

myCalPERS Health Enrollment

Student Guide

March 7, 2026



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 You will also learn how to review updated and rescinded transactions and use reports.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.
- We strive to provide accurate information within this guide; however, the Public Employees’ Retirement Law is the authoritative source for CalPERS policies.

What’s New

Unit 5 has updated steps for running a report using the myCalPERS Reports functionality.

System Access

If you do not have the myCalPERS access roles to process the scenarios in this guide, contact your agency’s [system access administrator](#) to update your myCalPERS access.

Training Opportunities

We offer instructor-led classes based on this guide. Follow these steps to ensure your CalPERS education experience is comprehensive and well-structured:

1. Take [Business Rules](#) classes.
2. Review the [Introduction to myCalPERS for Business Partners \(PDF\)](#) student guide.
3. Attend a [myCalPERS](#) instructor-led class.
4. Review the [self-paced online classes](#).

To access the classes, log in to your [myCalPERS](#) business partner account and then select the **Education** global navigation tab.

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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, confirmation of the health enrollment, change, cancellation, etc. is sent to the employee.
- The next business day, COBRA information and an HBD-85 are 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.

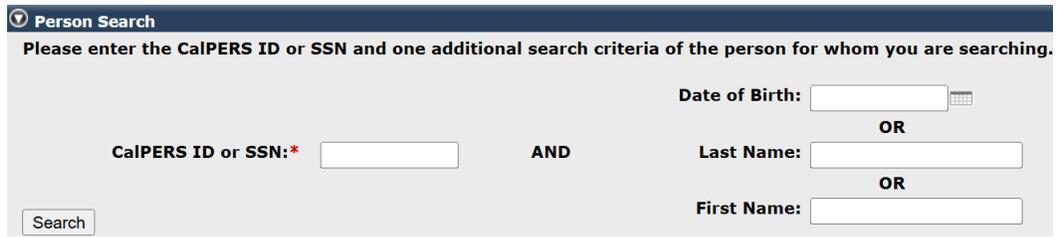
Step 1 Is this a CalPERS employee or a new (no prior appointment with your agency) Non-PERS or CalSTRS employee?

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:

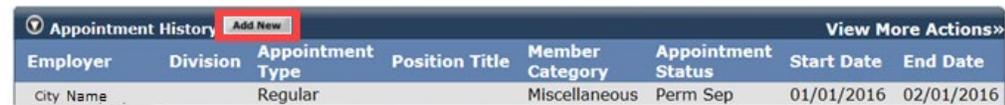
Last Name:

First Name:

Search

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.



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
Menu
Organization Search
Adjustment Reports
Name: City Name CalPERS ID: 9876543210
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.

Appointment Details
Employer: Agency Name CalPERS ID (Employer): 9876543210
Division:
Original Hire Date:*
Appointment ID:
Separation Date:
Additional Details
Position Title:
CBU:
Begin Date:
Medical Group:*
Appointment Status:
Retirement Program:*
End Date:
Affiliated Association:
Save & Continue Cancel Clear Return

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.

Confirm Address
We have validated your address against U.S. postal records and have provided an alternate choice according to these results. Please choose the address you wish to use or select the Cancel button to return to the address page to change your entry.
Entered Address: 400 P St., Sacramento, CA 95814
U.S. Postal Service Matches: 400 P ST, SACRAMENTO, CA 95814-5345

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.

Covered Person List Add New
Review the covered person list. To enroll a dependent, select the **Add New** button. Otherwise, select the **Save & Continue** button

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

Save & Continue Cancel Return

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.

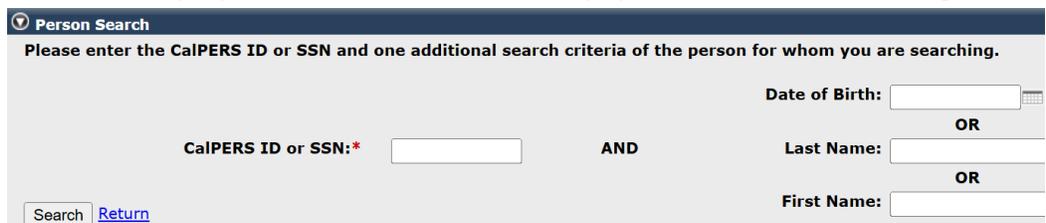


The screenshot shows a navigation menu with tabs: Home, Profile, Reporting, Person Information, Education, and Other Organizations. Below these are sub-tabs: Manage Reports, Billing and Payments, Payroll Schedule, Out-of-Class Validation, and Membership. A 'Common Tasks' section is expanded to show a '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.

