

# myCalPERS Health Enrollment

Student Guide

**June 21, 2025**



# Introduction

This guide will assist with processing common health enrollment transactions in myCalPERS. You will also learn how to review updated and rescinded transactions and use reports. Refer to the [myCalPERS Health Enrollment Supplement \(PDF\)](#) student guide for additional transactions.

## Disclaimer

Business partner and participant information has been masked in this procedure guide.

## System Access

If you are unable to process these scenarios, contact your agency’s system access administrator to update your myCalPERS access.

## Training Opportunities

Prior to taking a myCalPERS training, new users should review the [Introduction to myCalPERS for Business Partners \(PDF\)](#) student guide and take a health [Business Rules class](#). Business rules summarize the laws defined by the California Public Employees’ Retirement Law (PERL).

## What’s New

- Effective April 26, 2025, a system access administrator (SAA) can choose multiple contacts to receive notifications after your employees submit an online health enrollment or change or supporting document. Scenario 6 of the [myCalPERS System Access Administration \(PDF\)](#) student guide has the steps on adding contacts to the notification list. For confirming employee-submitted transactions in myCalPERS, refer to the [myCalPERS Health Transaction Verification \(PDF\)](#) student guide.
- Effective June 21, 2025, an extra validation field is required for all person searches.

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# Unit 1: Health Benefits Plan Enrollment for Active Employees (HBD-12)

In this unit, you will learn how to process the [Health Benefits Plan Enrollment for Active Employees \(HBD-12\) \(PDF\)](#) form using myCalPERS. Keep a copy of the HBD-12 in the employee personnel file. Do not mail the form to CalPERS unless it's requested.

## Decline Coverage

If an eligible employee declines to enroll, you do not need to process anything. Your employee must decline and sign the HBD-12 form which you keep on file.

## Notifications After a Transaction is Updated

- The next business day, a confirmation is sent to the employee.
- The next business day, a confirmation with the COBRA HBD-85 form and information is sent to cancelled employees and deleted dependents.
- Overnight, health carriers receive health enrollment/changes and demographic/address changes.

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## Scenario 1: New Enrollment-Enroll in Health Benefits

### System Logic

#### PERS Employees

- The appointment must be updated in myCalPERS prior to processing a health enrollment.
- For central-state agencies, it takes 1-2 days to update myCalPERS from the Personnel Information Management System (PIMS).

#### Non-PERS and CalSTRS Employees

- If the employee previously had health benefits with your agency then separated (prior appointment is in myCalPERS), before processing a new health enrollment, you will add a new appointment for them by following steps 1-6.
- If the employee has a concurrent active CalPERS appointment with your agency, contact CalPERS to add the non-PERS or CalSTRS appointment prior the health enrollment.
- For employees enrolling due to Affordable Care Act (ACA), the process is like a non-PERS/CalSTRS health enrollment. Refer to step 22 for the retirement program.

#### New Contracting Health Agency or New Contracting Group

Your PEMHCA resolution must be active in myCalPERS before you can process enrollments.

#### Social Security Numbers (SSN) for Dependents

- Contact CalPERS if adding a spouse or domestic partner who does not have an SSN.
- You can enroll a dependent child without an SSN by bypassing the warning message. Follow up within 90 days to add their SSN (refer to unit 4).

#### Overage Disabled Dependent Child

Process the health enrollment without the disabled dependent child who is 26 years or older. Provide the employee with two forms to be completed within 60 days of the newly eligible employee's initial enrollment in the CalPERS health program.

- The employee completes part A of the [Disabled Dependent Member Questionnaire and Medical Report \(HBD-34\) \(PDF\)](#), and then they submit it to the child's physician. The physician completes the rest of the form then submits it to CalPERS.
- The employee submits the [Authorization to Disclose Protected Health Information \(PERS-BSD-35\) \(PDF\)](#) to the child's physician, and the physician retains the form.

After CalPERS reviews the HBD-34, if the overage dependent is eligible, CalPERS will add the disabled dependent to the subscriber's health benefits. A notification will be sent to your agency and the employee after the dependent is added or if they are not approved.

#### ZIP Code for Eligibility

A physical address is required unless the employee is using an employer ZIP code for health eligibility. If the PO Box displays, you may add the physical address at step 17.

## Step Actions (48 Steps)

**Note:** Most enrollments begin with step 7.

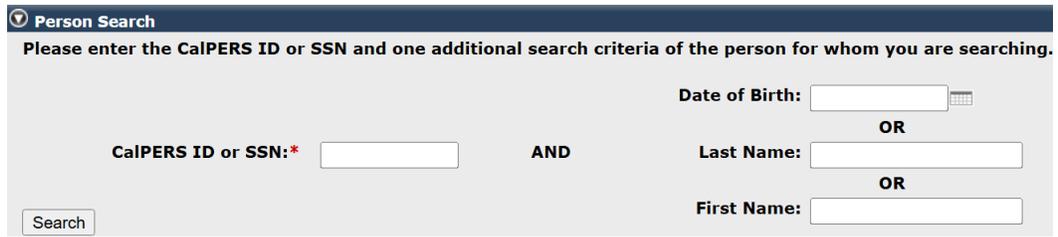
Step 1 Is this a CalPERS employee or a new (no prior appointment with your agency) Non-PERS or CalSTRS employee?

**Yes:** Skip to step 7.

**No:** For your returning CalSTRS or non-PERS employee (prior appointment in myCalPERS with your agency), add their appointment. From the homepage, select the **Person Information** global navigation tab.



Step 2 Enter the employee's CalPERS ID or SSN and populate one field on the right.



**Person Search**  
Please enter the CalPERS ID or SSN and one additional search criteria of the person for whom you are searching.

CalPERS ID or SSN:\*  AND

Date of Birth:

OR

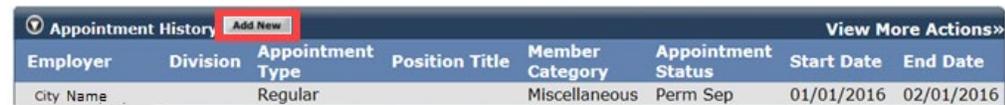
Last Name:

OR

First Name:

Step 3 Select the **Search** button.

Step 4 Within the Appointment History section, select the **Add New** button to create a new non-PERS or CalSTRS appointment.



**Appointment History**

Employer	Division	Appointment Type	Position Title	Member Category	Appointment Status	Start Date	End Date
City Name		Regular		Miscellaneous	Perm.Sep	01/01/2016	02/01/2016

If the button does not display, contact the person at your agency who adds appointments to assist you before processing the new health enrollment.

Step 5 Change the Program field to *Health*, and then complete the following:

- **Enrollment Eligibility Date:** Hire date for this health-only appointment
- **Retirement System:** Employee's retirement system (do not select CalPERS)
- **Division:** Select if the employee works for an agency under the parent agency
- **Original Hire Date:** Employee's first hire date with your agency
- **CBU:** Collective Bargaining Unit drop-down list displays after selecting the retirement system. Select the employee's medical group.

Step 6 Select the **Save** button.

## Add New Health Enrollment Transaction

Step 7 Select the **Reporting** global navigation tab.

Step 8 Within the Create or Edit Report section, select Add or Edit Health Enrollment from the Method drop-down list.

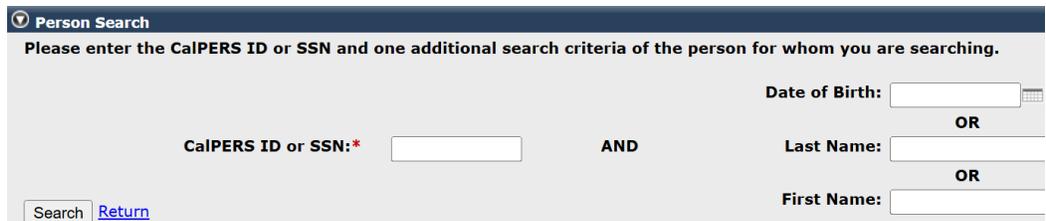


Home Profile Reporting Person Information Education Other Organizations  
Manage Reports Billing and Payments Payroll Schedule Out-of-Class Validation Memb  
Common Tasks ▲ Name: City Name CalPERS ID: 9876543210  
Menu ▼  
Organization Search  
Adjustment Reports  
▼ Create or Edit Report  
Method:\* Add or Edit Health Enrollment ▼ Continue

Step 9 Select the **Continue** button.

### Search for the Subscriber

Step 10 Enter the employee's CalPERS ID or SSN and populate one field on the right.



▼ Person Search  
Please enter the CalPERS ID or SSN and one additional search criteria of the person for whom you are searching.  
Date of Birth:   
OR  
CalPERS ID or SSN:\*  AND Last Name:   
OR  
First Name:   
Search [Return](#)

Step 11 Select the **Search** button.

Step 12 Does the Health Event Information section display?

**Yes:** Skip to step 14.

**No:** Select the **Add New** button to continue for the non-PERS or CalSTRS employee.

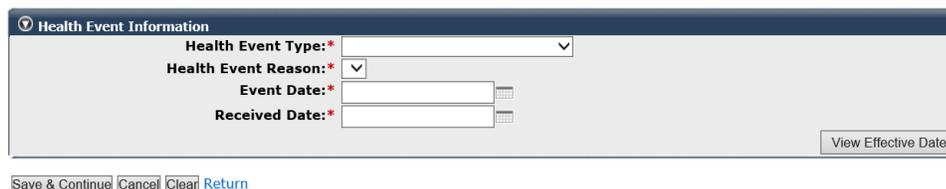


▼ Search Results **Add New**  
No results found. Review the data entered is correct. Click Add New to add a person.

Step 13 Complete the Demographics Information section.

### Input Health Event Information

Step 14 Complete the Health Event Information section.



▼ Health Event Information  
Health Event Type:\*   
Health Event Reason:\*   
Event Date:\*   
Received Date:\*   
View Effective Date  
Save & Continue Cancel Clear [Return](#)

Step 15 Select the **View Effective Date** button at bottom right.

Step 16 Select the **Save & Continue** button.

## Update Subscriber Details

Step 17 Complete the Maintain Address Details section if you need to update the employee's address or to choose the employer's ZIP code for health eligibility.

**Maintain Address Details**

Address Type:\* Physical Address ▾

Care Of:

Address:\*

Country:\*

City:\*

Province/Territory:\*

Postal Code:\*

Select the checkbox if subscriber requested to use their Employer ZIP code for Health Eligibility.  
**NOTE** - Overriding the current Health Eligibility Address will create a Change Eligibility ZIP transaction in conjunction with the enrollment transaction

Use Employer ZIP Code for Health Eligibility :

If a P.O. Box is used for the mailing address, the employee must have a physical address or use the employer ZIP code for health eligibility.

Step 18 **Optional:** If you populate the Maintain Communication Details section, select the **Primary** radio button so the phone number and/or email address displays on the employee's Profile page.

**Maintain Communication Details**

Primary  Secondary

Phone Type: Work ▾ Phone Number:  Extension:  International:

Email:

## Select Appointment

Step 19 Does the employee have more than one active appointment with your agency?

**Yes:** Choose the **Select Appointment** link.

**Appointment Details**

Employer: City Name CalPERS ID: 9876543210 (Employer):

[Select Appointment](#)

**No:** Skip to step 22.

Step 20 Select the applicable **appointment** radio button.

**Appointment History**

Delete

Employer	Division	Appointment Type	Position Title	Member Category	Appointment Status	Start Date	End Date
<input checked="" type="radio"/> City Name		Regular		Safety - Police	Active	09/15/2017	
<input type="radio"/> City Name		Regular		Miscellaneous	Active	02/02/1998	

Select Delete

Step 21 Choose the **Select** button.

Step 22

Complete the Appointment Details section:

- **Division:** An agency under a parent agency, e.g., a school district.
- **Original Hire Date:** Non-PERS or CalSTRS employee’s first hire date.
- **Retirement Program:** Affordable Care Act/None (For a part-time employee who is eligible due to ACA), Other (non-PERS), or STRS (California State Teachers’ Retirement System). Do not select PERS.
- **Affiliated Association:** For a dues-paying member of one of these associations.
- **Medical Group:** For public agencies and schools, choose the employee’s medical group based on your agency’s health contract.

Step 23

Select the **Save & Continue** button.

Step 24

Did you update the address?

**Yes:** Select the correct **Entered Address** or **U.S. Postal Service Matches** radio button.

**No:** Skip to step 27.

Step 25

Select the **Confirm** button.

Step 26

Select the **Save & Continue** button.

### Add Dependents

Step 27

Is your employee enrolling dependents?

**Yes:** Select the **Add New** button.

Name	Date of Birth	Relationship	Medical
JOE JONES	03/02/1984	Self	Basic

**No:** Skip to step 44.

Step 28 Is the dependent listed in the Existing Relationships Eligible for Health section?  
**Yes:** Select the dependent's radio button.

Existing Relationships Eligible for Health [Add New](#)

Select a dependent below. If a dependent is not listed, select the **Add New** button.

