

# Health Benefits Systems Guide

Prepared by  
Office of Health Benefits  
Department of Human Resource Management

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**BES: The Official Source Of Data**

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**BES collects, validates, and distributes eligibility and enrollment data for the State Health Benefits Program.**

- ✓ **Rules ensure compliance.**  
BES has built-in rules that comply with State and Federal laws and regulations.
- ✓ **Records for nearly 239,000.**  
BES currently has records for nearly 239,000 State participants and dependents.
- ✓ **Authorizes access to EmployeeDirect.**  
BES authorizes access to EmployeeDirect, the self-service Web tool used by participants to manage elections.
- ✓ **Transfers data to plan administrators.**  
BES transfers data to plan administrators that permits access to benefits and payment of claims.
- ✓ **Integrated with PMIS.**  
BES is integrated with PMIS and PMIS automatically updates BES when HR actions affect health benefits. Non-PMIS agencies enter HR actions affecting health benefits directly in BES.
- ✓ **Sets-up CIPPS payroll deductions.**  
BES automatically sets-up CIPPS payroll deductions. They are sent to DOA on the BES effective date, or the next business day when the effective date has passed. Non-CIPPS agencies set-up their own payroll deductions.
- ✓ **Produces agency reports.**  
BES produces agency reports to help reconcile data discrepancies and issue mandatory notices. Agency reports are found in HuRMan, the secure Web Portal provided by DHRM.
- ✓ **Creates mailing lists.**  
BES creates mailing lists. There must be a record in BES to be included in health benefits mailings.

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**Things to Know About BES Records**

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1. **Records are displayed using a transaction code with a participant's identification number, SSN or name.**
  - ✓ **Records are created and stacked by effective date.**  
Approved records are created and stacked by effective date making them old, current, or in suspense. The newest record is at the top of the stack; the oldest is at the bottom.
  - ✓ **Suspense records take effect at a future date and must be removed to create an earlier record.**  
Once the earlier record is created, a decision must be made about the suspense record. Should it be replaced or not? For example: OE record with QME prior to 07/01.
2. **Records are created or changed using a transaction and reason code with a participant's identification number.**
  - ✓ **Require an event date and a receive date.**
  - ✓ **Should be keyed within 5-7 business days.**
  - ✓ **Automatically create BES Turnarounds.**  
Most will require an event date and a receive date and should be keyed within 5-7 business days of the receive date and before the effective date to avoid coverage issues. Successful transactions automatically create BES Turnarounds.
3. **Keep good records!**
  - ✓ **Supporting documentation is subject to audit.**
  - ✓ **Review and reconcile BES reports.**
  - ✓ **Set-up accurate payroll deductions.**
  - ✓ **Issue mandatory notices.**  
Always review and reconcile BES reports, set-up accurate payroll deductions, and issue mandatory notices. Supporting documentation is subject to audit by the Office of Health Benefits.

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## Health Benefits Systems Guide

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The Health Benefits Systems Guide provides step-by step instructions for using BES and EmployeeDirect.

- ✓ **Updated annually; mid-year changes in E-News.**  
The Health Benefits Systems Guide is updated annually with mid-year changes in E-News. The most recent version is dated February 2014.
- ✓ **Go to [www.DHRM.virginia.gov](http://www.DHRM.virginia.gov) Resources for Benefits Administrators.**  
Click For Agencies, Benefits Administration, Manuals & Reports, and Health Benefits Systems Manual.

### Section 1: Getting Started

- ✓ How to get access to BES /PMIS and HuRMan.
- ✓ Contact information for OHB, ITECH, and VITA.

### Section 2: Displaying BES Records

- ✓ How to display participant and dependent records.
- ✓ How to display snapshots of FRAs and health care coverage.
- ✓ How to display or update agency contacts - those who receive information and materials from OHB and emails from EmployeeDirect.

### Section 3: Changing BES Data

- ✓ How to create, change, terminate, and transfer eligibility and enrollment data for participants and their dependents.

### Section 4: BES Codes, Rules, Reports and Screens

- ✓ Quick reference charts and BES screenshots.

### Section 5: EmployeeDirect

- ✓ How EmployeeDirect works with BES.

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## EmployeeDirect: Self-Service Tool

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EmployeeDirect provides secure, quick, and easy on-line access to personnel, compensation, and benefits resources.

- ✓ **99% are satisfied users and 69% use it for Open Enrollment.**  
EmployeeDirect statistics for those using the Health Benefits application.
- ✓ **Directly integrated with BES and available to all *active* participants.**
- ✓ **Convenient links to the DHRM Website, Payline, Plan Administrators, and the Virginia Retirement System.**
- ✓ **Participants can view their current, pending and suspense profiles and request a change.**  
From a personal Main Menu, participants simply click on step-by step links to view their profiles or request a change. Using EmployeeDirect eliminates the enrollment form. Users also have access to records for their dependents and linked family members in split contracts.
- ✓ **Some transactions update BES right away; others require supporting documentation and create a pending record.**  
Some EmployeeDirect transactions update BES right away and assign a confirmation number; others require supporting documentation and create a pending record in BES for the Benefits Administrator to approve or reject. Either way, a "courtesy" email is sent to the Benefits Administrator.
- ✓ **Highest level of security available.**  
EmployeeDirect uses the highest level of security available over the internet and requires participants to be registered account holders.
- ✓ **EmployeeDirect flyer explains registration.**

- Step 1:** Go to DHRM website at [www.DHRM.virginia.gov](http://www.DHRM.virginia.gov)
- ✓ Click Information Technology.
  - ✓ Click Request Access.
- Step 2:** Complete two forms.
- ✓ Information Security Access Form (PMIS and BES users)
  - ✓ DHRM Computer Applications Access Request Form
- Step 3:** Contact ITECH Help Desk with questions about the forms or access.
- ✓ Email: [ihelp@dhrm.virginia.gov](mailto:ihelp@dhrm.virginia.gov)
  - ✓ Phone: 804-225-2133

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## Contact Information

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### BES Help - Contact 1 :

Email: [Herb.Boyd@dhrm.virginia.gov](mailto:Herb.Boyd@dhrm.virginia.gov)  
Fax: 804-371-0231  
Phone: 804-371-6062 in Richmond or 888-642-4414 outside Richmond

### BES Help - Contact 2 :

Email: [Felicia.Smith@dhrm.virginia.gov](mailto:Felicia.Smith@dhrm.virginia.gov)  
Fax: 804-371-0231  
Phone: 804-225-2208 in Richmond or 888-642-4414 outside Richmond

### BES Help - Contact 3 :

Email: [Dan.Farrell@dhrm.virginia.gov](mailto:Dan.Farrell@dhrm.virginia.gov)  
Fax: 804-371-0231  
Phone: 804-371-2575 in Richmond or 888-642-4414 outside Richmond

### Office of Health Benefits:

Email: [ohb@dhrm.virginia.gov](mailto:ohb@dhrm.virginia.gov)  
Fax: 804-371-0231  
Phone: 804-225-3642 in Richmond or 888-642-4414 outside Richmond  
Web: [www.dhrm.virginia.gov/resources/benefitsadmin/benefitsadmintoc.html](http://www.dhrm.virginia.gov/resources/benefitsadmin/benefitsadmintoc.html)

### ITECH:

Email: [ihelp@dhrm.virginia.gov](mailto:ihelp@dhrm.virginia.gov)  
Fax: 804-371-0230  
Phone: 804-225-2133  
Web: <http://web1.dhrm.virginia.gov/itech>

### VITA Service Desk:

Email: [vccc@vita.virginia.gov](mailto:vccc@vita.virginia.gov)  
Phone: 866-637-8482

### DHRM:

Web: [www.dhrm.virginia.gov](http://www.dhrm.virginia.gov)







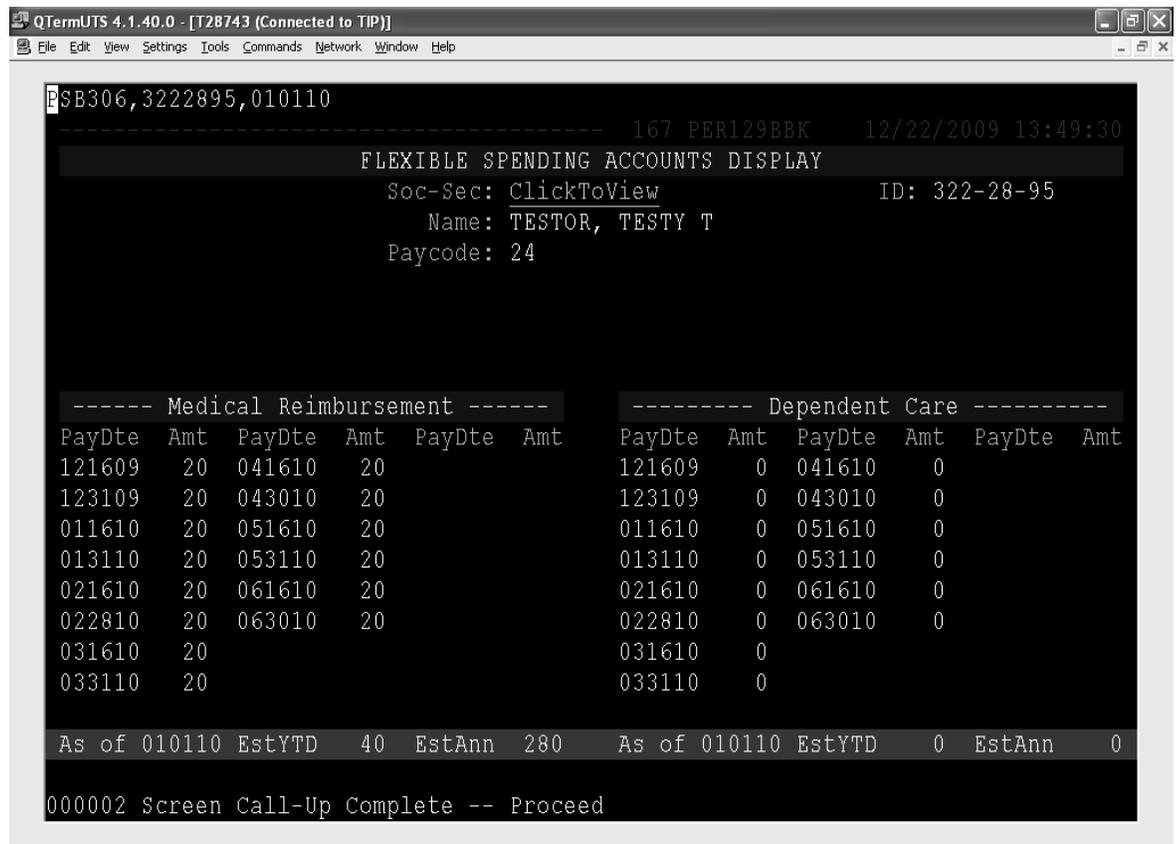
This transaction is used to display a snapshot of a participant's flexible reimbursements accounts (FRAs). It requires the participant's identification number, social security number or name.

When called it displays FRA data for the current plan year. Change the date in the command line to display a different plan year.

**Keying Instructions:**

- Step 1:** Key PSB306, the identification number, social security number or name and transmit.
  - ✓ An error message means the transaction failed. Correct the error and re-key PSB306.

PSB306 returns when the transaction succeeds.



For example:

This snapshot is for Testy Testor, ID 322-28-95 who is paid 24 times a year and has \$20 per pay period contributed to a MRA beginning with pay date 12/16/09. As of 01/01/10 the estimated year-to-date contribution is \$40 and the estimated annual amount is \$280.





This transaction is used to create a BES record for a newly eligible Non-PMIS participant. The PMIS transaction updates BES when a PMIS participant is newly eligible for the Program.

A newly eligible participant is one never in BES or rehired more than 30 days after termination. A valid SSN is required and their default health care coverage is Waived. Participants rehired within 30 days after termination are reinstated with the same elections they had at termination.

It is important that the eligible participant have a BES record to receive Program mailings. It is best to key this transaction as soon as the participant is eligible for the Program.

*Special Handling:*

- 1) When a social security number for a participant is unavailable, send a Request for Assistance form to OHB. If approved, a system-generated SSN is assigned by BES.
- 2) Participant records in the State Retiree Program are considered Non-PMIS records and most are transferred from the State Employee Program. Sometimes, however, a new participant record must be created. Examples include a retiree, survivor, linked spouse or linked child not previously covered who become eligible due to a qualifying mid-year event.

*Vendor Files:*

- 1) BES does not include Waived records for newly eligible participants on the eligibility files to vendors.

**Keying Instructions:**

**Step 1:** Key PSB000, the social security number and transmit.

- ✓ See "Special handling" above for specific keying tips.
- ✓ An error message means the transaction failed. Correct the error and re-key PSB000.

PSB000 returns when the transaction is successful.

- ✓ Key the SSN, tab to Xmit and transmit.
- ✓ Re-key the SSN to confirm and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB101 returns when the transaction succeeds.

- ✓ Key the appropriate data items, tab to Xmit and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB352 with reason code 01 returns when the transaction succeeds.

- ✓ Verify the data forwarded from PSB101 is correct. If a mistake is found, re-key PSB000.
- ✓ Key the appropriate coverage data items, tab to END and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB305 returns when the transaction is complete.

- ✓ Verify the changes. If a mistake is found, re-key PSB301 with reason code 01.
- ✓ Contact OHB when unable to correct a mistake.

**Step 2:** Reconcile BES Turnaround documents. Resolve discrepancies immediately.

- ✓ Created for each successful BES transaction
- ✓ Found in the agency's HuRMan folder daily after 5:00 AM.
- ✓ File Name: BES-Turnaround

**Step 3:** Keep good records.

- ✓ Supporting documentation for each BES transaction is subject to audit.

This transaction is used to manage flexible reimbursement account data. A BES reason code, an event date, and a receive date are required. The reason code identifies why the transaction is being used. It permits certain data changes on the participant's BES record based on Program guidelines.

**Always key personal information and health care coverage changes before keying flexible reimbursement account changes.**

It is best to key this transaction within 5-7 business days of the receive date and before the effective date to avoid a delay in coverage.

*Vendor Files:*

- 1) BES sends an eligibility file to the FRA administrator on the 10<sup>th</sup> and 25<sup>th</sup> of each month. Successful transactions are sent on the next scheduled file following their effective date. For example, a FRA keyed on May 11<sup>th</sup> and effective June 1 would be sent on June 10<sup>th</sup>. Open Enrollment transactions are sent the day after the BES keying deadline.
- 2) The FRA administrator sends a confirmation statement to the participant within 7-10 business days after the eligibility file is received.

**Keying Instructions:**

**Step 1:** Key PSB200, the identification number, the reason code and transmit.

- ✓ See "Reason Code Rules" chart for a list of FRA reason codes.
- ✓ An error message means the transaction failed. Correct the error and re-key PSB200.

PSB200 (FSA Update screen) returns when the transaction succeeds.

- ✓ Key the event date, the receive date, tab to Xmit and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB200 returns when the transaction succeeds.

- ✓ Key the appropriate data items, tab to Xmit and transmit.
- ✓ "Transaction Complete" message displays when the transaction succeeds.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

Key PSB305, the identification number and transmit.

- ✓ Verify the changes. If you find a mistake, re-key PSB200. To correct a PMIS paycode, key PSE211 for classified employees or PSE083 for faculty and then re-key PSB200.
- ✓ Contact OHB when unable to correct a mistake.

**Step 2:** Reconcile BES Turnaround documents. Resolve discrepancies immediately.

- ✓ Created for each successful BES transaction
- ✓ Found in the agency's HuRMan folder daily after 5:00 AM.
- ✓ File Name: BES-Turnaround

Ensure payroll deductions are set-up accurately.

- ✓ BES automatically sets-up CIPPS deductions; they appear in the pay period ending on the 9<sup>th</sup> of the month following the transaction's effective date.

**Step 3:** Issue to participants who enroll in a medical FRA:

- ✓ General Notice of Extended Coverage Rights (within 90 days of effective date)
- ✓ Employee/Retiree Privacy Notice of Creditable Coverage

**Step 4:** Keep good records.

- ✓ Supporting documentation for each BES transaction is subject to audit.

This transaction is used to manage health care coverage data for a current BES participant. A BES reason code, an event date, and a receive date are required. The reason code identifies why the transaction is being used. It permits certain data changes on the participant's BES record based on Program guidelines.

Always key personal information changes before health care coverage changes. It is best to key this transaction within 5-7 business days of the receive date and before the effective date to avoid a delay in coverage.

*Special handling:*

- 1) When a social security number for a dependent child is temporarily unavailable, enter all 9s in the social security number field and a system-generated number will be assigned by BES. After three months and until a valid social security number is entered, BES will not allow any changes.
- 2) When a social security number for a spouse is unavailable, or if a dependent child will not have a social security number, send a Request for Assistance form to OHB. If approved, a system-generated SSN will be assigned by BES.
- 3) When an employee chooses to waive their own coverage and be covered as a dependent under their spouse's State plan the employee's BES record must be waived first. Then, the employee can be added as a dependent by the spouse's agency.
- 4) When a Qualified Medical Child Support Order (QMCSO) is received, key PSB355 with reason code 71. The event date is the date the order is received. The QMCSO indicator must be deleted before the child may be removed from coverage.

*Vendor Files:*

- 1) BES sends eligibility files to the health care plan administrators daily. Successful transactions are sent 7-10 business days prior to the effective date, or the next business day when the effective date has passed. Open Enrollment transactions are sent the day after the BES keying deadline.
- 2) When a Non-Medicare plan participant enrolls in coverage, a combined health care plan ID card is issued. Separate ID cards are issued to Medicare plan participants who also enroll in prescription drug and dental coverage. Health care coverage changes only create a new ID card when information on the existing card changes. Additional cards are available by calling the ID Card Order Line.

**Keying Instructions:**

When a participant in the Retiree Program chooses to cover a dependent and one or both of them are eligible for Medicare, it is necessary to create a split contract. Skip the steps below and see "Split Contract Coverage".

- Step 1:** Key PSB301, the identification number, the reason code and transmit.
- ✓ See "Reason Code Rules" chart for a list of reason codes permitted.
  - ✓ An error message means the transaction failed. Correct the error and re-key PSB301.

- PSB351 (BES Update screen) returns when the transaction succeeds.
- ✓ Verify address and update if needed; PSB351 returns when update is successful.
  - ✓ Key the event date, the receive date, tab to Xmit and transmit.
  - ✓ An error message means the transaction failed. Correct the error and transmit again.

- PSB301 returns when the transaction succeeds.
- ✓ See "Special handling" above for specific keying tips.
  - ✓ Key the appropriate data items, tab to END and transmit. To remove a dependent's coverage, key the day before the effective date in the delete date field. To remove a delete date, replace it with zeros (000000).
  - ✓ An error message means the transaction failed. Correct the error and transmit again.

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- Step 1 continued:** PSB111 returns when a Medicare plan is selected.
- ✓ Key the Medicare HICN and transmit.
  - ✓ An error message means the transaction failed. Correct the error and transmit again.
- PSB305 returns when the transaction is complete.
- ✓ Verify the changes. If you find a mistake, correct it. To correct most mistakes, re-key PSB301 with the appropriate reason code and the same dates. Key PSB117 to remove a record in suspense.
  - ✓ Contact OHB when unable to correct a mistake.
- Step 2:** Reconcile BES Turnaround documents. Resolve discrepancies immediately.
- ✓ Created for each successful BES transaction
  - ✓ Found in the agency's HuRMan folder daily after 5:00 AM.
  - ✓ File Name: BES-Turnaround
- Ensure payroll deductions are set-up accurately.
- ✓ BES automatically sets-up CIPPS deductions; they appear in the pay period ending on the 9<sup>th</sup> of the month following the transaction's effective date.
- Step 3:** Issue to participants who enroll in health care coverage:
- ✓ Member Handbook (a new one is not required if changing option in same plan)
  - ✓ General Notice of Extended Coverage Rights (within 90 days of effective date)
  - ✓ Employee/Retiree Privacy Notice of Creditable Coverage
  - ✓ Medicare Part D General Notice of Creditable Coverage
- Issue to spouses added to health care coverage:
- ✓ General Notice of Extended Coverage Rights (within 90 days of effective date)
  - ✓ Employee/Retiree Privacy Notice
  - ✓ Medicare Part D General Notice of Creditable Coverage (optional if provided to participant)
- Issue to participants and dependents removed from health care coverage:
- ✓ Certificate of Group Health Plan Coverage
- Issue to participants and dependents that qualify for Extended Coverage (COBRA):
- ✓ Extended Coverage Election Notice
- Step 4:** Keep good records.
- ✓ Supporting documentation for each BES transaction is subject to audit.

This transaction is used to accept or reject a BES pending record created when a participant uses EmployeeDirect to submit a change that requires supporting documentation. EmployeeDirect does not create a pending record for personal information updates and most Open Enrollment changes. Only changes that require supporting documentation create pending records.

It is best to review a pending transaction as soon as you receive notice that it has been created to determine what supporting documentation is needed. Then, accept the transaction within 5-7 business days of receiving the supporting documentation and before the effective date to avoid a delay in coverage. Or, reject the transaction because it does not satisfy Program guidelines.

*Special handling:*

- 1) Remember, a pending record may include multiple requests for changes. When you accept or reject it, you accept or reject all the changes. Additional keying is required when some of the requests are valid and others are not. First, print a copy of the pending record for documentation. Next, reject the pending record; this removes it from BES. Then, key PSB301 or PSB200 for the valid changes using the same date received that was on the original pending record.