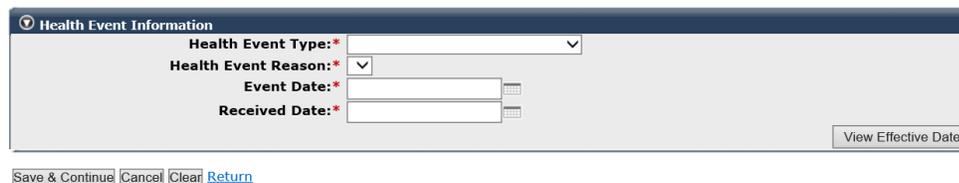


The screenshot shows the 'Person Search' form. It prompts the user to 'Please enter the CalPERS ID or SSN and one additional search criteria of the person for whom you are searching.' There are three input fields: 'CalPERS ID or SSN:*', 'Date of Birth:', and 'Last Name:'. The 'Date of Birth' and 'Last Name' fields have a calendar icon. Below these fields are 'OR' labels. A 'First Name:' field is also present. At the bottom left, there are 'Search' and 'Return' buttons.

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:*' (a dropdown menu), 'Health Event Reason:*' (a dropdown menu), 'Event Date:*' (a date field with a calendar icon), and 'Received Date:*' (a date field with a calendar icon). A 'View Effective Date' button is located at the bottom right. At the bottom left, there are 'Save & Continue', 'Cancel', 'Clear', and 'Return' buttons.

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		Update Demographics

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.



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.			

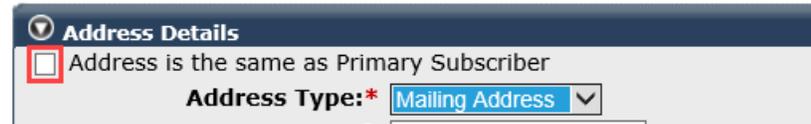
[Continue](#) [Cancel](#) [Return](#)

Step 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 Details

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 Add New					
Select a dependent below. If a dependent is not listed, select the Add New 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	Update Certification	<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 options like Organization Search and Adjustment Reports. The 'Create or Edit Report' section is active, displaying 'Name: City Name' and 'CalPERS ID: 9876543210'. The 'Method:' dropdown menu is set to 'Add or Edit Health Enrollment', which is highlighted with a red box. A 'Continue' button is visible next to 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 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 'Last Name' and 'First Name' fields are separated by 'OR' labels. 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:*' (a dropdown menu), 'Health Event Reason:*' (a dropdown menu), 'Event Date:*' (a date field with a calendar icon), and 'Received Date:*' (a date field with a calendar icon). 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.

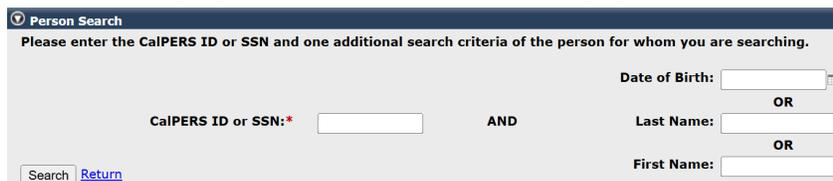


The screenshot shows a navigation menu with tabs for Home, Profile, Reporting, Person Information, Education, and Other Organizations. Under the Reporting tab, there are sub-tabs for Manage Reports, Billing and Payments, Payroll Schedule, Out-of-Class Validation, and Membership. A 'Common Tasks' section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

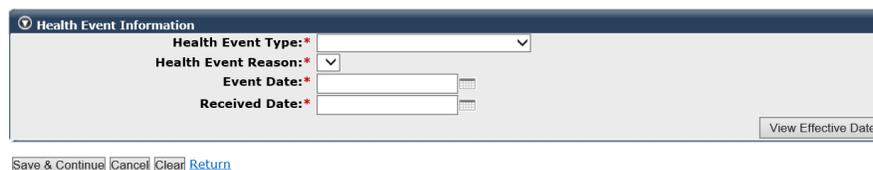


The screenshot shows a 'Person Search' form with the instruction: 'Please enter the CalPERS ID or SSN and one additional search criteria of the person for whom you are searching.' There are input fields for 'CalPERS ID or SSN:*' and 'Date of Birth:'. Below these are 'AND' and 'OR' options. There are also input fields for 'Last Name:' and 'First Name:'. 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.



