
31 - Placer	061
32 - Plumas	063
33 - Riverside	065
34 - Sacramento	067
35 - San Benito	069
36 - San Bernardino	071
37 - San Diego	073
38 - San Francisco	075
39 - San Joaquin	077
40 - San Luis Obispo	079
41 - San Mateo	081
42 - Santa Barbara	083
43 - Santa Clara	085
44 - Santa Cruz	087
45 - Shasta	089
46 - Sierra	091
47 - Siskiyou	093
48 - Solano	095
49 - Sonoma	097
50 - Stanislaus	099

LONG NAME	CODE VALUE
51 - Sutter	101
52 - Tehama	103
53 - Trinity	105
54 - Tulare	107
55 - Tuolumne	109
56 - Ventura	111
57 - Yolo	113
58 - Yuba	115

LONG NAME	CODE VALUE
Out of State	000
1st District (SF)	100
2nd District (LA)	110
2nd Sub District (Ventura)	117
3rd District (Sac)	120
4th District (San Diego)	130
4th Sub District (Riverside)	131
4th Sub District (Santa Ana)	132
5th District (Fresno)	140
6th District (Santa Clara)	150

Appendix A4 – Country Code Values

LONG NAME	CODE VALUE
United States	US
Afghanistan	AF
Albania	AL
Algeria	DZ
American Samoa	AS
Andorra	AD
Angola	AO
Anguilla	Al
Antarctica	AQ
Antigua & Barbuda	AG
Argentina	AR
Armenia	AM
Aruba	AW
Australia	AU
Austria	AT
Azerbaijan	AZ
Bahamas	BS
Bahrain	ВН
Bangladesh	BD
Barbados	ВВ
Belarus	BY
Belgium	BE
Belize	BZ
Benin	BJ

LONG NAME	CODE VALUE
Bermuda	BM
Bhutan	ВТ
Bolivia	ВО
Bosnia-Herzegovina	BA
Botswana	BW
Bouvet Island	BV
Brazil	BR
British Indian Ocean Terr	10
Brunei	BN
Bulgaria	BG
Burkina Faso	BF
Burundi	ВІ
Cambodia	КН
Cameroon	СМ
Canada	CA
Cape Verde	CV
Cayman Islands	KY
Central African Republic	CF
Chad	TD
Chile	CL
China	CN
Christmas Island (Pacific)	CX
Cocos (Keeling) Islands	СС
Colombia	СО
Comoros	KM

LONG NAME	CODE VALUE
Congo	CG
Cook Islands	СК
Costa Rica	CR
Croatia	HR
Cuba	CU
Cyprus	CY
Czech Republic	CZ
Denmark	DK
Djibouti	DJ
Dominica	DM
Dominican Republic	DO
Ecuador	EC
Egypt	EG
El Salvador	SV
Equatorial Guinea	GQ
Eritrea	ER
Estonia	EE
Ethiopia	ET
Falkland Islands	FK
Faroe Islands	FO
Fiji	FJ
Finland	FI
France	FR
French Guiana	GF
French Polynesia	PF
Gabon	GA
Gambia	GM

LONG NAME	CODE VALUE
Georgia	GE
Germany	DE
Ghana	GH
Gibraltar	GI
Greece	GR
Greenland	GL
Grenada	GD
Guadeloupe	GP
Guam	GU
Guatemala	GT
Guernsey	GG
Guinea	GN
Guinea Bissau	GW
Guyana	GY
Haiti	HT
Heard McDonald Islands	НМ
Honduras	HN
Hong Kong	НК
Hungary	HU
Iceland	IS
India	IN
Indonesia	ID
Iran	IR
Iraq	IQ
Ireland	IE
Isle of Man	IM
Israel	IL

LONG NAME	CODE VALUE
Italy	IT
Ivory Coast	CI
Jamaica	JM
Jan Mayen	SJ
Japan	JP
Jersey	JE
Jordan	10
Kazakhstan	KZ
Kenya	KE
Kiribati	KI
Kuwait	KW
Kyrgyzstan	KG
Laos	LA
Latvia	LV
Lebanon	LB
Lesotho	LS
Liberia	LR
Libya	LY
Liechtenstein	LI
Lithuania	LT
Luxembourg	LU
Macau	МО
Macedonia	MK
Madagascar	MG
Malawi	MW
Malaysia	MY
Maldives	MV

LONG NAME	CODE VALUE
Mali	ML
Malta	MT
Marshall Islands	МН
Martinique	MQ
Mauritania	MR
Mauritius	MU
Mayotte	YT
Mexico	MX
Micronesia	FM
Moldova	MD
Monaco	MC
Mongolia	MN
Montenegro	ME
Montserrat	MS
Morocco	MA
Mozambique	MZ
Myanmar	MM
Namibia	NA
Nauru	NR
Nepal	NP
Netherlands	NL
Netherlands Antilles	AN
New Caledonia	NC
New Zealand	NZ
Nicaragua	NI
Niger	NE
Nigeria	NG

LONG NAME	CODE VALUE
Niue	NU
Norfolk Island	NF
North Korea	КР
Northern Mariana Islands	MP
Norway	NO
Oman	OM
Pakistan	PK
Panama	PA
Papua New Guinea	PG
Paraguay	PY
Peru	PE
Philippines	PH
Pitcairn Island	PN
Poland	PL
Portugal	PT
Puerto Rico	PR
Qatar	QA
Republic of South Korea	KR
Reunion	RE
Romania	RO
Russia	RU
Rwanda	RW
San Marino	SM
Sao Tome & Principe	ST
Saudi Arabia	SA
Senegal	SN
Serbia	RS

LONG NAME	CODE VALUE
Seychelles	SC
Sierra Leone	SL
Singapore	SG
Slovakia	SK
Slovenia	SI
Solomon Islands	SB
Somalia	SO
South Africa	ZA
Spain	ES
Sri Lanka	LK
St Helena	SH
St Kitts & Nevis	KN
St Lucia	LC
St Pierre & Miquelon	PM
St Vincent & Grenadines	VC
Sudan	SD
Suriname	SR
Swaziland	SZ
Sweden	SE
Switzerland	СН
Syria	SY
Taiwan	TW
Tajikistan	TJ
Tanzania	TZ
Thailand	TH
The Democratic Republic of the Congo	CD
Togo	TG

LONG NAME	CODE VALUE
Tokelau	TK
Tonga	ТО
Trinidad and Tobago	TT
Tunisia	TN
Turkey	TR
Turkmenistan	TM
Turks & Caicos Islands	TC
Tuvalu	TV
Uganda	UG
Ukraine	UA
United Arab Emirates	AE
United Kingdom	GB
Uruguay	UY

LONG NAME	CODE VALUE
Uzbekistan	UZ
Vanuatu	VU
Vatican City	VA
Venezuela	VE
Vietnam	VN
Virgin Islands (British)	VG
Virgin Islands (U.S.)	VI
Wallis & FUTUNA	WF
Western Sahara	EH
Western Samoa	WS
Yemen	YE
Zambia	ZM
Zimbabwe	ZW