For example, during Open Enrollment, a pending record may request to add a dependent to health care coverage and set-up a new medical FRA. Not receiving the dependent documentation makes the health care coverage request invalid, but does not change the request to set-up the medical FRA. After you print the pending record for documentation, reject it. Then, key the medical FRA using PSB200 and the same date received on the original pending record.

*Vendor Files:*

- 1) Pending records that are accepted appear on eligibility files BES send to the vendors just like transactions that are keyed in BES using PSB301 for health care coverage or PSB200 for FRAs.
- 2) BES sends an eligibility file to the FRA administrator on the 10<sup>th</sup> and 25<sup>th</sup> of each month. Successful transactions are sent on the next scheduled file following their effective date. For example, a FRA keyed on May 11<sup>th</sup> and effective June 1 would be sent on June 10<sup>th</sup>. Open Enrollment transactions are sent the day after the BES keying deadline.
- 3) BES sends eligibility files to the health care plan administrators daily. Successful transactions are sent 7-10 business days prior to the effective date, or the next business day when the effective date has passed. Open Enrollment transactions are sent the day after the BES keying deadline.
- 4) When a Non-Medicare plan participant enrolls in coverage, a combined health care plan ID card is issued. Separate ID cards are issued to Medicare plan participants who also enroll in prescription drug and dental coverage. Health care coverage changes only create a new ID card when information on the existing card changes. Additional cards are available by calling the ID Card Order Line.

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**Keying Instructions:**

**Step 1:** Key PSBPEN, the identification number and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSBPEN.

PSBPEN returns when the transaction succeeds.

- ✓ See "Special handling" above for specific keying tips.
- ✓ Tab to Accept/Reject, key R to Reject or A to Accept and transmit. A rejected record is removed from BES - notify the participant.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB305 returns when the accepted transaction succeeds.

- ✓ Verify the changes. If a mistake is found, correct it. To correct most mistakes, re-key the transaction with the same reason code, event date and receive date. Use PSB301 for health care coverage and PSB200 for FRA corrections.
- ✓ Contact OHB when unable to correct a mistake.

**Step 2:** Reconcile BES Turnaround documents. Resolve discrepancies immediately.

- ✓ Created for each successful BES transaction
- ✓ Found in the agency's HuRMan folder daily after 5:00 AM.
- ✓ File Name: BES-Turnaround

Ensure payroll deductions are set-up accurately.

- ✓ BES automatically sets-up CIPPS deductions; they appear in the pay period ending on the 9<sup>th</sup> of the month following the transaction's effective date.

**Step 3:** Issue to participants who enroll in health care coverage:

- ✓ Member Handbook (a new one is not required if changing option in same plan)
- ✓ General Notice of Extended Coverage Rights (within 90 days of effective date)
- ✓ Employee/Retiree Privacy Notice of Creditable Coverage
- ✓ Medicare Part D General Notice of Creditable Coverage

Issue to spouses added to health care coverage:

- ✓ General Notice of Extended Coverage Rights (within 90 days of effective date)
- ✓ Employee/Retiree Privacy Notice
- ✓ Medicare Part D General Notice of Creditable Coverage (optional if provided to the participant)

Issue to participants and dependents removed from health care coverage:

- ✓ Certificate of Group Health Plan Coverage

Issue to participants and dependents that qualify for Extended Coverage (COBRA):

- ✓ Extended Coverage Election Notice

Issue to participants who enroll in a medical FRA:

- ✓ General Notice of Extended Coverage Rights (within 90 days of effective date)
- ✓ Employee/Retiree Privacy Notice of Creditable Coverage

**Step 4:** Keep good records.

- ✓ Supporting documentation for each BES transaction is subject to audit.

This transaction is used to remove the term date on the BES record and reinstate the elections for a Non-PMIS participant within the same agency. PMIS transactions update BES for PMIS participants.

It is best to key this transaction within 5-7 business days of the receive date and before the effective date if possible to avoid a delay in coverage.

*Vendor Files:*

- 1) Reinstated BES records appear on eligibility files BES send to the vendors just like BES transactions that are keyed using PSB301 for health care coverage or PSB200 for FRAs.
- 2) BES sends eligibility files to the health care plan administrators daily. Successful transactions are sent 7-10 business days prior to the effective date, or the next business day when the effective date has passed. Open Enrollment transactions are sent the day after the BES keying deadline.
- 3) BES sends an eligibility file to the FRA administrator on the 10<sup>th</sup> and 25<sup>th</sup> of each month. Successful transactions are sent on the next scheduled file following their effective date. For example, a FRA keyed on May 11<sup>th</sup> and effective June 1 would be sent on June 10<sup>th</sup>. Open Enrollment transactions are sent the day after the BES keying deadline.

**Keying Instructions:**

**Step 1:** Key PSB116, the identification number and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB116.

PSB116 returns when the transaction succeeds.

- ✓ Key a note, tab to Xmit and transmit.
- ✓ "Transaction Complete" message displays when the transaction succeeds.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

Key PSB305, the identification number and transmit.

- ✓ Verify that the term date is removed. If you find a mistake, correct it. To correct personal information, key PSB000 and/or PSB301. See "Change Address and Other Personal Information" for specific keying instructions.
- ✓ Contact OHB when unable to correct a mistake.

**Step 2:** Reconcile BES Turnaround documents. Resolve discrepancies immediately.

- ✓ Created for each successful BES transaction
- ✓ Found in the agency's HuRMan folder daily after 5:00 AM.
- ✓ File Name: BES-Turnaround

Ensure payroll deductions are set-up accurately.

- ✓ BES automatically sets-up CIPPS deductions; they appear in the pay period ending on the 9<sup>th</sup> of the month following the transaction's effective date.

**Step 3:** Keep good records.

- ✓ Supporting documentation for each BES transaction is subject to audit.

This transaction is used to display or update agency contacts for communications and materials. Updates entered by the end of the month are generally effective the first week of the following month.

Benefits Contact 1 receives:

- ✓ Communications from OHB
- ✓ Emails from EmployeeDirect
- ✓ Materials to be distributed to members

Benefits Contact 2, Payroll Contact 1 and Payroll Contact 2 receive:

- ✓ Communications from OHB

### Keying Instructions:

- Step 1:** Key PSB100, the agency number, the group number and transmit.
- ✓ An error message means the transaction failed. Correct the error and re-key PSB100.

PSB100 returns when the transaction succeeds.

- ✓ Key the appropriate data items, tab to Xmit and transmit.
- ✓ "Transaction Complete" message displays when the transaction succeeds.
- ✓ Verify the changes. If a mistake is found, re-key PSB100.
- ✓ An error message means the transaction failed. Correct the error and transmit again.
- ✓ Contact OHB when unable to correct an error.

- Step 2:** Update each group within your agency.

```

QTermUTS 4.1.40.0 - [T28743 (Connected to TIP)]
File Edit View Settings Tools Commands Network Window Help

PSB100,129,001                                CONTACTS CHANGE
----- 240 PER129BBK 12/22/2009 13:43:08
Agy 129 DHRM  Group 001      Dept of Human Resource Mgmt

Benefits Contact 1 ID 9999999  Phone 8042252007  Ext:      FAX 8043717401
(PMIS Emp)  E-Mail debbie.wyattsmith@dhrm.virginia.gov  Agy 129
            WYATT-SMITH, DEBORAH D

Benefits Contact 2 ID      Phone      Ext:      FAX
E-Mail      Agy

Payroll Contact 1 ID 9999999  Phone 8043714348  Ext:      FAX 8047865321
(PMIS Emp)  E-Mail charla.hamaker@doa.virginia.gov  Agy 151
            HAMAKER, CHARLA R

Payroll Contact 2 ID 9999999  Phone 8047865909  Ext:      FAX 8047865321
(PMIS Emp)  E-Mail kim.wood@doa.virginia.gov  Agy 151
Mailing Verified  WOOD, KIMBERLY G
Bldg JAMES MONROE BLDG
Addr 101 N 14TH ST FL 12          Loc 51760  Richmond (City)
City RICHMOND          State VA  ZIP 23219  ZIP+4 3684
Shipping Verified
Bldg JAMES MONROE BLDG
Addr 101 N 14TH ST FL 12          Loc 51760  Richmond (City)
City RICHMOND          State VA  ZIP 23219  ZIP+4 3684  Xmit _
000002 Screen Call-Up Complete -- Proceed

```

These transactions are used to manage a current participant's address, phone, email and other personal information. Verify the address format on the USPS Website before keying it. Always key personal information changes before health care coverage changes or flexible reimbursement account changes. It is best to key these transactions within 5-7 business days of the receive date.

The address on a terminated record may be updated by keying PSB302 with identification number.

*Vendor Files:*

- 1) Personal information changes are included on the eligibility files BES sends to the health care plan administrators daily and to the FRA administrator on the 10<sup>th</sup> and 25<sup>th</sup> of the month.

**Keying Instructions:**

**Step 1: *Non-PMIS Participant:***

**Participant's Birth date, sex, SSN and status:**

Key PSB000, the identification number and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB000.

PSB000 returns when the transaction succeeds.

- ✓ Key the appropriate data items, tab to END and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB305 returns when the transaction is complete.

- ✓ Verify the changes. If a mistake is found, re-key PSB000.
- ✓ Contact OHB when unable to correct a mistake.

**Participant's Address, phone numbers, and personal email:**

Key PSB301, the identification number, reason code 37 and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB301.

PSB301 with reason code 37 returns when the transaction succeeds.

- ✓ Key the appropriate data items, tab to END and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB305 returns when the transaction is complete.

- ✓ Verify the changes. If a mistake is found, re-key PSB301 with reason code 37.
- ✓ Contact OHB when unable to correct a mistake.

**Participant's Name (also updates enrolled dependent's information):**

Key PSB301, the identification number, reason code 57 and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB301.

PSB301 with reason code 57 returns when the transaction succeeds.

- ✓ Key the appropriate data items, tab to END and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB305 returns when the transaction is complete.

- ✓ Verify the changes. If a mistake is found, re-key PSB301 with reason code 57.
- ✓ Contact OHB when unable to correct a mistake.

**Steps 2 & 3:** See next page - same as Steps 2 & 3 for a PMIS participant.

Continued on next page

**Step 1: *PMIS Participant:*****Participant's Name, address, birth date, sex and SSN:**

Key PSE091, the identification number and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSE091.

PSE091 returns when the transaction succeeds.

- ✓ Key the appropriate data items, tab to END and transmit. "Transaction Complete" message displays when the transaction succeeds. PMIS automatically updates BES.
- ✓ Verify the changes. If a mistake is found, re-key PSE091.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

**Participant's State phone and State email:**

Key PSE098, the identification number and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSE098.

PSE098 returns when the transaction succeeds.

- ✓ Key the appropriate data items, tab to END and transmit. "Transaction Complete" message displays when the transaction succeeds. PMIS automatically updates BES.
- ✓ Verify the changes. If a mistake is found, re-key PSE098.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

**Participant's Personal email:**

Key PSB301, the identification number, reason code 37 and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB301.

PSB301 with reason code 37 returns when the transaction succeeds.

- ✓ Key the appropriate data items, tab to END and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB305 returns when the transaction is complete.

- ✓ Verify the changes. If a mistake is found, re-key PSB301 with reason code 37.
- ✓ Contact OHB when unable to correct a mistake.

**Participant's enrolled Dependent's information:**

Key PSB301, the identification number, reason code 57 and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB301.

PSB301 with reason code 57 returns when the transaction succeeds.

- ✓ Key the appropriate data items, tab to END and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB305 returns when the transaction is complete.

- ✓ Verify the changes. If a mistake is found, re-key PSB301 with reason code 57.
- ✓ Contact OHB when unable to correct a mistake.

**Step 2:** Reconcile BES Turnaround documents. Resolve discrepancies immediately.

- ✓ Created for each successful BES transaction
- ✓ Found in the agency's HuRMan folder daily after 5:00 AM.
- ✓ File Name: BES-Turnaround

**Step 3:** Keep good records.

- ✓ Supporting documentation for each BES transaction is subject to audit.

When an employee terminates employment with one agency and is rehired by another agency within 30 days of the termination, it is considered an agency transfer and BES must be updated.

Coverage in the old agency ends at the end of the month following the termination and is reinstated in the new agency with the same elections on the first of the month following the hire date in the new agency. When the hire date is the first of a month, coverage in the new agency begins that day.

When a break in coverage occurs, COBRA is offered by the old agency. If COBRA is elected, the new agency contacts OHB to have the COBRA coverage terminated and then reinstates coverage in the new agency.

It is best to key these transactions as soon as you know about them and before the effective date to avoid a delay in coverage.

*Vendor Files:*

- 1) Employment status changes are included on the eligibility files BES sends to the health care plan administrators daily and to the FRA administrator on the 10<sup>th</sup> and 25<sup>th</sup> of the month.

**Keying Instructions:**

***Non-PMIS participant transfers to another Non-PMIS agency:***

- Old Agency: Key PSB301 with reason code 27 to terminate coverage.
- ✓ The event date is the last day worked or on paid leave.
- New Agency: Key PSB000 to reinstate coverage with the same elections on file at termination.
- ✓ See "Add Newly Eligible Participant's Record to BES" for keying instructions.
  - ✓ The event date is the hire date.

***Non-PMIS participant transfers to a PMIS agency:***

- Old Agency: Key PSB301 with reason code 27 to terminate coverage.
- ✓ The event date is the last day worked or on paid leave.
- New Agency: Key PSE001 or PSE002; BES automatically reinstates the same elections on file at termination.
- ✓ The PMIS effective date is the hire date.

***PMIS participant transfers to a Non-PMIS agency:***

- Old Agency: Key the appropriate PMIS transfer transaction; BES automatically terminates coverage.
- ✓ The effective date is the day after the last day worked or on paid leave.
- New Agency: Key PSB000 to reinstate coverage with the same elections on file at termination.
- ✓ Be sure to key the new agency / group number.
  - ✓ The event date is the hire date.

***PMIS participant transfers to another PMIS agency:***

- Old agency: Do nothing.
- ✓ BES automatically updates when the new agency keys the PMIS transfer transaction.
  - ✓ Old agency is responsible for coverage through the end of the month following the last day worked or on paid leave.
- New agency: Key the appropriate PMIS transfer transaction; BES automatically reinstates coverage with the same elections on file at transfer at the new agency.
- ✓ The PMIS effective date is the hire date.

When an employee changes from full-time to part-time employment within the same agency, the participant's status must be changed. FRA elections remain the same and health care coverage is automatically waived at the end of the month following the change to part-time. Participants who wish to continue health care coverage in the State Employee Program must complete a form within 60 days of the change to part-time status. The State does not contribute to the premium so the participant pays the total premium.

It is best to key this transaction as soon as you know about it and before the effective date.

*Vendor files:*

- 1) Employment status changes are included on the eligibility files BES sends to the health care plan administrators daily and to the FRA administrator on the 10<sup>th</sup> and 25<sup>th</sup> of the month.

### Keying Instructions:

#### Step 1: *Non-PMIS Employee:*

Key PSB000, the identification number and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB000.

PSB104 returns when the transaction succeeds.

- ✓ Key the appropriate data items, tab to Xmit and transmit. The event date is the first day in part-time status and the status is part-time.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB305 returns with waived health care coverage when the transaction succeeds.

- ✓ Verify the changes. If a mistake is found, re-key PSB000.
- ✓ After the status is changed, PSB301 or PSB200 may be keyed with reason code 77.

#### *PMIS Employee:*

Key the appropriate PMIS transaction to change the status to part-time; PMIS updates BES and

- ✓ The PMIS effective date is the day after the first day in part-time employment status.
- ✓ A successful PMIS transaction creates waived health care coverage in BES.

Key PSB305, the identification number and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB305.

PSB305 returns when the transaction succeeds.

- ✓ Verify the PMIS changes. If a mistake is found, contact OHB.
- ✓ After the status is changed, PSB301 or PSB200 may be keyed with reason code 77.

#### Step 2: Reconcile BES Turnaround documents. Resolve discrepancies immediately.

- ✓ Created for each successful BES transaction.
- ✓ Found in the agency's HuRMan folder daily after 5:00 AM.
- ✓ File Name: BES-Turnaround

Ensure payroll deductions are set-up accurately.

- ✓ BES automatically sets-up CIPPS deductions; they appear in the pay period ending on the 9<sup>th</sup> of the month following the transaction's effective date.

#### Step 3: Issue to those removed from health care coverage:

- ✓ Certificate of Group Health Plan Coverage
- ✓ Extended Coverage (COBRA) Election Notice

#### Step 4: Keep good records.

- ✓ Supporting documentation for each BES transaction is subject to audit.

When an employee changes from part-time to full-time employment within the same agency, the participant's status must be changed. FRA elections remain the same and health care coverage remains the same, but the health care coverage premium is automatically adjusted to reflect the State's contribution.

It is best to key this transaction as soon as you know about it and before the effective date.

*Vendor files:*

- 1) Employment status changes are included on the eligibility files BES sends to the health care plan administrators daily and to the FRA administrator on the 10<sup>th</sup> and 25<sup>th</sup> of the month.

### Keying Instructions:

#### Step 1: *Non-PMIS Employee:*

Key PSB000, the identification number and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB000.

PSB104 returns when the transaction succeeds.

- ✓ Key the appropriate data items, tab to Xmit and transmit. The event date is the first day in full-time status and the status is full-time.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB305 returns when the transaction succeeds.

- ✓ Verify the changes. If a mistake is found, re-key PSB000.
- ✓ After the status is changed, PSB301 may be keyed with reason code 78.

#### *PMIS Employee:*

Key the appropriate PMIS transaction to change the status to full-time; PMIS updates BES.

- ✓ The PMIS effective date is the day after the first day in full-time employment status.

Key PSB305, the identification number and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB305.

PSB305 returns when the transaction succeeds.

- ✓ Verify the PMIS changes. If a mistake is found, contact OHB.
- ✓ After the status is changed, PSB301 may be keyed with reason code 78.

#### Step 2: Reconcile BES Turnaround documents. Resolve discrepancies immediately.

- ✓ Created for each successful BES transaction.
- ✓ Found in the agency's HuRMan folder daily after 5:00 AM.
- ✓ File Name: BES-Turnaround

Ensure payroll deductions are set-up accurately.

- ✓ BES automatically sets-up CIPPS deductions; they appear in the pay period ending on the 9<sup>th</sup> of the month following the transaction's effective date.

#### Step 3: Keep good records.

- ✓ Supporting documentation for each BES transaction is subject to audit.

When an employee dies, BES must be updated. FRA elections end at the end of the month following the death. When the deceased employee is enrolled in single health care coverage, it also ends at the end of the month following the death. Health care coverage is automatically continued in the State Employee Program for an extra month when dependents are enrolled under the deceased employee unless it is declined. It is best to key this transaction as soon as you know about it.

Dependents eligible for survivor coverage in the State Retiree Program must complete an enrollment form within 60 days of the employee's death. For transfer coverage keying instructions, see "Enroll in Survivor Coverage".

*Vendor files:*

- 1) Employment status changes are included on the eligibility files BES sends to the health care plan administrators daily and to the FRA administrator on the 10<sup>th</sup> and 25<sup>th</sup> of the month.

**Keying Instructions:**

**Step 1: *Non-PMIS Employee:***

Key PSB301, the identification number, reason code 65 and transmit.

- ✓ When dependents decline the extra month of health care coverage, use reason code 27.
- ✓ An error message means the transaction failed. Correct the error and re-key PSB301.

PSB351 (BES Update screen) returns when the transaction succeeds.

- ✓ Key the appropriate data items and transmit. The event date is the date of death.
- ✓ An error message means the transaction failed. Correct the error and transmit again.
- ✓ PSB301 (BES Terminate screen) returns. Tab to Xmit and transmit.

PSB305 returns when the transaction is complete.

- ✓ Verify the changes. To correct most mistakes, key PSB117 to delete the record in suspense and then re-key PSB301.
- ✓ Contact OHB when unable to correct a mistake.

***PMIS Employee:***

Key PSE009; PMIS terminates coverage in BES.

- ✓ Contact OHB when the extra month of health care coverage is declined.

Key PSB305, the identification number and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB305.

PSB305 returns when the transaction is complete.

- ✓ Verify the PMIS changes. If you find a mistake, contact OHB.

**Step 2:** Reconcile BES Turnaround documents. Resolve discrepancies immediately.

- ✓ Created for each successful BES transaction.
- ✓ Found in the agency's HuRMan folder daily after 5:00 AM.
- ✓ File Name: BES-Turnaround

Ensure payroll deductions are set-up accurately.

- ✓ BES automatically sets-up CIPPS deductions; they appear in the pay period ending on the 9<sup>th</sup> of the month following the transaction's effective date.

**Step 3:** Issue to those removed from health care coverage:

- ✓ Certificate of Group Health Plan Coverage
- ✓ Extended Coverage (COBRA) Election Notice

**Step 4:** Keep good records.

- ✓ Supporting documentation for each BES transaction is subject to audit.

When an employee takes a leave of absence BES must be updated. It is best to key leave transactions as soon as you know about them and within 5-7 business days of the effective date when possible. Use the UNUM Action report to key VSDP short-term and long-term disability transactions.

BES calculates a term date when a transaction to begin or extend a leave that affects health care coverage or FRA elections is keyed. The term date is removed when the employee is returned to work. The "Leave Code Rules" chart describes the types of leave and how the BES term date is handled.

Leave of absence generally runs concurrently with Extended Coverage (COBRA) eligibility (see the Health Insurance Manual for details).