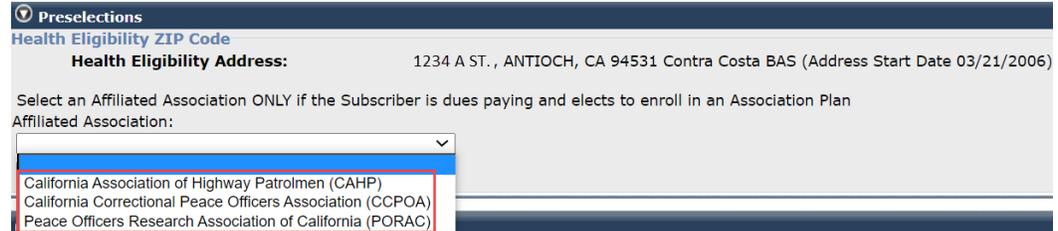
The screenshot shows a 'Health Event Information' form with fields for 'Health Event Type:*' (a dropdown menu), 'Health Event Reason:*' (a dropdown menu), 'Event Date:*' (a date picker), and 'Received Date:*' (a date picker). A 'View Effective Date' button is located at the bottom right. At the bottom 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.

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.



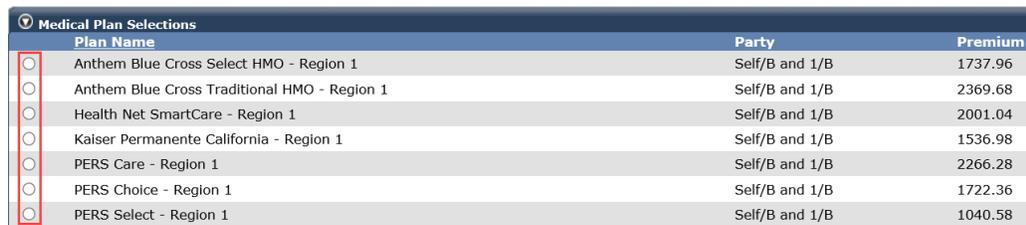
Preselections
Health Eligibility ZIP Code
Health Eligibility Address: 1234 A ST., ANTIOCH, CA 94531 Contra Costa BAS (Address Start Date 03/21/2006)
Select an Affiliated Association ONLY if the Subscriber is dues paying and elects to enroll in an Association Plan
Affiliated Association:
California Association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

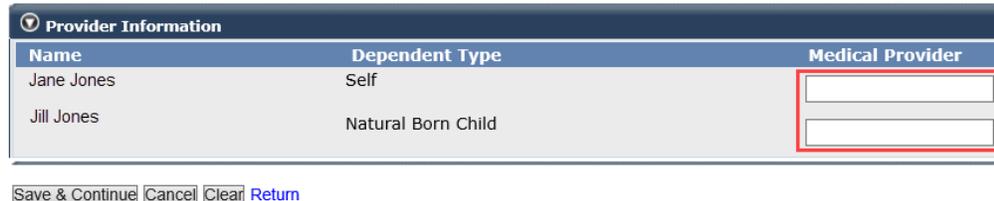
Change Health Plan

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).

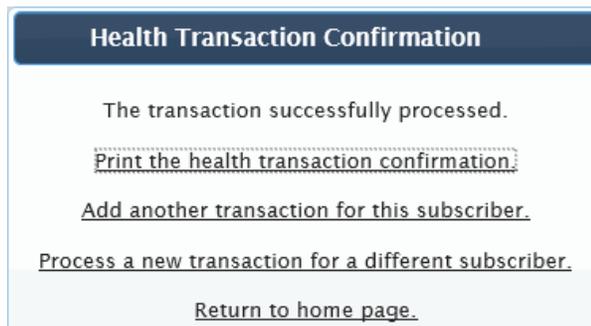


Name	Dependent Type	Medical Provider
Jane Jones	Self	<input type="text"/>
Jill Jones	Natural Born Child	<input type="text"/>

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)

For Public Agencies and Schools

- 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

For All Employer Types

- 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 a navigation menu with tabs: Home, Profile, Reporting, Person Information, Education, and Other Organizations. Below the tabs are links for Manage Reports, Billing and Payments, Payroll Schedule, Out-of-Class Validation, and Membership. A 'Common Tasks' section contains a search for 'City Name' and a 'CalPERS ID: 9876543210'. A 'Menu' section is expanded to show 'Create or Edit Report'. Under this menu, the 'Method' dropdown is set to 'Add or Edit Health Enrollment', and the 'Continue' button is highlighted.

Step 3 Select the **Continue** button.

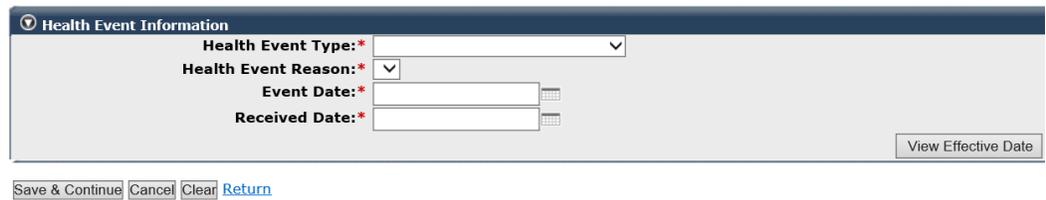
Search for the Subscriber

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

Step 5 Select the **Search** button.