	Name	Date of Birth	Relationship	Medical
<input type="radio"/>	Jones, Joey	07/30/2015	Child	No
<input type="radio"/>	Jones, Jill	11/03/1983	Spouse	No
<input type="radio"/>	Jones, Jake	11/17/2017	Child	No

[Continue](#) [Cancel](#) [Return](#)

**No:** Skip to step 31.

---

Step 29 Select the **Continue** button.

---

Step 30 Skip to step 32.

---

Step 31 Select the **Add New** button.

Existing Relationships Eligible for Health [Add New](#)

Select a dependent below. If a dependent is not listed, select the **Add New** button.

	Name	Date of Birth	Relationship	Medical
No results found.				

[Continue](#) [Cancel](#) [Return](#)

---

Step 32 Complete or update the Person Details section if necessary. You may update if the dependent is not an active employee at a PERS-contracting agency.

---

Step 33 Does the dependent have the same address as your employee?

**Yes:** Skip to step 37.

**No:** Deselect the Address is the same as Primary Subscriber check box.

Address Details

Address is the same as Primary Subscriber

Address Type:\* [Mailing Address](#)

---

Step 34 Complete the Address Details section.

---

Step 35 Select the **Save & Continue** button.

---

Step 36 Select the **Confirm** button.

---

Step 37 Select the **Save & Continue** button.

---

Step 38 Is this dependent in a parent-child relationship?

**Yes:** Select the **Maintain Certification** link.

Dependent Information

Parent-Child Relationship Information

Certification Submitted: No [Maintain Certification](#)

**No:** Skip to step 43.

Step 39 Select the Certify Dependent check box.

**Parent-Child Relationship Certification**

Please complete the following certification/recertification:

The Public Employee's Medical and Hospital Care Act (PEMHCA) and regulations allow for the enrollment of a child (other than natural, adopted, or step-child) in the CalPERS-sponsored health plan when the Employee or Annuitant has a "parent-child relationship" with the child. The child must be under the age of 26 (except for certain disabled dependents).

In order to enroll or continue enrollment in a CalPERS-sponsored health plan, please certify the parent-child relationship by selecting the appropriate certification reason.

Name	Parent-Child Relationship Certification Expiration Date	Certify Dependent Checkbox
Kitty Kooper	03/31/2025	<input type="checkbox"/> Certify Dependent

Step 40 Select the disclaimer check box.

Name	Parent-Child Relationship Certification Expiration Date	Certify Dependent Checkbox
Kitty Kooper	03/31/2025	<input checked="" type="checkbox"/> Certify Dependent

I am a duly appointed and qualified representative of the agency/department.

I have reviewed the above affidavit, supporting documentation, and verified the identity of the subscriber submitting this affidavit.

I retained copies of the subscriber's health and dental enrollment form(s) and all supporting documents to enroll/recertify the eligibility of the employee's dependent in a PCR.

Based on the review of the documentation and information provided I recommend enrolling/recertifying this dependent in a PCR based on the information provided and documentation attached [per CCR §599.500(o)].

[Save & Continue](#) [Return](#)

Step 41 Select the **Save & Continue** button.

Step 42 Below the Dependent Information section, select the **Save & Continue** button.

Step 43 Do they have additional dependents?

**Yes:** Return to step 27.

**No:** Continue to step 44.

Step 44 Select the **Save & Continue** button.

### Select Health Plan

Step 45 Select the **medical plan** radio button.

Medical Plan Selections			
Plan Name	Party	Premium	
<input checked="" type="radio"/> Anthem Blue Cross Select HMO - Region 1	Self/B and 2+/B	2961.04	
<input type="radio"/> Anthem Blue Cross Traditional HMO - Region 1	Self/B and 2+/B	3483.22	
<input type="radio"/> Blue Shield Access+ - Region 1	Self/B and 2+/B	2799.78	

Step 46 Enter a medical provider(s) if the employee indicated a primary care physician.

Provider Information		
Name	Dependent Type	Medical Provider
Joe Jones	Self	<input type="text"/>
Jill Jones	Spouse	<input type="text"/>
Kitty Kooper	Parent-Child	<input type="text"/>

[Save & Continue](#) [Cancel](#) [Clear](#) [Return](#)

Ensure all dependents are listed. If you need to make a correction, select the **Return** link at bottom left.

Step 47 Select the **Save & Continue** button.

Step 48

Select one of the four option links in the health transaction confirmation.

**Health Transaction Confirmation**

The transaction successfully processed.

[Print the health transaction confirmation.](#)

[Add another transaction for this subscriber.](#)

[Process a new transaction for a different subscriber.](#)

[Return to home page.](#)

**Tip:** The print option provides details in a PDF format in a separate browser window. Confirm that the transaction completed accurately. To correct a transaction with a:

- **Future effective date:** Rescind the transaction and re-process the new health enrollment if you forgot a dependent or chose the incorrect plan.
- **Retroactive effective date:** Contact CalPERS.

**Health Transaction Confirmation**

The following transaction successfully processed on 08/28/2024.

CalPERS ID: 2612367457  
Subscriber Name: Joe Jones

Health Event Type: New Enrollment  
Health Event Reason: Time Base & Tenure

Effective Date: 09/01/2024  
Event Date: 08/28/2024  
Received Date: 08/28/2024

Health Plan Name: Anthem Blue Cross Select

Covered Persons:

Covered Person	Relationship
Joe Jones	Self
Kitty Kooper	Niece
Jill Jones	Spouse

**You have completed this scenario.**

---

## Scenario 2: Add Dependent

### System Logic

- Social Security number (SSN) fields are required when adding a spouse or domestic partner. If they do not have an SSN, contact CalPERS to add the dependent.
- You can enroll a dependent child without an SSN by bypassing the warning message. Follow up within 90 days to add their SSN (refer to unit 4).
- When adding multiple dependents within one transaction, the health event reason must be the same. If not, process a separate health transaction for each unique health event reason.

### Step Actions (26 Steps)

#### Add Health Enrollment Transaction

Step 1 Select the **Reporting** global navigation tab.

Step 2 Within the Create or Edit Report section, select Add or Edit Health Enrollment from the Method drop-down list.

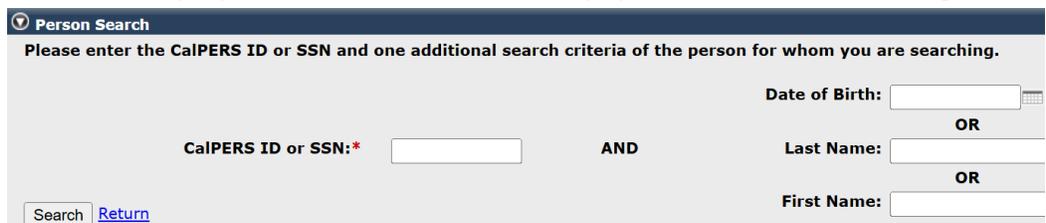


The screenshot shows a navigation menu with tabs: Home, Profile, Reporting, Person Information, Education, and Other Organizations. Below these are sub-tabs: Manage Reports, Billing and Payments, Payroll Schedule, Out-of-Class Validation, and Membership. A 'Common Tasks' section is expanded to show a 'Menu' with options: Organization Search and Adjustment Reports. The 'Create or Edit Report' section is also expanded, showing a 'Method:' dropdown menu with 'Add or Edit Health Enrollment' selected and highlighted with a red box. Other fields visible include 'Name: City Name' and 'CalPERS ID: 9876543210'. A 'Continue' button is located to the right of the dropdown.

Step 3 Select the **Continue** button.

#### Search for the Subscriber

Step 4 Enter the employee's CalPERS ID or SSN and populate one field on the right.

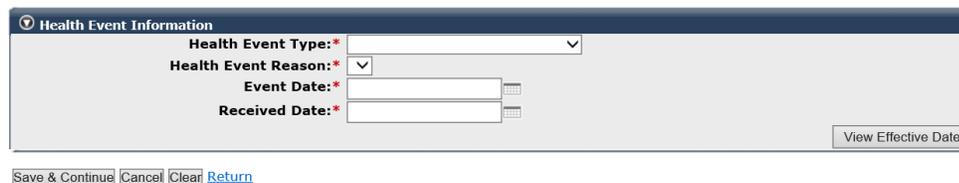


The screenshot shows the 'Person Search' form. It includes a header 'Person Search' and a prompt: 'Please enter the CalPERS ID or SSN and one additional search criteria of the person for whom you are searching.' The form has three main input areas: 'CalPERS ID or SSN:\*' with a text box, 'AND' with a dropdown menu, and a section on the right with three fields: 'Date of Birth:' with a date picker, 'Last Name:' with a text box, and 'First Name:' with a text box. There are 'OR' labels between the Date of Birth and Last Name fields, and between the Last Name and First Name fields. A 'Search' button and a 'Return' link are at the bottom left.

Step 5 Select the **Search** button.

#### Input Health Event Information

Step 6 Complete the Health Event Information section.



The screenshot shows the 'Health Event Information' form. It has a header 'Health Event Information' and four required fields: 'Health Event Type:\*' with a dropdown menu, 'Health Event Reason:\*' with a dropdown menu, 'Event Date:\*' with a date picker, and 'Received Date:\*' with a date picker. A 'View Effective Date' button is located at the bottom right. At the bottom left, there are buttons for 'Save & Continue', 'Cancel', 'Clear', and 'Return'.

Step 7 Select the **View Effective Date** button at bottom right.

Step 8 Select the **Save & Continue** button.

---

### Adding Dependents

Step 9 Is the dependent listed in the Existing Relationships Eligible for Health section?  
**Yes:** Select the dependent's check box.

**No:** Skip to step 12.

---

Step 10 Do you need to update the dependent's demographics or address?

**Yes:** Select the **Update Demographics** link.

Name	Date of Birth	Relationship	Medical	Parent-Child Relationship	Provider
<input checked="" type="checkbox"/> Adams, Annie	05/18/2012	Child	No		<a href="#">Update Demographics</a>

**No:** Select the **Continue** button, then skip to step 24.

---

Step 11 Skip to step 13.

---

Step 12 Within the Existing Relationships Eligible for Health section, select the **Add New** button.

[Add New](#)

No results found.

[Continue](#) [Cancel](#) [Return](#)

---

Step 13 Complete or update the Person Details section.

---

Step 14 Is the dependent's address the same as your employee's?

**Yes:** Skip to step 18.

**No:** Deselect the Address is the same as Primary Subscriber check box.

Address is the same as Primary Subscriber

Address Type:\* [Mailing Address](#)

---

Step 15 Complete the Address Details section.

---

Step 16 Select the **Save & Continue** button.

---

Step 17 Select the **Confirm** button.

---

Step 18 Select the **Save & Continue** button.

---

Step 19 Is the dependent in a parent-child relationship?

**Yes:** Select the **Provide Certification** link.

**No:** Skip to step 24.

---

Step 20 Select the Certify Dependent check box.

Name	Parent-Child Relationship Certification Expiration Date	Certify Dependent Checkbox
Kitty Kooper	01/31/2024	<input type="checkbox"/> Certify Dependent

Step 21 Select the disclaimer check box.

Name	Parent-Child Relationship Certification Expiration Date	Certify Dependent Checkbox
Kitty Kooper	03/31/2025	<input checked="" type="checkbox"/> Certify Dependent

\* I am a duly appointed and qualified representative of the agency/department.

I have reviewed the above affidavit, supporting documentation, and verified the identity of the subscriber submitting this affidavit.

I retained copies of the subscriber's health and dental enrollment form(s) and all supporting documents to enroll/recertify the eligibility of the employee's dependent in a PCR.

Based on the review of the documentation and information provided I recommend enrolling/recertifying this dependent in a PCR based on the information provided and documentation attached [per CCR §599.500(o)].

Step 22 Select the **Save & Continue** button.

Step 23 If the employee provided a physician name for the dependent, enter the physician's name in the Provider field.

Step 24 Do they have additional dependents to add for this health event reason?

**Yes:** Return to step 9.

**No:** Continue to step 25.

Step 25 Under the Existing Relationships Eligible for Health section, select the **Continue** button.

Existing Relationships Eligible for Health <a href="#">Add New</a>					
Select a dependent below. If a dependent is not listed, select the <b>Add New</b> button.					
Name	Date of Birth	Relationship	Medical	Parent-Child Relationship	Provider
<input type="checkbox"/> Liinamo, Pip X	10/02/1986	Child	No		
<input type="checkbox"/> Liinamo, Liber Richelle	12/13/1984	Child	No		
<input checked="" type="checkbox"/> Kooper, Kitty	09/15/2012	Niece	Yes	<a href="#">Update Certification</a>	<input type="text"/>

[Return](#)

Step 26 Select one of the four option links in the health transaction confirmation.

### Health Transaction Confirmation

The transaction successfully processed.