*Special handling:*

- 1) Certain changes are permitted when a leave begins or ends; see "Reason Code Rules" for specific changes. Key PSB301 (health care coverage) or PSB200 (FRA) with the appropriate reason code and event date to make election changes.
- 2) Failure to pay a required amount while on layoff or temporary workforce reduction (leave code 20, 21, 22, 23, 24 or 25) terminates coverage and must be keyed by OHB. Failure to pay a required amount while on any other type of leave of absence requires that coverage be waived. Key PSB301 with reason code 79. The event date is the paid-to-date.
- 3) The Leave Expire Report displays records with a leave end date that has expired or will expire within the next 45 days. It is important to review this report regularly and key follow-up leave transactions timely.
  - ✓ Key PSL002 with the agency number to see records for all groups in the Agency.
  - ✓ Key PSL002 with the agency number and the group number to see specific group records.

*Vendor files:*

- 1) Employment status changes are included on the eligibility files BES sends to the health care plan administrators daily and to the FRA administrator on the 10<sup>th</sup> and 25<sup>th</sup> of the month.

**Keying Instructions:**

**Step 1: *Non-PMIS Employee:***

Key PSB003, the identification number and transmit. Or, you may key PSB301, the identification number, reason code 75 and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB003.

PSB003 returns when the transaction succeeds. Follow the screen prompts carefully.

PSB351 (PSB031 for STD) returns when the transaction succeeds.

- ✓ Key the required data items and transmit. Be sure to key the correct dates.
- ✓ An error message means the transaction failed. Correct the error and re-key PSB301

PSB305 returns when the transaction is complete.

- ✓ Verify the changes. To correct most mistakes, key PSB117 to delete the record in suspense and then re-key PSB301.
- ✓ Contact OHB when unable to correct a mistake.
- ✓ After the leave begins or ends, certain changes are permitted. See "Special handling" above for specific keying tips.

Continue with Steps 2 - 4 on the next page.

Continued on next page

**Step 1 continued:**

*PMIS Employee:*

Key PSE003, the identification number and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSE003.

PSE003 returns when the transaction succeeds.

- ✓ Follow the screen prompts carefully, key the required data items and transmit on each screen. Be sure to key the correct dates.
- ✓ "Transaction Complete" message displays and PMIS updates BES when the transaction completes.
- ✓ An error message means the transaction failed. Correct the error and re-key PSE003.

Key PSB305, the identification number and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB305.

PSB305 returns when the transaction is complete.

- ✓ Verify the PMIS changes. If you find a mistake, contact OHB.
- ✓ After the leave begins or ends, certain changes are permitted. See "Special handling" above for specific keying tips.

**Step 2:** Reconcile BES Turnaround documents. Resolve discrepancies immediately.

- ✓ Created for each successful BES transaction.
- ✓ Found in the agency's HuRMan folder daily after 5:00 AM.
- ✓ File Name: BES-Turnaround

Ensure payroll deductions are set-up accurately.

- ✓ BES automatically sets-up CIPPS deductions; they appear in the pay period ending on the 9<sup>th</sup> of the month following the transaction's effective date.

**Step 3:** Issue to those who lose the employer contribution or pre-tax benefit:

- ✓ Extended Coverage (COBRA) Election Notice

Issue to those removed from health care coverage:

- ✓ Certificate of Group Health Plan Coverage
- ✓ Extended Coverage (COBRA) Election Notice

**Step 4:** Keep good records.

- ✓ Supporting documentation for each BES transaction is subject to audit.

When an employee is approved for LTD - Not Working, BES must be updated. Coverage in the State Employee Program ends at the end of the month after the short-term disability benefit is exhausted and the employee does not return to work. Key the LTD - Not Working transaction 5-7 business days prior to the end of the STD.

Participants who wish to continue LTD coverage in the State Retiree Program must submit an enrollment form within 31 days of the loss of coverage in the State Employee Program. For transfer coverage keying instructions, see "Enroll in Long-Term Disability (LTD) Coverage".

*Vendor files:*

- 1) Employment status changes are included on the eligibility files BES sends to the health care plan administrators daily and to the FRA administrator on the 10<sup>th</sup> and 25<sup>th</sup> of the month.

**Keying Instructions:**

**Step 1: *Non-PMIS Employee:***

Key PSB301, the identification number, reason code 75 and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB301.

PSB003 returns when the transaction succeeds.

- ✓ Follow the screen prompts carefully and transmit.

PSB353 returns when the transaction succeeds.

- ✓ Key the appropriate data items and transmit. The LTD Begin Date is the last day worked or on paid leave.
- ✓ An error message means the transaction failed. Correct the error and re-key PSB353.

PSB305 returns when the transaction is complete.

- ✓ Verify the changes. To correct most mistakes, key PSB117 to delete the record in suspense and then re-key PSB301 with reason code 75.
- ✓ Contact OHB when unable to correct a mistake.

***PMIS Employee:***

Key PSE003 to change status to LTD - Not Working; PMIS terminates coverage in BES.

- ✓ The PMIS effective date is the day after the last day worked or on paid leave.

Key PSB305, the identification number and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB305.

PSB305 returns when the transaction is complete.

- ✓ Verify the PMIS changes. If you find a mistake, contact OHB.

**Step 2:** Reconcile BES Turnaround documents. Resolve discrepancies immediately.

- ✓ Created for each successful BES transaction.
- ✓ Found in the agency's HuRMan folder daily after 5:00 AM.
- ✓ File Name: BES-Turnaround

**Step 3:** Issue to those removed from health care coverage:

- ✓ Certificate of Group Health Plan Coverage
- ✓ Extended Coverage (COBRA) Election Notice

**Step 4:** Keep good records.

- ✓ Supporting documentation for each BES transaction is subject to audit.

When an employee retires, BES must be updated. Coverage in the State Employee Program ends at the end of the month following the last day worked and prior to the retirement date. It is best to key this transaction within 5-7 business days of the retirement date.

Participants eligible for retiree coverage and who wish to continue coverage in the State Retiree Program must complete an enrollment form within 31 days of the retirement. For transfer of coverage keying instructions, see "Enroll in Retiree Coverage".

*Vendor files:*

- 1) Employment status changes are included on the eligibility files BES sends to the health care plan administrators daily and to the FRA administrator on the 10<sup>th</sup> and 25<sup>th</sup> of the month.

**Keying Instructions:**

**Step 1: *Non-PMIS Employee:***

Key PSB301, the identification number, reason code 27 and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB301.

PSB351 (BES Update screen) returns when the transaction succeeds.

- ✓ Key the event date, the receive date, tab to Xmit and transmit. The event date is the last day worked or on paid leave.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB301 returns when the transaction succeeds.

- ✓ Key a note about the retirement date, tab to Xmit and transmit twice.

PSB305 returns when the transaction is complete.

- ✓ Verify the changes. To correct most mistakes, key PSB117 to delete the record in suspense and then re-key PSB301.
- ✓ Contact OHB when unable to correct a mistake.

***PMIS Employee:***

Key PSE009 to change status to Retirement.

- ✓ The PMIS effective date is the day after the last day worked or on paid leave.
- ✓ "Transaction Complete" message displays and PMIS terminates coverage in BES when the transaction succeeds.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

Key PSB305, the identification number and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB305.

PSB305 returns when the transaction is complete.

- ✓ Verify the PMIS changes. If you find a mistake, contact OHB.

**Step 2:** Reconcile BES Turnaround documents. Resolve discrepancies immediately.

- ✓ Created for each successful BES transaction.
- ✓ Found in the agency's HuRMan folder daily after 5:00 AM.
- ✓ File Name: BES-Turnaround

**Step 3:** Issue to those removed from health care coverage:

- ✓ Certificate of Group Health Plan Coverage
- ✓ Extended Coverage (COBRA) Election Notice
- ✓ Offer of continued coverage (when eligible) as a retiree

**Step 4:** Keep good records.

- ✓ Supporting documentation for each BES transaction is subject to audit.

When an employee separates from employment, BES must be updated. Coverage in the State Employee Program ends at the end of the month following the termination. It is best to key this transaction as soon as you know about it and before the effective date.

Participants eligible for Extended Coverage (COBRA) and who wish to continue coverage must submit an enrollment form within the COBRA time frames. For transfer coverage keying instructions, see "Enroll in Extended Coverage (COBRA) Coverage".

*Vendor files:*

- 1) Employment status changes are included on the eligibility files BES sends to the health care plan administrators daily and to the FRA administrator on the 10<sup>th</sup> and 25<sup>th</sup> of the month.

**Keying Instructions:**

**Step 1: *Non-PMIS Employee:***

Key PSB301, the identification number, reason code 27 and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB301.

PSB351 (BES Update screen) returns when the transaction succeeds.

- ✓ Key the event date, the receive date, tab to Xmit and transmit. The event date is the last day worked or on paid leave.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB301 returns when the transaction succeeds.

- ✓ Key a note about the separation date, tab to Xmit and transmit twice.

PSB305 returns when the transaction is complete.

- ✓ Verify the changes. To correct most mistakes, key PSB117 to delete the record in suspense and then re-key PSB301.
- ✓ Contact OHB when unable to correct a mistake.

***PMIS Employee:***

Key PSE009 to separate the participant's employment.

- ✓ The PMIS effective date is the day after the last day worked or on paid leave.
- ✓ "Transaction Complete" message displays and PMIS terminates coverage in BES when the transaction succeeds.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

Key PSB305, the identification number and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB305.

PSB305 returns when the transaction is complete.

- ✓ Verify the PMIS changes. If you find a mistake, contact OHB.

**Step 2:** Reconcile BES Turnaround documents. Resolve discrepancies immediately.

- ✓ Created for each successful BES transaction.
- ✓ Found in the agency's HuRMan folder daily after 5:00 AM.
- ✓ File Name: BES-Turnaround

**Step 3:** Issue to those removed from health care coverage:

- ✓ Certificate of Group Health Plan Coverage
- ✓ Extended Coverage (COBRA) Election Notice

**Step 4:** Keep good records.

- ✓ Supporting documentation for each BES transaction is subject to audit.

This transaction is used to transfer qualified coverage from the State Employee or Retiree Program to Extended Coverage (COBRA). Coverage in the State Program must be terminated in BES before enrollment as an extended coverage (COBRA) participant can occur. Election Notices are issued within 14 days of the loss of coverage, and qualified beneficiaries have a 60-day election period to enroll. By design, COBRA coverage is generally started retroactively. It is best to key this transaction within 5-7 business days of the enrollment form receive date but not before the effective date.

*Special handling:*

- 1) COBRA is a continuation of coverage - plan (carrier) changes are not allowed unless there is also a qualifying mid-year event. Changing an option in the same plan is permitted.

*Vendor Files:*

- 1) BES sends eligibility files to the health care plan administrators daily. Successful transactions are sent 7-10 business days prior to the effective date, or the next business day when the effective date has passed.

**Keying Instructions:**

**Step 1:** Key PSB109, the identification number and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB109.

PSB109 (New Agency/Group screen) returns when the transaction succeeds.

- ✓ Verify the participant. If a mistake is found, re-key PSB109.
- ✓ Key the required data items, tab to the appropriate extended coverage (COBRA) group and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB109 (Transfer reason screen) returns when the transaction succeeds.

- ✓ Verify the new Agency/Group. If a mistake is found, re-key PSB109.
- ✓ Tab to the appropriate extended coverage (COBRA) reason and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB109 (New Agency/Group screen) returns a second time when the transaction succeeds.

- ✓ Verify the (COBRA) reason. If a mistake is found, re-key PSB109.
- ✓ Tab to the appropriate extended coverage (COBRA) group again and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB301 with reason code 45 returns when the transaction succeeds.

- ✓ See "Special handling" above for specific keying tips.
- ✓ Key the appropriate data items, tab to END and transmit. To reactivate a dependent's coverage, replace the delete date with zeros (000000).
- ✓ Be sure to transmit! Coverage remains terminated until the PSB305 displays.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB305 returns when the transaction is complete.

- ✓ Verify the changes and that the future term date has calculated correctly.
- ✓ Contact OHB to correct a mistake.

PSB301 with the identification number and reason code 45 may be keyed to update address, phone, and email.

**Step 2:** Reconcile BES Turnaround documents. Resolve discrepancies immediately.

- ✓ Created for each successful BES transaction.
- ✓ Found in the agency's HuRMan folder daily after 5:00 AM.
- ✓ File Name: BES-Turnaround

**Step 3:** Keep good records.

- ✓ Supporting documentation for each BES transaction is subject to audit.

This transaction is used to transfer coverage from the State Employee Program to the State Retiree Program. Coverage in the State Employee Program must be terminated in BES before enrollment as a LTD participant in the State Retiree Program can occur. LTD participants must enroll in the State Retiree Program within 31 days of the loss of coverage in the State Employee Program. It is best to key this transaction within 5-7 business days of the enrollment form receive date.

*Vendor Files:*

- 1) BES sends eligibility files to the health care plan administrators daily. Successful transactions are sent 7-10 business days prior to the effective date, or the next business day when the effective date has passed.

**Keying Instructions:**

When a LTD participant chooses to cover a dependent and one or both of them are eligible for Medicare, it is necessary to create a split contract. Skip the steps below and see "Split Contract Coverage".

**Step 1:** Key PSB109, the participant's identification number and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB109.

PSB109 (New Agency/Group screen) returns when the transaction succeeds.

- ✓ Verify the participant. If a mistake is found, re-key PSB109.
- ✓ Key the required data items, tab to the appropriate LTD coverage group and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB301 with reason code 54 returns when the transaction succeeds.

- ✓ Key to appropriate data items, tab to END and transmit. To reactivate a dependent's coverage, replace the delete date with zeros (000000).
- ✓ Be sure to transmit! Coverage remains terminated until PSB305 displays.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB111 returns when a Medicare plan is selected.

- ✓ Key the Medicare HICN and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB305 displays when the transaction is complete.

- ✓ Verify the changes and that the term date has been removed.
- ✓ To correct most mistakes, re-key PSB301 with reason code 54 and the same event date.
- ✓ Contact OHB when unable to correct a mistake.

PSB301 with the identification number and reason code 54 may be keyed to update address, phone and email.

**Step 2:** Reconcile BES Turnaround documents. Resolve discrepancies immediately.

- ✓ Created for each successful BES transaction.
- ✓ Found in the agency's HuRMan folder daily after 5:00 AM.
- ✓ File Name: BES-Turnaround

**Step 3:** Issue to participants who change health care coverage plans:

- ✓ Member Handbook (a new one is not required if changing option in same plan)

**Step 4:** Keep good records.

- ✓ Supporting documentation for each BES transaction is subject to audit.

This transaction is used to transfer coverage from the State Employee Program to the State Retiree Program. Coverage in the State Employee Program must be terminated in BES before enrollment as a retiree in the State Retiree Program can occur. Participants eligible for retiree coverage in the State Retiree Program must enroll within 31 days of the retirement. It is best to key this transaction within 5-7 business days of the retirement date.

*Vendor Files:*

- 1) BES sends eligibility files to the health care plan administrators daily. Successful transactions are sent 7-10 business days prior to the effective date, or the next business day when the effective date has passed.

**Keying Instructions:**

When a retiree chooses to cover a dependent and one or both of them are eligible for Medicare, it is necessary to create a split contract. Skip the steps below and see "Split Contract Coverage".

***When "Enroll as Retiree" is selected:***

**Step 1:** Key PSB109, the participant's identification number and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB109.

PSB109 (New Agency/Group screen) returns when the transaction succeeds.

- ✓ Verify the participant. If a mistake is found, re-key PSB109.
- ✓ Key the required data items, tab to the appropriate retiree coverage group and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB109 (Transfer reason screen) returns when the transaction succeeds.

- ✓ Verify the new Agency/Group. If a mistake is found, re-key PSB109.
- ✓ Tab to "Enroll as Retiree" and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB301 with reason code 48 returns when the transaction succeeds.

- ✓ Key the appropriate data items, tab to END and transmit. To reactivate a dependent's coverage, replace the delete date with zeros (000000).
- ✓ Be sure to transmit! Coverage remains terminated until PSB305 returns.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB111 returns when a Medicare plan is selected.

- ✓ Key the Medicare HICN and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB305 returns when the transaction is complete.

- ✓ Verify the changes and that the term date has been removed.
- ✓ To correct most mistakes, re-key PSB301 with reason code 48 and the same event date.
- ✓ Contact OHB when unable to correct a mistake.

PSB301 with the identification number and reason code 48 may be keyed to update address, phone and email.

**Step 2:** Reconcile BES Turnaround documents. Resolve discrepancies immediately.

- ✓ Created for each successful BES transaction.
- ✓ Found in the agency's HuRMan folder daily after 5:00 AM.
- ✓ File Name: BES-Turnaround

**Step 3:** Keep good records.

- ✓ Supporting documentation for each BES transaction is subject to audit.

Continued on next page

***When "Waive Own Coverage and Enroll as Dependent on Spouse's State Plan" is selected:***

NOTE: Be sure to key the dependent record first.

- Step 1:** Key PSB109, the participant's identification number and transmit.
- ✓ An error message means the transaction failed. Correct the error and re-key PSB109.
- PSB109 (New Agency/Group screen) returns when the transaction succeeds.
- ✓ Verify the participant. If a mistake is found, re-key PSB109.
  - ✓ Key the required data items, tab to the appropriate retiree coverage group and transmit.
  - ✓ An error message means the transaction failed. Correct the error and transmit again.
- PSB109 (Transfer reason screen) returns when the transaction succeeds.
- ✓ Verify the new Agency/Group. If a mistake is found, re-key PSB109.
  - ✓ Tab to "Enroll as Dependent on Spouse's State Plan" and transmit.
  - ✓ An error message means the transaction failed. Correct the error and transmit again. Contact the spouse's agency if the dependent coverage has not been keyed and then re-key PSB109.
- PSB305 returns indicating a participant and a dependent record when the transaction succeeds.
- ✓ Verify waived coverage and reason code 69 on the participant record. If a mistake is found, contact OHB.
- Step 2:** Reconcile BES Turnaround documents. Resolve discrepancies immediately.
- ✓ Created for each successful BES transaction.
  - ✓ Found in the agency's HuRMan folder daily after 5:00 AM.
  - ✓ File Name: BES-Turnaround
- Step 3:** Keep good records.
- ✓ Supporting documentation for each BES transaction is subject to audit.

***When "Decline Coverage" is selected:***

- Step 1:** Key PSB109, the participant's identification number and transmit.
- ✓ An error message means the transaction failed. Correct the error and re-key PSB109.
- PSB109 (New Agency/Group screen) returns when the transaction succeeds.
- ✓ Verify the participant. If a mistake is found, re-key PSB109.
  - ✓ Key the required data items, tab to the appropriate retiree coverage group and transmit.
  - ✓ An error message means the transaction failed. Correct the error and transmit again.
- PSB109 (Transfer reason screen) returns when the transaction succeeds.
- ✓ Verify the new Agency/Group. If a mistake is found, re-key PSB109.
  - ✓ Tab to "Decline Coverage" and transmit.
  - ✓ An error message means the transaction failed. Correct the error and transmit again.
- PSB305 returns when the transaction succeeds.
- ✓ Verify waived coverage, a BES term date and reason code 41. If a mistake is found, contact OHB.
- Step 2:** Reconcile BES Turnaround documents. Resolve discrepancies immediately.
- ✓ Created for each successful BES transaction.
  - ✓ Found in the agency's HuRMan folder daily after 5:00 AM.
  - ✓ File Name: BES-Turnaround
- Step 3:** Keep good records.
- ✓ Supporting documentation for each BES transaction is subject to audit.

This transaction is used to transfer an eligible survivor's coverage to the State Retiree Program. Coverage under the deceased participant must be terminated in BES before enrollment as a survivor can occur. Survivors must enroll within 60 days of the participant's date of death. It is best to key this transaction with 5-7 business days of the enrollment form receive date.

*Vendor Files:*

- 1) BES sends eligibility files to the health care plan administrators daily. Successful transactions are sent 7-10 business days prior to the effective date, or the next business day when the effective date has passed.

**Keying Instructions:**

When a survivor chooses to cover an eligible dependent and one or both of them are eligible for Medicare, it is necessary to create a split contract. Skip the steps below and contact OHB for help in creating a split contract for a survivor.

**Step 1:** Key PSB109, the participant's identification number and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB109.

PSB109 (New Agency/Group screen) returns when the transaction succeeds.

- ✓ Verify the participant. If a mistake is found, re-key PSB109.
- ✓ Key the required data items, tab to the appropriate survivor coverage group and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB109 (Transfer reason screen) returns when the transaction succeeds.

- ✓ Verify the new Agency/Group. If a mistake is found, re-key PSB109.
- ✓ Tab to "Enroll as Survivor" and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB301 with reason code 73 returns when the transaction succeeds.

- ✓ Key the appropriate data items, tab to END and transmit. To reactivate a dependent's coverage, replace the delete date with zeros (000000).
- ✓ Be sure to transmit! Coverage remains terminated until the PSB305 displays.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB111 returns when a Medicare plan is selected.

- ✓ Key the Medicare HICN and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB305 returns when the transaction is complete.

- ✓ Verify the changes and that the term date has been removed.
- ✓ To correct most mistakes, re-key PSB301 with reason code 73 and the same event date.
- ✓ Contact OHB when unable to correct a mistake.

PSB301 with the identification number and reason code 73 may be keyed to update address, phone, and email.

