

HEALTH ENROLLMENT REASON CODES

NEW ENROLLMENT			
REASON CODE	REASON DESCRIPTION	EVENT DATE	EFFECTIVE DATE METHOD*
100	New Employee	Date of appointment	2
101	Late or Loss of coverage (Employee)	Date other coverage ends	2
102	New enrollment after Reinstatement from Retirement	Date of appointment	2
103	Return from Military Leave	Date employee returns to work	2
104	New Enrollment for Employee during <i>Open Enrollment</i>	September 1 st	4
105*	New Enrollment for Retiree during <i>Open Enrollment</i>	September 1 st	4
106	New State Permanent Intermittent (PI) Employee	July 1 st or January 1 st	9
107	New State Permanent Intermittent (PI) Employee Off Pay Status during initial 60-day enrollment period.	Date of return to pay status	2
108	Employee enrolling in their own CalPERS health plan after deletion as a dependent from a CalPERS health plan.	Date dependent coverage terminates	2
109*	Retiree enrolling in their own CalPERS health plan after deletion as a dependent from a CalPERS health plan.	Date dependent coverage terminates	2
110*	New enrollment for Survivor	Date of request to enroll	2
111	New enrollment for Employee Off Pay Status during Open Enrollment Period.	Date of return to pay status	6
112*	New Retirement enrollment	Date of retirement	3
113*	Deferred Retirement enrollment	Date of retirement	3
114*	New Survivor enrollment	Date of member's death	1 M
119	Pending Retirement	Last day of pay status	7
121	Appealing Dismissal	Last day of pay status	3
123	Layoff: Enroll Direct Pay	Last day of pay status	7
131	COBRA Reduction in Hours	Date hours reduced	7
132	COBRA Loss of Employment	Date employment terminates	7
133	COBRA Div/Sep/Mv from Household	Div/Sep/Mv Date	1 M
147	Late or Loss of Coverage (Retiree)	Date other coverage ends	2
148	Enroll half time employee	Date of appointment	2
153	BU 06 PI Cadet New Enroll	Date of appointment	2
154	Open Enrollment Survivor	September 1	4
160	Return From Off Pay Status	Date return from off pay status	2
NEW ENROLLMENT FOR NEW CONTRACTING PUBLIC AGENCY (PA)			
115	New enrollment for Employee of Newly Contracting PA	Date of Contract	8
116*	New enrollment for Retiree of Newly Contracting PA	Date of Contract	8
117*	New enrollment for Survivor of Newly Contracting PA	Date of Contract	8
118	New Contracting—LOA (Direct Pay)	Date of Contract	8
150	New Contracting Employee Enroll (Half-time)	Date of Contract	8

*CalPERS Use Only

Updated: 2/11

ADDING DEPENDENT(S)

200	Adding Newborn or Newly Adopted Child	Date of birth, date of adoption or placement for adoption	1 M
201	Adding New Spouse or Step-children due to Marriage	Date of Marriage	2
202	Adding child due to Change in Custody	Date dependent is acquired	2
203	Adding child who qualifies for a parent-child relationship with employee	Date parent-child relationship is established	2
204	Adding dependent due to loss of non-CalPERS health coverage	Date other coverage terminates	2
205	Adding dependent due to return from Military leave	Date of return from Military leave	2
206	Adding dependent during Open Enrollment	September 1 st	4
207	Adding dependent upon return from off pay status during Open Enrollment	Date of return to pay status	6
208	Adding dependent due to Court Order	Date Court Order Received	1 P
209*	Adding dependent to resolve Split Family Enrollment	Administratively determined	3
210*	Adding Certified Disabled Dependent	Administratively determined	3
215	Add Domestic Partner	Date of Registration of Domestic Partnership	2
216	Adding Domestic Partner Child	Date of Registration of Domestic Partnership	2
218	Domestic Partner to Spouse	Date of Request	1 P

DELETING DEPENDENTS

300	Deleting dependent due to Death	Date of death	1 M
301	Deleting dependent who reaches Age 26	Dependent's 26 th birth date	1 M
302	Deleting dependent(s) due to Divorce	Date of divorce	1 M
303	Deleting child due to Marriage	Date of child's marriage	1 M
304	Deleting dependent who is enrolling in their own CalPERS health plan	The day before the effective date	1 M
305	Deleting dependent that is no longer Disabled.	Date determined no longer disabled	1 M
306	Deleting ineligible dependent.	Date determined ineligible as a dependent	1 M
307	Deleting dependent that obtains other coverage.	Date other coverage begins	1 P
308	Deleting dependent due to Legal Separation.	Date of legal separation	1 P
309	Deleting dependent who goes on Military Leave	Date of Military Leave	1 P
310	Deleting child who no longer qualifies for a parent-child relationship	Date parent-child relationship ceases	1 M
311	Deleting all dependents	Date of request	1 P
312	Deleting dependent due to Change in Custody.	Date custody changes	1 P
313	Deleting dependent that moves out of household.	Date of move	1 P
314*	Deleting dependent to resolve dual coverage or split family enrollment.	Administratively determined	3
315*	Deleting dependent due to premium deduction exceeds gross (AB 592)	Administratively determined	3
318	Domestic Partner Termination	Date Partnership terminates	1
319	Domestic Partner Child Termination	Date Domestic Partnership Terminates	1
320	Deleting dependent during Open Enrollment	Any date in Open Enrollment	4
322	Change Domestic Partner to Spouse	Date of Request	1 P
323	Change Domestic Partner Child	Date of Request	1 P

CHANGING HEALTH PLANS			
400	OPEN ENROLLMENT Change in Health Plans	September 1st	4
401	Changing health plans upon return from off pay status during Open Enrollment	Date of return to pay status	6
402	Change in Home or Work Address (Move)	Date of move	1 P
403	Gain Association Membership	Date of membership	1 P
404	Lose Association Membership	Date loses membership	1 M
405*	Special Open Enrollment	Administratively determined	5
406*	Change in health plan due to premium deduction exceeds gross net	Administratively determined	3
407*	Rollover/Mass Plan Change	Administratively determined	3
408*	Provider Network Disruption	Administratively determined	3
409*	Change in Medicare coordinated health plan	Administratively determined	3
ELIGIBILITY ZIP CHANGE			
480	Add Eligibility ZIP Code	Administratively determined	3
481	Terminate Eligibility ZIP Code	Administratively determined	3
CANCEL			
501	Change in appointment to Non-Participating Bargaining Unit	Date of change in appointment	1 M
502	Cancel coverage due to reduction in time base, tenure, or a Permanent Intermittent (PI) employee who did not meet control period hours	Date status changes or for PI end of control period (June 30 th or December 31 st)	7
503	Cancel coverage to elect Flex Cash during Open Enrollment	September 1st	4
504*	Delay in Retirement Roll Placement	Administratively determined	1 P
505	Voluntary Request to Cancel Coverage	Date of Request	1 P
530	Cancel coverage during Open Enrollment	Any date in Open Enrollment	4
533	Off Pay Status Cancel	Last day of pay status	7
DIRECT PAY			
704	Leave of Absence	Last day of pay status	7
705	Worker Comp/Claim Pending	Last day of pay status	7
706	PI/off pay	Last day of pay status	7
707	Suspension	Last day of pay status	7
708	CSU Inactive	Last day of pay status	7
709	Insufficient earnings	Last day of pay status	7
710	Pending NDI	Last day of pay status	7
712	Chg to deduct-Return to Work	Last day of pay status	2
715	Chg to deduct-FMLA	Last day of pay status	7