

THE CALIFORNIA STATE UNIVERSITY  
Office of the Chancellor  
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**Date:** June 24, 2003

**Code:** TECHNICAL LETTER  
HR/Benefits 2003-10  
Supplement #1

**To:** Human Resources Directors  
Benefits Officers

**Reference:** HR/Benefits 2002-25

**From:** Cathy Robinson, Assistant Vice-Chancellor  
Human Resources Administration

**Subject:** Automated Benefits Programs: Update

As previously stated in HR/Benefits 2003-10 and HR/Benefits 2002-25, effective July 1, 2003, Human Resources Administration is phasing out its automated benefits systems for long-term disability (LTD), basic life and vision programs. Campuses are working diligently to implement the State Controller's Office (SCO) electronic interface process, either individually or through the Common Management Systems automated benefits program. Please be advised that all campuses must complete transition to an automated process as soon as possible.

Because some campuses will not have completed the required testing by July 1, the SCO has agreed to accept manual processing of these benefits on a short-term temporary basis. The Miscellaneous Benefits Enrollment Authorization (MBEA) Form that was created to enroll AB 211 employees into these benefit programs has been revised to accommodate the enrollment of all eligible employees in the appropriate benefit programs.

**Enrollment Instructions – Manual Form**

Attachment A is the revised form that campuses should use to enroll eligible employees in the appropriate benefit program. As you know, not all employees are eligible for all programs. To assist campuses, Attachment B is an Organization Code chart listing the appropriate benefit and organization code for each CBID, if eligible for the benefit program. Campuses should utilize the following instructions when completing the form:

1. Complete Sections 1-3. Section 4 lists embedded deduction codes for the three benefit programs.

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**Distribution:**

CSU Presidents  
Vice Chancellor, Human Resources  
Executive Vice Chancellor, CFO  
Vice Presidents, Business/Administration  
Associate Vice Presidents/Deans of Faculty  
Budget Officers  
Director, SOSS  
Payroll Managers

2. In Section 5, place the appropriate organization code next to the benefit program. If the employee is ineligible for the benefit, place horizontal lines through the DED CODE and in the ORG. CODE column. For example, an employee in a CSEA covered position is ineligible for LTD, so lines would be placed in Sections 4 and 5 next to LTD.
3. In Section 6, if the employee is a new hire or becomes newly eligible for benefits, check “new.” If the employee loses eligibility for benefits or is separating from employment, check “delete.”
4. In Section 7, please key the pay period consistent with the effective date of appointment, regardless of when the form is completed.\*
5. Complete Section 9 including the CBID for the employee being enrolled in the benefit program.
6. Mail the form to the SCO at the address listed on the form, forward a copy of the form to the employee, and keep a copy for your records.

\*For example, for an AY employee appointed August 27, whose form is not completed until October, the pay period to be keyed is September. Campuses should review their academic calendar and tie the deduction to the first academic pay period of the new AY.

For staff appointments, the pay period should be consistent with the effective date of the appointment. For example, an employee with a hire date of July 25 should be keyed for the July pay period.

### **Unique Faculty Enrollments**

With the implementation of AB 211 and the new enrollment processes set to begin July 1, the following changes will be implemented effective July 1:

- For AB 211 enrollments, campuses no longer need to key “2111” in item 962 as systemwide HR-ISA administration of these benefits is being terminated.
- Campuses are encouraged to enroll “grandfathered” faculty employees through the AB 211 enrollment process as it provides expanded eligibility.

If you have any questions, please contact Pamela Chapin in Human Resources Administration at (562) 951-4414 or by email at [pchapin@calstate.edu](mailto:pchapin@calstate.edu). This technical letter is also available on Human Resources Administration’s web page at: <http://www.calstate.edu/HRAdm/memos.shtml>.

CR/pc  
Attachments



# The California State University

## MISCELLANEOUS BENEFITS ENROLLMENT AUTHORIZATION FORM

**Instructions:**

Completion of this form enrolls or deletes coverage for employees under normal enrollment (at least half time for 6 months and 1 day) and part time Faculty and Coaches (qualified under AB 211 and CB Agreement) eligible for Vision, Life Insurance and Long-Term Disability benefits. Upon separation or loss of eligibility due to reduction of time base below 0.5 (for normal enrollments) or 0.4 (for AB 211 enrollments), deletion of coverage MUST be submitted immediately.

If the employee is ineligible for a particular benefit, place horizontal lines through the DED. CODE (Section 4) and ORG. CODE (Section 5). The effective date of enrollment is the pay period the employee is hired or becomes eligible (Section 7).

Please type or print clearly.

### TO: STATE CONTROLLER – PPSD/PAYROLL SERVICES

(1) SOCIAL SECURITY		(2) NAME (FIRST) (MIDDLE) (LAST)			(3) POSITION NUMBER			
					AGENCY	UNIT	CLASS CODE	SERIAL
BENEFIT	(4) DED. CODE	(5) ORG. CODE	(6) CHANGE TYPE		(7) PAY PERIOD		(8) PARTY CODE	
			NEW	DELETE	MONTH	YEAR		
VISION	450						3	
LIFE INS.	250							
LTD	250							
Remarks:								
(9) PLEASE PROVIDE THE FOLLOWING ADDITIONAL INFORMATION:								
FORM COMPLETED BY (PLEASE PRINT):					AUTHORIZED SIGNATURE:			
CAMPUS NAME			TELEPHONE NUMBER			DATE SIGNED		
ENROLLEE CBID:								

**Mail Completed Form To:**

**State Controller's Office  
PPSD/Miscellaneous Deductions Unit  
P.O. Box 942850  
Sacramento, CA 94250**

<b>Organization Code</b>				
<b>Unit # / Description</b>		<b>Vision</b>	<b>Basic Term Life</b>	<b>LTD</b>
<b>Unit 1</b>	<b>Physicians</b>	003	N/A	103
<b>Units 2, 5, 7 &amp; 9</b>	<b>CSEA</b>	003	027	N/A
<b>Unit 3</b>	<b>Faculty</b>	003	021	101
<b>Unit 4</b>	<b>Academic Support</b>	003	024	102
<b>Unit 6</b>	<b>Skilled Crafts</b>	003	N/A	N/A
<b>Unit 8</b>	<b>Public Safety</b>	003	023	N/A
<b>Unit 10</b>	<b>Operating Engineers</b>	003	N/A	N/A
<b>E99 TA</b>	<b>Excluded TA</b>	003	022	N/A
<b>E99</b>	<b>Excluded</b>	003	N/A	N/A
<b>C99</b>	<b>Confidential</b>	003	025	N/A
<b>M80</b>	<b>MPP</b>	003	020	100
<b>M98</b>	<b>Executives</b>	003	026	104
<b>FERP</b>	<b>FERP</b>	997	N/A	N/A