**Step 2:** Reconcile BES Turnaround documents. Resolve discrepancies immediately.

- ✓ Created for each successful BES transaction.
- ✓ Found in the agency's HuRMan folder daily after 5:00 AM.
- ✓ File Name: BES-Turnaround

**Step 3:** Keep good records.

- ✓ Supporting documentation for each BES transaction is subject to audit.

When a participant chooses to cover a dependent in the State Retiree Program and one or both of them are eligible for Medicare, it is necessary to create a split contract.

Each person in a split contract is enrolled in a plan based on their Medicare eligibility.

- ✓ A person eligible for Medicare is enrolled in a Medicare plan and in single membership. Two or more Medicare-eligible persons may choose different Medicare plans.
- ✓ A person NOT eligible for Medicare is enrolled in a non-Medicare plan and in single membership. Two or more persons not eligible for Medicare are enrolled in the same non-Medicare plan and in a membership that corresponds with the number of persons covered by that plan.

A split contract may have more than one Medicare plan but only one non-Medicare plan. Each plan will have a participant - the original participant or the original participant's linked spouse or linked child.

The total cost of the split contract combines the premium amounts of each plan selected. However, when the split contract includes a non-Medicare plan, the total cost is limited to the premium amount for a family membership in that non-Medicare plan. Contact OHB for this special premium limit.

*Special Handling:*

- 1) At initial enrollment into the State Retiree Program, plan changes are permitted for both the original participant and the linked participant. Splitting a contract for a person already enrolled in the State Retiree Program who becomes eligible for Medicare permits only the Medicare-eligible person to change plans.

*Vendor Files:*

- 1) BES sends eligibility files to the health care plan administrators daily. Successful transactions are sent 7-10 business days prior to the effective date, or the next business day when the effective date has passed.

**Keying Instructions:**

***Initial Enrollment Into The State Retiree Program:***

**Step 1:** Key PSB109, the original participant's identification number and transmit.

- ✓ An error message means the transaction failed. Correct the error and re-key PSB109.

PSB109 (New Agency/Group screen) returns when the transaction succeeds.

- ✓ Verify the participant. If a mistake is found, re-key PSB109.
- ✓ Key the required data items, tab to the appropriate retiree coverage group and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB109 (Transfer reason screen) returns when the transaction succeeds.

- ✓ Verify the new Agency/Group. If a mistake is found, re-key PSB109.
- ✓ Tab to the appropriate enrollment reason and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB301 returns when the transaction succeeds.

- ✓ See "Special handling" above for specific keying tips.
- ✓ Key the appropriate data items, tab to END and transmit. When enrolling in a non-Medicare plan with dependents, replace a dependent's delete date with zeros (000000). Keep the dependent's delete date when enrolling in a Medicare plan.
- ✓ Be sure to transmit! Coverage remains terminated until PSB305 displays.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

PSB111 returns when a Medicare plan is selected.

- ✓ Key the Medicare HICN and transmit.
- ✓ An error message means the transaction failed. Correct the error and transmit again.

Continued on next page

*Initial Enrollment Into The State Retiree Program - continued*

- Step 1 continued:** PSB305 displays when the transaction is complete.
- ✓ Verify the changes and that the term date has been removed.
  - ✓ To correct most mistakes, re-key PSB301 with the same reason code and event date.
  - ✓ Contact OHB when unable to correct a mistake.
- Step 2:** Key PSB109, the linked participant's identification number and transmit.
- ✓ An error message means the transaction failed. Correct the error and re-key PSB109.
- PSB109 (New Agency/Group screen) returns when the transaction succeeds.
- ✓ Verify the participant. If a mistake is found, re-key PSB109.
  - ✓ Key the required data items, tab to the appropriate retiree program group and transmit.
  - ✓ An error message means the transaction failed. Correct the error and transmit again.
- PSB109 (Transfer reason screen) returns when the transaction succeeds.
- ✓ Verify the new Agency/Group. If a mistake is found, contact OHB for help.
  - ✓ Tab to "Enroll as Linked Spouse or Linked Child" and transmit.
  - ✓ An error message means the transaction failed. Contact OHB for help.
- PSB301 with reason code 53 returns when the transaction succeeds.
- ✓ Key the appropriate data items, tab to END and transmit. When enrolling in a non-Medicare plan with dependents, key only the relationship and the SSN for each dependent; BES will automatically add the other dependent information.
  - ✓ Be sure to transmit! Coverage remains terminated until PSB305 displays.
  - ✓ An error message means the transaction failed. Correct the error and transmit again.
- PSB111 returns when a Medicare plan is selected.
- ✓ Key the Medicare HICN and transmit.
  - ✓ An error message means the transaction failed. Correct the error and transmit again.
- PSB305 displays when the transaction is complete.
- ✓ Verify the changes and that the term date has been removed.
  - ✓ To correct most mistakes, re-key PSB301 with reason code 53 and the same event date.
  - ✓ Contact OHB when unable to correct a mistake.
- Step 3:** Reconcile BES Turnaround documents. Resolve discrepancies immediately.
- ✓ Created for each successful BES transaction.
  - ✓ Found in the agency's HuRMan folder daily after 5:00 AM.
  - ✓ File Name: BES-Turnaround
- Step 4:** Issue to participants who change health care coverage plans:
- ✓ Member Handbook (a new one is not required if changing option in same plan)
- Step 5:** Keep good records.
- ✓ Supporting documentation for each BES transaction is subject to audit.

*Becoming Medicare-eligible After Enrolled In The Retiree Program:*

- Step 1:** Key PSB301, the original participant's identification number, reason code 66 and transmit.
- ✓ An error message means the transaction failed. Correct the error and re-key PSB301.

- PSB351 (BES Update screen) returns when the transaction succeeds.
- ✓ Key the required data items, tab to Xmit and transmit.
  - ✓ An error message means the transaction failed. Correct the error and transmit again.

Continued on next page

***Becoming Medicare-eligible After Enrolled In The Retiree Program - continued:***

- Step 1 continued:** PSB301 with reason code 66 returns when the transaction succeeds.
- ✓ Key the appropriate data items, tab to END and transmit. When enrolling in a Medicare plan, key each dependent's delete date. When removing a dependent eligible for Medicare, adjust the membership to correspond with the number of dependents who remain covered by the non-Medicare plan and key the delete date for the Medicare-eligible dependent.
  - ✓ Be sure to transmit! Coverage is unchanged until PSB305 displays.
  - ✓ An error message means the transaction failed. Correct the error and transmit again.
- PSB111 returns when a Medicare plan is selected.
- ✓ Key the Medicare HICN and transmit.
  - ✓ An error message means the transaction failed. Correct the error and transmit again.
- PSB305 displays when the transaction is complete.
- ✓ Verify the changes.
  - ✓ To correct most mistakes, re-key PSB301 with reason code 66 and the same event date.
  - ✓ Contact OHB when unable to correct a mistake.
- Step 2:** Key PSB109, the linked participant's identification number and transmit.
- ✓ An error message means the transaction failed. Correct the error and re-key PSB109.
- PSB109 (New Agency/Group screen) returns when the transaction succeeds.
- ✓ Verify the participant. If a mistake is found, re-key PSB109.
  - ✓ Key the required data items, tab to the appropriate retiree program group and transmit.
  - ✓ An error message means the transaction failed. Correct the error and transmit again.
- PSB109 (Transfer reason screen) returns when the transaction succeeds.
- ✓ Verify the new Agency/Group. If a mistake is found, contact OHB.
  - ✓ Tab to "Enroll as Linked Spouse or Linked Child" and transmit.
  - ✓ An error message means the transaction failed. Contact OHB.
- PSB301 with reason code 53 returns when the transaction succeeds.
- ✓ Key the appropriate data items, tab to END and transmit. When enrolling in a non-Medicare plan with dependents, key only the relationship and the SSN for each dependent; BES will automatically add the other dependent information.
  - ✓ Be sure to transmit! Coverage remains terminated until PSB305 displays.
  - ✓ An error message means the transaction failed. Correct the error and transmit again.
- PSB111 returns when a Medicare plan is selected.
- ✓ Key the Medicare HICN and transmit.
  - ✓ An error message means the transaction failed. Correct the error and transmit again.
- PSB305 displays when the transaction is complete.
- ✓ Verify the changes and that the term date has been removed.
  - ✓ To correct most mistakes, re-key PSB301 with reason code 53 and the same event date.
  - ✓ Contact OHB when unable to correct a mistake.
- Step 3:** Reconcile BES Turnaround documents. Resolve discrepancies immediately.
- ✓ Created for each successful BES transaction.
  - ✓ Found in the agency's HuRMan folder daily after 5:00 AM.
  - ✓ File Name: BES-Turnaround
- Step 4:** Issue to participants who change health care coverage plans:
- ✓ Member Handbook (a new one is not required if changing option in same plan)
- Step 5:** Keep good records.
- ✓ Supporting documentation for each BES transaction is subject to audit.

BES	DB	Description	BES	DB	Description
<b>Dependent's Relationship</b>			<b>Plans for those Not-Medicare eligible</b>		
D	20	Daughter	ACC0	42	COVA Care (with preventive dental)
OF	98	Other female child	ACC1	43	+ Out-of-network
OM	97	Other male child	ACC2	44	+ Exp Dental
S	10	Son	ACC3	45	+ Exp Dental + Out-of-network
SF	02	Spouse-Female	ACC4	46	+ Exp Dental + Vision & Hearing
SM	01	Spouse-Male	ACC5	47	+ Exp Dental+OON+Vision & Hearing
SD	21	Step-daughter	CHA	101	COVA Health Aware (with preventive dental)
SS	11	Step-son	CHA1	102	COVA Health Aware + Exp Dental + Vision
<b>Disability Indicator</b>			CHA2	103	COVA HealthAware + Exp Dental
E	03	Even Year Certification	CHD	50	COVA High Deductible Plan (with preventive dental)
N	00	Not Disabled	CHD1	105	COVA High Deductible Plan + Exp Dental
O	04	Odd Year Certification	KP	06	Kaiser Permanente HMO
P	02	Certification Not Required	TRC	110	TRICARE
<b>Medicare Indicator</b>			W	00	Waived Coverage
E	7	NOT Eligible for Medicare by Exemption	<b>Premium Codes</b>		
N	0	NOT Eligible for Medicare	02	02	Bill Sent to Participant
Y	6	Eligible for Medicare	03	03	VRS Withhold
<b>Membership</b>			04	04	Medicare + Family
S	0	Self Only	06	06	Agency Payroll
DM	3	Self + Child	07	07	DOA - Line Of Duty
DS	4	Self + Spouse	08	08	Special Arrangement with Last Agency
F	1	Self + Family	09	09	Unpaid Premium - Claims On Hold
W	5	Waived Coverage	<b>Status for Non-PMIS Employees</b>		
<b>Pay Codes</b>			NE	45	Excluded from health care coverage
12	12	12 pay periods beginning in July	NF	01	Full-time 40 hours
18	18	18 pay periods beginning in August	NP	43	Part-time 20 - 29 hours
19	19	18 pay periods beginning in September	NQ	41	Full-time 30 - 39 hours
20	20	20 pay periods beginning in September	<b>Status for PMIS Employees</b>		
24	24	24 pay periods beginning in July	PE	44	Excluded from health care coverage
<b>Plans for those Medicare-eligible</b>			PF	00	Full-time 40 hours
65DV	37	Advantage 65 + Dental & Vision	PP	42	Part-time 20 - 29 hours
65MO	48	Advantage 65 Medical Only	PQ	40	Full-time 30 - 39 hours
A65	27	Advantage 65	<b>Status for those in the Retiree Program</b>		
B2	03	Option II	D	27	LTD Participant
B2DV	36	Option II + Dental & Vision	EX	25	Excluded from health care coverage
MODV	49	Advantage 65 Medical + Dental & Vision	LC	32	Split Contract - Linked Child
W	00	Waived Coverage	LS	31	Split Contract - Linked Spouse
<p>Note: Low-Income Subsidy                      Medicare Part D Plan Codes                      may be viewed on-line by                      keying PSBHLP, screen 4 of 4.</p>			R	02	Retiree
			SC	33	Surviving Child
			SS	34	Surviving Spouse
			X	04	Extend Coverage (COBRA) Participant

Frequently-Used BES Codes by Agency/Group

Section 4

	Category	Agency / Group	Participant Status					Bill Premium		Medicare						
Employing Agency	Eligible Employees	090-999/ 001-999	PQ	PF	PP	PE	06	07	N							
			NQ	NF	NP	NE										
		<i>Paycode</i>	12	18	19	20	24									
Office of Health Benefits	Extended Coverage (COBRA)	006 / 005 006 / 008	X					02	09	N	Y	E				
	Regular Disability Extension		X					02	09	N	Y	E				
	Non-Annuitant Survivors	006 / 006				SC	SS	EX	02	07	N	Y	E			
	OHB Approved Participants	006 / 003	R	LC	LS	SC	SS	02	03	04	07	N	Y	E		
			D													
Virginia Retirement System	VRS Service Retirees/Annuitant Survivors	005 / 001	R	LC	LS	SC	SS	EX	02	03	07	N	Y	E		
	VRS Disability Retirees	005 / 002	R	LC	LS	EX			02	03	07	N	Y	E		
	VSDP Long-Term Disability Participants	005 / 004	D	LC	LS	EX			02	07	08	N	Y	E		
Last Employing Agency	ORP Retirees	007 / 008	R	LC	LS	EX			02	07			N	Y	E	
	ORP Long-Term Disability Participants	007 / 004	D	LC	LS	EX			02	07	08			N	Y	E
	Local Retirees	007 / 007	R	LC	LS	EX			02	07			N	Y	E	
	VCCS Early Retirees	007 / 005	R	LC	LS			08					N	Y	E	

Medicare = N or E		ACC0	ACC1	ACC2	ACC3	ACC4	ACC5	CHA	CHA1	CHA2	CHD
Plan		CHD1	KP	TRC	W						
Membership		S	DM	DS	F	W					
Dependent Relationship		D	S	SD	SS	OF	OM	SF	SF		
Medicare = Y											
Plan		65MO	A65	65DV	MODV	B2	B2DV	W			
Membership		S	W								

Description	HlthCare	FRA	RC/Other
Add Dependent to Existing Family Coverage	PSB301	NA	19
Birth or Adoption	PSB301	PSB200	15
Child Covered under your Plan Lost Eligibility	PSB301	PSB200	38
Create Non-PMIS Record**	NA	NA	PSB000
Death of Child	PSB301	PSB200	17
Death of Spouse	PSB301	PSB200	08
Delete Suspense Record	NA	NA	PSB117
Dependent Care Cost or Coverage Change	NA	PSB200	61
Divorce	PSB301	PSB200	10
Employment Change: Full-time to Part-time	PSB301	PSB200	77
Employment Change: Part-time to Full-time	PSB301	NA	78
Employment Change: Unpaid Leave Begins	PSB301	PSB200	49
Employment Change: Unpaid Leave Ends	PSB301	PSB200	50
Gained Eligibility under Medicare or Medicaid	PSB301	PSB200	66
Handle Employee-Direct Pending Request	NA	NA	PSBPEN
HIPAA Special Enrollment-Loss of Coverage	PSB301	NA	70
Initial Enrollment	PSB301	PSB200	01
Judgment, Decree, or Order to Add Child	PSB301	PSB200	71
Judgment, Decree, or Order to Remove Child	PSB301	PSB200	67
Lost Eligibility under Governmental Plan	PSB301	NA	76
Lost Eligibility under Medicare or Medicaid	PSB301	PSB200	09
Marriage	PSB301	PSB200	07
Move Affecting Eligibility for Health Plan	PSB301	NA	05
Open Enrollment	PSB301	PSB200	56
Other Employer's Open Enrollment or Plan Change	PSB301	NA	62
Post Open Enrollment	PSB301	PSB200	47
Reinstate Non-PMIS Record in the Same Agency**	NA	NA	PSB116
Remove Dependent - Unspecified Reason*	PSB301	NA	18
Spouse or Child Gained Eligibility under Their Employer's Plan	PSB301	PSB200	28
Spouse or Child Lost Eligibility under Their Employer's Plan	PSB301	PSB200	13
Switch Medicare Plan*	PSB301	NA	03
Term: Employee Death	PSB301	NA	65
Term: No Longer Eligible	PSB301	NA	27
Term: Participant Death*	PSB301	NA	29
Term: Participant Request*	PSB301	NA	41
Term: Premium Not Paid*	PSB301	NA	68
Transfer to (COBRA)*	PSB109	NA	45
Transfer to LTD Coverage*	PSB109	NA	54
Transfer to Retiree Coverage*	PSB109	NA	48
Transfer to Split Contract at Initial Enrollment* 1. Original Participant 2. Dependent (Link)	PSB109 PSB109	NA NA	45,54,48,or 73 53
Transfer to Survivor Coverage*	PSB109	NA	73
Update Agency Contacts - must be keyed for each Agency/Group	NA	NA	PSB100
Update Qualified Medical Child Support Order (Use Dependent's SSN)	PSB355	NA	NA
Update Enrolled Dependent's Information	PSB301	NA	57
Update Medicare HIC Number	PSB111	NA	NA
Update Non-PMIS Employee's Leave Status**	PSB301	NA	75
Update Participant's Address or Personal Email	PSB301	NA	37
Update Premium Code*	PSB301	NA	06
Waive: Dependent on State Plan 1. Participant adding dependent 2. Participant waiving coverage	PSB301 PSB109	NA NA	13 69
Waive: LWOP & Non-Pay	PSB301	NA	79

\*Used in Retiree Program only-Agencies 005-007.

\*\*PMIS transaction updates BES.

Category	LV	Description	LV End Date Not to Exceed	BES Term Date Is End of Month After:
<b>Layoff and Temporary Work Force Reduction</b>	20	Placement Only	12 months	LV Begin Date; LWP supersedes
	21	Severance & Placement	12 months	LV Begin Date + 12 months
	22	Severance & Retirement	12 months	LV Begin Date + 12 months
	23	Severance Only	12 months	LV Begin Date + 12 months
	24	TWFR--Reduced Hours	12 months	LV Begin Date + 12 months
	25	TWFR--Unpaid	12 months	LV Begin Date + 12 months
<b>Leave with Full Pay</b>	40	Bone Marrow	1 month	NA
	02	Educational	24 months	NA
	42	Medical	24 months; 480 hours /FMLA	NA
	43	Military	4 months	NA
	06	Mobility Leave	12 months	NA
	44	Personal	4 months; 12 weeks/FMLA	NA
	45	Pre-Disciplinary	80 hours	NA
	46	Pre-Layoff Leave	80 hours	NA
	47	Suspension	4 months	NA
	48	Workers Compensation	12 months	NA
<b>Leave with Partial Pay</b>	30	Educational	24 months	LV End Date not to exceed 24 months
	31	Medical	24 months; 12 weeks/FMLA	LV End Date not to exceed 24 months
	32	Personal with FMLA	12 weeks	LV End Date
	33	Workers Compensation	12 months	LV End Date
<b>Leave Without Pay</b>	17	Educational	24 months	LV End Date not to exceed 24 months
	18	Medical	12 months*; 12 weeks/FMLA	LV End Date not to exceed 12 months
	05	Military	60 months	LV Begin Date + 24 months; Layoff supersedes;
	09	Personal	12 months*; 12 weeks/FMLA	LV Begin Date + 6 months
	16	Suspension: Pending Investigation	12 months	LV End Date
	03	Suspension: Standards of Conduct Violation	12 months	LV End Date
	19	Workers Compensation	12 months	LV End Date
<b>Long-Term Disability</b>	11	No Workers Compensation	Indefinite, 18-month increments 12 weeks/FMLA	LV Begin Date; Layoff supersedes LV End Date
	13	Workers Compensation	Indefinite, 18-month increments 12 weeks/FMLA	LV Begin Date; Layoff supersedes LV End Date
<b>Short-Term Disability:</b>	10	No Workers Compensation	125 work days, 180-182 calendar days; 12 weeks/FMLA	STD End Date STD End Date
	12	Workers Compensation	125 work days, 180-182 calendar days; 12 weeks/FMLA	STD End Date STD End Date
<b>Working Long-Term Disability</b>	14	No Workers Compensation	Indefinite, 12-month increments	NA
	15	Workers Compensation	Indefinite, 12-month increments	NA