[Print the health transaction confirmation.](#)

[Add another transaction for this subscriber.](#)

[Process a new transaction for a different subscriber.](#)

[Return to home page.](#)

**You have completed this scenario.**

## Scenario 3: Delete Dependent

### System Logic

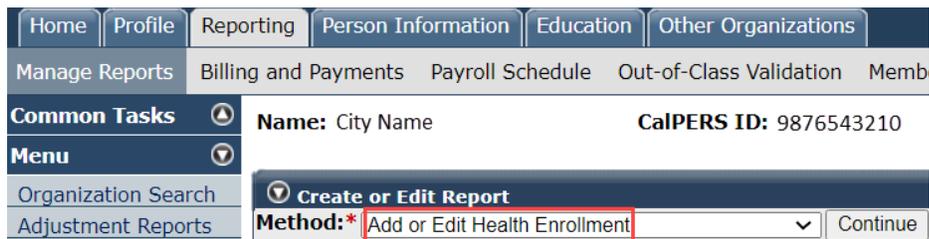
- When deleting multiple dependents within one health transaction, the health event reason must be the same. If not, process a separate health transaction for each health event reason.
- When deleting a former spouse due to divorce or domestic partner due to termination of relationship with the Secretary of State, allow myCalPERS to automatically delete dependents with the relationship of Step Child or Domestic Partner Child.

### Step Actions (11 Steps)

#### Add Health Enrollment Transaction

Step 1 Select the **Reporting** global navigation tab.

Step 2 Within the Create or Edit Report section, select Add or Edit Health Enrollment from the Method drop-down list.

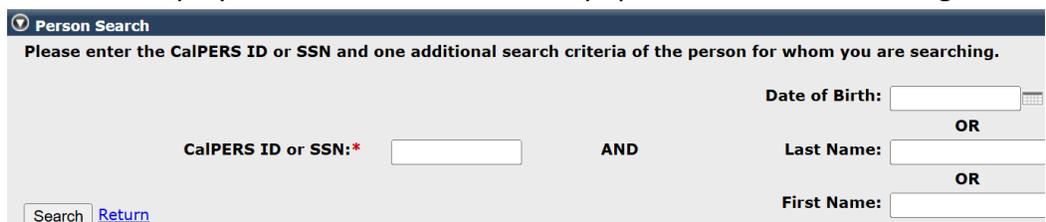


The screenshot shows a navigation menu with tabs for Home, Profile, Reporting, Person Information, Education, and Other Organizations. Under the Reporting tab, there are sub-tabs for Manage Reports, Billing and Payments, Payroll Schedule, Out-of-Class Validation, and Membership. A 'Common Tasks' menu is open, showing 'Create or Edit Report' selected. Below this, the 'Method' dropdown is set to 'Add or Edit Health Enrollment', which is highlighted with a red box. The 'Continue' button is visible to the right.

Step 3 Select the **Continue** button.

#### Search for the Subscriber

Step 4 Enter the employee's CalPERS ID or SSN and populate one field on the right.

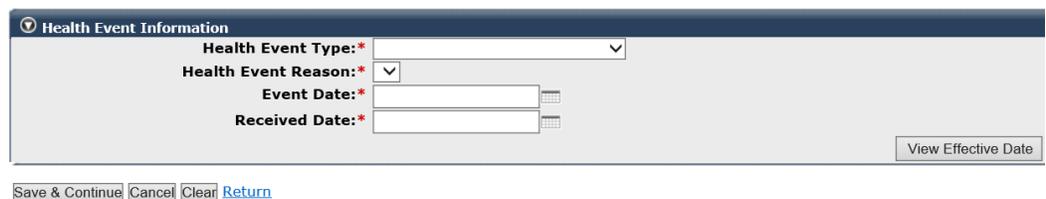


The screenshot shows the 'Person Search' form. It prompts the user to enter the CalPERS ID or SSN and one additional search criteria. There are input fields for 'CalPERS ID or SSN', 'Date of Birth', 'Last Name', and 'First Name'. The 'Date of Birth' field has a calendar icon. The 'AND' and 'OR' options are used to combine search criteria. A 'Search' button and a 'Return' link are at the bottom left.

Step 5 Select the **Search** button.

#### Input Health Event Information

Step 6 Complete the Health Event Information section.



The screenshot shows the 'Health Event Information' form. It has four required fields: 'Health Event Type', 'Health Event Reason', 'Event Date', and 'Received Date'. Each field has a dropdown menu or a date picker. A 'View Effective Date' button is located at the bottom right. At the bottom left, there are buttons for 'Save & Continue', 'Cancel', 'Clear', and 'Return'.

Step 7 Select the **View Effective Date** button at bottom right.

Step 8 Select the **Save & Continue** button.

## Delete Dependent(s)

Step 9 Select the check box(es) next to the dependent(s) being deleted.

Existing Relationships Eligible for Health				
	Name	Date of Birth	Relationship	Medical
<input type="checkbox"/>	Wilson, Willy	06/14/2001	Child	Yes
<input type="checkbox"/>	Wilson, Wanda	05/04/1979	Spouse	Yes
<input type="checkbox"/>	Wilson, Wally	03/18/2013	Child	Yes
<input type="checkbox"/>	Smith, Sam	06/02/2004	Step Child	Yes

[Continue](#) [Cancel](#) [Return](#)

Step 10 Select the **Continue** button.

Step 11 Select one of the four option links in the health transaction confirmation.

### Health Transaction Confirmation

The transaction successfully processed.

[Print the health transaction confirmation.](#)

[Add another transaction for this subscriber.](#)

[Process a new transaction for a different subscriber.](#)

[Return to home page.](#)

**You have completed this scenario.**

## Scenario 4: Change Health Plan

### System Logic

#### Move Health Event Reason

- Prior to processing a plan change, the new address should be reflected in myCalPERS.
- For central-state agencies, an address change in Personnel Information Management System (PIMS) will reflect in myCalPERS in 1-2 business days.

#### Work ZIP Code

To start or stop using the work ZIP code for health eligibility, process an Update Enrollment health event type prior to the plan change with the following health event reasons:

- *Change Eligibility ZIP* to add the work ZIP code
- *Cancel Eligibility ZIP* to cancel a work ZIP code

### Step Actions (14 Steps)

#### Add Health Enrollment Transaction

Step 1 Select the **Reporting** global navigation tab.

Step 2 Within the Create or Edit Report section, select Add or Edit Health Enrollment from the Method drop-down list.

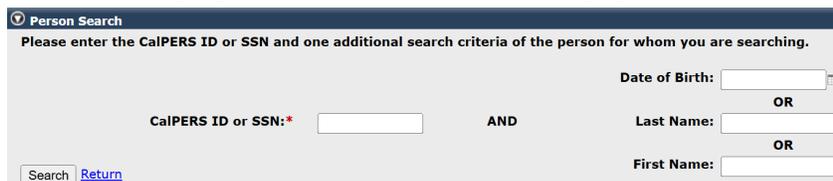


The screenshot shows a navigation menu with tabs: Home, Profile, Reporting, Person Information, Education, and Other Organizations. Under the Reporting tab, there are sub-items: Manage Reports, Billing and Payments, Payroll Schedule, Out-of-Class Validation, and Membership. Below this is a 'Common Tasks' section with a search bar for 'Name: City Name' and 'CalPERS ID: 9876543210'. A 'Menu' section is expanded, showing 'Create or Edit Report' with a dropdown menu where 'Add or Edit Health Enrollment' is selected and highlighted with a red box. Other options in the menu include Organization Search, Adjustment Reports, and a Continue button.

Step 3 Select the **Continue** button.

#### Search for the Subscriber

Step 4 Enter the employee's CalPERS ID or SSN and populate one field on the right.

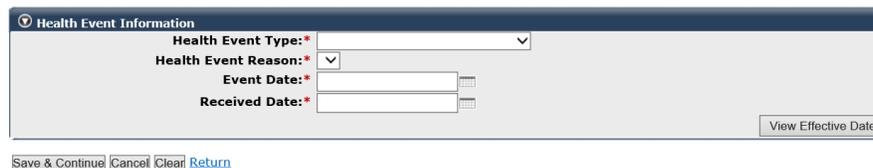


The screenshot shows a 'Person Search' form with the instruction: 'Please enter the CalPERS ID or SSN and one additional search criteria of the person for whom you are searching.' There are three input fields: 'CalPERS ID or SSN:\*', 'Date of Birth:', and 'Last Name:'. There are 'AND' and 'OR' operators between the fields. A 'First Name:' field is also present. A 'Search' button and a 'Return' link are at the bottom left.

Step 5 Select the **Search** button.

#### Input Health Event Information

Step 6 Complete the Health Event Information section.



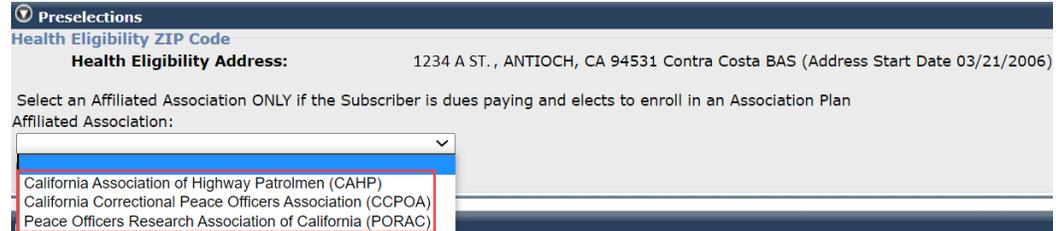
The screenshot shows a 'Health Event Information' form with the following fields: 'Health Event Type:\*' (dropdown), 'Health Event Reason:\*' (dropdown), 'Event Date:\*' (calendar), and 'Received Date:\*' (calendar). A 'View Effective Date' button is at the bottom right. At the bottom left, there are buttons for 'Save & Continue', 'Cancel', 'Clear', and 'Return'.

Step 7 Select the **View Effective Date** button at bottom right.

Step 8 Select the **Save & Continue** button.

Step 9 Are they a dues-paying member of an affiliated association who is electing to enroll in an association plan?

**Yes:** Select the member's association from the drop-down list.



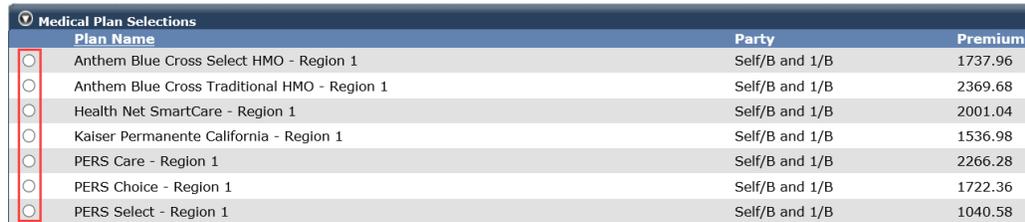
**Preselections**  
Health Eligibility ZIP Code  
Health Eligibility Address: 1234 A ST., ANTIOCH, CA 94531 Contra Costa BAS (Address Start Date 03/21/2006)  
Select an Affiliated Association ONLY if the Subscriber is dues paying and elects to enroll in an Association Plan  
Affiliated Association:  
California Association of Highway Patrolmen (CAHP)  
California Correctional Peace Officers Association (CCPOA)  
Peace Officers Research Association of California (PORAC)

**No:** Skip to step 11.

Step 10 Select the **Display Plans** button.

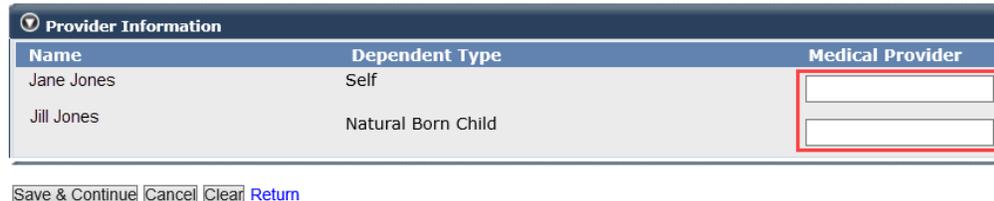
### Change Health Plan

Step 11 Select the **health plan** radio button chosen by the subscriber.



Plan Name	Party	Premium
<input type="radio"/> Anthem Blue Cross Select HMO - Region 1	Self/B and 1/B	1737.96
<input type="radio"/> Anthem Blue Cross Traditional HMO - Region 1	Self/B and 1/B	2369.68
<input type="radio"/> Health Net SmartCare - Region 1	Self/B and 1/B	2001.04
<input type="radio"/> Kaiser Permanente California - Region 1	Self/B and 1/B	1536.98
<input type="radio"/> PERS Care - Region 1	Self/B and 1/B	2266.28
<input type="radio"/> PERS Choice - Region 1	Self/B and 1/B	1722.36
<input type="radio"/> PERS Select - Region 1	Self/B and 1/B	1040.58

Step 12 Enter a medical provider(s) if the employee indicated primary care physician(s).

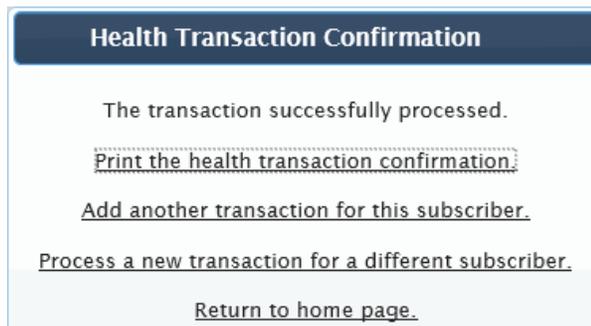


Name	Dependent Type	Medical Provider
Jane Jones	Self	<input type="text"/>
Jill Jones	Natural Born Child	<input type="text"/>

Save & Continue Cancel Clear Return

Step 13 Select the **Save & Continue** button.

