

CalPERS Health Benefits – Early thru Mid-Career

Disclaimer: *CalPERS health benefits are governed by the Public Employees Medicare and Hospital Care Act (PEMHCA). Dental is governed by State Employees Dental Care Act. The statements in this document are general. Health and Retirement Laws are complex and subject to change. If there is a conflict between the law and this document, any decisions will be based on the law and not this document.*

Important! This class is for members who currently work for an employer who participates in the CalPERS Health Program. If your employer doesn't participate in the CalPERS Health Program, the following presentation and information doesn't apply to you. Please contact your employer to find out about your specific health benefits. CalPERS doesn't administer dental and vision benefits. Contact your employer for information on dental and vision coverage.

Agenda

This presentation covers information on:

- Health Benefit Officers (HBO)
- Eligibility
- Employer Contribution
- Enrollment
- Direct Pay
- COBRA
- Health Plans
- Health Into Retirement
- Resources

Health Benefit Officers

Each employer has a Health Benefits Officer (HBO). They are a representative who works directly with us regarding your health benefits.

Their roles include:

- Providing you with information on enrollment, eligibility, and health and dental plan costs, including your employer contribution
- Ensuring your eligible family members are covered
- Ensuring all supporting documentation is received
- Maintaining records for all employees
- Processing all health enrollments and changes

While you're employed, your employer is responsible for your health benefits. Your HBO is in your personnel office. Once you retire, we become your HBO.

Eligibility

While you're working, your [eligibility](#) for health benefits is based on two things:

1. Tenure – the length of your appointment, such as permanent vs. temporary
 - Your tenure must be six months and one day or greater
2. Time base – number of hours you work in the pay period, such as half-time or full-time
 - Your time base must be half-time or greater

State Permanent Intermittent (PI) employees gain health eligibility differently. If you're a PI, contact your HBO for more information.

Eligible Family Members

Once you're enrolled, you may wish to [enroll your family members](#) as your dependents. Eligible dependents include:

- Your spouse or registered domestic partner
- Natural, adopted or stepchildren, up to age 26
- Certified disabled children who were disabled prior to age 26
- A child in a parent-child relationship with you, such as a grandchild who's dependent upon you for their financial support

The [Health Program Guide \(HBD-120\) \(PDF\)](#) is available on our website to assist you with eligibility requirements and the documentation required to enroll your eligible dependents.

There are those who are not eligible to be covered as a dependent on your plan, for example, your ex-spouse cannot be covered. It's against the law to continue enrollment of an ineligible family member. If this occurs, you may be responsible for all costs incurred during the period in which they were ineligible.

Employer Contribution

Public agency and school employer contribution amounts are established by contract. These contracts are specific to each employer and they have the authority to make changes to the contract. Contact your employer for contribution amounts.

Active state employees can contact their HBO or the [California Department of Human Resources \(CalHR\)](#) for employer contribution amounts. The CalHR website has a [Benefits Calculator](#) that provides the gross premium and the state's contribution for your health, dental, and vision plans based on your bargaining unit.

California State University (CSU) employees should contact the [CSU Chancellor's Office](#) for more information about your employer's contribution and what your deduction will be.

Enrollment

Complete and submit the [Health Benefits Plan Enrollment for Active Employees \(HBD-12\) \(PDF\)](#) with [Instructions \(PDF\)](#) to:

- Enroll in a health plan
- Add or delete eligible family members
- Change health plans
- Cancel health plan enrollments
- Decline enrollment

Open Enrollment

[Open enrollment](#) is the one time each year when you can make changes to your health benefits without a qualifying event. It's traditionally held in the fall with changes effective the following January 1. You'll need to submit your open enrollment change to your HBO during this window.

During open enrollment you can:

- Enroll in a health plan
- Change health plans
- Add or delete eligible family members
- Cancel all coverage

Open enrollment materials are no longer sent by mail unless you opt-in. The easiest way to view your health information is to log in to your [myCalPERS](#) account. Here you'll find information about your current health plan, premiums, and which plans are available to you.

Special or Late Enrollment

Special enrollments are qualifying events that allow you to make changes to your health enrollment without having to wait for the next open enrollment period. Marriage, birth, adoption or placement for adoption, involuntary loss of coverage, and court-ordered coverage for eligible family members are some examples of special enrollments.

Requests to make changes to your health benefits based on a special enrollment must be made *within 60 days* of the qualifying event. The change goes into effect the first of the following month from when all required documentation is received.

Late enrollment applies when there is no qualifying event to allow enrollment or the request for special enrollment is made outside of the 60-day period. There is a 90-day waiting period for late enrollments. The effective date of the change is the first of the month following the waiting period.

Qualifying Enrollment Events – Voluntary and Mandatory

Voluntary qualifying events are opportunities when you can make a change to your health outside of open enrollment, but you don't have to. Examples of voluntary qualifying events include:

- New employment

- New marriage or domestic partnership
- Change of residential address
- Loss of coverage
- Birth or adoption of a child

Mandatory qualifying events require you by law to make a change to your enrollment. Examples of mandatory qualifying events include:

- Divorce or termination of a domestic partnership
- Death of a dependent family member
- Death of a member

Report these voluntary and mandatory events to your HBO as soon as possible. The effective date of a mandatory qualifying event is the first of the month following the event.

You may be required to provide supporting documentation to add or delete a dependent family member. For example, a divorce or termination of a domestic partnership requires a copy of the divorce decree or the [Termination of Domestic Partnership \(PDF\)](#) from the [Secretary of State](#) to delete the dependent. Find more information on the supporting documentation requirements by reading the [Health Program Guide \(HBD-120\) \(PDF\)](#).