\*24 months on exception

Reason Code Title	RC	Event Date	Dependent Care FSA				Health Care FSA				Effective Date
			Enroll	Increase	Reduce	Cancel	Enroll	Increase	Reduce	Cancel	
Add Dependent to Existing Family Coverage	19	Date Received	-	-	-	-	-	-	-	-	-
Birth or Adoption	15	Birth/Adoption Date	E	I	-	-	*E	I	OHB	OHB	Rule 3
Child Covered under your Plan Lost Eligibility	38	Last Date Covered	-	-	R	C	-	I	R	-	Rule 3
Death of Child	17	Date of Death	-	-	R	C	-	-	R	C	Rule 3
Death of Spouse	08	Date of Death	E	I	R	C	*E	I	R	C	Rule 3
Dependent Care Cost or Coverage Change	61	Date Change Effective	E	I	R	C	-	-	-	-	Rule 3
Divorce	10	Date Judge Signed	E	I	R	C	*E	I	R	C	Rule 3
Employment Change: Full-time to Part-time	77	Last Date as FT	-	-	R	C	-	-	-	-	Rule 2
Employment Change: Part-time to Full-time	78	Last Date as PT	-	-	-	-	-	-	-	-	-
Employment Change: Unpaid Leave Begins	49	First Date of Leave	-	-	R	C	-	-	R	C	Rule 3
Employment Change: Unpaid Leave Ends	50	First Date of RTW	E	I	-	-	*E	I	-	-	Rule 3
Gained Eligibility under Medicare or Medicaid	66	First Date Covered	-	-	-	-	-	I	R	C	Rule 3
HIPAA Special Enrollment Loss of Coverage	70	Last Date Covered	-	-	-	-	-	-	-	-	-
Initial Enrollment	01	Hire Date	E	-	-	-	*E	-	-	-	Rule 2
Judgment, Decree, or Order to Add Child	71	Date Received	-	-	-	-	*E	I	-	-	Rule 3
Judgment, Decree, or Order to Remove Child	67	Date Received	-	-	-	-	-	-	R	-	Rule 3
Lost Eligibility under Governmental Plan	76	Last Date Covered	-	-	-	-	-	-	-	-	-
Lost Eligibility under Medicare or Medicaid	09	Last Date Covered	-	-	-	-	*E	I	R	C	Rule 3
Marriage	07	Date of Marriage	E	I	R	C	*E	I	R	-	Rule 3
Move Affecting Eligibility for Health Plan	05	Date Change Effective	-	-	-	-	-	-	-	-	Rule 3
Open Enrollment	56	Date Received	E	-	-	-	*E	-	-	-	Rule 4
Other Employer's Open Enrollment or Plan Change	62	Date Change Effective	-	-	-	-	-	-	-	-	Rule 3
Post Open Enrollment	47	Date Received	E	-	-	-	*E	-	-	-	Rule 4
Spouse or Child Gained Eligibility under Their Employer's Plan	28	First Date Covered	E	I	R	C	-	-	R	C	Rule 3
Spouse or Child Lost Eligibility under Their Employer's Plan	13	Last Date Covered	E	I	R	C	*E	I	-	-	Rule 3
Waive: LWOP & Non-Pay	79	Paid to Date	-	-	R	C	-	-	R	C	Rule 2

\*Issue Notice of Extended Coverage Rights and Employee/Retiree Privacy Notice of Creditable Coverage

Codes: E=Enroll in FSA, I=Increase FSA Amount, R=Reduce FSA Amount (Amount >0), C=Cancel (Amount =0)

Continued on next page

Reason Code Title	R C	Event Date	Health Care Coverage								Effective Date	Notices Etc.
			Waive to Non-Waive	Non-Waive to Non-Waive	Add Child	Add Spouse	Remove Child	Remove Spouse	Waive Par & Term Deps	Term Par & Term Deps		
Add Dependent to Existing Family Coverage	19	Date Received	-	-	Y	Y	-	-	-	-	Rule 3	2
Birth or Adoption	15	Date of Birth or Adoption	M	M	Y	Y	O	O	-	-	Rule 1	1,2,3
Child Covered under your Plan Lost Eligibility	38	Last Date Covered	-	-	-	-	Y	-	-	-	Rule 2	1,3,4
Death of Child	17	Date of Death	-	M	-	-	Y	-	-	-	Rule 2	1
Death of Spouse	08	Date of Death	M	M	Y	-	-	Y	-	-	Rule 2	1
Dependent Care Cost or Coverage Change	61	Date Change Effective	-	-	-	-	-	-	-	-	-	-
Divorce	10	Date Judge Signed	-	M	-	-	Y1	Y1	-	-	Rule 2	1,3,4
Employment Change: Full-time to Part-time	77	Last Date as FT	Y	-	Y2	Y2	-	-	Y	-	Rule 2	1,2,3
Employment Change: Part-time to Full-time	78	Last Date as PT	Y	Y	Y	Y	-	-	-	-	Rule 3	1,2
Employment Change: Unpaid Leave Begins	49	First Date of Leave	-	-	-	-	Y	Y	Y	-	Rule 3	3,4
Employment Change: Unpaid Leave Ends	50	First Date of RTW	Y	Y	Y	Y	-	-	-	-	Rule 3	1,2
Gained Eligibility under Medicare or Medicaid	66	First Date Covered	-	M	-	-	Y	Y	O	-	Rule 3	1,3
HIPAA Special Enrollment Loss of Coverage	70	Last Date Covered	M	M	Y	Y	-	-	-	-	Rule 3	1,2
Initial Enrollment	01	Hire Date	Y	-	Y	Y	-	-	Y	-	Rule 2	1,2
Judgment, Decree, or Order to Add Child	71	Date Received	M	M	Y	-	-	-	-	-	Rule 3	1
Judgment, Decree, or Order to Remove Child	67	Date Received	-	M	-	-	Y	-	Y	-	Rule 3	1,3
Lost Eligibility under Governmental Plan	76	Last Date Covered	M	M	Y	Y	-	-	-	-	Rule 3	1,2
Lost Eligibility under Medicare or Medicaid	09	Last Date Covered	M	M	Y	Y	-	-	-	-	Rule 3	1,2
Marriage	07	Date of Marriage	M	M	Y	Y	-	-	O	-	Rule 3	1,2,3
Move Affecting Eligibility for Health Plan	05	Date Change Effective	Y	Y	Y	Y	O	O	-	-	Rule 3	1,2,3
Open Enrollment	56	Date Received	Y	Y	Y	Y	Y	Y	Y	-	Rule 4	1,2,3
Other Employer's Open Enroll / Plan Change	62	Date Change Effective	Y	Y	Y	Y	Y	Y	Y	-	Rule 3	1,2,3
Post Open Enrollment	47	Date Received	Y	Y	Y	Y	Y	Y	Y	-	Rule 4	1,2,3

Codes: Y=Yes; M=Maybe-dependent rules apply; O=OHB, Y1= must remove spouse and stepchildren; Y2=add only prior dependents  
Continued on next page

Reason Code Title	RC	Event Date	Health Care Coverage								Effective Date	Notices Etc.
			Waive to Non-Waive	Non-Waive to Non-Waive	Add Child	Add Spouse	Remove Child	Remove Spouse	Waive Par, Term Deps	Term Par, Term Deps		
Remove Dependent - Unspecified Reason*	18	Date Received	-	-	-	-	Y	Y	-	-	Rule 3	3,4
Spouse or Child Gained Eligibility under Their Employer's Plan	28	First Date Covered	-	M	-	-	Y	Y	Y	-	Rule 3	1,2,3
Spouse or Child Lost Eligibility under Their Employer's Plan	13	Last Date Covered	M	M	Y	Y	-	-	-	-	Rule 3	1,2
Switch Medicare Plan*	03	Date Received	-	Y	-	-	-	-	-	-	Rule 3	-
Term: Employee Death	65	Date of Death	-	-	-	-	-	-	-	Y	Rule 6	3,4
Term: No Longer Eligible	27	Term Date	-	-	-	-	-	-	-	Y	Rule 7	3,4
Term: Participant Death*	29	Date of Death	-	-	-	-	-	-	-	Y	Rule 2	3,4
Term: Participant Request*	41	Last Date Covered	-	-	-	-	-	-	-	Y	Rule 2	3,4
Term: Premium Not Paid*	68	Paid to Date	-	-	-	-	-	-	-	Y	Rule 2	3,4
Transfer to (COBRA)*	45	Term Date	-	-	-	-	Y	Y	-	-	Rule 2	-
Transfer to LTD Coverage*	54	Term Date	Y	Y	-	-	Y	Y	Y	-	Rule 2	1
Transfer to Retiree Coverage*	48	Term Date	Y	Y	-	-	Y	Y	-	-	Rule 2	1
Transfer to Split Contract*	53	Term Date	Y	-	Y	Y	-	-	-	-	Rule 2	1,2
Transfer to Survivor Coverage*	73	Term Date	-	Y	-	-	Y	Y	-	-	Rule 2	-
Update Enrolled Dependent's Information	57	Date Received	-	-	-	-	-	-	-	-	Rule 5	-
Update Non-PMIS Employee's Leave Status	75	Date Change Effective	-	-	-	-	-	-	-	-	Rule 2	-
Update Participant's Personal Information	37	Date Received	-	-	-	-	-	-	-	-	Rule 5	-
Update Premium Code*	06	Last Date for Old Code	-	-	-	-	-	-	-	-	Rule 2	-
Waive: Dep. on State Plan	69	Term Date	-	-	-	-	-	-	Y	-	Rule 2	-
Waive: LWOP & Non-Pay	79	Paid to Date	-	-	-	-	-	-	Y	-	Rule 2	3,4

\*Used in the State Retiree Program only - Agencies 005-007.

Codes: Y=Yes; M=Maybe-dependent rules apply; O=OHB, Y1= must remove spouse and stepchildren; Y2=add only prior dependents

Effective Date Rules	
Rule 1	Changes are retroactively effective the first of the month in which the child is born, adopted, or placed for adoption. When the event date is the first of the month, changes are effective that day.
Rule 2	Changes are effective the first of the month following the event. When the event date for Initial Enrollment (reason code 01) is the first of the month, changes are effective that day.
Rule 3	Changes are effective the first of the month following receipt of the request or following the event, whichever is later. When the later date is the first of the month, changes are effective that day.
Rule 4	Elections are effective July 1 following the Open Enrollment period.
Rule 5	Changes are effective the first of the current month. When a suspense record exists, changes are effective on that record's effective date.
Rule 6	Coverage ends at the end of the second month following the event.
Rule 7	Coverage ends at the end of the month following the event. When the event is the first of the month, coverage ends at the end of that month.

Continued on next page

Notices, etc to be Issued	
1	To participants who enroll: <ul style="list-style-type: none"> <li>✓ Member Handbook (changing option within the same plan does not require a new one)</li> <li>✓ General Notice of Extended Coverage Rights (within 90 days of effective date)</li> <li>✓ Employee/Retiree Privacy Notice of Creditable Coverage</li> <li>✓ Medicare Part D General Notice of Creditable Coverage</li> </ul>
2	To spouses added: <ul style="list-style-type: none"> <li>✓ General Notice of Extended Coverage Rights (within 90 days of effective date)</li> <li>✓ Employee/Retiree Privacy Notice</li> <li>✓ Medicare Part D General Notice of Creditable Coverage (optional if provided to participant)</li> </ul>
3	To participants and dependents removed: <ul style="list-style-type: none"> <li>✓ Certificate of Group Health Plan Coverage</li> </ul>
4	To participants and dependents that qualify for Extended Coverage (COBRA): <ul style="list-style-type: none"> <li>✓ Extended Coverage Election Notice</li> </ul>

BES Transactions	
Description	Code
Create Non-PMIS Record	PSB000
Delete Suspense Record	PSB117
Display BES Data As of [Date]	PSB305
Display BES Data History	PSB309
Display Flexible Reimbursement Accounts - Plan Year Snapshot	PSB306
Display Health Care Coverage - Calendar Year Snapshot	PSB308
Display Help Screen 1 of 4	PSBHLP
Display Leave Expire Report	PSL002
Display PMIS/BES Broadcast Screen	PMIS
Display Transactions Available To BES	BENEFIT
Enroll or Change Flexible Reimbursement Accounts	PSB200
Enroll, Change or Waive Health Care Coverage	PSB301
Handle Employee-Direct Pending Request	PSBPEN
Reinstate Non-PMIS Record in the Same Agency	PSB116
Transfer from Employee Program to Retiree Program	PSB109
Update Agency Contacts-must keyed for each Agency/Group	PSB100
Update Medicare HIC Number	PSB111
Update Qualified Medical Child Support Order (QMSCO)	PSB355

Contacts for Help	
<b>BES Help - Contact 1</b> Email: <a href="mailto:Herb.Boyd@dhrm.virginia.gov">Herb.Boyd@dhrm.virginia.gov</a> Fax: 804-371-0231 Phone: 804-371-6062 or 888-642-4414	<b>DHRM - Office of Health Benefits</b> Email: <a href="mailto:OHB@dhrm.virginia.gov">OHB@dhrm.virginia.gov</a> Fax: 804-371-0231 Phone: 804-225-3642 or 888-642-4414
<b>BES Help - Contact 2</b> Email: <a href="mailto:Felicia.Smith@dhrm.virginia.gov">Felicia.Smith@dhrm.virginia.gov</a> Fax: 804-371-0231 Phone: 804-225-2208 or 888-642-4414	<b>DHRM - ITECH</b> Email: <a href="mailto:IHelp@dhrm.virginia.gov">IHelp@dhrm.virginia.gov</a> Fax: 804-371-0230 Phone: 804-225-2133
<b>BES Help - Contact 3</b> Email: <a href="mailto:Dan.Farrell@dhrm.virginia.gov">Dan.Farrell@dhrm.virginia.gov</a> Fax: 804-371-0231 Phone: 804-371-2575 or 888-642-4414	<b>VITA Service Desk</b> Email: <a href="mailto:vccc@vita.virginia.gov">vccc@vita.virginia.gov</a> Phone: 866-637-8482

Report Name	File Name	Description
BES Dependents Approaching Eligibility Thresholds (csv file)	BES-Dependent-Age-26-Approaching-Termination	This report is created in <i>August and October</i> of each year. It identifies participants who have children reaching Age 26 sometime during the current year. Note that this report does not include children added to BES after the report's run date. (csv format report)
BES Dependents Approaching Eligibility Thresholds (text report)	BES-Dependent-Age-26-Approaching-Termination-Rpt	This report is created in <i>August and October</i> of each year. It identifies participants who have children reaching Age 26 sometime during the current year. Note that this report does not include children added to BES after the report's run date. (text report format)
BES Enrollment Report	BES-Enrollment-Rpt	This report lists eligible participants as of the first of a month. It includes personal information, health care coverage and FSA elections. <i>The report is available on the 3rd, 10th, 17th and 24th of each month.</i> See PM9103-BOM-Enrollment for corresponding flat file.
BES Enrollment Report	BES-Projected-Enrollment-Rpt	This report is created in <i>early June</i> . It identifies all eligible participants as of the upcoming July 1. It includes personal information, health care coverage and FSA elections.
BES EOM Enrollment Report	BES-EOM-Enrollment-Rpt	This report is created at the <i>end of each month</i> . It identifies all the eligible participants as of the end of last month. It includes personal information, health care coverage and FSA elections. See PM9103-EOM-PARS for corresponding flat file.
BES Exception Report	BES-Exception-Rpt	This <i>monthly</i> report lists a variety of discrepancies found in BES records that need attention and reconciliation.
BES Open Enrollment Report	BES-Open-Enrollment-Rpt	This report is created at the <i>end of the Open Enrollment period</i> . It identifies participants who have made Open Enrollment changes as of the report date. It includes personal information, health care coverage and FSA elections. See PM9103-BOM-Open-Enrollment for corresponding flat file.
BES Premium Reward Discrepancies	BES-Premium-Reward-Discrepancies	This <i>monthly</i> report lists discrepancies between CIPPS and BES where either the premium or reward differs.
BES Termination Report	BES-Termination-CSV	This <i>monthly</i> report identifies participants and dependents recently terminated. (csv formatted file)
BES Termination Report (Participant/Dependent Recently Terminated)	BES-Termination-Rpt	This <i>monthly</i> report identifies participants and dependents recently terminated. (text report format)
BES Turnaround Document	BES-Turnaround	This <i>daily</i> report is the official record of changes made in BES by PMIS, an agency operator, or EmployeeDirect before 5:00 PM.
BES Turnaround Empty Document	BES-Turnaround-Empty	This report is created when there are no turnarounds to report for the agency.
Dependent Age 26 Termination Report (csv file)	BES-Dependent-Age-26-Terminations	This report is created each year in the <i>first part of December</i> . It lists dependent children being removed from BES effective the last day of the year because they will have reached the age that makes them ineligible for coverage in the upcoming year. (csv formatted report)

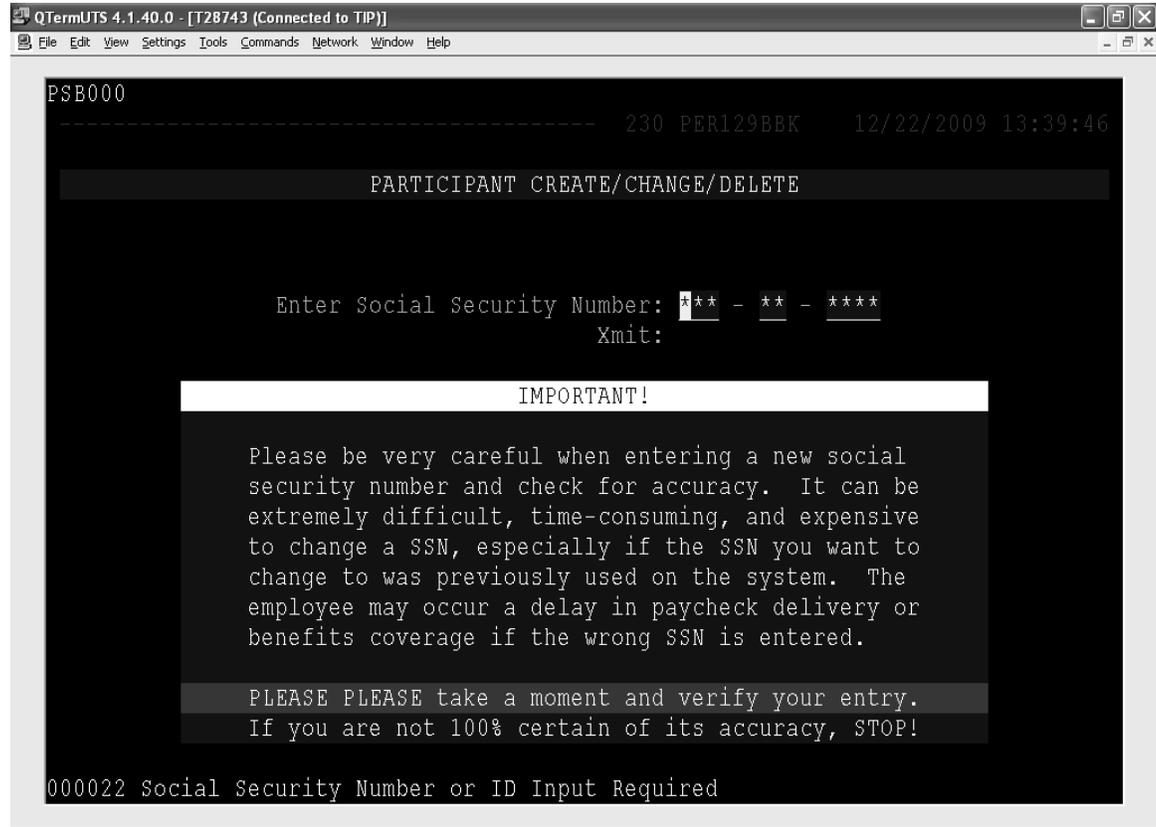
Report Name	File Name	Description
<b>Dependent Age 26 Termination Report (text report)</b>	BES-Dependent-Age-26-Terminations	This report is created each year in the <i>first part of December</i> . It lists dependent children being removed from BES effective the last day of the year because they will have reached the age that makes them ineligible for coverage in the upcoming year. (text report format)
<b>Persons Eligible for Medicare in [month]</b>	BES-Persons-Eligible-For-Medicare	This <i>monthly</i> report identifies individuals approaching age 65 in the Retiree Program that will be automatically switched to Advantage 65 + Dental & Vision unless a different option is requested. This is a three month notice report.
<b>Summary of BES Turnaround Documents</b>	BES-Turnaround-Summary	This <i>daily</i> report is a summary changes made on the day's BES Turnaround documents.

Data Extract Name	File Name	Description
<b>BES Begin of Month Participants Extract</b>	PM9103-BOM-Enrollment	This flat file contains data for eligible participants as of the first of the month. The file is available on the 3rd, 10th, 17th and 24th of each month. See BES-Enrollment-Rpt for corresponding report.
<b>BES End of Month Dependents Extract</b>	PM9104-EOM-DEPS	This flat file is created at the end of each month. It contains all the eligible dependents as of the end of last month.
<b>BES End of Month Participants Extract</b>	PM9103-EOM-PARS	This flat file is created at the end of each month. It contains all the eligible participants as of the end of last month. See BES-EOM-Enrollment-Rpt for corresponding report.
<b>BES Open Enrollment Participants Extract</b>	PM9103-BOM-Open-Enrollment	This flat file is created at the end of the Open Enrollment period. It identifies participants who have made Open Enrollment changes as of the report date. See BES-Open-Enrollment-Rpt for corresponding report.
<b>BES Projected Enrollment Participants Extract</b>	PM9103-BOM-Projected-Enrollment	This flat file is created in early June. It contains all the eligible participants as of the upcoming July 1. It includes personal information, health care coverage and FSA elections. See BES-Projected-Enrollment-Rpt for corresponding report.
<b>BES Value of Healthcare Extract (non-CIPPS agencies)</b>	BES-W2-Value-of-Healthcare	This annual flat file is created at the end of December. It contains Value of Healthcare data for participants in non-CIPPS agencies. This file provides the value of healthcare by FEIN to be included in W-2 processing by non-CIPPS agency payroll.
<b>Test - BES Value of Healthcare Extract (non-CIPPS agencies)</b>	BES-Test-W2-Value-of-Healthcare	This annual Test flat file is created in early December. It contains Value of Healthcare data for participants in non-CIPPS agencies. This file provides the value of healthcare by FEIN to be included in W-2 processing by non-CIPPS agency payroll. (Test File)

Contact DHRM-ITECH about accessing your agency's HuRMan folder. Contact OHB about specific reports.