Input Health Event Information

Step 6 Complete the Health Event Information section.

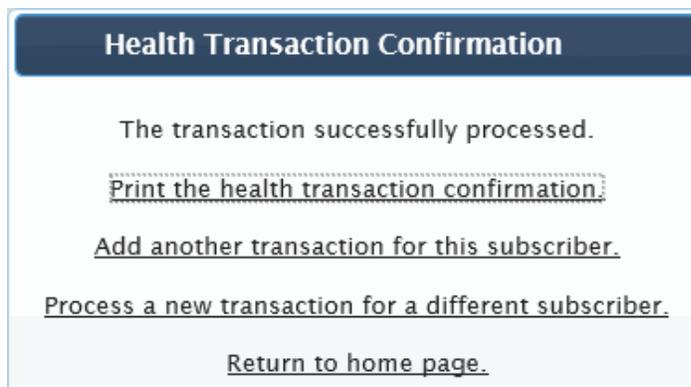


The screenshot shows a form titled "Health Event Information" with a dark blue header. Below the header, there are four required fields: "Health Event Type:" with a dropdown menu, "Health Event Reason:" with a dropdown menu, "Event Date:" with a text input and a calendar icon, and "Received Date:" with a text input and a calendar icon. A "View Effective Date" button is located in the bottom right corner 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.

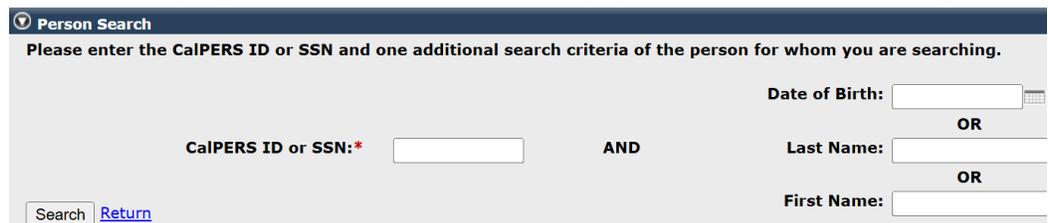


The screenshot shows a navigation menu with tabs: Home, Profile, Reporting, Person Information, Education, and Other Organizations. Below these are sub-tabs: Manage Reports, Billing and Payments, Payroll Schedule, Out-of-Class Validation, and Membership. A 'Common Tasks' menu is open, showing 'Create or Edit Report' selected. Under this menu, the 'Method' dropdown is set to 'Add or Edit Health Enrollment' and is highlighted with a red box. A 'Continue' button is visible next to 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 search criteria section with 'CalPERS ID or SSN:*' and an input field. To the right, there are input fields for 'Date of Birth:', 'Last Name:', and 'First Name:'. The form also includes 'Search' and 'Return' buttons.

Step 5 Select the **Search** button.

Rescind the Transaction

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



The screenshot shows the 'Demographics Information' section for a subscriber. It displays the CalPERS ID (0123456789) and a link to 'Rescind an Existing Transaction'. Other demographic information shown includes Prefix, First Name (Ellie), Middle Name (E), Last Name (Edwards), Suffix, SSN (XXX-XX-9999), Date of Birth (04/17/1977), and Gender (Female).

Step 7 Within the Health Enrollment History section, select the radio button associated with 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	
Subscriber Name: Ellie E Edwards Subscriber CalPERS ID: 0123456789 Subscriber Date of Birth: 04/17/1977 Subscriber Coverage Type: Basic Health Event Type: Change Health Plan Health Event Reason: 402 - Move Health Benefit Type: Medical Health Plan Name: Anthem Blue Cross Select HMO - Region 1 (5062) Party Type: Self/B and 1/B Effective Date: 07/01/2024 Event Date: 06/06/2024 Received Date: 06/06/2024 Status: Appointment ID: 495100	Created Date: 06/06/2024 11:36:11 AM Change Date: 06/06/2024 11:36:11 AM Created by User: Employer Updated by User: Employer Reason for Rescission: Additional Information:

[View Health Enrollment Summary](#)

Rescission Confirmation	
Reason for Rescission:	Subscriber Request
Additional Information:	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 retroactively 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 for all employees or leave of absence for public agencies and schools (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 4: Premium Search Tool	30
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Scenario 1: Enrollment Summary

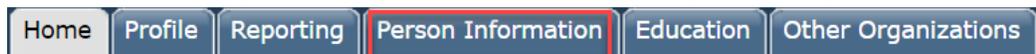
You will review subscriber health enrollment information including current and formerly covered dependents, health plan, total premium, and future health events.