Unlawful Enrollments

There are two types of enrollments that are **not** allowed:

1. Dual coverage – You are only permitted one CalPERS health enrollment, meaning you can't be enrolled in your own CalPERS health plan as the subscriber and a dependent on another person's CalPERS plan at the same time.
2. Split enrollment – All dependents must be covered under one subscriber.

Life events may lead to a loss of health coverage such as:

- Separation from employment
- Extended leave without pay, or
- Layoff

Direct Pay

If you're off regular pay status for any reason, such as leave of absence, pending service retirement or approval of disability retirement, you may choose to continue your health plan by electing direct pay. There is no limit to the amount of time you can be enrolled in direct pay during one of these situations.

Direct pay allows you to continue your benefits by paying 100 percent of the plan premiums directly to the health and/or dental plan. In order to go onto direct pay, you need to fill out the [Direct Payment Authorization Form \(HBD-21\) \(PDF\)](#) and submit it to your employer.

Consolidated Omnibus Budget Reconciliation Act (COBRA)

[COBRA](#) is a federal entitlement for the continuation of health coverage when you or your eligible family members loses your health coverage due to a COBRA qualifying event. If you or your eligible family member becomes eligible for COBRA, you'll be notified by your employer.

To enroll, the COBRA enrollee must complete and submit the [COBRA Election Form \(Active\) \(HBD-85\) \(PDF\)](#) to your employer within 60 days of the notification. There cannot be a break in coverage between the end of the CalPERS coverage and the beginning of the COBRA coverage.

The monthly premium for continuing coverage under COBRA is 102 percent of the current health or dental plan rate. This amount is paid by you directly to the health plan.

If you have a reduction in work hours, are laid off, or separate from employment, you may receive up to 18 months of COBRA coverage. If you go on military leave, COBRA coverage is 24 months.

Your COBRA eligible dependent may receive COBRA for up to 36 months. Your dependent may become eligible for COBRA when:

- You get divorced or terminate your domestic partnership
- You get a legal separation
- Your child ceases to be a dependent (when they reach age 26)
- You die, unless they qualify for continued coverage as a survivor

Health Plans

We offer different types of health plans. The availability of these plans varies depending on where you live or work.

- **Preferred Provider Organizations (PPO)** are available worldwide and generally allow greater flexibility when choosing providers. There is a yearly deductible, but you don't need a referral to see a specialist.
- **Health Maintenance Organizations (HMO)** have a standard design that simplifies plan selection. Healthcare is provided within the plan's predefined network and you must select a primary care provider.
- **Exclusive Provider Organizations (EPO)** generally function like HMOs and offer the same services. EPO members do not have to select a primary care provider but must seek services from the EPO network of providers. This plan is available in a few counties where access to HMO's are limited.
- **Association** plans are available but are only available to dues paying members of those organizations.

Use the [Health Plan Search by Zip Code](#) tool to find the CalPERS health plans available in your area. You can either use your home or work zip code.

Review the **Health Benefit Summary (HBD-110)** for information that will help you make an informed choice about your health plan. This publication compares covered services, co-payments, and benefits for

health plans we offer. View or download it on the [Forms & Publications](#) page of our website. Costs and coverage vary by plan type. Find our [Plans & Rates](#) on our website.

You're allowed to change your health plan during open enrollment and with a qualifying event, including when you move or when you change employers.

Health Into Retirement

You're eligible to enroll in a plan or continue your [health enrollment](#) as a retiree if you:

- Separate from employment and retire within 120 days. Your separation and retirement dates can't be the same date. Your separation date is your last day on payroll with your employer and your retirement date is the actual retirement effective date chosen by you.
- Receive a monthly retirement allowance
- Are eligible for health benefits on your date of separation

Health Vesting for Retirement

Health vesting refers to the amount of time you must be employed by your employer in order to receive their contribution toward your health premium at retirement.

If you are a public agency or school member, your employer may or may not have a vesting requirement and contributions vary. Contact your employer to find out how much they will contribute toward your monthly premium.

Vesting for state and CSU retirees is based on your date of hire and your bargaining unit. If you receive 100 percent of the state's contribution toward your health benefits this may or may not cover 100 percent of the premium. This means that if your health plan premium is more than the state's contribution, you will be required to pay the remaining balance.

Find more information about health into retirement and vesting by reading our publication [Health Program Guide \(HBD-120\) \(PDF\)](#).

Resources

Visit the [Health Benefits](#) webpage to find more information about active member health benefits, including eligibility and enrollment, plans and rates, and open enrollment.

The **Evidence of Coverage** publications can be found under each health plan on the [Plans & Rates](#) webpage. These publications are provided by the plans and describe the terms and conditions of coverage including benefits, covered services, and co-payment information.

Log in to your [myCalPERS](#) account to find your current service credit and contribution balances, your earliest date until retirement. You can also change your beneficiaries, generate estimates, and more.

Once you log in you can view your **Health Summary** page which provides information about your medical plan, coverage type, when you were enrolled, information about your premium. You'll also find your

subscriber information as well as a list of any dependents enrolled on your health plan along with vesting information.

You can do a side-by-side comparison of the available health plans by using the **Search Health Plans** tool. Remember, while an active employee, you should continue to contact your employer regarding any health plan changes.

You can submit a question online using **Messages** in myCalPERS. Because myCalPERS is behind your username and password, we may be able to provide a more personalized response.

Other available resources include:

- Schedule an appointment with a [Regional Office](#) counselor
- Customer Contact Center **888 CalPERS** (or **888-225-7377**)
- [Subscribe](#) to our **Member Education Bulletin**
- [Register](#) for our monthly videos
- Watch our [YouTube Videos](#)