PSB000:



```
QTermUTS 4.1.40.0 - [T28743 (Connected to TIP)]
File Edit View Settings Tools Commands Network Window Help

PSB000
----- 230 PER129BBK 12/22/2009 13:39:46

PARTICIPANT CREATE/CHANGE/DELETE

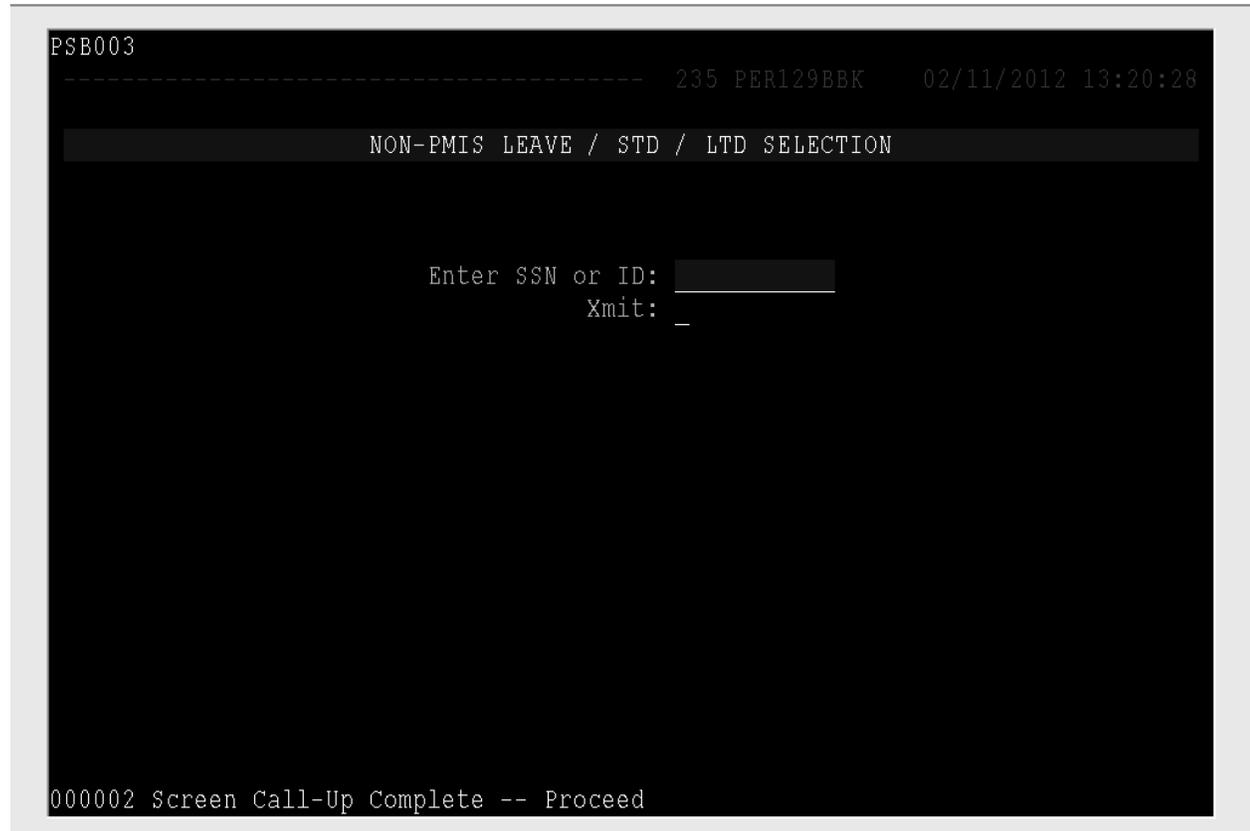
Enter Social Security Number: *** - ** - ****
Xmit:

IMPORTANT!

Please be very careful when entering a new social
security number and check for accuracy. It can be
extremely difficult, time-consuming, and expensive
to change a SSN, especially if the SSN you want to
change to was previously used on the system. The
employee may occur a delay in paycheck delivery or
benefits coverage if the wrong SSN is entered.

PLEASE PLEASE take a moment and verify your entry.
If you are not 100% certain of its accuracy, STOP!

000022 Social Security Number or ID Input Required
```

PSB003:  
Screen 1/8

```
PSB003
----- 235 PER129BBK 02/11/2012 13:20:28

NON-PMIS LEAVE / STD / LTD SELECTION

Enter SSN or ID: _____
Xmit: _

000002 Screen Call-Up Complete -- Proceed
```

\*Sample screens updated only when significantly changed.

PSB003:  
Screen 2/8

```
PSB003,3222895
----- 207 PER129BBK 02/11/2012 13:21:20

Agency/Group 129 - 001 Dept of Human Resource Mgmt
ID 322-28-95 TESTOR, TESTY T
Current Status Not On Leave

NON-PMIS LEAVE / STD / LTD SELECTION

<-- Move Employee To Leave Without Pay
<-- Move Employee To Leave With Partial Pay
<-- Move Employee To Leave With Full Pay or Working LTD
<-- Move Employee To Layoff / TWFR
<-- Move Employee To Short Term Disability - New STD Claim Number
<-- Move Employee To Long Term Disability (NOT Working)

Move Cursor To Desired Option and Transmit
000002 Screen Call-Up Complete -- Proceed
```

PSB003:  
Screen 3/8

```
PSB003,3222895 NON-PMIS LEAVE WITHOUT PAY OPTION MENU
----- 216 PER129BBK 02/11/2012 13:23:42

Agency 129 - 001 Dept of Human Resource Mgmt
ID 322-28-95 TESTOR, TESTY T
Current Status Not On Leave

<- 16 LWOP: Suspension: Pending Investigation
<- 17 LWOP: Educational
<- 18 LWOP: Medical
<- 05 LWOP: Military
<- 09 LWOP: Personal
<- 03 LWOP: Suspension: Violation of Standards/Conduct
<- 19 LWOP: Workers Compensation
<- 01 LWOP: Other

Move Cursor To Desired Option and Transmit
000002 Screen Call-Up Complete -- Proceed
```

PSB003:  
Screen 4/8

```

PSB003,3222895      NON-PMIS LEAVE WITH PARTIAL PAY OPTION MENU
----- 216 PER129XYZ      02/11/2012 13:34:47

          Agency 129 - 001      Dept of Human Resource Mgmt
              ID 322-28-95      TESTOR, TESTY T
Current Status              Not On Leave

    <- 30 LWPP: Educational
    <- 31 LWPP: Medical
    <- 32 LWPP: Personal
    <- 33 LWPP: Workers Compensation

          Move Cursor To Desired Option and Transmit
000002 Screen Call-Up Complete -- Proceed

```

PSB003:  
Screen 5/8

```

PSB003,3222895      NON-PMIS LEAVE WITH FULL PAY / WORKING LTD OPTION MENU
----- 216 PER129XYZ      02/11/2012 13:35:21

          Agency 129 - 001      Dept of Human Resource Mgmt
              ID 322-28-95      TESTOR, TESTY T
Current Status              Not On Leave

    <- 02 LWFP: Educational
    <- 42 LWFP: Medical
    <- 43 LWFP: Military
    <- 44 LWFP: Personal
    <- 45 LWFP: Pre-Disciplinary
    <- 46 LWFP: Pre-Layoff Leave
    <- 47 LWFP: Suspension
    <- 48 LWFP: Workers Compensation
    <- 40 LWFP: Bone Marrow
    <- 06 LWFP: Mobility Leave
    <- 14 Working LTD: No Workers Compensation
    <- 15 Working LTD: Workers Compensation

          Move Cursor To Desired Option and Transmit
000002 Screen Call-Up Complete -- Proceed

```

PSB003:  
Screen 6/8

```
PSB003,3222895          NON-PMIS LAYOFF / TWFR OPTION MENU
----- 216 PER129XYZ    02/11/2012 13:35:55

          Agency 129 - 001      Dept of Human Resource Mgmt
          ID 322-28-95         TESTOR, TESTY T
Current Status              Not On Leave

█ <- 20 Layoff: Placement Only
█ <- 29 Layoff: Wage Placement Only
█ <- 21 Layoff: Severance and Placement
█ <- 22 Layoff: Severance and Retirement
█ <- 23 Layoff: Severance Only
█ <- 24 TWFR: Reduced Hours
█ <- 25 TWFR: Unpaid

Move Cursor To Desired Option and Transmit
000002 Screen Call-Up Complete -- Proceed
```

PSB003:  
Screen 7/8

```
PSB003,3222895          SHORT TERM DISABILITY OPTION MENU
----- 216 PER129BBK    02/11/2012 13:21:54

          Agency 129 - 001      Dept of Human Resource Mgmt
          ID 322-28-95         TESTOR, TESTY T
Current Status              Not On Leave

█ <- 10 STD: No Workers Compensation
█ <- 12 STD: Workers Compensation

Move Cursor To Desired Option and Transmit
000002 Screen Call-Up Complete -- Proceed
```

PSB003:  
Screen 8/8

```

PSB003,3222895   NON-PMIS LONG TERM DISABILITY NOT WORKING OPTION MENU
----- 216 PER129XYZ   02/11/2012 13:36:33

          Agency 129 - 001   Dept of Human Resource Mgmt
            ID 322-28-95   TESTOR, TESTY T
Current Status           Not On Leave

      <- 11 LTD: No Workers Compensation
      <- 13 LTD: Workers Compensation

                                Move Cursor To Desired Option and Transmit
000002 Screen Call-Up Complete -- Proceed

```

## PSB031:

```

PSB031,3222895   VSDP SHORT TERM DISABILITY (NO WORKERS COMP)
----- 200 PER129BBK   02/11/2012 13:22:27
Agency/Group..... 129 - 001   ID..... 322-28-95
TESTOR, TESTY T

-----
VSDP Report Date Created... ***** ("Date Created" on UNUM Form)
Benefit Start Date..... ***** ("Benefit Start Date" on UNUM Form)
VSDP Claim Number..... ***** ("Claim Number" on UNUM Form)
Authorized End Date..... ***** ("Authorized End Date" on UNUM Form)
FMLA?..... N (Y/N)
Waiting Period Waived?..... * ("Waiting Period Waived" on UNUM Form)
STD End Date..... ***** ("STD End Date" on UNUM Form)

( 10 )
End..... _

                                Important! You Must Have The UNUM STD Form To Fill In This Screen
                                Please Key Data Directly From The UNUM STD Form

000002 Screen Call-Up Complete -- Proceed

```

PSB101:

```

PSB101,345678900          PARTICIPANT CREATE
----- 76 PER129XYZ      02/11/2012 13:30:01

      Reason 01 Initial Enroll
      Event Date *****
      Receive Date *****
      Soc-Sec-Num 345678900
      Last Name *****
      First Name *****
      Middle Initial
      Second Initial
      Name Suffix
      Birthdate ***** MMDDCCYY
      Agency ***
      Group *** SubGrp (Local Choice Only)
      Pay Code 00
      Sex *
      Last Agency Num 000
      Original Participant 000000000
      Employee Status **

      Xmit

000002 Screen Call-Up Complete -- Proceed

```

PSB104:

```

PSB104,234567890          PARTICIPANT CHANGE
----- 76 PER129XYZ      02/11/2012 13:32:51

      Reason 57 Par Per Update
      Event Date 021112
      Receive Date *****
      Soc-Sec-Num 234567890
      Last Name TESTOR
      First Name TESTY
      Middle Initial T
      Second Initial
      Name Suffix
      Birthdate 01011944 MMDDCCYY
      Agency 129
      Group 001 SubGrp (Local Choice Only)
      Pay Code 24
      Sex M
      Last Agency Num 000
      Original Participant 000000000
      Employee Status NE

      Xmit

000002 Screen Call-Up Complete -- Proceed

```

PSB109:  
Screen 1/4

QTermUTS 4.1.40.0 - [T27704 (Connected to TIP)]

File Edit View Settings Tools Commands Network Window Help

Courier New Auto B

T30232 [TIP] T30265 [MCB5] T27703 [MCB5] T27704 [TIP]

PSB109,234567890 TRANSFER INACTIVE RECORD

----- 105 PER1291HB 12/22/2009 14:55:04

Participant SSN..... 234-56-7890 TESTOR, TESTY T

Receive Date..... 122209

Event Date..... 123109 Effective Date..... 010110

Note.....

E-Mail..... bfarrish@gmail.com

IMPORTANT!

a. A successful record transfer requires multiple screens.  
b. Successfully transmit on each one until a PSB305 display appears.

Transmit Next To The New Agency/Group

<input type="checkbox"/> 006/008 COBRA Disability Extension	<input type="checkbox"/> 007/007 Local Retiree
<input type="checkbox"/> 006/007 COBRA FT Military 32-40 Hrs	<input type="checkbox"/> 007/008 ORP Retiree
<input type="checkbox"/> 006/009 COBRA PT Military 20-31 Hrs	<input type="checkbox"/> 007/004 ORP LTD Participant
<input type="checkbox"/> 006/005 COBRA Regular	<input type="checkbox"/> 007/005 VCCS Early Retiree
<input checked="" type="checkbox"/> 005/001 VRS Service Retiree/Survivor	<input type="checkbox"/> 006/006 Non-Annuitant Survivor
<input type="checkbox"/> 005/002 VRS Disability Retiree/Survivor	<input type="checkbox"/> 006/003 OHB Approved Participant
<input type="checkbox"/> 005/004 VSDP LTD Participant	

000002 Screen Call-Up Complete -- Proceed

T27704 Row: 20 Col: 4 Mouse: 20:5 Connected to TIP Page: 1 OVR: 14:55

PSB109:  
Screen 2/4

QTermUTS 4.1.40.0 - [T27704 (Connected to TIP)]

File Edit View Settings Tools Commands Network Window Help

Courier New Auto B

T30232 [TIP] T30265 [MCB5] T27703 [MCB5] T27704 [TIP]

PSB109,234567890 TRANSFER INACTIVE RECORD

----- 106 PER1291HB 12/22/2009 14:55:48

You are about to transfer: 234-56-7890 TESTOR, TESTY T  
to Agency/Group 005/001 - VRS Service Retiree/Survivor

Please transmit next to the reason for this transfer

<- Decline Coverage - Cannot Return Later

<- Enroll as Dependent on Spouse's State Plan

<- Enroll as Retiree

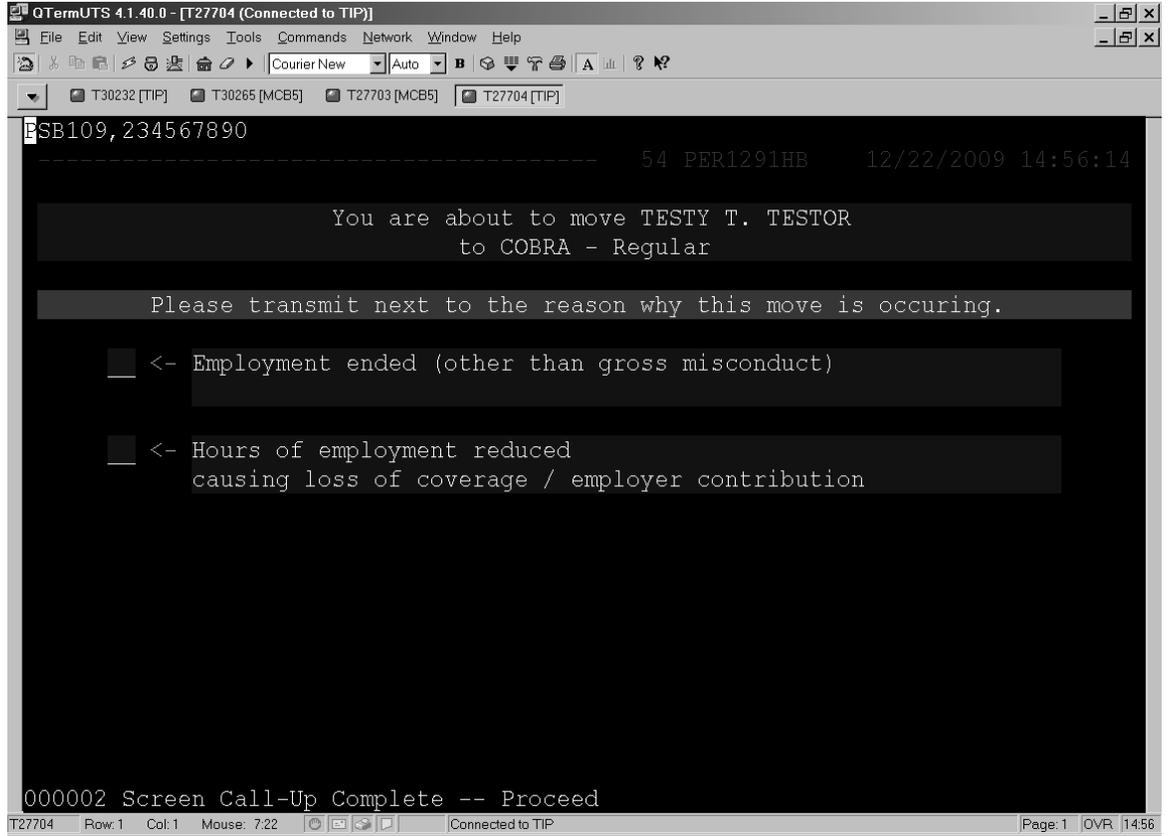
<- Enroll as Survivor

<- Enroll as Linked Spouse or Linked Child

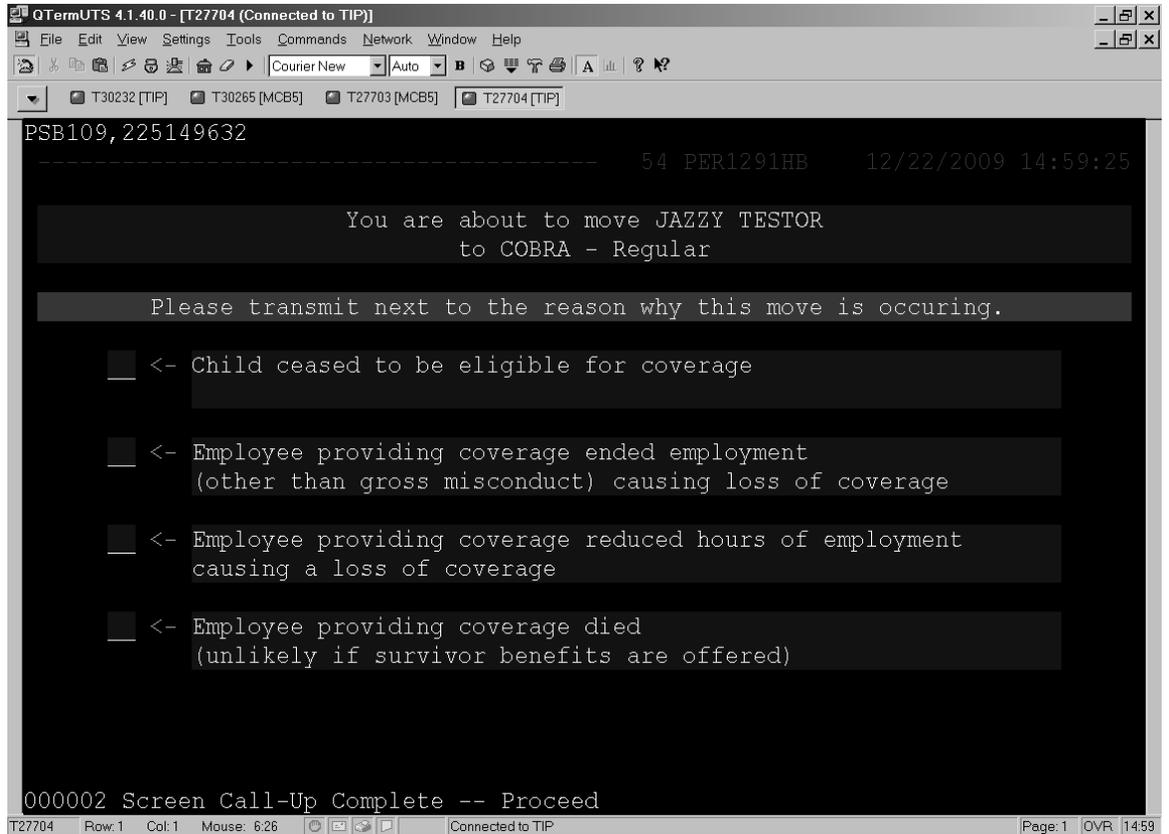
000002 Screen Call-Up Complete -- Proceed

T27704 Row: 1 Col: 1 Mouse: 9:38 Connected to TIP Page: 1 OVR: 14:55

PSB109:  
Screen 3/4



PSB109:  
Screen 4/4



PSB111:

```

QTermUTS 4.1.40.0 - [T28743 (Connected to TIP)]
File Edit View Settings Tools Commands Network Window Help

PSB111,234567890          MEDICARE HIC NUMBER UPDATE
----- 41 PER129BBK      12/22/2009 14:28:24

SSN/ID 234567890 / 3222895
Name TESTOR, TESTY T

HIC 234567890
Xmit _

Enter the HIC number exactly as shown on
the Medicare card or on page 3 of the
enrollment form.

Most HICs will be 9 numbers followed by:
a. 1 or 2 letters
b. 1 letter and 1 number

Some HICs will be 1, 2 or 3 letters
followed by 6 or 9 numbers

Contact OHB if it is not of these patterns.

000002 Screen Call-Up Complete -- Proceed

