California State University SAN MARCOS

Finance & Administrative Services

Benefits Enrollment Worksheet

Employee Information		
Name:	Social Security Number:	PeopleSoft ID:
Campus Department:	Address:	
Contact Phone/Campus Extension:	Contact Email:	Marital Status:

Type of Action				
Enroll in Plan	Cancel Plan	Change Plan	Add/Delete Dependent	Transferring from another CSU/State Agency?
☐ Health ☐ Dental ☐ FlexCash Health ☐ FlexCash Dental	☐ Health ☐ Dental ☐ FlexCash Health ☐ FlexCash Dental	☐ Health ☐ Dental	☐ Health ☐ Dental	☐ No ☐ Yes - Agency:
Permitting Event: Select	Event Date:		Eligibility Zip (employer or personal):	

Plan Options

Medical Plan		FlexCash Plan
☐ Anthem Select HMO	☐ Sharp HMO	☐ Health FlexCash ($128/month)
☐ Anthem HMO Traditional	☐ United Healthcare HMO	☐ Dental FlexCash ($12/month)
☐ BlueShield Access+HMO	☐ PERS-Care PPO	
☐ Health Net Salud Y Mas	☐ PERS-Choice PPO	Alternative Coverage Information:
☐ Health Net Smartcare	☐ PERS-Select PPO	Medical Insurance Carrier/Policy #
☐ Kaiser HMO	☐ PORAC (unit 8 only)	_____
Dental Plan:		Dental Insurance Carrier/Policy #
☐ Delta Dental PPO		
☐ Delta Care USA Delta Care USA Facility:_____		_____

Dependent Enrollment Selections (*Copies of birth certificates required for dependent children. Copies of Marriage Certificate or Declaration of Domestic Partnership required for spouse/domestic partner.***)**

First Name	Last Name	Social Security	Date of Birth	Relationship	Health		Dental		Vision	
					Add	Del	Add	Del	Add	Del
				Self						

Employee Signature: _____ Date: _____

You have the option to voluntarily decline benefits offered by the CSU. To decline medical coverage, you must complete CalPERS form HBD-12A. If you do not select medical coverage (or FlexCash) within the 60-day timeframe, then you are agreeing, by default, to decline the offer of medical coverage. Participants in the CSU benefit plans must notify the HR Benefits Office of any family status changes (i.e., marriage, divorce, dependent child turns age 26, etc.) within 60 days of the event date. Failure to notify HR of a family status change event may result in financial liability for any costs due to late notification and correction of retroactive benefits coverage. Review the CalPERS Health Program for details on eligibility, deadlines and family status changes.

Print Form