System Logic

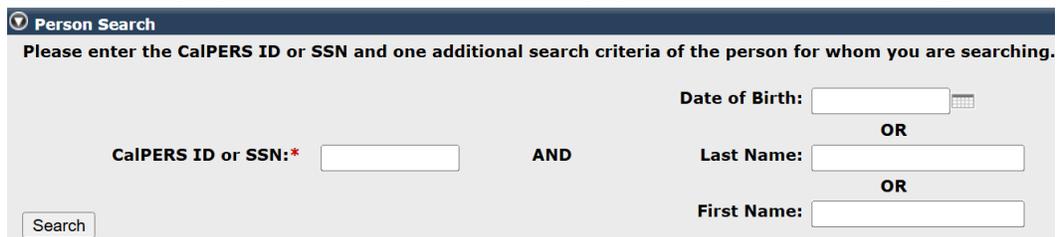
When the Enrollment Summary page is unavailable due to future-dated enrollments or a former subscriber, use the one of the other four left-side menu links to verify enrollment information and deductions.

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.

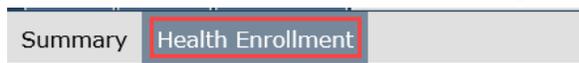
CalPERS ID or SSN:* AND Date of Birth:

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
CalPERS Employment	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 Yes
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	
TADHIG LIEBAN	05/02/1958	Self	NA	Basic	No	No	
ARUTYUN LIEBAN	10/18/1965	Spouse	NA	Basic	No	No	
STULING LIEBAN	07/01/1994	Natural Born Child	NA	Basic	No	No	
DOMINNETTA DUBOSKI	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"> Menu Enrollment Summary Enrollment History Deduction History Premium Search Tool Summary As-Of Date 	Your health enrollment is based on the following information: Health Eligibility Information Appointment ID: 2233440 Employer CalPERS ID: 9876543210 Employer: 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

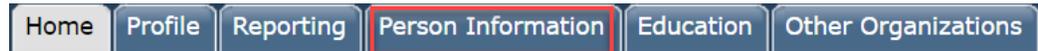
You have completed this scenario.

Scenario 2: Enrollment History

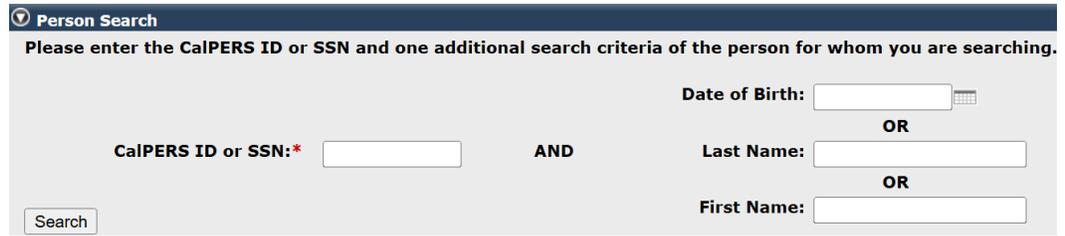
You will review all health enrollment transactions in chronological order including rescissions, effective dates, health event types, and future enrollment changes.

Step Actions (11 Steps)

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

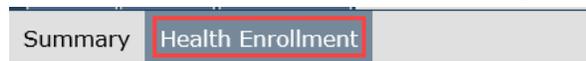


Step 2 Enter the employee's CalPERS ID or SSN and populate one field on the right.



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.

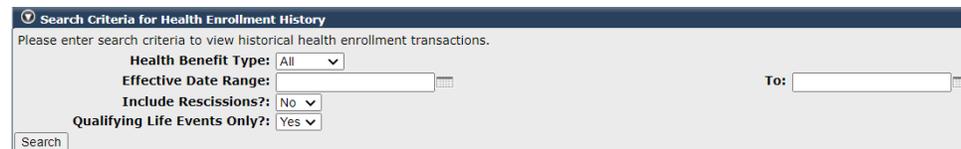


Health Account	Qualifying Participant Name	Qualifying CalPERS ID
CalPERS Employment	JOE JONES	0123456789

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	Rescinded	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	Rescinded	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	Confirmed	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	Confirmed	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
JOE JONES	11/11/1972	Self	NA	Basic	No	No
Pam Parks	11/12/1964	Spouse	No	Basic	No	No
Paige Parks	05/05/1995	Step Child	No	Basic	No	No
Taylor T Thomas	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)

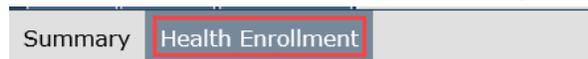
Step 1 From the homepage, select the **Person Information** global navigation tab.



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

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

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.

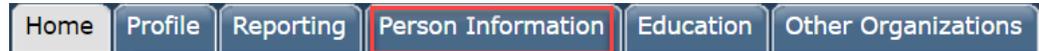
Scenario 4: Premium Search Tool

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.