Step 14 Select one of the four option links in the health transaction confirmation.



**Health Transaction Confirmation**

The transaction successfully processed.

[Print the health transaction confirmation.](#)

[Add another transaction for this subscriber.](#)

[Process a new transaction for a different subscriber.](#)

[Return to home page.](#)

**You have completed this scenario.**

## Scenario 5: Cancel Coverage

### System Logic

#### Leave of Absence (Not Family Medical Leave or Maternity/Paternity Leave)

- After the employee's appointment reflects a leave of absence that is not a family medical leave (FMLA) or maternity/paternity leave, the health benefits will automatically cancel.
- After the leave of absence (those other than FMLA or maternity/paternity leave) is reflected in myCalPERS, verify the health benefits is cancelled to ensure correct billing.
- For steps on updating nonPERS and CalSTRS employee appointments, refer to the myCalPERS [Health Enrollment Supplement \(PDF\)](#) student guide.

#### Permanent Separation

- Do not process a Cancel Coverage transaction for a permanently separating employee. Add the separation event to their appointment, and myCalPERS will cancel the health benefits.
- After the permanent separation is reflected in myCalPERS, verify the health benefits is cancelled to ensure there won't be any billing issues.

#### Voluntary Cancellation Effective More Than a Month in the Future

For this request, you can process the transaction by adjusting the *received date* to the month prior to the effective date.

- **Event Date:** Day of the employee request
- **Received Date:** Month prior to the effective date/01/year

### Step Actions (9 Steps)

#### Add Health Enrollment Transaction

Step 1 Select the **Reporting** global navigation tab.

---

Step 2 Within the Create or Edit Report section, select Add or Edit Health Enrollment from the Method drop-down list.



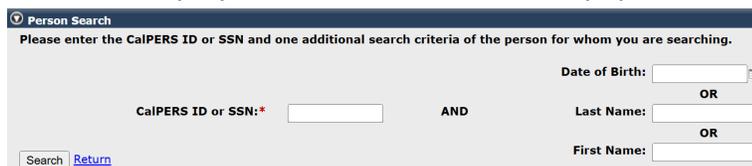
The screenshot shows the 'Reporting' tab selected in the top navigation bar. Below it, there are several sub-tabs: 'Manage Reports', 'Billing and Payments', 'Payroll Schedule', 'Out-of-Class Validation', and 'Members'. Under 'Manage Reports', there is a 'Common Tasks' section with a 'Create or Edit Report' button. A dropdown menu is open from this button, showing 'Method:\* Add or Edit Health Enrollment' selected. A 'Continue' button is visible to the right of the dropdown.

Step 3 Select the **Continue** button.

---

#### Search for the Subscriber

Step 4 Enter the employee's CalPERS ID or SSN and populate one field on the right.



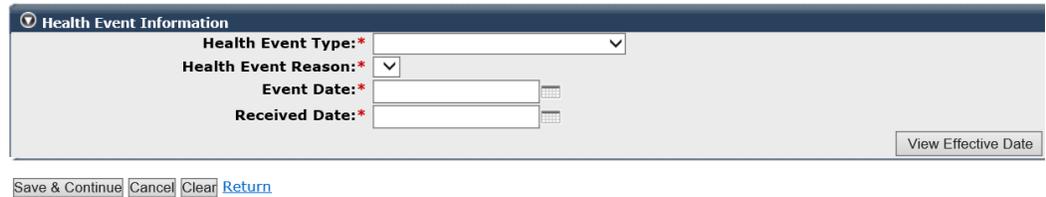
The screenshot shows the 'Person Search' form. It has a title bar 'Person Search' and a subtitle 'Please enter the CalPERS ID or SSN and one additional search criteria of the person for whom you are searching.' There are four input fields: 'CalPERS ID or SSN:\*' (with a red asterisk), 'Date of Birth:', 'Last Name:', and 'First Name:'. The fields are arranged in a grid with 'AND' between the first and second fields, and 'OR' between the last and first name fields. There is a 'Search' button and a 'Return' link at the bottom left.

Step 5 Select the **Search** button.

---

### Input Health Event Information

Step 6 Complete the Health Event Information section.



The screenshot shows a form titled "Health Event Information" with a dark blue header. Below the header, there are four fields: "Health Event Type:" with a dropdown menu, "Health Event Reason:" with a dropdown menu, "Event Date:" with a text input and a calendar icon, and "Received Date:" with a text input and a calendar icon. A "View Effective Date" button is located at the bottom right of the form. Below the form, there are four buttons: "Save & Continue", "Cancel", "Clear", and "Return".

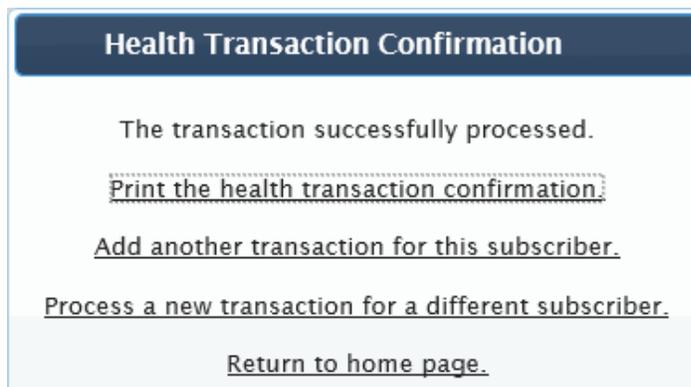
Step 7 Select the **View Effective Date** button at bottom right.

---

Step 8 Select the **Save & Continue** button.

---

Step 9 Select one of the four option links in the health transaction confirmation.



The screenshot shows a confirmation page with a dark blue header that reads "Health Transaction Confirmation". Below the header, the text says "The transaction successfully processed." followed by four underlined links: "Print the health transaction confirmation.", "Add another transaction for this subscriber.", "Process a new transaction for a different subscriber.", and "Return to home page.".

**You have completed this scenario.**

---

## Unit 2: Rescission

A rescission is reversing a transaction to make a correction or due to a subscriber request. In this unit, you will learn how to rescind a *permissive* transaction with a *future effective date*.

### Scenario

You processed a plan change with a future effective date. Today, the employee let you know they changed their mind and wants to remain with their current plan.

### System Logic

You may not process a rescission for a mandatory event or if it is after the effective date. To rescind these transactions, contact CalPERS.

### Step Actions (12 Steps)

Step 1 Select the **Reporting** global navigation tab.

Step 2 Within the Create or Edit Report section, select Add or Edit Health Enrollment from the Method drop-down list.



Home Profile Reporting Person Information Education Other Organizations

Manage Reports Billing and Payments Payroll Schedule Out-of-Class Validation Memb

Common Tasks (up arrow)

Menu (down arrow)

Organization Search

Adjustment Reports

Name: City Name CalPERS ID: 9876543210

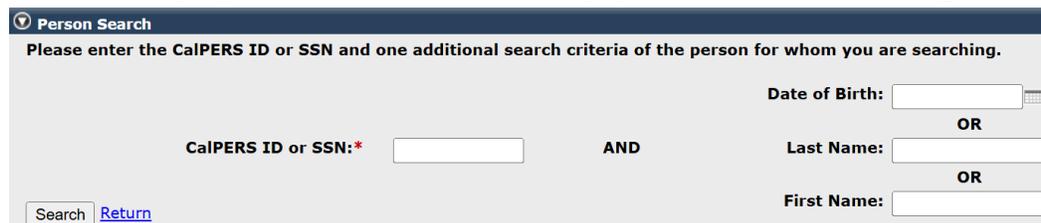
Create or Edit Report

Method:\* Add or Edit Health Enrollment Continue

Step 3 Select the **Continue** button.

### Search for the Subscriber

Step 4 Enter the employee's CalPERS ID or SSN and populate one field on the right.



Person Search

Please enter the CalPERS ID or SSN and one additional search criteria of the person for whom you are searching.

CalPERS ID or SSN:\* [input] AND [input]

Date of Birth: [input]

OR

Last Name: [input]

OR

First Name: [input]

Search Return

Step 5 Select the **Search** button.

### Rescind the Transaction

Step 6 Within the Demographics Information section, select the **Rescind an Existing Transaction** link.



Demographics Information

CalPERS ID: 0123456789

Rescind an Existing Transaction

Prefix:

First Name: Ellie Middle Name: E Last Name: Edwards

Suffix:

SSN: XXX-XX-9999 Date of Birth: 04/17/1977 Gender: Female

Step 7 Within the Health Enrollment History section, select the radio button associated to the future health event to be rescinded.

Health Enrollment History									
Rescind									
Effective Date	Health Event Type	Health Event Reason	Name	Health Benefit Type	Status	Appointment ID	Create Date	Change Date	
<input checked="" type="radio"/>	07/01/2024	Change Health Plan	Move	Ellie E Edwards	Medical	Future	495100	06/06/2024 11:36:11 AM	06/06/2024 11:36:11 AM

Step 8 Select the **Rescind** button.

Step 9 Complete the Rescission Confirmation section.

Transaction Details	
<b>Subscriber Name:</b> Ellie E Edwards <b>Subscriber CalPERS ID:</b> 0123456789 <b>Subscriber Date of Birth:</b> 04/17/1977 <b>Subscriber Coverage Type:</b> Basic <b>Health Event Type:</b> Change Health Plan <b>Health Event Reason:</b> 402 - Move <b>Health Benefit Type:</b> Medical <b>Health Plan Name:</b> Anthem Blue Cross Select HMO - Region 1 (5062) <b>Party Type:</b> Self/B and 1/B <b>Effective Date:</b> 07/01/2024 <b>Event Date:</b> 06/06/2024 <b>Received Date:</b> 06/06/2024 <b>Status:</b> <b>Appointment ID:</b> 495100	<b>Created Date:</b> 06/06/2024 11:36:11 AM <b>Change Date:</b> 06/06/2024 11:36:11 AM <b>Created by User:</b> Employer <b>Updated by User:</b> Employer <b>Reason for Rescission:</b> <b>Additional Information:</b>

[View Health Enrollment Summary](#)

Rescission Confirmation	
<b>Reason for Rescission:</b>	Subscriber Request
<b>Additional Information:</b>	On 6/6/24, employee requested to rescind their plan change.
<input type="button" value="Save and Continue"/>	

Step 10 Select the **Save and Continue** button.

Step 11 From the Health Event Information section, select the **Save & Continue** button.

Step 12 Select one of the four option links in the health transaction confirmation.

### Health Transaction Confirmation

The transaction successfully processed.

[Print the health transaction confirmation.](#)

[Add another transaction for this subscriber.](#)

[Process a new transaction for a different subscriber.](#)

[Return to home page.](#)

You have completed this scenario.

## Unit 3: Person Search Tool-Health Enrollment Details

In this unit, you will learn how to review health enrollment details by using the five left-side links (the five scenarios) for one of your employees enrolled in health benefits.

### System Logic

- You may access health details only for employees and retirees with your agency.
- myCalPERS automatically displays information as of the current date. A warning message displays when you’re accessing a future new health enrollment or a retroactive cancelled enrollee. To review their Health Enrollment Summary page, use the **Summary As-Of Date** left-side link and enter a date of when they had/will have health benefits with your agency.



- In most cases, a permanent separation or leave of absence (excluding FMLA or maternity/paternity leave) will cancel health benefits; however, verify the cancellation of a separated employee to ensure the correct billing of premiums.
- To clear the previous subscriber’s health benefits information, select the myCalPERS logo in the upper left.

### Contents

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Scenario 2: Enrollment History .....	26
Scenario 3: Deduction History .....	28
Scenario 4: Premium Search Tool .....	30
Scenario 5: Summary As-Of Date.....	33

## Scenario 1: Enrollment Summary

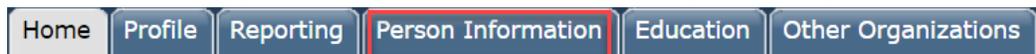
You will review subscriber health enrollment information including current and formerly covered dependents, health plan, total premium, and future health events.

### System Logic

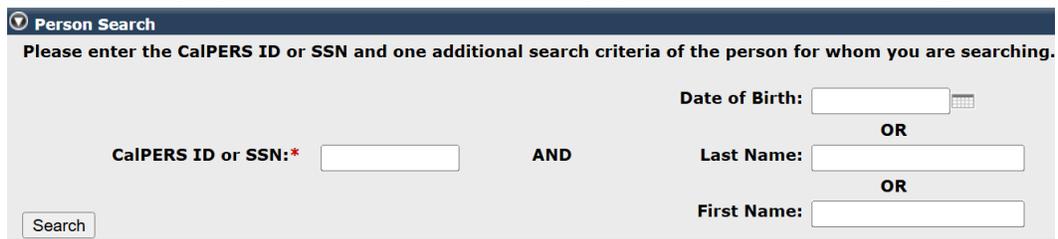
When the Enrollment Summary page is unavailable due to future-dated enrollments or a former subscriber, use the one of the other four left-side menu links to verify enrollment information and deductions.