```

PSB116:

```

QTermUTS 4.1.40.0 - [T28743 (Connected to TIP)]
File Edit View Settings Tools Commands Network Window Help

PSB116,234567890          131 PER129BBK      12/22/2009 13:56:32

REACTIVATE TERMINATED PARTICIPANT

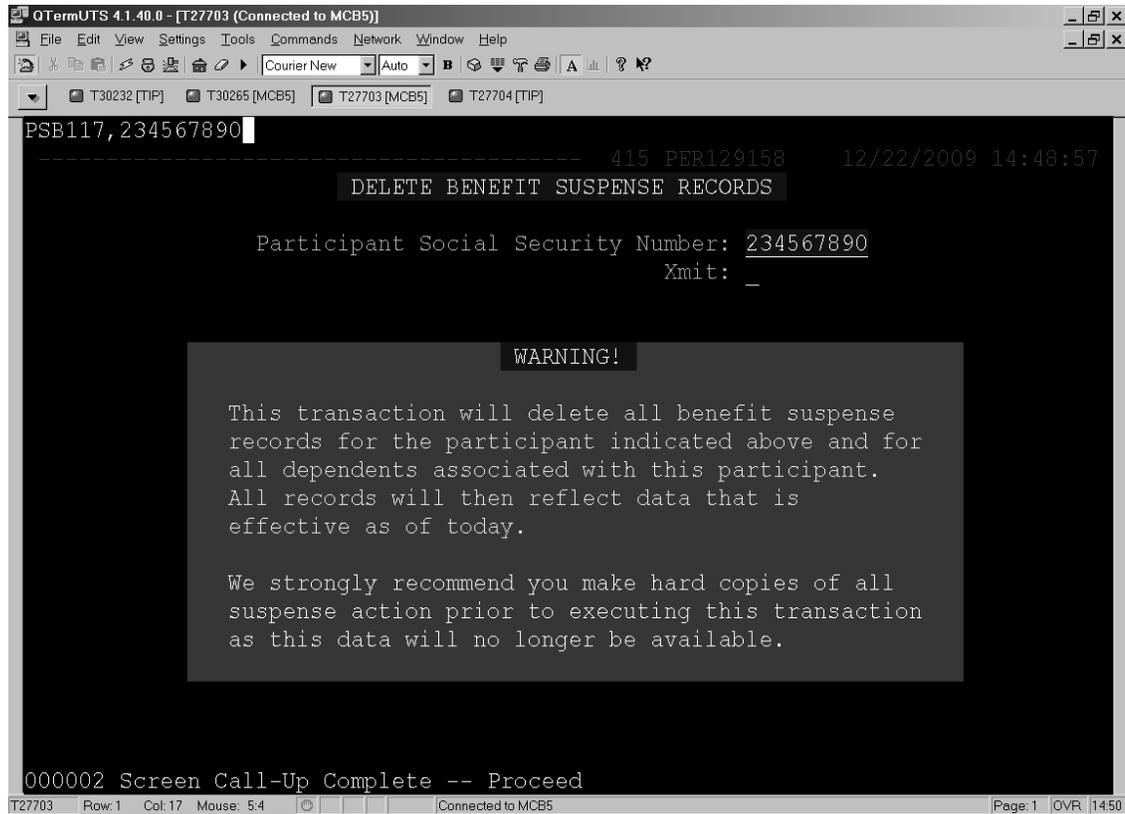
Participant ID: 3222895
Participant SSN: 234567890 TESTOR, TESTY T
Effective Date: 010110
Agency: 129
Group: 001
Employee Status: NF

Note:
Xmit:

000002 Screen Call-Up Complete -- Proceed

```

PSB117:



The screenshot shows a terminal window titled "QTermUTS 4.1.40.0 - [T27703 (Connected to MCB5)]". The window contains the following text:

```
PSB117,234567890
----- 415 PER129158 12/22/2009 14:48:57
      DELETE BENEFIT SUSPENSE RECORDS

Participant Social Security Number: 234567890
Xmit: _

      WARNING!

This transaction will delete all benefit suspense
records for the participant indicated above and for
all dependents associated with this participant.
All records will then reflect data that is
effective as of today.

We strongly recommend you make hard copies of all
suspense action prior to executing this transaction
as this data will no longer be available.

000002 Screen Call-Up Complete -- Proceed
```

The terminal window also shows a status bar at the bottom with the following information: "T27703 Row: 1 Col: 17 Mouse: 5.4 Connected to MCB5 Page: 1 OVR 1450".

PSB200:  
Screen 1/2

```

QTermUTS 4.1.40.0 - [T30265 (Connected to MCB5)]
File Edit View Settings Tools Commands Network Window Help
CourierNew Auto B
T30232 [TIP] T30265 [MCB5] T27703 [TIP] T27704 [TIP]
PSB200,055747404
----- 231 PER129158 01/04/2010 14:21:02
FSA UPDATE
SSN or ID: 055747404
Reason Code: 07
Event Date: *****
Receive Date: *****
Xmit: -
Reason Codes Valid For A 01/04/2010 Effective Date
01 Initial Enroll 66 Elig MCare/Caid
07 Marriage 67 J/D/Odr-Rmve Ch
08 Death of Spouse 71 J/D/Ord-Add Ch
09 Lost MCare/Caid 79 LWOP Non-Pay
10 Divorce
13 S/C-Lost ER Plan
15 Birth/Adoption
17 Death of Child
28 S/C-Elig ER Pln
38 Ch Ceases Elig.
49 Unpd LV Bgn-EE
50 Return LWOP
61 Dep Care Chnges
000002 Screen Call-Up Complete -- Proceed
T30265 Row: 1 Col: 1 Mouse: 1:1 Connected to MCB5 Page: 1 OVR: 14:21
Start 2 Microsoft Offi... QTermUTS 4... 2 Microsoft Offi... 2:21 PM
    
```

PSB200:  
Screen 2/2

```

QTermUTS 4.1.40.0 - [T28743 (Connected to TIP)]
File Edit View Settings Tools Commands Network Window Help
PSB200,234567890
----- 165 PER129BBK 12/22/2009 13:47:26
FLEXIBLE SPENDING ACCOUNTS UPDATE
Soc-Sec: 234-56-7890 ID: 322-28-95
Name: TESTOR, TESTY T
Reason: 10 Divorce Paycode: 24
Event Date: 120209 Receive Date: 122209
Medical Per Pay Amt: 20 Dep Care Per Pay Amt: 0
Effective Date: 000000
----- Medical -----
PayDte Amt PayDte Amt PayDte Amt
121609 20 041610 20
123109 20 043010 20
011610 20 051610 20
013110 20 053110 20
021610 20 061610 20
022810 20 063010 20
031610 20
033110 20
----- Dependent Care -----
PayDte Amt PayDte Amt PayDte Amt
121609 0 041610 0
123109 0 043010 0
011610 0 051610 0
013110 0 053110 0
021610 0 061610 0
022810 0 063010 0
031610 0
033110 0
Estimated Medical Annual Amount 280 Estimated Dependent Annual Amount 0
Note: Xmit:
000002 Screen Call-Up Complete -- Proceed
    
```

PSB301:

```

PSB301,3222895,02          BES CHANGE
----- 103 PER129FAS      04/08/2015 10:30:23
  ID 3222895      Sex M  Agy/Grp 129 - 001      Birth 01011944  BES Beg 030111
  Addr 101 N 14TH STREET APT 10                PO Box
  City RICHMOND      State VA  ZIP 23219 - 2222      Country US
  Rsn 02 02:ohb      Receive 040115      Event Date 050115  Efft Date
  Plan TRC  Emp NE  Mbr F  PreTax Y                Bill 6
  Last TESTOR      First TESTY      MI T  SI  Suf
  POA
  Day Phn 0000000000  Home Phone 8043716062      Medicare M
  ----- [Dependents] ----- Delete
  Rel  Last Name      First Name  MI  Suf  Birth  SSN  QB  D  M  Date
  SF  TESTOR          WIFFEE    |  |  021541 345678901  N  N
  S   KID             TEST      |  |  040314 900420638  N  N
  S   KID             THE       |  |  040314 900420099  N  N
  D   TESTOR          JANE     |  |  052412 900423905  N  N
  Note _____ End
000002 Screen Call-Up Complete -- Proceed
T000101 Row: 6 Col: 73 Mouse: 1.25 Connected to ATIP Page: 1 OVR 10:30

```

PSB302:

```

PSB302,3222895          TERMINATED PARTICIPANT ADDRESS UPDATE
----- 148 PER129XYZ      02/16/2012 12:03:14
  ID 322-28-95  TESTOR, TESTY T
  Address Line 1 101 N FOURTEENTH STREET
  - or - PO BOX _____ (enter as "PO BOX nnn")
  City RICHMOND
  State VA
  ZIP 23219 - 1111
  Xmit _
000002 Screen Call-Up Complete -- Proceed

```

PSB351:

```

PSB351,234567890,07          BES UPDATE
----- 68 PER129BBK      02/11/2012 13:16:55
Name: TESTOR, TESTY T          ID: 322-28-95      A102
Transmit here if the address, home phone, or
email of the participant is not correct -->
Reason Code: 07 00:
101 N FOURTEENTH STREET        Event Date: *****
RICHMOND, VA 23219-1111       Receive Date: *****
No Home Phone                  Xmit: _
employeeedirect@gmail.com

Reason Codes Valid For A 02/11/2012 Effective Date
01 Initial Enroll      28 S/C-Elig ER Pln   71 J/D/Ord-Add Ch
02 OHB Override        37 Upd Prsnl Info   75 Chg Leave Stat
05 Mve Afect Elig     38 Ch Ceases Elig.  76 Lost GovSpr Pln
06 Chg Bill Premium   49 Unpd LV Bgn-EE   77 Chg FT to PT-EE
07 Marriage            50 Return LWOP      78 Chg PT to FT-EE
08 Death of Spouse    54 Transfer to LTD  79 LWOP Non-Pay
09 Lost MCare/Caid    57 Upd Dep Info
10 Divorce            62 Other ER OE/Chg
13 S/C-Lost ER Plan   65 Trm-EE Death
15 Birth/Adoption     66 Elig MCare/Caid
17 Death of Child     67 J/D/Odr-Rmve Ch
19 Add-Exst Family   68 Trm-Prem Not Pd
27 Trm-Not Elig      70 HIPAA Sp Enroll
000693 Warning: Field Must Be Filled

```

PSB352:

```

PSB352,3222895,37          BES CHANGE
----- 103 PER1291HB      02/13/2012 10:22:01
ID 3222895      Sex M  Agy/Grp 129 - 001      Birth 01011944  BES Beg 110110
Addr 101 N FOURTEENTH STREET          PO Box
City RICHMOND      State VA  ZIP 23219 - 1111      Country US
Rsn 37 Upd Prsnl Info  Receive 021312      Event Date 021312  Effct Date 020112
Plan ACC4 Emp NF Mbr F  PreTax Y          Bill 6
Last TESTOR      First TESTY          MI T  SI      Suf
                          POA
Day Phn 0000000000  Home Phone 0000000000      Medicare N
E-Mail employeeedirect@gmail.com          Delete
Rel  Last Name      First Name  MI Suf  Birth  SSN  QB D M  Date
SS TESTOR          RANDY      051202 666000203  N N
S TESTOR           JOHN      121511 900360680  N N
S TESTOR           JOSH      102511 666000173  N N
S TESTOR           RONNIE    102511 900358661  N N
D TESTOR           DASSEY    051210 225123267  N N
S TESTOR           SONNY     E 030211 229123589  N N
D TESTOR           SALLEY    111796 335120112  N N

End _
000002 Screen Call-Up Complete -- Proceed

```

PSB353:

```

PSB353,3222895
----- 114 PER129BBK 02/11/2012 13:24:58

Agency/Group 129 - 001 Dept of Human Resource Mgmt
ID 322-28-95 TESTOR, TESTY T
Current Status Not On Leave

Move Employee To Leave 13: LTD: Not Working Workers Comp

LTD Begin Date *****
LTD End Date *****
FMLA N
Leave Share N
Note
( 13 ) Xmit

000002 Screen Call-Up Complete -- Proceed

```

PSB355:

```

PSB355,900347996
----- 250 PER129BBK 06/28/2011 11:27:15
CREATE PRIVATE ADDRESS OR QMCSO

Dependent: 900-34-7996 TESTOR, SONNY E
Birth/Relationship: 03/02/2011 Son
Participant: 322-28-95 TESTOR, TESTY T
Reason: (Y)QMCSO (P)Privacy:

Address - or - PO Box
City
State
ZIP 00000 - 0000
Country US
Date of Notice 000000
Case Number
Telephone 0000000000 FAX 0000000000
Issuing Agency
Xmit

000002 Screen Call-Up Complete -- Proceed

```









## What is EmployeeDirect?

EmployeeDirect provides registered account holders with secure, quick and easy online access to a variety of compensation, benefits and human resource information. It allows you to review and make certain changes to your personal information from any computer with Internet access. EmployeeDirect is generally available from 6:00 am to midnight.

## Is EmployeeDirect secure?

EmployeeDirect uses Secure Socket Layer (SSL) technology, the highest level of security available over the Internet, to protect your personal information. All information provided to you is scrambled en route and decoded once it reaches your browser. See EmployeeDirect's security certificate information when you click on the closed lock at the bottom of your browser screen.

## Why should I use EmployeeDirect?

Using EmployeeDirect saves time and improves efficiency. It only takes minutes, eliminates paper forms, and automatically notifies your agency when you make certain change requests. It also gives you direct links to Payline, Health Benefits Plan Administrators, the Virginia Retirement System, and your agency's Benefits Administrator. EmployeeDirect has earned a 99% overall satisfaction rating with users.

## How do I get started using EmployeeDirect?

1. Confirm with your agency (your Supervisor, a Human Resource Manager, or a Benefits Administrator) the following identification information as it appears on your PMIS/BES record *before* you visit EmployeeDirect.
  - Identification Number (7-digit number assigned when your agency creates your record)
  - Date of Birth
  - Last four digits of your Social Security Number
  - E-Mail Address
2. Go to the [www.DHRM.virginia.gov](http://www.DHRM.virginia.gov) home page and click on the EmployeeDirect link. It is important to review the "Getting Started" and "FAQs" links *before* you begin your registration.
3. Click the "Register Now" link if you are using EmployeeDirect for the first time. You will be asked to enter your identification information, activate your account within 24 hours, and set-up security to protect your account *before* you can log-in.
4. Log-in using your Username and Password. Then, choose an option from the EmployeeDirect Main Menu.

## Who do I contact if I have difficulty logging into EmployeeDirect?

Many questions are answered when you click on the FAQs link. If you have a question not answered, first contact your agency to be sure your identification information is entered correctly on your account. If you continue to have difficulty, contact [EDirect@DHRM.virginia.gov](mailto:EDirect@DHRM.virginia.gov).

**Confirmation E-mail to Employee:**

Hello [EmployeeName].

Thank you for your visit to EmployeeDirect on [Current Date].

Your approved health benefits change request takes effect on [Effective Date]. It is important that you keep a copy of the updated Health Benefits Profile for your records.

For more information about your rights and obligations when a health benefits change is approved, review the [Privacy](#), [Extended Coverage](#), and [Portability](#) notices.

Do not reply to this automatically generated e-mail. Contact your [Benefits Administrator](#) if you have any questions.

Thank you,  
[EmployeeDirect](#)

**Confirmation E-mail to Benefits Administrator:**

Hello [BA Name]:

EmployeeDirect approved a health benefits change request on [Current Date] for [Employee Name].

The official BES Turnaround Document will be placed in your FTP folder for your review. Don't forget to issue the appropriate [Privacy](#), [Extended Coverage](#) and [Portability](#) notices. Remember, Open Enrollment is not a qualifying event to elect Extended Coverage. Refer to specific rules under [Resources under Benefits Administration](#).

Do not reply to this automatically generated e-mail. Contact the [Office of Health Benefits](#) if you have questions.

Thank you,  
[EmployeeDirect](#)

**Pending Approval E-mail to Employee:**

Hello [Employee Name].

Thank you for your visit to EmployeeDirect on [Current Date].

It generally takes 5 - 7 business days for a *pending* health benefits change request to be approved and updated. Visit [EmployeeDirect](#) at any time to check the status. It is important to keep a copy of the request for your records.

For more information about your rights and obligations when a health benefits change is approved, review the [Privacy](#), [Extended Coverage](#), and [Portability](#) notices.

Do not reply to this automatically generated e-mail. Contact your [Benefits Administrator](#) if you have any questions.

Thank you,  
[EmployeeDirect](#)

Continued on next page

**Pending Approval E-mail to Benefits Administrator:**

Hello [BA Name]:

On [Current Date] EmployeeDirect created a BES Pending Record for [Employee Name]. It is important that you review this change request, ask for supporting documentation if required, and use PSBPEN within 5 - 7 business days to accept or reject it. Remember, approved changes must be consistent with the event and are subject to audit.

The official BES Turnaround Document will be placed in your FTP folder for your review when you accept the request. Don't forget to issue the appropriate [Privacy](#), [Extended Coverage](#) and [Portability](#) notices. Refer to specific rules under [Resources under Benefits Administration](#).

Do not reply to this automatically generated e-mail. Contact the [Office of Health Benefits](#) if you have questions.

Thank you,  
EmployeeDirect

**Pending Cancelled E-mail to Benefits Administrator:**

Hello [BA Name]:

On [Current Date] a pending change request was cancelled by [Employee Name].

EmployeeDirect has automatically rejected the BES Pending Record associated with the cancelled request. Please disregard the previous Pending Approval Notice.

Do not reply to this automatically generated e-mail. Contact the [Office of Health Benefits](#) if you have questions.

Thank you,  
EmployeeDirect

Once an employee is logged into EmployeeDirect, this is the first Health Benefits Enrollment and Information page displayed. Important health benefits announcements are presented here. Participant clicks on a link to continue.

Page 1/1:

The screenshot shows the EmployeeDirect website interface. At the top, it displays 'Virginia.gov' and 'Department of Human Resource Management'. The main header features the 'EMPLOYEE DIRECT' logo and the tagline 'The Portal for State Employees'. On the left side, there is a navigation menu with several categories: 'Exit Health Benefits', 'Get More Information' (with sub-links for Advantage 65, COVA Care, COVA Connect, COVA HDHP, Flex Accounts - FBMC, Kaiser, and Options I & II), 'DHRM Website', 'Payline Website', and 'VRS Website'; 'Need Help?' (with a sub-link for E-mail Health Benefits); and 'Using EmployeeDirect' (with sub-links for Privacy Statement, Site Requirements, and Terms Of Use). The main content area is titled 'Health Benefits Enrollment and Information' and contains a welcome message: 'Welcome to the quick and easy way to manage your enrollment and election choices for health care coverage and flexible reimbursement accounts!'. Below this message is a link that says 'Click here to CONTINUE to your Health Benefits Menu'. At the bottom of the main content area, it says 'Thank you for using EmployeeDirect' and includes the 'dhrm' logo.

This page permits the employee to manage their personal Health Benefits Profile. Options on this menu vary with the type of records available in BES. Participant clicks on a link to continue.

Page 1/4: Current record only in BES:

The screenshot shows the EmployeeDirect website interface. At the top, it says "Virginia.gov" and "Department of Human Resource Management". The main header is "EMPLOYEE DIRECT The Portal for State Employees". On the left, there is a navigation menu with sections: "Exit Health Benefits", "Get More Information" (with links to Advantage 65, COVA Care, COVA Connect, COVA HDHP, Flex Accounts - FBMC, Kaiser, Options I & II, DHRM Website, Payline Website, and VRS Website), "Need Help?" (with links to Benefits Administrator and E-mail Health Benefits), and "Using EmployeeDirect" (with links to Privacy Statement, Site Requirements, and Terms Of Use). The main content area is titled "Health Benefits Enrollment and Information" and shows an ID of 322-28-95 and EC010. It includes a warning: "This is the Health Benefits Menu for: TESTOR, TESTY T" and a link to the Benefits Administrator. Below this, it says "Click on a link to continue." and lists several links: "Qualifying Mid-Year Event Change Request", "Request Exception for Those Already Under Family Coverage", "Update Address, E-Mail, or Phone", "Update Family Member's Profile", and "View Current Health Benefits Profile". At the bottom, it says "EmployeeDirect Security Checked".

Page 2/4: Pending record in BES:

The screenshot shows the EmployeeDirect website interface, similar to the previous one. The main content area is titled "Health Benefits Enrollment and Information" and shows an ID of 322-28-95 and EC042. It includes the same warning: "This is the Health Benefits Menu for: TESTOR, TESTY T" and a link to the Benefits Administrator. Below this, it says "Click on a link to continue." and lists several links: "Cancel Pending Change Request", "View Current Health Benefits Profile", and "View Pending Change Request Received On 12/23/2009". Under the last link, it says "Confirmation Number: Not Yet Approved" and "Reason: Spouse Or Child Gained Eligibility Under Their Employer's Plan". At the bottom, it says "EmployeeDirect Security Checked".

Page 3/4:

Suspense record in BES:

The screenshot shows the EmployeeDirect website interface. At the top, it says "Virginia.gov" and "Department of Human Resource Management". The main header is "EMPLOYEE DIRECT" with the tagline "The Portal for State Employees". On the left, there is a navigation menu with sections: "Exit Health Benefits", "Get More Information" (with sub-links: Advantage 65, COVA Care, COVA Connect, COVA HDHP, Flex Accounts - FBMC, Kaiser, Options I & II), "DHRM Website", "Payline Website", "VRS Website", "Need Help?" (with sub-links: Benefits Administrator, E-mail Health Benefits), and "Using EmployeeDirect" (with sub-links: Privacy Statement, Site Requirements, Terms Of Use). The main content area is titled "Health Benefits Enrollment and Information" and displays ID: 322-28-95 and EC026. It includes a red warning: "This is the Health Benefits Menu for: TESTOR, TESTY T". Below this, it says "For more information or to request a change not listed, contact your Benefits Administrator." and provides links: "Click on a link to continue.", "Update Address, E-Mail, or Phone", "View Current Health Benefits Profile", and "View Health Benefits Profile That Takes Effect 01/01/2010". The Confirmation Number is 0140132 and the Reason is "Spouse Or Child Gained Eligibility Under Their Employer's Plan". At the bottom, it says "EmployeeDirect Security Checked".