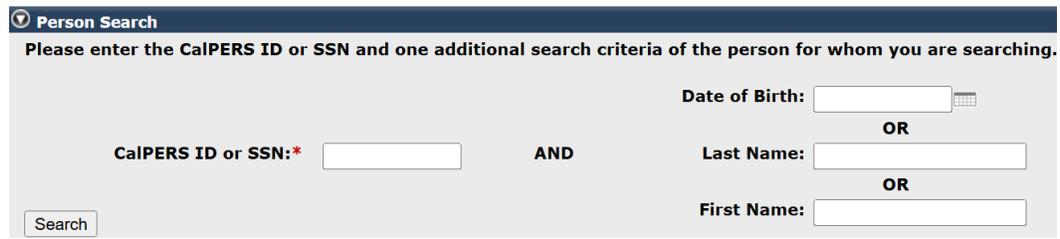
You will also compare benefits and premiums for the available plans.

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:

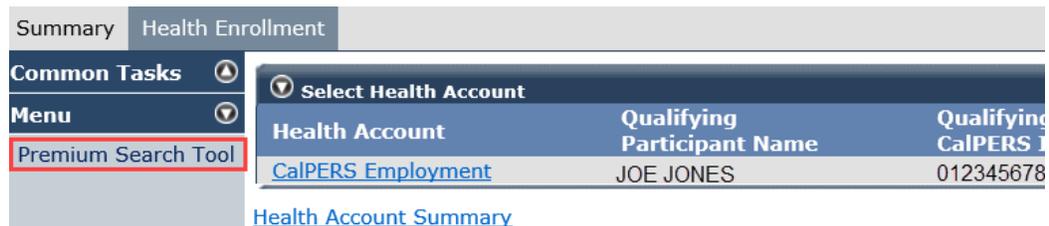
First Name:

Step 3 Select the **Search** button.

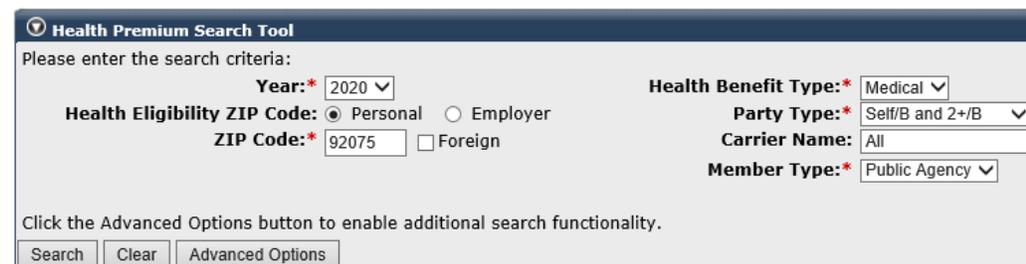
Step 4 Select the **Health Enrollment** local navigation link.



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



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
Kaiser Permanente California - Region 1	No	HMO	Self/B and 2+/B	\$1,998.07	<input checked="" type="checkbox"/>
PERS Care - Region 1	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
Anthem Blue Cross Select HMO - Region 2	HMO	Self/B and 2+/B	\$1,700.50	<input checked="" type="checkbox"/>
Blue Shield Access+ - Region 2	HMO	Self/B and 2+/B	\$2,365.66	<input checked="" type="checkbox"/>
Health Net Salud y Mas - Region 2	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
-Premiums					
Gross Premium	\$1,128.83	\$1,174.50	\$913.74	\$825.61	
-Calendar Year Deductible					
Individual	N/A	N/A	N/A	Individual \$1000	
Family	N/A	N/A	N/A	Family \$2000 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)	Family \$2000 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)
+Maximum Calendar Year Co-pay or Co-insurance (excluding Pharmacy)					
+Hospital (including Mental Health and Substance Abuse)					

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](#)

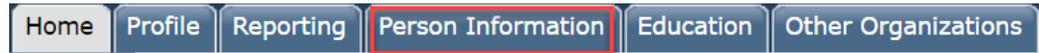
You have completed this scenario.

Scenario 5: Summary As-Of Date

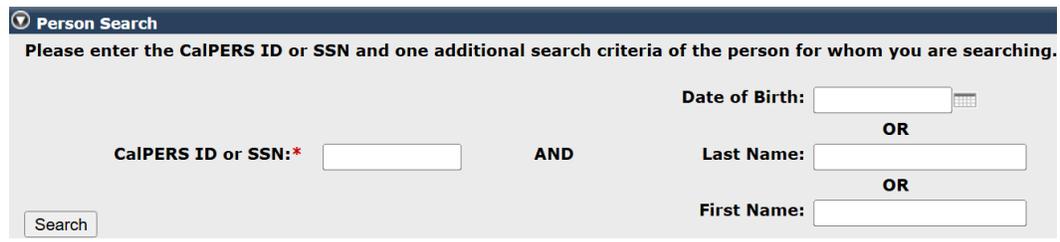
You will verify health enrollment details on a new health enrollment with a future effective date. You can also use this to review retroactively cancelled enrollees.