### Step Actions (12 Steps)

Step 1 From the homepage, select the **Person Information** global navigation tab.



Step 2 Enter the employee's CalPERS ID or SSN and populate one field on the right.



**Person Search**  
Please enter the CalPERS ID or SSN and one additional search criteria of the person for whom you are searching.

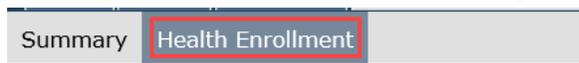
CalPERS ID or SSN:\*  AND Date of Birth:

Last Name:

First Name:

Step 3 Select the **Search** button.

Step 4 Select the **Health Enrollment** local navigation link.



Step 5 Select the first link under the Health Account column.



Health Account	Qualifying Participant Name	Qualifying CalPERS ID
<a href="#">CalPERS Employment</a>	JOE JONES	0123456789

[Health Account Summary](#)

Step 6 Review the Health Enrollment Information section.



**Health Enrollment Information**  
Your health enrollment is based on the following information: Health Enrollment Summary As Of: 02/01/2023

**Health Eligibility Information**

Appointment ID: 91618622	Medical Group: 001 UNREP UNIT A H M W & X
Employer CalPERS ID: 1262943822	Permanent Separation Date:
Employer: Agency Name	Retirement Date:
Division CalPERS ID: 1262943822	Health Benefit Appointment <a href="#">Yes</a>
Division: Agency Name	Same As Health Eligibility:
Agency Type: Public Agency	
Qualifying CalPERS ID: 0123456789	

**Enrollment Information**

Affiliated Retirement System: PERS	Health Eligibility Zip Code: 95650
Financially Responsible CalPERS ID: 0123456789	Zip Code Override Indicator: Yes
Payroll Office Code: 5	Override Zip Code Type: Employer Address
Affiliated Association:	Region: RG1
Health Account Status: Active Employment	County: Placer

Step 7 Review the Covered Persons Summary section for to review the current and former dependents. Each name is a link to their Covered Persons Health Information page.

Step 8 Is there a **View More Actions** link in the Covered Persons Summary section?  
**Yes:** Select the **View More Actions** link to expand the list of covered and formerly covered dependents.

Covered Persons Summary							View More Actions»
Below are your covered persons for health. Select the name of a covered person to view detailed health information.							
Name	Date of Birth	Dependent Type	Certified	Medical	Dental	Vision	
<a href="#">TADHIG LIEBAN</a>	05/02/1958	Self	NA	Basic	No	No	
<a href="#">ARUTYUN LIEBAN</a>	10/18/1965	Spouse	NA	Basic	No	No	
<a href="#">STULING LIEBAN</a>	07/01/1994	Natural Born Child	NA	Basic	No	No	
<a href="#">DOMINETTA DUBOSKI</a>	12/06/1995	Natural Born Child	NA	Basic	No	No	

**No:** Skip to step 10.

Step 9 If you selected the **View More Actions** link, select the **Enrollment Summary** left-side link to return to the previous Health Enrollment Summary page.

Common Tasks	Health Enrollment Information
<ul style="list-style-type: none"> <li>Menu</li> <li><b>Enrollment Summary</b></li> <li>Enrollment History</li> <li>Deduction History</li> <li>Premium Search Tool</li> <li>Summary As-Of Date</li> </ul>	Your health enrollment is based on the following information: <b>Health Eligibility Information</b> <b>Appointment ID:</b> 2233440  <b>Employer CalPERS ID:</b> 9876543210  <b>Employer:</b> City Name

Step 10 Review the Health Plan Summary section.

Health Plan Summary				
Below is your plan and premium information.				
Health Benefit Type	Health Plan Name	Party Type	Health Enrollment Status	Total Premium
Medical	Kaiser Permanente California Bay Area (1043)	Self/B and 2+/B	01/01/2016	\$1,906.81

Step 11 Review the Future Health Events section for transactions with future effective dates.

Future Health Events			
Below are your health events that are effective at a future date.			
Future Health Event Type	Future Health Event Reason	Future Effective Date	Health Notification
New Enrollment	Late or Loss of Coverage (Emp)	02/01/2023	
Update Enrollment	Establish Medical Group	02/01/2023	

Step 12 For state agencies, the Pending Health Events section will display if there is a pending dental enrollment into retirement transaction.

Pending Health Events					
Below are requests that require CalPERS review.					
Name	CalPERS ID	Pending Health Event Type	Pending Health Event Reason	Received Date	Status
ZANOTELLI CASTRO-AYALA	0123456789	New Enrollment	State Retiree - Dental Enrollment	01/01/2018	Pending Analyst Review

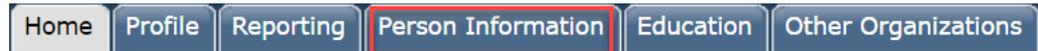
**You have completed this scenario.**

## Scenario 2: Enrollment History

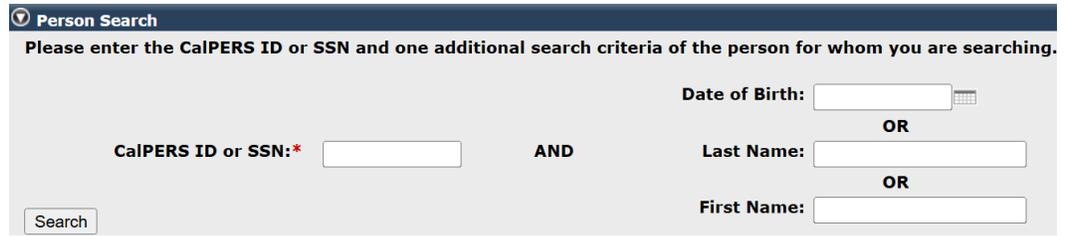
You will review all health enrollment transactions in chronological order including rescissions, effective dates, health event types, and future enrollment changes.

### Step Actions (11 Steps)

Step 1 From the homepage, select the **Person Information** global navigation tab.

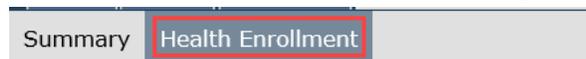


Step 2 Enter the employee's CalPERS ID or SSN and populate one field on the right.



Step 3 Select the **Search** button.

Step 4 Select the **Health Enrollment** local navigation link.



Step 5 Select the top link under the Health Account column.

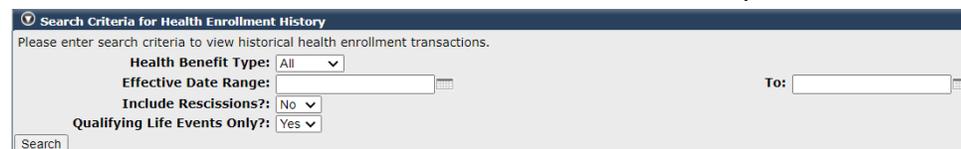


Health Account	Qualifying Participant Name	Qualifying CalPERS ID
<a href="#">CalPERS Employment</a>	JOE JONES	0123456789

Step 6 Select the **Enrollment History** link under the Menu left-side navigation.



Step 7 Do you want to filter your search to review specific transactions like a rescission?  
**Yes:** Use the Search Criteria for Health Enrollment History section.



**No:** Skip to step 9.

Step 8 Select the **Search** button.

Step 9

Under the Status column, select the link for transaction details to review the dates used to enter the transaction, if employer or CalPERS processed, and rescission notes.

Health Enrollment History								
Effective Date	Health Event Type	Health Event Reason	Name	Health Benefit Type	Status	Appointment ID	Create Date	Change Date
11/01/2023	Delete Dependent	Delete Dependent- Did not certify for Parent-Child Relationship	Taylor T Thomas	Medical	<a href="#">Rescinded</a>	91776650	10/02/2023 08:02:24 PM	10/13/2023 11:11:46 AM
11/01/2022	Delete Dependent	Delete Dependent- Did not certify for Parent-Child Relationship	Taylor T Thomas	Medical	<a href="#">Rescinded</a>	91776650	10/03/2022 08:00:54 PM	04/21/2023 10:40:28 AM
12/01/2021	Delete Dependent	26 year old delete - Batch	Jenni J Jones	Medical	<a href="#">Confirmed</a>	91776650	11/01/2021 06:58:23 AM	11/01/2021 06:58:23 AM
09/01/2021	Add Dependent	Parent-Child Relationship	Taylor T Thomas	Medical	<a href="#">Confirmed</a>	91776650	08/24/2021 09:48:35 AM	08/24/2021 09:48:35 AM

Step 10

Select the **View Health Enrollment Summary** link for the health enrollment summary as of the effective date of the transaction.

**Transaction Details**

**Subscriber Name:** JOE JONES  
**Subscriber CalPERS ID:** 0123456789  
**Subscriber Date of Birth:** 11/11/1972  
**Subscriber Coverage Type:** Basic  
**Health Event Type:** Add Dependent  
**Health Event Reason:** 203 - Parent-Child Relationship  
**Health Benefit Type:** Medical  
**Health Plan Name:** Kaiser Permanente California - Region 1 (5333)  
**Party Type:** Self/B and 2+/B  
**Effective Date:** 09/01/2021  
**Event Date:** 07/01/2021  
**Received Date:** 08/24/2021  
**Status:**  
**Appointment ID:** 91776650

**Created Date:** 08/24/2021 09:48:35 AM  
**Change Date:** 08/24/2021 09:48:35 AM  
**Created by User:** Employer  
**Updated by User:** Employer  
**Reason for Rescission:**  
**Additional Information:**

**Dependent List**

Dependent Name	Dependent CalPERS ID	Dependent Date of Birth	Dependent Coverage Type
Taylor T Thomas	1234567890	03/03/2003	Basic

[View Health Enrollment Summary](#)

Step 11

Review the health information based on the effective date of the transaction.

**Health Enrollment Information**

Your health enrollment is based on the following information:

**Health Enrollment Summary As Of:** [09/01/2021](#)

**Health Eligibility Information**

**Appointment ID:** 91776650  
**Employer CalPERS ID:** 9876543210  
**Employer:** City Name  
**Division CalPERS ID:** 9876543210  
**Division:** City Name  
**Agency Type:** Public Agency  
**Qualifying CalPERS ID:** 0123456789

**Medical Group:** 004 UPE, LOCAL 790 UNIT B C D  
**Permanent Separation Date:**  
**Retirement Date:**  
**Health Benefit Appointment Yes Same As Health Eligibility:**

**Enrollment Information**

**Affiliated Retirement System:** PERS  
**Financially Responsible CalPERS ID:** 0123456789  
**Payroll Office Code:** 5  
**Affiliated Association:**  
**Health Account Status:** Active Employment

**Health Eligibility Zip Code:** 94601  
**Zip Code Override Indicator:** No  
**Override Zip Code Type:**  
**Region:** RG1  
**County:** Alameda

**Covered Persons Summary** [View More Actions](#)

Below are your covered persons for health. Select the name of a covered person to view detailed health information.

Name	Date of Birth	Dependent Type	Certified	Medical	Dental	Vision
<a href="#">JOE JONES</a>	11/11/1972	Self	NA	Basic	No	No
<a href="#">Pam Parks</a>	11/12/1964	Spouse	No	Basic	No	No
<a href="#">Paige Parks</a>	05/05/1995	Step Child	No	Basic	No	No
<a href="#">Taylor T Thomas</a>	03/03/2003	Parent-Child	No	Basic	No	No

**Health Plan Summary**

Below is your plan and premium information.

Health Benefit Type	Health Plan Name	Party Type	Health Enrollment Status	Total Premium
Medical	Kaiser Permanente California - Region 1 (5333)	Self/B and 2+/B	01/01/2020	\$2,115.46

You have completed this scenario.

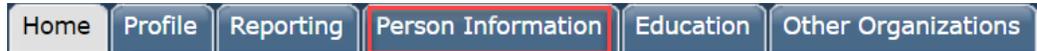
### Scenario 3: Deduction History

You will review your employee’s history of premium payments and credits. The information includes the coverage month, plan name, party type, and participant/employer share.

You also have access to the deduction history for your retirees and former employees.

#### Step Actions (9 Steps)

Step 1 From the homepage, select the **Person Information** global navigation tab.



Step 2 Enter the employee’s CalPERS ID or SSN and populate one field on the right.

Person Search

Please enter the CalPERS ID or SSN and one additional search criteria of the person for whom you are searching.

CalPERS ID or SSN:\*  AND Date of Birth:

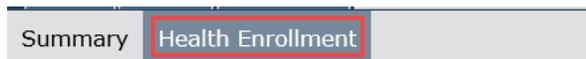
Last Name:

First Name:

Search

Step 3 Select the **Search** button.

Step 4 Select the **Health Enrollment** local navigation link.



Step 5 Select the top link under the Health Account column.

Health Account	Qualifying Participant Name	Qualifying CalPERS ID
CalPERS Employment	JOE JONES	0123456789

Health Account Summary

Step 6 Under the left-side menu, select the **Deduction History** link.

Step 7 Within the Search Criteria section, you must select from the Deduction Source drop-down list:

- **Benefit Roll:** All CalPERS retiree health deductions and employer share. The Participant Share column displays what was deducted from the retiree’s warrant.
- **PA Billing:** Public agency (PA) and school billed amounts for active and retired CalPERS, CalSTRS, and non-PERS subscribers.
- **SCO:** Amount paid for active central-state employee health premiums.
- **Non-Central:** Amount for active non-central state employee health premiums.

