

MEMORANDUM

To: PERSONNEL MANAGEMENT LIAISONS Date: May 14, 1992  
REFERENCE CODE: 92-55

THIS MEMORANDUM SHOULD BE DISTRIBUTED TO:  
ACCOUNTING OFFICERS AND  
ACCOUNTING OFFICE STAFF

From: Department of Personnel Administration

Subject: Semi-Annual Employer Paid Administration Fee for Employees  
in the FlexElect Program and the Premium Only Plan (POP)

In the May 1992 payroll cycle (June 1, 1992 warrant), the State Controller's Office (SCO) will collect the semi-annual employer-paid administration fee for employees enrolled in the State's FlexElect Program and Premium Only Plan (POP).

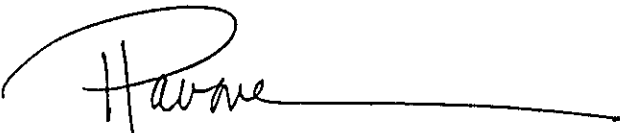
FlexElect Semi-Annual Administration Fee

For each employee who is enrolled in the State's 1992 FlexElect Program, the semi-annual administration fee is computed at \$.75 a month for six (6) months, which is a total of \$4.50. This amount will be reflected on the employee's May pay warrant stub as an employer contribution for "Health/Flex".

POP Semi-Annual Administration Fee

The Premium Only Plan (POP) is only for excluded employees who pay an out-of-pocket health and/or dental premium and who are not enrolled in the State's FlexElect Program. For each employee who is enrolled in the State's 1992 Premium Only Plan, the semi-annual administration fee is computed at \$.35 a month for six (6) months, which is a total of \$2.10. This amount will be reflected on the employee's May pay warrant stub as an employer contribution for "Health/Flex".

If you have any questions regarding these administration fees, you may call Janice Yates, Statewide FlexElect Coordinator, at (916) 324-0535 or ATSS 454-0535.

  
Patricia Pavone, Chief  
Benefits and Training Division