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
CalPERS Employment	JOE JONES	0123456789

[Health Account Summary](#)

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

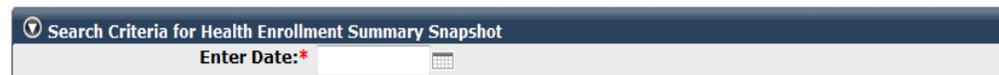


Common Tasks
Menu

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
Roellie Sundotien	11/11/1961	Self	NA	Basic	No	No
Jorge Beuningen	03/06/1961	Spouse	No	Basic	No	No
Elizabeth Llinamo	10/02/2005	Parent-Child	No	Basic	No	No
Liber Llinamo	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:

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
CalPERS Employment	JOE JONES	0123456789

[Health Account Summary](#)

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.

[Contact Us](#) | [CalPERS Website](#) | [Privacy Policy](#) | [Conditions of Use](#) | [Accessibility](#) | Copyright © 2023 California Public Employ

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.

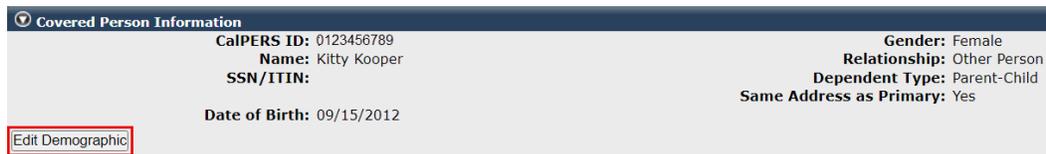


Name	Date of Birth	Dependent Type	Certified	Medical	Dental	Vision
JOE JONES	05/02/1958	Self	NA	Basic	No	No

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

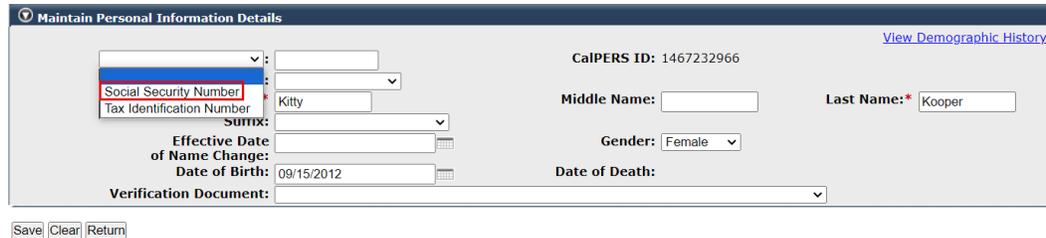
Edit Demographic

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 Reports Catalog](#) page.

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

Contents

Scenario 1: Employer Health Event Transactions Report	38
Scenario 2: Employer Health Enrollee Report	41

Scenario 1: Employer Health Event Transactions Report

You will run the Employer Health Event Transactions Report to review transactions that are effective next month for your agency. We recommend running 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 (18 Steps)

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



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



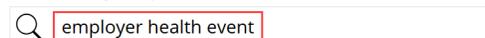
Step 3 From the top navigation, select **Run Report**.



Step 4 Search by partial report name or scroll through the list.



Search by Report Name:



[Employer Health Event Notifications Report](#)

[Employer Health Event Transactions Report](#)

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

Step 6

Enter or select at least one of the fields on this page. If the employer name doesn't prepopulate, select it from the drop-down list.

Subscriber Calpers ID:

Employer Name:

The type of user that originated the transaction.

Created By User Type:

Created by User Type: You can choose who/what updated the transactions:

- **Service:** Automatically updated by the system, e.g., 26-year-old delete – Batch, Continued Elig: Retirement – Batch, etc.
- **Internal User:** CalPERS team member
- **External Participant:** Employee or retiree
- **External Business Partner:** Employer (Employer processed the enrollment or confirmed an employee-submitted myCalPERS transaction)
- **Blank:** If this is listed, a transaction was updated to fix the data.

Step 7

Select the **Next** button at the bottom.

Step 8

Enter either the effective date range or the create date range.

The effective date is the date on which the transaction takes effect. An effective date range can be entered to provide a report of all transactions that became effective during that time frame.

Effective From Date:

Effective To Date:

The event create date is the date on which the transaction was created/processed. An event create date range can be entered to provide a report of all transactions that were created during that time frame.

Event Create From Date:

Event Create To Date:

- **Effective From/To Date:** Populate the dates of when transactions became effective, e.g., 03/01/2026 for the from and to dates for March.
- **Event Create From/To Date:** Populate the dates of when transactions updated to myCalPERS.