Step 8 Select the **Search** button to review deduction history.

Step 9 Review the Deduction History section.

Deduction History									
Coverage Month	Status	Employer CalPERS ID	Plan Name	Party Type	Plan Code	Participant Share	Employer Share	Medicare Reimbursement	
October 2022	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,228.36	\$0.00	
September 2022	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,228.36	\$0.00	
August 2022	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,228.36	\$0.00	
July 2022	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,228.36	\$0.00	
June 2022	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,228.36	\$0.00	
May 2022	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,228.36	\$0.00	
April 2022	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,228.36	\$0.00	
March 2022	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,228.36	\$0.00	
February 2022	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,228.36	\$0.00	
January 2022	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,228.36	\$0.00	
December 2021	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,115.46	\$0.00	
November 2021	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,115.46	\$0.00	
October 2021	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,115.46	\$0.00	
September 2021	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,115.46	\$0.00	
August 2021	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,115.46	\$0.00	
July 2021	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,115.46	\$0.00	
June 2021	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,115.46	\$0.00	
May 2021	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,115.46	\$0.00	
April 2021	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,115.46	\$0.00	
March 2021	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,115.46	\$0.00	
February 2021	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,115.46	\$0.00	
January 2021	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$2,115.46	\$0.00	
December 2020	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$1,998.07	\$0.00	
November 2020	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$1,998.07	\$0.00	
October 2020	Employment	1262943822	Kaiser Permanente California - Region 1	Self/B and 2+/B	5333	\$0.00	\$1,998.07	\$0.00	

Showing records 1 - 25 | First << Previous 1 2 3 4 5 6 7 8 9 Next >> Last | View Max

**Public agency and schools:** An active employee will have their full premium under the Employer Share column because CalPERS bills your agency for their full premiums. A retiree, unless they're non-PERS, will display their portion and your employer contribution.

**State agencies:** An active employee and retiree will have their portion and the state contribution displayed. If the employee has consolidated benefits (CoBen), then the full premium will display under the Participant Share column. If a coverage month is not displayed, then premiums have not been paid.

**You have completed this scenario.**

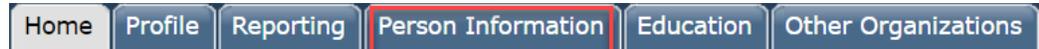
## Scenario 4: Premium Search Tool

You will assist your employee to search for available health plans by eligibility ZIP code and those associated with a specific provider or medical group.

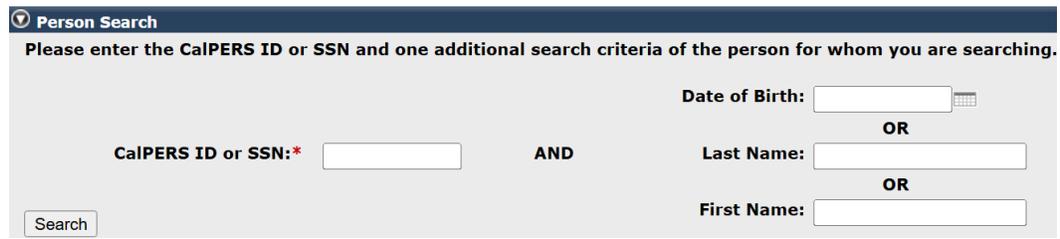
You will also compare benefits and premiums for the available plans.

### Step Actions (14 Steps)

Step 1 From the homepage, select the **Person Information** global navigation tab.



Step 2 Enter the employee's CalPERS ID or SSN and populate one field on the right.



**Person Search**  
Please enter the CalPERS ID or SSN and one additional search criteria of the person for whom you are searching.

CalPERS ID or SSN:\*  AND Date of Birth:

Last Name:

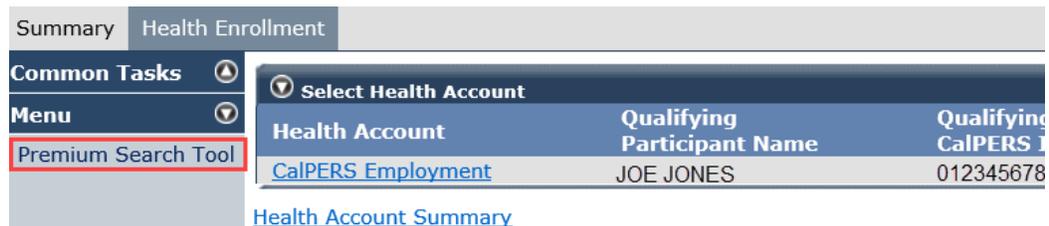
First Name:

Step 3 Select the **Search** button.

Step 4 Select the **Health Enrollment** local navigation link.



Step 5 Select the **Premium Search Tool** link under the Menu left-side navigation.



Summary Health Enrollment

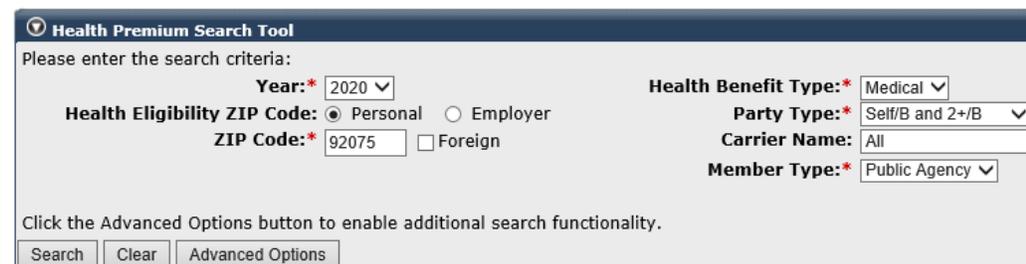
**Common Tasks** **Menu**

**Premium Search Tool**

Health Account	Qualifying Participant Name	Qualifying CalPERS ID
<a href="#">CalPERS Employment</a>	JOE JONES	012345678

[Health Account Summary](#)

Step 6 **Optional:** Use the filter(s) in the Health Premium Search Tool section.



**Health Premium Search Tool**  
Please enter the search criteria:

Year:\* 2020   
Health Eligibility ZIP Code:  Personal  Employer  
ZIP Code:\* 92075  Foreign  
Health Benefit Type:\* Medical   
Party Type:\* Self/B and 2+/B   
Carrier Name: All  
Member Type:\* Public Agency

Click the Advanced Options button to enable additional search functionality.

Step 7 Do you want to search for plans affiliated with a physician or medical group?

**Yes:** Continue to step 8.

**No:** Skip to step 10.

Step 8

Enter a provider’s (primary care or specialist) first or last name or medical group, and the health plans with which they are associated will display. *Subscribers should contact the health plan to verify if the provider is available.*

1. Select the **Advanced Options** button.
2. Select the **Provider Type** radio button.
3. If you want to search for plans associated with a physician medical group, select the **Medical Group** radio button.
4. Change the mile radius from the drop-down list if necessary.
5. Enter a provider’s first and/or last name or medical group name. *Do not press the Enter key.*
6. Select the doctor, specialist, or medical group from the list below.
7. Select the **Search** button at bottom left of the section.
8. Review the *Provider Available?* column to confirm if the provider is affiliated with the health plan.

**Advanced Options**

**Terms of Use:** Results are based on the ZIP code, selected mile radius, and coverage type, and include doctors within the United States, and medical groups in California. Provider information is subject to change, before you make any changes verify with the health plan that the selected provider is available.

Enter a Physician or Medical Group name to include in your search.

**Provider Type**

**Basic Physician**  
 **Medicare Physician**  
 **Medical Group**

Within 20 Mile radius of 94621

smith

Sam Smith (Specialist)  
 Family Medicine  
 2288 Market St  
 San Francisco, CA 94114

Sam Smith (Primary Care)  
 Family Medicine  
 2288 Market St  
 San Francisco, CA 94114

Search Clear Basic Options

---

**Available Health Plans**

The following health plans are available for this service area. Service area is determined by health eligibility ZIP code. To view the Medicare reimbursement amount, use the View Medicare Plans button.

Health Plan Name	Provider Available?	Plan Type	Party Type	Gross Premium	Compare Select All
<a href="#">Kaiser Permanente California - Region 1</a>	No	HMO	Self/B and 2+/B	\$1,998.07	<input checked="" type="checkbox"/>
<a href="#">PERS Care - Region 1</a>	Yes	PPO	Self/B and 2+/B	\$2,946.16	<input type="checkbox"/>

The health plan name is a link their toll-free telephone number.

Step 9

Select at least one health plan check box or the **Select All** link.

**Available Health Plans**

The following health plans are available for this service area. Service area is determined by health eligibility ZIP code. To view the Medicare reimbursement amount, use the View Medicare Plans button.

Health Plan Name	Plan Type	Party Type	Gross Premium	Compare Select All
<a href="#">Anthem Blue Cross Select HMO - Region 2</a>	HMO	Self/B and 2+/B	\$1,700.50	<input checked="" type="checkbox"/>
<a href="#">Blue Shield Access+ - Region 2</a>	HMO	Self/B and 2+/B	\$2,365.66	<input checked="" type="checkbox"/>
<a href="#">Health Net Salud y Mas - Region 2</a>	HMO	Self/B and 2+/B	\$1,131.36	<input checked="" type="checkbox"/>

Step 10

Within the Provider Directory Alert section, review any alert information.

**Provider Directory Alert**

Excel Print Show 25 rows Search: \_\_\_\_\_

Health Plan Name	Provider Name	Alert Message
Western Health Advantage - Region 1		Sample message for WHA plan or a particular provider.

Showing 1 to 1 of 1 entries First Previous Next Last

Step 11

Select the **Compare Health Plans** button at the bottom left of the page.

Step 12

Within the Health Plan Comparison Filters section, select the benefits you want to review or compare.

**Health Plan Comparison Filters**

**Benefit Type:**

- Premiums
- Calendar Year Deductible
- Physician Services (including Mental Health and Substance Abuse)
- Infertility Testing/Treatment
- Chiropractic
- Ambulance Services
- Maximum Calendar Year Co-pay or Co-insurance (excluding Pharmacy)
- Diagnostic X-Ray/Lab
- Occupational/Physical/Speech Therapy
- Skilled Nursing Facility
- Hearing Services
- Hospital (including Mental Health and Substance Abuse)
- Prescription Drugs
- Diabetes Services
- Home Health Services
- Vision Care
- Emergency Services
- Durable Medical Equipment
- Acupuncture
- Hospice

Select All Clear All

Plan Type:  HMO  PPO  Association

Step 13

Each plan that you selected in step 9 will be displayed in columns side by side with the selected benefits expanded.

Health Plan Comparison					
	Search:				
	Anthem Blue Cross Select	Health Net SmartCare	Kaiser Permanente	PERS Gold	
	Hide	Hide	Hide	Hide	
				PPO	Non-PPO
<b>-Premiums</b>					
Gross Premium	\$1,128.83	\$1,174.50	\$913.74	\$825.61	
<b>-Calendar Year Deductible</b>					
Individual	N/A	N/A	N/A	Individual <b>\$1000</b>	
Family	N/A	N/A	N/A	<b>Family \$2000</b> Incentives available to reduce individual deductible (max. \$500) or family deductible (max. \$1,000) include: getting a biometric screening (\$100 credit); receiving a flu shot (\$100 credit); getting a non-smoking certification (\$100 credit); getting a virtual second opinion (\$100 credit); and getting a condition care certification (\$100 credit)	<b>Family \$2000</b> Incentives available to reduce individual deductible (max. \$500) or family deductible (max. \$1,000) include: getting a biometric screening (\$100 credit); receiving a flu shot (\$100 credit); getting a non-smoking certification (\$100 credit); getting a virtual second opinion (\$100 credit); and getting a condition care certification (\$100 credit)
<b>+Maximum Calendar Year Co-pay or Co-insurance (excluding Pharmacy)</b>					
<b>+Hospital (including Mental Health and Substance Abuse)</b>					

Step 14

Select the **Back to Health Plan Search Results** button in the top Health Plan Search Criteria section to do another health plan comparison.

**Health Plan Search Criteria**

Year: 2019

Health Eligibility ZIP Code:  Personal  Employer

ZIP Code: 94551  Foreign

County: Alameda

Retirement Date:

Vesting Percentage: %

Health Benefit Type: Medical

Party Type: Self/B and 2+/B

Carrier Name: All

Member Type: Public Agency

[Back to Health Plan Search Results](#)

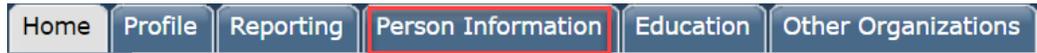
You have completed this scenario.

