Sample Email from Personnel Liaison

# New to State:

Dear (employee’s name):

Congratulations, and welcome to our team.

This email is to provide you information regarding the many benefits provided to employees of the State of California.

The New Employee Benefits Orientation found on the California Department of Human Resources (CalHR) website (<http://media.calhr.ca.gov/calhr/new-employee-orientation.shtm>) provides information regarding essential benefits and services, optional benefits, and automatic benefits available to our employees. (The department may wish to include a link to its own employee orientation in addition to or in place of CalHR’s).

As a state employee, based on your appointment tenure and time base, you may be entitled to Health, Dental, and Vision benefits. You have **60 days** from the effective date of your appointment to submit your enrollment forms for these benefits (Basic Vision coverage is automatic for all employees and eligible dependents); however, the sooner you submit your benefit forms, the sooner you will have benefits. Plan coverage, premium information, and enrollment forms can be found utilizing the following links:

* Health Benefits - <http://www.calpers.ca.gov/>
	+ Health Benefit Plan Enrollment Form - HBD-12 <https://www.calpers.ca.gov/docs/forms-publications/health-benefits-enrollment-form.pdf>
	+ Declaration of Health Coverage – HBD-12A <https://www.calpers.ca.gov/docs/forms-publications/declaration-health-coverage.pdf>
* Dental Benefits - [http://www.calhr.ca.gov/Documents/dental-handbook-2015.pdf](https://authoring.calhr.ca.gov/Documents/dental-handbook-2015.pdf)
	+ Dental Plan Enrollment Authorization - STD 692 <http://www.documents.dgs.ca.gov/dgs/fmc/pdf/std692.pdf>
* Vision Benefits - [http://www.calhr.ca.gov/Documents/vision-basic-premier-comparison-open-enrollment.pdf](https://authoring.calhr.ca.gov/Documents/vision-basic-premier-comparison-open-enrollment.pdf)
	+ For Premier plan enrollment - [http://www.calhr.ca.gov/Documents/calhr-774.pdf](https://authoring.calhr.ca.gov/Documents/calhr-774.pdf)

CalHR also provides a link to the Benefits Calculator ([http://www.calhr.ca.gov/Documents/benefits-calculator-2014-2015.pdf](https://authoring.calhr.ca.gov/Documents/benefits-calculator-2014-2015.pdf)) which can be utilized to determine your contribution towards your Health, Dental, and Vision premiums.

Additionally, Retirement benefit information can be found on California Public Employees Retirement System’s (CalPERS) website (<https://www.calpers.ca.gov/docs/forms-publications/state-misc-industrial-benefits.pdf>).

Please take a moment to review and sign the following additional forms pertaining to your employment at (department name):

* (include any general or department specific forms or documents that new employees should review).

If you have any questions about the above information, please contact me via email, or by phone at (Personnel Liaison’s phone #).

Welcome to the (department name)!

# Existing State Employee:

Dear (employee’s name):

Congratulations, and welcome to our team.

Because you are a current state employee, your benefits will carry over with you to (department name) uninterrupted unless you have a qualifying event which allows you to change your benefit enrollment.

Please take a moment to review and sign the following forms pertaining to your employment at (department name):

* (include any general or department specific forms or documents that new employees should review).

Should you have any changes to your benefit enrollment, or have any questions please contact me via email, or by phone at (Personnel Liaison’s phone #).

Welcome to (department name)!