Step 9

Select the **Next** button.

Step 10 Under the report parameters, select a run option (format) radio button.

Run Option:  **Download (.xls)** **Download (.csv)** **Online (.html)**



Note: Large reports that automatically run in the background will display a fourth run option of Save Online (.html).

Step 11 At bottom left, select the **Run Report** button.

Step 12 Did you select Online (.html) as the run option?
Yes: The report will be displayed. Continue to step 13.
No: Skip to step 14.

Step 13 Do you want to change the report parameters?
Yes: Select the **Start Over** button at the bottom, then return to step 6.
No: Continue to step 14.

Step 14 Do you want to download the report to CSV or Excel?
Yes: From step 10, if you selected the:

- Online (.html) format, select the **Download** button at the bottom, then continue to step 15.
- Download (.xls) or (.csv) format, skip to step 16.

No: You have completed this scenario.

Step 15 Select the **CSV** or **Excel** button.



Step 16 After the status changes from Running to Generated, select the **Generated** link to download the report.

Report Name	Employer Health Event Transactions Report
Submitted	February 06, 2026 07:16 AM
Run Option	Download (.xls)
Status	Generated
Status Last Updated	February 06, 2026 07:16:24 AM

Step 17 Select the download icon (if using Chrome for your browser, it is at top right).



Step 18 Select the report to open it.
You have completed this scenario.

Scenario 2: Employer Health Enrollee Report

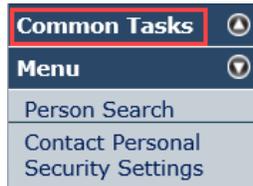
You will run the Employer Health Enrollee Report to display everyone who is enrolled as of a certain date. This includes all dependents and those enrolled on direct pay and COBRA.

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 (16 Steps)

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



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



Step 3 From the top navigation, select the **Run Report** tab.



Step 4 Search by partial report name or scroll through the list.
Search by Report Name:



[Dependent Enrollment Report](#)

[Employer Health Enrollee Report - External Report](#)

Step 5 Select the **Employer Health Enrollee Report – External Report** link.

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

Business Partner CalPERS ID: *

AGENCY NAME - 9876543210 ▾

Enter As of Date (takes the first day of the month selected)

As Of Date: *

02/01/2026 📅

Next

Step 7 Select the **Next** button.

Step 8 Under the report parameters, select a run option (format) radio button.

Run Option: ⓘ Download (.xls) Download (.csv) Online (.html)

Run Report

Back

Note: Large reports that automatically run in the background will display a fourth run option of Save Online (.html).

Step 9 At bottom left, select the **Run Report** button.

Step 10 Did you select Online (.html) as the run option?

Yes: The report will be displayed. Continue to step 11.

No: Skip to step 12.

Step 11 Do you want to change the report parameters?

Yes: Select the **Start Over** button at the bottom, then return to step 6.

No: Continue to step 12.

Step 12 Do you want to download the report to CSV or Excel?

Yes: From step 8, if you selected the Online (.html) format, select the **Download** button at the bottom, then continue to step 13.

If you selected the Download (.xls) or (.csv) run options, skip to step 14.

No: You have completed this scenario.

Step 13 Select the format you want to download.

CSV

Excel

Download

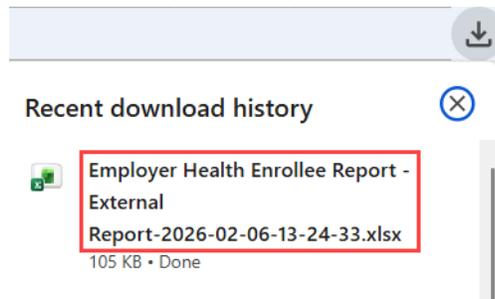
Step 14 After the status changes from Running to Generated, select the **Generated** link to download the report.

Report Name	Employer Health Enrollee Report - External Report
Submitted	February 06, 2026 11:27 AM
Run Option	Download (.xls)
Status	Generated
Status Last Updated	February 06, 2026 11:28:05 AM

Step 15 Select the download icon (if using Chrome for your browser, it is at top right).



Step 16 Select the report to open it.



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 > (On the bottom right) 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 Reports Catalog](#)
Pathway: CalPERS website > Employers > myCalPERS Technical Requirements > myCalPERS Reports Catalog
 - Run in myCalPERS Reports
 - 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 Transactions Report (**Note:** The 26-year-old deletion batch runs on the first business day of the month for the following month's deletions.)
- 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.
- To contact the [Employer Response Team](#) for assistance with your most critical, complex, or time-sensitive issues, email ert@calpers.ca.gov.
- To [request a custom health report](#), email 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.