## Scenario 5: Summary As-Of Date

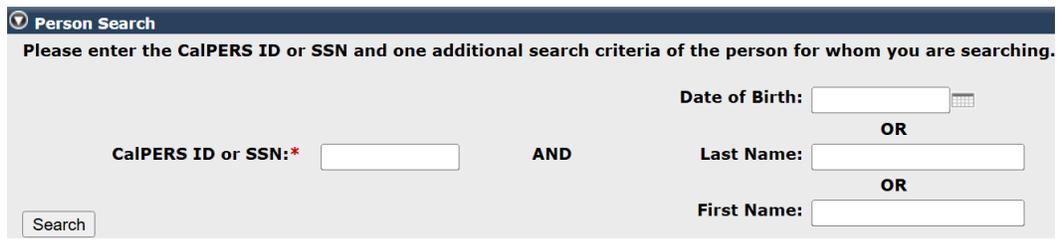
You will verify health enrollment details on a new health enrollment with a future effective date. You can also use this to review retroactively cancelled enrollees.

### Step Actions (9 Steps)

Step 1 From the homepage, select the **Person Information** global navigation tab.



Step 2 Enter the employee's CalPERS ID or SSN and populate one field on the right.



**Person Search**  
Please enter the CalPERS ID or SSN and one additional search criteria of the person for whom you are searching.

CalPERS ID or SSN:\*  AND

Date of Birth:

OR

Last Name:

OR

First Name:

Step 3 Select the **Search** button.

Step 4 Select the **Health Enrollment** local navigation link.



Step 5 Select the top link under the Health Account column.



Summary Health Enrollment

**Common Tasks**   
**Menu**

Premium Search Tool

**Select Health Account**

Health Account	Qualifying Participant Name	Qualifying CalPERS ID
<a href="#">CalPERS Employment</a>	JOE JONES	0123456789

[Health Account Summary](#)

Step 6 Select the **Summary As-Of Date** link under the left-side Menu folder.



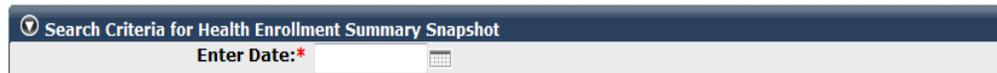
**Common Tasks**   
**Menu**

[Enrollment Summary](#)  
[Enrollment History](#)  
[Deduction History](#)  
[Premium Search Tool](#)  
[Summary As-Of Date](#)

**Health Enrollment Information**  
Your health enrollment is based on the following information:

**Health Eligibility Information**  
**Appointment ID:** 2233440  
**Employer CalPERS ID:** 9876543210  
**Employer:** City Name

Step 7 Enter the date of when the enrollee is covered or the transaction effective date.



**Search Criteria for Health Enrollment Summary Snapshot**  
Enter Date:\*

Step 8 Select the **Search** button.

Step 9

Review the enrollment summary information based on the as-of date entered. Refer to scenario 1 for details.

**Health Account Summary**

Health Account: CalPERS Employment      Qualifying Participant Name: Roellie Lee Sundotien  
 Qualifying CalPERS ID: 0123456789      Health Account Status: Active Employment

---

**Health Enrollment Information**

Your health enrollment is based on the following information:      Health Enrollment Summary As Of: 01/27/2023

**Health Eligibility Information**

Appointment ID: 27791120      Medical Group: 004 UPE, LOCAL 790 UNIT B C D  
 Employer CalPERS ID: 1262943822      Permanent Separation Date:  
 Employer: Agency Name      Retirement Date:  
 Division CalPERS ID: 1262943822  
 Division: Agency Name  
 Agency Type: Public Agency  
 Qualifying CalPERS ID: 0123456789      Health Benefit Appointment [Yes](#)  
 Same As Health Eligibility:

**Enrollment Information**

Affiliated Retirement System: PERS      Health Eligibility Zip Code: 94531  
 Financially Responsible CalPERS ID: 0123456789      Zip Code Override Indicator: No  
 Payroll Office Code: 5      Override Zip Code Type:  
 Affiliated Association:      Region: RG1  
 Health Account Status: Active Employment      County: Contra Costa

---

**Covered Persons Summary** [View More Actions](#)

Below are your covered persons for health.  
 Select the name of a covered person to view detailed health information.

Name	Date of Birth	Dependent Type	Certified	Medical	Dental	Vision
<a href="#">Roellie Sundotien</a>	11/11/1961	Self	NA	Basic	No	No
<a href="#">Jorge Beuningen</a>	03/06/1961	Spouse	No	Basic	No	No
<a href="#">Elizabeth Liinamo</a>	10/02/2005	Parent-Child	No	Basic	No	No
<a href="#">Liber Liinamo</a>	12/13/1984	Natural Born Child	No	No	No	No

---

**Health Plan Summary**

Below is your plan and premium information.

Health Benefit Type	Health Plan Name	Party Type	Health Enrollment Status	Total Premium
Medical	Kaiser Permanente California - Region 1 (5333)	Self/B and 2+/B	01/01/2020	\$2,228.36

---

**Future Health Events**

Below are your health events that are effective at a future date.

Future Health Event Type	Future Health Event Reason	Future Effective Date	Health Notification
Add Dependent	Loss of Coverage	02/01/2023	
Dependent Address Change	Address Update	02/01/2023	

---

**Pending Health Events**

Below are requests that require CalPERS review.

Name	CalPERS ID	Pending Health Event Type	Pending Health Event Reason	Received Date	Status
No results found.					

You have completed this scenario.

## Unit 4: Change Dependent Demographics

In this unit, you will learn how to make dependent demographic changes to a Social Security number, name, gender, and date of birth. A verification document is required. Refer to the [health benefits guides](#) for the acceptable types of supporting documents.

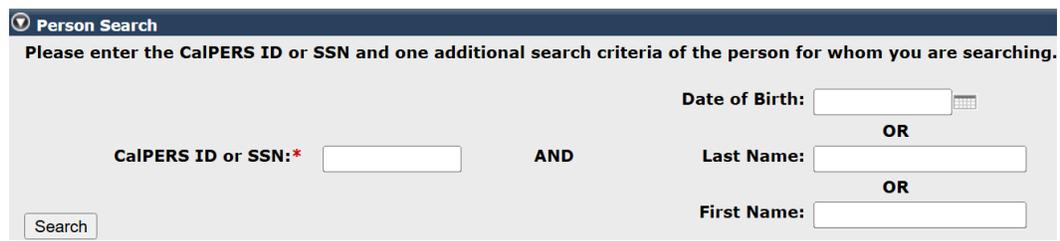
### System Logic

You cannot update a dependent's demographics if they work for an agency that contracts with CalPERS for retirement or health benefits. The dependent must contact their employer.

### Step Actions (15 Steps)

Step 1 From the homepage, select the **Person Information** global navigation tab.

Step 2 Enter the employee's CalPERS ID or SSN and populate one field on the right.



Person Search

Please enter the CalPERS ID or SSN and one additional search criteria of the person for whom you are searching.

CalPERS ID or SSN:\*  AND Date of Birth:

Last Name:

First Name:

Search

Step 3 Select the **Search** button.

Step 4 Select the **Health Enrollment** local navigation link.

Step 5 Select the first link (may display CalPERS or CalPERS Employment) under the Health Account column.



Health Account	Qualifying Participant Name	Qualifying CalPERS ID
<a href="#">CalPERS Employment</a>	JOE JONES	0123456789
<a href="#">Health Account Summary</a>		

Step 6 Does the employee's profile page display?

**Yes:** Skip to step 9.

**No:** Select the **Summary As-Of Date** left-side link.



Home Profile Reporting Person Information Education Other Organizations

Summary Health Enrollment

Common Tasks

Menu

Enrollment Summary

Enrollment History

Deduction History

Premium Search Tool

[Summary As-Of Date](#)

This participant currently does not have a health account associated to your organization; therefore, you cannot view their health enrollment information.

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Step 7 Complete the Enter Date field with the date the employee is enrolled.

Step 8 Select the **Search** button.

Step 9 Within the Covered Persons Summary section, is the dependent listed?

**Yes:** Continue to step 10.

**No:** Within the Covered Persons Summary section, select the **View More Actions** link to display the full list of covered and formerly covered dependents.

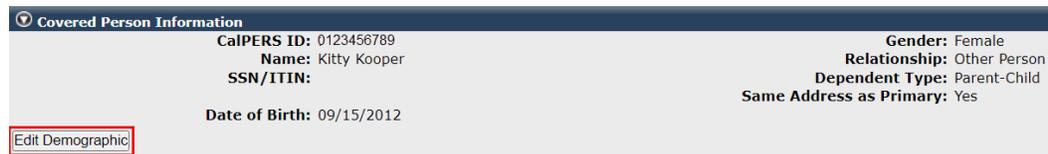


Name	Date of Birth	Dependent Type	Certified	Medical	Dental	Vision
JOE JONES	05/02/1958	Self	NA	Basic	No	No

View More Actions»

Step 10 Select the **name** link for the dependent you want to update.

Step 11 Select the **Edit Demographic** button at bottom left.



CalPERS ID: 0123456789  
Name: Kitty Kooper  
SSN/ITIN:  
Date of Birth: 09/15/2012

Gender: Female  
Relationship: Other Person  
Dependent Type: Parent-Child  
Same Address as Primary: Yes

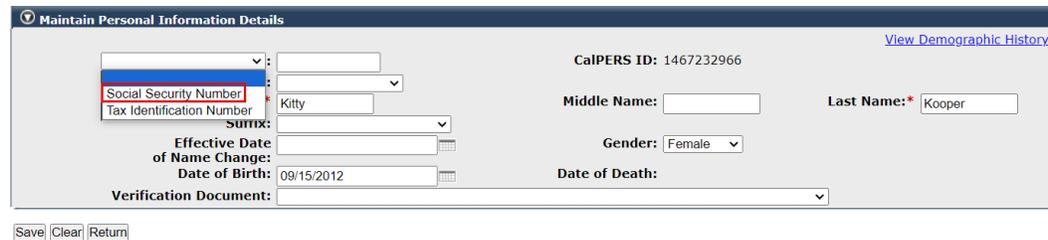
Edit Demographic

Step 12 Are you adding or correcting a Social Security number?

**Yes:** Continue to step 13.

**No:** Change the name, gender, or date of birth, then skip to step 15.

Step 13 From the drop-down list, select Social Security Number.



CalPERS ID: 1467232966

Social Security Number  
Tax Identification Number

Prefix: Kitty  
Suffix:

Effective Date of Name Change:  
Date of Birth: 09/15/2012  
Verification Document:

Middle Name: Last Name: \* Kooper

Gender: Female  
Date of Death:

Save Clear Return

Step 14 In the next field, enter the dependent's Social Security number.

Step 15 Select the type of proof of documentation you have.



Social Security Number

Prefix: First Name: \*  
Suffix: Effective Date of Name Change:  
Date of Birth: Verification Document:

Native American Tribal Document  
Naturalization  
Permanent Resident Card or Alien Registration Receipt Card (Form I-551)  
Pre-21 Record  
School Records  
Social Security Card  
Social Security Certification  
Survivor Benefits Documentation  
U.S. Coast Guard Merchant Mariner Card  
U.S. Passport or U.S. Passport Card  
Voter's Registration Card

Save Clear Return

Step 16 Select the **Save** button at the bottom left.

**You have completed this scenario.**

## Unit 5: Health Reports

In this unit, you will learn how to run health reports to review new transactions, batch transactions (those that are automatically updated in myCalPERS), and other data.

For a full list of employer reports, refer to the [myCalPERS Employer Reports \(Cognos\) Catalog](#) page.

To learn more about Cognos (IBM software that retrieves data from myCalPERS and creates reports) functionality, refer to the [myCalPERS Employer Reports \(Cognos\) PDF](#) student guide.

### Contents

Scenario 1: Employer Health Event Transaction Report.....	38
Scenario 2: Employer Health Enrollee Report .....	41

## Scenario 1: Employer Health Event Transaction Report

You will run the Employer Health Event Transaction Report to review transactions that are effective next month for your agency. It's recommended to run this report monthly.

### Some reasons to run this report:

- Identify deleted 26-year-old children. Some agencies use this information to delete the dependents from the employees' dental and vision benefits.
- Review transactions that were submitted online by your employees.
- Verify the enrollment information that you entered is correct.
- Public agencies and schools review the new transactions for their active and retired employees to reconcile their health statement.

### System Logic

Wait to run this report until after the first business day of the current month (26-year-old deletion batch completion time) if retrieving data for the following month.

### Step Actions (17 Steps)

#### Run Report

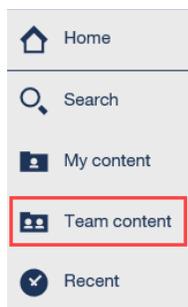
Step 1 From the homepage, select the Common Tasks folder from the upper left side.



Step 2 Select the **Reports** left-side link.



Step 3 From the left-side menu, select the Team content folder.



Step 4 Select the PSR\_REPORTS\_ENV98 folder.

---

Step 5 Select the **Employer Health Event Transaction Report** link.

---

Step 6 To review transactions that will be effective next month, use the Effective Date Range criterion. For example, if the current month is October 2024, enter 11/01/24 for the from and to dates.

Select Effective Date Range \_\_\_\_\_

The effective date is the date on which the transaction takes effect.

Effective From Date :  

Effective To Date :  

To retrieve other transaction data, you may use these options to run the report:

- For public agency or school billing reconciliation, use the Select Event Create Date Range From Date (day after the previous month's billing cutoff date) and To Date (statement billing cutoff date) fields.
- To display specific transactions by who/what made the updates, choose from the Created by User Type drop-down list:
  - **External Business Partner:** Employer (Employer processed the enrollment or confirmed an employee-submitted myCalPERS transaction)
  - **External Participant:** Employee or retiree
  - **Internal User:** CalPERS team member
  - **Service:** Automatically updated by the system, e.g., 26-year-old delete – Batch, Continued Elig: Retirement – Batch, etc.
  - **Blank:** No user (transaction was due to a data fix)

---

Step 7 Select the **Finish** button at bottom left.

---

### Change Report Format

Step 8 Select the Run as icon in the top left corner of the page.



---

Step 9 Select a format. Run Excel data and Run CSV are recommended for filtering.

 Run HTML

 Run PDF

 Run Excel

 Run Excel data

 Run CSV

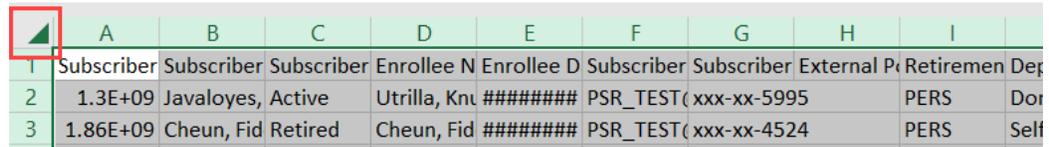
---

Step 10 Select the spreadsheet to open it.

---

## Filter the Report

Step 11 Select the cell in the top left corner to highlight the entire spreadsheet.



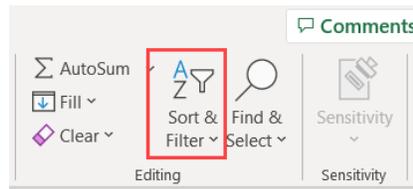
	A	B	C	D	E	F	G	H	I	
1	Subscriber	Subscriber	Subscriber	Enrollee N	Enrollee D	Subscriber	Subscriber	External P	Retiremen	Dep
2	1.3E+09	Javaloyes, Active	Utrilla, Kn	#####	PSR_TEST	(xxx-xx-5995		PERS	Dor	
3	1.86E+09	Cheun, Fid	Retired	Cheun, Fid	#####	PSR_TEST	(xxx-xx-4524	PERS	Self	

Step 12 To widen all the cells, double click on the line between any two columns.



	A	B	C
1	Subscriber	Subscriber	Subscriber

Step 13 From the ribbon, select Sort & Filter.



Step 14 Select the Filter option.

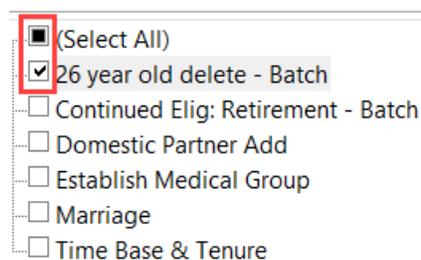


Step 15 Select the drop-down arrow in the Health Event Reason column.



M
Health Event Reason
Domestic Partner Add
Continued Elig: Retirement - Batch
Marriage
26 year old delete - Batch

Step 16 Deselect the Select All check box, and then select the check box(es) for the specific transactions you want displayed like the 26-year-old deleted children.



The screenshot shows a list of checkboxes for filtering data. The '26 year old delete - Batch' checkbox is checked and highlighted with a red box. The 'Select All' checkbox is unchecked. Other options include 'Continued Elig: Retirement - Batch', 'Domestic Partner Add', 'Establish Medical Group', 'Marriage', and 'Time Base & Tenure'.

Step 17 Select the **OK** button.

If you want to save the report with formatting changes, save it with an Excel (not CSV) file extension.

**You have completed this scenario.**

## Scenario 2: Employer Health Enrollee Report

You will run the Employer Health Enrollee Report to display everyone who is enrolled as of a certain date. This includes all dependents and those enrolled on direct pay and COBRA.

### Some other benefits to this report:

- Review the Age 26 Cancel Date, Medically Disabled Dependent Certification End Date, and Parent-Child Relationship Certification End Date columns to identify the children that will be deleted or who may need to be recertified.
- If the Enrollee SSN column is blank, add the dependent's SSN in myCalPERS (refer to unit 4).
- If the Mailing Undeliverable Address Indicator column has a Y, CalPERS correspondence to the employee got returned. You may need to update an employee's address in myCalPERS.

### Step Actions (17 Steps)

#### Run Report

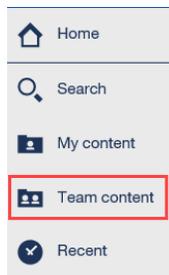
Step 1 From the homepage, select the Common Tasks folder from the upper left side.

---

Step 2 Select the **Reports** left-side link.



Step 3 From the left-side navigation, select the Team content folder.



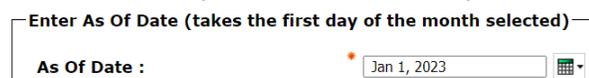
Step 4 Select the PSR\_REPORTS\_ENV98 folder.

---

Step 5 Select the **Employer Health Enrollee Report-Ext** link.

---

Step 6 To review everyone who is currently enrolled, don't change the As Of Date field.

A screenshot of a form field labeled 'As Of Date'. Above the field is the text 'Enter As Of Date (takes the first day of the month selected)'. The field contains the date 'Jan 1, 2023' and has a calendar icon to its right.

Step 7 Select the **Finish** button.

---

## Change Report Format

Step 8 Select the Run as icon in the top left corner of the page.



Step 9 Select a format. Run Excel data and Run CSV are recommended for filtering.



Step 10 Select the spreadsheet to open it.

## Filter the Report

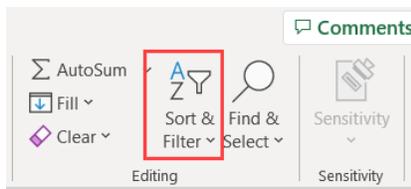
Step 11 Select the cell in the top left corner to highlight the entire spreadsheet.

	A	B	C	D	E	F	G	H	I
1	Subscriber	Subscriber	Subscriber	Subscriber	Retiremen	Subscriber	Enrollee N	Enrollee S	Enrollee C
2	4.45E+09	Al-Kazzaz,	XXX-XX-72	Retired	PERS	#####	Al-Kazzaz,	XXX-XX-72	4.45E+09
3							Lickelli, Xa	XXX-XX-66	7.19E+09
4	7.5E+09	Allshouse,	XXX-XX-04	Employe	PERS		Allshouse,	XXX-XX-04	7.5E+09

Step 12 To widen the cells for the entire sheet, double click on the line in between any two columns.



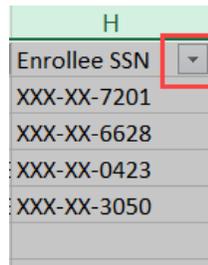
Step 13 From the ribbon, select the Sort & Filter option.



Step 14 Select the Filter option.



Step 15 Select the drop-down arrow in one or more column(s).



The screenshot shows a table with a header row labeled 'H'. The first column is titled 'Enrollee SSN' and contains the following values: 'XXX-XX-7201', 'XXX-XX-6628', 'XXX-XX-0423', and 'XXX-XX-3050'. A red box highlights the drop-down arrow in the 'Enrollee SSN' column header.

H
Enrollee SSN
XXX-XX-7201
XXX-XX-6628
XXX-XX-0423
XXX-XX-3050

Step 16 Deselect the Select All check box, and then select the check box if you only want to certain information like all dependents with missing SSNs.

Text Filters

Search

- XXX-XX-9592
- XXX-XX-9669
- XXX-XX-9819
- XXX-XX-9835
- XXX-XX-9846
- XXX-XX-9934
- XXX-XX-9959
- XXX-XX-9995
- (Blanks)

Step 17 Select the **OK** button.

If you want to save the report with formatting changes, save it with an Excel (not CSV) file extension.

**You have completed this scenario.**

## CalPERS Resources

Obtain more information by visiting the [CalPERS website](http://www.calpers.ca.gov) at www.calpers.ca.gov.

- [Business Rules & myCalPERS Classes](#)  
**Pathway:** CalPERS website > Employers > Employer Education > Business Rules & myCalPERS Classes
- [myCalPERS Student Guides & Resources](#)  
**Pathway:** CalPERS website > Employers > Employer Education > (On the right side under Resources) myCalPERS Student Guides & Resources
- [Policies & Procedures](#)  
**Pathway:** CalPERS website > Employers > Policies & Procedures
- [Public Agency & Schools Health Benefits Guide \(PDF\)](#)  
**Pathway:** CalPERS website > Employers > Policies & Procedures > Reference & Health Guides > Public Agency & Schools Health Benefits Guide (PDF)
- [State Health Benefits Guide \(PDF\)](#)  
**Pathway:** CalPERS website > Employers > Policies & Procedures > Reference & Health Guides > State Health Benefits Guide (PDF)
- [Health Program Guide \(HBD-120\) \(PDF\) \(Member publication\)](#)  
**Pathway:** CalPERS website > In the search box at top right, enter HBD-120 > CalPERS Health Program Guide
- [System Enhancements](#)  
**Pathway:** CalPERS website > Employers > myCalPERS Technical Requirements > System Enhancements
- [Circular Letters](#)  
**Pathway:** CalPERS website > Employers > Policies & Procedures > Circular Letters
- [Public Employees' Retirement Law \(PERL\)](#)  
**Pathway:** CalPERS website > About > Laws, Legislation & Regulations > Public Employees' Retirement Law (PERL)
- [myCalPERS Employer Reports \(Cognos\) Catalog](#)  
**Pathway:** CalPERS website > Employers > myCalPERS Technical Requirements > myCalPERS Employer Reports (Cognos) Catalog
  - Run in Cognos
    - CalPERS Health Subscriber Out of Service Population – Employer
    - Chancellor's Office Parent – Child Recertification Report CSU Campuses
    - Dental Retirees OE Report – CalHR
    - Dental Retirees OE Report – CSU
    - Dependent Enrollment Report
    - Employer Health Enrollee Report – Ext

- Employer Health Event Notification Report
- Employer Health Event Transaction Report
  - Note:** The 26-year-old deletion batch runs the first business day of the month.
- Health Plan Statement Employer Report
- Health Subscriber PA Billing Report
- Health ZIP Code Yes-No Report - HMO for Public Agency/School
- Health ZIP Code Yes-No Report - PPO for Public Agency/School
- Health ZIP Code Yes-No Report - State/CSU
- Non-PERS Health Eligibility and Appointment Data Submission Report
- Parent-Child Relationship Dependent with Expiring Certification Report
- State Active Health Enrollment and SCO Health Deduction Discrepancy Report
- Run via the myCalPERS pages (not the **Reports** left-side link):
  - For state agencies:
    - Dependent Verification End Date Employer Report
    - Dependent Verification Health Event Employer Report
    - Dependent Verification with Past Due or No End Dates Active Health Report
  - For public agencies, schools, and non-central state agencies:
    - Monthly Employer Billing Roster Report
- [Self-Paced Online Classes](#) (log in to myCalPERS, select the **Education** global navigation tab)
  - Business Rules
    - Health Plan Options
    - Health Benefits Officer Roles & Responsibilities
    - Health Eligibility Requirements
    - Health Enrollment
    - Contracting Agency Health Billing (public agencies and schools)
  - myCalPERS
    - New Enrollment, Non-PERS and CalSTRS New Enrollment
    - Change Plan
    - Cancellation
    - Rescission
    - Add a Dependent
    - Delete Dependent
    - COBRA Enrollment for Deleted Dependents
    - COBRA Enrollment for Employees
    - Set Up Direct Pay
    - Non-PERS Continued Health Into Retirement
    - Reconcile State-Active Premiums (central-state agencies)
    - Billing Reconciliation (public agencies and schools)

## CalPERS Contacts

### Email

- To contact [employer educators](#) for questions and requests, email [calpers\\_employer\\_communications@calpers.ca.gov](mailto:calpers_employer_communications@calpers.ca.gov).
- To contact the [Employer Response Team](#) for assistance with your most critical, complex, or time-sensitive issues, email [ert@calpers.ca.gov](mailto:ert@calpers.ca.gov).
- To [request a custom Cognos health report](#), email [hamd\\_data\\_services@calpers.ca.gov](mailto:hamd_data_services@calpers.ca.gov). It can take 6-10 weeks to fulfill each request. Additional information and approval may be required.

### Phone or Fax

Contact CalPERS at **888 CalPERS** (or **888-225-7377**), Monday through Friday, 8:00 a.m. to 5:00 p.m., except on state holidays.

- TTY: (877) 249-7442 (This number does not accept voice calls.)
- CalPERS centralized fax number: (800) 959-6545
- Employer Response Team phone number: (800) 253-4594

### Submit Inquiry

You can send secure messages through myCalPERS. Expand the **Common Tasks** left-side navigation folder, then select the **Submit Inquiry** link to submit a question or request. Refer to the [Introduction to myCalPERS for Business Partners \(PDF\)](#) student guide for details.