Page 4/4:

Suspense record only in BES:

The screenshot shows the EmployeeDirect website interface, similar to the previous one. The main content area is titled "Health Benefits Enrollment and Information" and displays ID: 496-70-10 and EC018. It includes a red warning: "This is the Health Benefits Menu for: TESTY, TEST". Below this, it says "For more information or to request a change not listed, contact your Benefits Administrator." and provides links: "Click on a link to continue.", "Initial Enrollment Request", "Update Address, E-Mail, or Phone", and "View Health Benefits Profile That Takes Effect 01/01/2010". The Confirmation Number is 0000001 and the Reason is "Profile Update". At the bottom, it says "EmployeeDirect Security Checked".

This page permits the employee to identify the qualifying mid-year event for their change request - first by type of event, then by specific event. Participant click on a link to continue.

Page 1/6: Type of event:

Virginia.gov  
Department of Human Resource Management  
**EMPLOYEEDIRECT**  
The Portal for State Employees

› Exit Health Benefits

*Get More Information*

- › Advantage 65
- › COVA Care
- › COVA Connect
- › COVA HDHP
- › Flex Accounts - FBMC
- › Kaiser
- › Options I & II

› DHRM Website

› Payline Website

› VRS Website

*Need Help?*

- › Benefits Administrator
- › E-mail Health Benefits

*Using EmployeeDirect*

- › Privacy Statement
- › Site Requirements
- › Terms Of Use

**Health Benefits Enrollment and Information**

ID: 322-28-95 EC010

Certain qualifying mid-year events permit specific enrollment and election changes with supporting documentation. Your change request must be received *within 31 days* of the qualifying mid-year event.

**Click on a link to continue.**

- › **ALL Events**
- › [Events affecting your family member's employment](#)
- › [Events affecting your number of family members](#)
- › [Events affecting your employment](#)
- › [Events affecting your marital status](#)

› Click here to **CANCEL** and return to Health Benefits Menu

EmployeeDirect Security Checked

Page 2/6: Events affecting your family member's employment:

Virginia.gov  
Department of Human Resource Management  
**EMPLOYEEDIRECT**  
The Portal for State Employees

› Exit Health Benefits

*Get More Information*

- › Advantage 65
- › COVA Care
- › COVA Connect
- › COVA HDHP
- › Flex Accounts - FBMC
- › Kaiser
- › Options I & II

› DHRM Website

› Payline Website

› VRS Website

*Need Help?*

- › Benefits Administrator
- › E-mail Health Benefits

*Using EmployeeDirect*

- › Privacy Statement
- › Site Requirements
- › Terms Of Use

**Health Benefits Enrollment and Information**

ID: 322-28-95 EC010

HELP next to each qualifying mid-year event gives a description of circumstances and specific election changes permitted. Contact your [Benefits Administrator](#) about an event not listed.

**Click on a link to continue.**

- Help** › [Spouse Or Child Gained Eligibility Under Their Employer's Plan](#)
- Help** › [Spouse Or Child Lost Eligibility Under Their Employer's Plan](#)
- › [View ALL EVENTS](#)

› Click here to **CANCEL** and return to Health Benefits Menu

EmployeeDirect Security Checked

Page 3/6: Events affecting your number of family members:

The screenshot shows the EmployeeDirect portal for Virginia.gov. The header includes the Virginia.gov logo, Department of Human Resource Management, and the EMPLOYEEEDIRECT logo with the tagline 'The Portal for State Employees'. The left sidebar contains navigation links under 'Exit Health Benefits', 'Get More Information', 'Need Help?', and 'Using EmployeeDirect'. The main content area is titled 'Health Benefits Enrollment and Information' and displays an ID of 322-28-95 and EC010. It provides instructions on how to use the 'HELP' links for various events and includes a list of event types such as Birth Or Adoption, Child Covered Under Your Plan Lost Eligibility, Death Of Child, Death Of Spouse, Gained Eligibility Under Medicare Or Medicaid, HIPAA Special Enrollment, Judgment, Decree, Or Order To Add Child, Judgment, Decree, Or Order To Remove Child, and Lost Eligibility Under Medicare Or Medicaid. A link to 'View ALL EVENTS' is also present, along with a 'CANCEL' link to return to the Health Benefits Menu. The footer indicates 'EmployeeDirect Security Checked'.

Page 4/6: Events affecting your employment:

The screenshot shows the EmployeeDirect portal for Virginia.gov, similar to page 3/6. The left sidebar navigation is identical. The main content area is titled 'Health Benefits Enrollment and Information' and displays the same ID (322-28-95) and EC010. The 'HELP' links in this section are related to employment changes: Employment Change -- Part-time To Full-time, Employment Change -- Initial Enrollment Request, Employment Change -- Full-time To Part-time, Employment Change -- Unpaid Leave Of Absence Began, and Employment Change -- Unpaid Leave Of Absence Ended. A 'View ALL EVENTS' link and a 'CANCEL' link to return to the Health Benefits Menu are also present. The footer indicates 'EmployeeDirect Security Checked'.

Page 5/6: Events affecting your marital status:

Virginia.gov  
Department of Human Resource Management  
**EMPLOYEE DIRECT**  
The Portal for State Employees

Exit Health Benefits

Get More Information  
 ▶ Advantage 65  
 ▶ COVA Care  
 ▶ COVA Connect  
 ▶ COVA HDHP  
 ▶ Flex Accounts - FBMC  
 ▶ Kaiser  
 ▶ Options I & II

DHRM Website  
 Payline Website  
 VRS Website

Need Help?  
 ▶ Benefits Administrator  
 ▶ E-mail Health Benefits

Using EmployeeDirect  
 ▶ Privacy Statement  
 ▶ Site Requirements  
 ▶ Terms Of Use

**Health Benefits Enrollment and Information**

ID: 322-28-95 EC010

HELP next to each qualifying mid-year event gives a description of circumstances and specific election changes permitted. Contact your [Benefits Administrator](#) about an event not listed.

**Click on a link to continue.**

[Help](#) ▶ [Death Of Spouse](#)

[Help](#) ▶ [Divorce](#)

[Help](#) ▶ [Marriage](#)

▶ [View ALL EVENTS](#)

▶ [Click here to CANCEL and return to Health Benefits Menu](#)

EmployeeDirect Security Checked

Page 6/6: ALL events:

Virginia.gov  
Department of Human Resource Management  
**EMPLOYEE DIRECT**  
The Portal for State Employees

Exit Health Benefits

Get More Information  
 ▶ Advantage 65  
 ▶ COVA Care  
 ▶ COVA Connect  
 ▶ COVA HDHP  
 ▶ Flex Accounts - FBMC  
 ▶ Kaiser  
 ▶ Options I & II

DHRM Website  
 Payline Website  
 VRS Website

Need Help?  
 ▶ Benefits Administrator  
 ▶ E-mail Health Benefits

Using EmployeeDirect  
 ▶ Privacy Statement  
 ▶ Site Requirements  
 ▶ Terms Of Use

**Health Benefits Enrollment and Information**

ID: 322-28-95 EC010

HELP next to each qualifying mid-year event gives a description of circumstances and specific election changes permitted. Contact your [Benefits Administrator](#) about an event not listed.

**Click on a link to continue.**

[Help](#) ▶ [Birth Or Adoption](#)

[Help](#) ▶ [Child Covered Under Your Plan Lost Eligibility](#)

[Help](#) ▶ [Death Of Child](#)

[Help](#) ▶ [Death Of Spouse](#)

[Help](#) ▶ [Dependent Care Cost Or Coverage Change](#)

[Help](#) ▶ [Divorce](#)

[Help](#) ▶ [Employment Change -- Part-time To Full-time](#)

[Help](#) ▶ [Employment Change -- Initial Enrollment Request](#)

[Help](#) ▶ [Employment Change -- Full-time To Part-time](#)

[Help](#) ▶ [Employment Change -- Unpaid Leave Of Absence Began](#)

[Help](#) ▶ [Employment Change -- Unpaid Leave Of Absence Ended](#)

[Help](#) ▶ [Gained Eligibility Under Medicare Or Medicaid](#)

[Help](#) ▶ [HIPAA Special Enrollment](#)

[Help](#) ▶ [Judgment, Decree, Or Order To Add Child](#)

[Help](#) ▶ [Judgment, Decree, Or Order To Remove Child](#)

[Help](#) ▶ [Lost Eligibility Under Governmental Plan](#)

[Help](#) ▶ [Lost Eligibility Under Medicare Or Medicaid](#)

[Help](#) ▶ [Marriage](#)

[Help](#) ▶ [Move Affecting Eligibility For Health Care Plan](#)

[Help](#) ▶ [Other Employer's Open Enrollment Or Plan Change](#)

[Help](#) ▶ [Spouse Or Child Gained Eligibility Under Their Employer's Plan](#)

[Help](#) ▶ [Spouse Or Child Lost Eligibility Under Their Employer's Plan](#)

▶ [Click here to CANCEL and return to Health Benefits Menu](#)

EmployeeDirect Security Checked

This page permits the employee to enter the date of the qualifying mid-year event. Participant enters date and clicks on a link to continue.

Page 1/1:

Date of event:

Virginia.gov  
Department of Human Resource Management  
**EMPLOYEEDIRECT**  
The Portal for State Employees

### Health Benefits Enrollment and Information

ID: 322-28-95 EC010

Qualifying mid-year event change requests must be submitted within 31 days of the event. If this opportunity is missed, your next chance to request a change will be at Open Enrollment or with another consistent qualifying mid-year event, whichever comes first.

Event: Divorce

Enter Date Judge Signed Final

Divorce Decree: MM/DD/YYYY

[Click here to CONTINUE this change request](#)

[Click here to CANCEL and return to Health Benefits Menu](#)

EmployeeDirect Security Checked

**Get More Information**

- › Advantage 65
- › COVA Care
- › COVA Connect
- › COVA HDHP
- › Flex Accounts - FBMC
- › Kaiser
- › Options I & II
- › DHRM Website
- › Payline Website
- › VRS Website

**Need Help?**

- › Benefits Administrator
- › E-mail Health Benefits

**Using EmployeeDirect**

- › Privacy Statement
- › Site Requirements
- › Terms Of Use

This page permits the employee to submit changes to their Health Benefits Profile. Participant enters permitted changes and clicks on "submit" link.

Page 1/1:

Virginia.gov  
Department of Human Resource Management  
**EMPLOYEE DIRECT**  
The Portal for State Employees

**Health Benefits Enrollment and Information**

ID: 322-28-95 EC010

**This is a Health Benefits Change Request for:**  
**TESTOR, TESTY T**

It is important to review each section before you submit your request. If you have any questions or want to make a change not permitted here, contact your [Benefits Administrator](#).

**Section 1: Event Information**

Event: Divorce  
Event Date: 12/02/2009  
Classification: Full-time Employee - NF  
Status: Actively At Work  
Medicare Indicator: No  
Eligibility Terminates: 00/00/0000

**Section 2: Personal Information**

Name: TESTOR, TESTY T  
Gender: Male  
Date Of Birth: 05/06/1950  
Social Security Number: On File

**Important!** Before you change your address, verify the correct format at USPS.

Street Address: 438 CHANDLER DR

P. O. Box:

City: CHESAPEAKE

State: Virginia

Zip 5: 23322

Zip 4: 3838

Personal Phone: (804) 371-6465

Personal E-mail: bfamish@gmail.com

State Phone: (804) 371-6466

State E-mail: Not Available

**Section 3: Health Care Coverage Election**

Health Plan: COVA High Deductible

[Click here to Change plan](#)

Family Members: *Click on name for family member's profile.*

Wife: Covered  TESTOR, WIFFEE

Daughter: Covered  TESTOR, JAZZY

Son: Covered  KIDDO, TESTY

Son: Covered  TESTOR, TODD

Son: Covered  NN, N

Premium Method: Payroll Withhold By Agency  
Premium Status: Pre-Tax

**Section 4: Medical Flexible Reimbursement Account Election**

Maximum Plan Year Amount \$5000 - Minimum Pay Period Amount \$10  
*Whole Dollar Amounts Only.*

MRA Pay Period Amount: 20

Number Of Pay Periods: 24

**Section 5: Dependent Care Flexible Reimbursement Account Election**

Maximum Plan Year Amount \$5000 - Minimum Pay Period Amount \$10  
*Whole Dollar Amounts Only.*

DCA Pay Period Amount: 0

Number Of Pay Periods: 24

**Section 6: Certification and Authorization**

I have reviewed, understand, and agree to the eligibility, elections, and enrollment information in the [Enrollee Statement](#).

Yes

**Important!** Some change requests are approved right away, others are forwarded to your Benefits Administrator for approval.

[Click here to SUBMIT this change request](#)

[Click here to CANCEL and return to Health Benefits Menu](#)

EmployeeDirect Security Checked

This page permits the employee to select a different health care plan before submitting their change request. Participant clicks on a link to continue.

Page 1/1:

Virginia.gov  
Department of Human Resource Management  
**EMPLOYEE DIRECT**  
The Portal for State Employees

**Health Benefits Enrollment and Information**

ID: 322-28-95 EC010

Health care plan options are available depending upon where you live and in some cases where you work. [Review available plans](#) by service area, a summary comparison of benefits, and current monthly premiums before you make your health care plan selection. Contact your [Benefits Administrator](#) for more information.

**Click on a link to continue.**

- ▶ [COVA Care \(with basic dental\)](#)
  - ▶ [COVA Care + Out-Of-Network](#)
  - ▶ [COVA Care + Expanded Dental](#)
  - ▶ [COVA Care + Out-Of-Network + Expanded Dental](#)
  - ▶ [COVA Care + Expanded Dental + Vision & Hearing](#)
  - ▶ [COVA Care + Out-Of-Network + Expanded Dental + Vision & Hearing](#)
- ▶ [COVA Connect \(with basic dental\)](#)
  - ▶ [COVA Connect + Out-Of-Network](#)
  - ▶ [COVA Connect + Expanded Dental](#)
  - ▶ [COVA Connect + Out-Of-Network + Expanded Dental](#)
  - ▶ [COVA Connect + Expanded Dental + Vision & Hearing](#)
  - ▶ [COVA Connect + Out-Of-Network + Expanded Dental + Vision & Hearing](#)
- ▶ [COVA HDHP - High Deductible Plan](#)
- ▶ [Kaiser Permanente - Regional HMO](#)

▶ [Click here for NO PLAN CHANGE](#)

EmployeeDirect Security Checked

EmployeeDirect: Request to Change Family Member's Profile Page  
(sample updated only when significantly changed)

This page permits the employee to enter changes to a family member's profile before submitting their change request. Participant clicks on a link to continue.

Page 1/1:

Virginia.gov  
Department of Human Resource Management  
**EMPLOYEE DIRECT**  
The Portal for State Employees

**Health Benefits Enrollment and Information**

ID: 322-28-95 EC010

**This is the Family Member Profile for:**

Relationship:

Last Name:

First Name:

Middle Initial:

Suffix:

Date Of Birth:

Social Security Number: On File

▶ [Click here when FINISHED with this family member profile](#)

EmployeeDirect Security Checked

This page permits the employee to view their Health Benefits Profile based on the type of records available in BES. Participant clicks on a link to continue.

Page 1/3:

Current record in BES:

The screenshot displays the EmployeeDirect portal interface. At the top, it shows the Virginia.gov logo and the Department of Human Resource Management. The main header reads "EMPLOYEE DIRECT - The Portal for State Employees". On the left side, there is a navigation menu with categories: "Exit Health Benefits", "Get More Information" (including Advantage 65, COVA Care, COVA Connect, COVA HDHP, Flex Accounts - FBMC, Kaiser, and Options I & II), "DHRM Website", "Payline Website", "VRS Website", "Need Help?" (including Benefits Administrator and E-mail Health Benefits), and "Using EmployeeDirect" (including Privacy Statement, Site Requirements, and Terms Of Use). The main content area is titled "Health Benefits Enrollment and Information" and shows the employee ID as 322-28-95 and EC010. A red notice states: "This is the Health Benefits Profile that is effective 12/23/2009 for: TESTOR, TESTY T". Below this, there is a warning to review each section of the current profile and to contact the Benefits Administrator for any questions. A reminder notes that a qualifying mid-year event is required to change enrollment or elections once they take effect. The page is divided into five sections: Section 1: Event Confirmation (Confirmation Number: 0000001, Event: Profile Update, Event Date: 10/18/2009, Classification: Full-time Employee - NF, Status: Actively At Work, Medicare Indicator: No, Eligibility Terminates: 00/00/0000); Section 2: Personal Information (Name: TESTOR, TESTY T, Gender: Male, Date Of Birth: 05/06/1950, Social Security Number: On File, Street Address: 438 CHANDLER DR, P. O. Box, City: CHESAPEAKE, State: Virginia, Zip 5: 23322, Zip 4: 3838, Personal Phone: (804) 371-6465, Personal E-mail: bfarrish@gmail.com, State Phone: (804) 371-6466, State E-mail: Not Available); Section 3: Health Care Coverage Election (Health Plan: COVA High Deductible, Membership: You + Two or More Family Members, Family Members: Click on name for family member's profile, Son: NN\_N, Son: TESTOR\_TODD, Son: KIDDO\_TESTY, Daughter: TESTOR\_JAZZY, Wife: TESTOR\_WIFFEE, Total Monthly Premium: \$ 1054, You Pay: \$ 0, Premium Method: Payroll Withhold By Agency, Premium Status: Pre-Tax); Section 4: Medical Flexible Reimbursement Account Election (MRA Pay Period Amount: \$ 20, Number Of Pay Periods: 24, Estimated Plan Year Amount: \$ 260, Plan Year Election End Date: 06/30/2010); and Section 5: Dependent Care Flexible Reimbursement Account Election (DCA Pay Period Amount: \$ 0, Number Of Pay Periods: 24, Estimated Plan Year Amount: \$ 0, Plan Year Election End Date: 00/00/0000). At the bottom, there are links to "Click here for HEALTH BENEFITS MENU" and "Click here to PRINT A COPY". The footer indicates "EmployeeDirect Security Checked".

Page 2/3:

Pending record in BES:

Virginia.gov  
Department of Human Resource Management  
**EMPLOYEE DIRECT**  
The Portal for State Employees

Exit Health Benefits

Get More Information  
Advantage 65  
COVA Care  
COVA Connect  
COVA HDHP  
Flex Accounts - FBMC  
Kaiser  
Options I & II

DHRM Website  
Payline Website  
VRS Website

Need Help?  
Benefits Administrator  
E-mail Health Benefits

Using EmployeeDirect  
Privacy Statement  
Site Requirements  
Terms Of Use

### Health Benefits Enrollment and Information

ID: 322-28-95 EC042

**This is the Change Request pending since 12/23/2009 for:  
TESTOR, TESTY T**

Review each section of this *pending* request and [keep a copy](#) for your records. Contact your [Benefits Administrator](#) with any questions.

Remember, you may be asked by your Benefits Administrator to provide supporting documentation before this request is approved. Approval generally takes 5 - 7 business days.

**Section 1: Event Confirmation**

Confirmation Number: Not Yet Approved  
Event: Spouse Or Child Gained Eligibility Under Their Employer's Plan  
Event Date: 01/01/2010  
Classification: Full-time Employee - NF  
Status: Actively At Work  
Medicare Indicator: No  
Eligibility Terminates: 00/00/0000

**Section 2: Personal Information**

Name : TESTOR, TESTY T  
Gender: Male  
Date Of Birth: 05/06/1950  
Social Security Number: On File  
Street Address: 438 CHANDLER DR  
P. O. Box:  
City: CHESAPEAKE  
State: Virginia  
Zip 5: 23322  
Zip 4: 3838  
Personal Phone: (804) 371-6465  
Personal E-mail: bfarrish@gmail.com  
State Phone: (804) 371-6466  
State E-mail: Not Available

**Section 3: Health Care Coverage Election**

Health Plan: Waived Health Care Coverage  
Membership: Waived Health Care Coverage  
Family Members: *Click on name for family member's profile.*  
Wife: Removed [TESTOR, WIFFEE](#)  
Daughter: Removed [TESTOR, JAZZY](#)  
Son: Removed [KIDDO, TESTY](#)  
Son: Removed [TESTOR, TODD](#)  
Son: Removed [NN, N](#)

Premium Method: Payroll Withhold By Agency  
Premium Status: Pre-Tax

**Section 4: Medical Flexible Reimbursement Account Election**

MRA Pay Period Amount: \$ 0  
Number Of Pay Periods: 24

**Section 5: Dependent Care Flexible Reimbursement Account Election**

DCA Pay Period Amount: \$ 0  
Number Of Pay Periods: 24

[Click here to CANCEL this pending Change Request](#)  
[Click here for HEALTH BENEFITS MENU](#)  
[Click here to PRINT A COPY](#)

EmployeeDirect Security Checked

Page 3/3:

Suspense record in BES:

The screenshot shows the Virginia.gov EmployeeDirect portal. The header includes the Virginia.gov logo and the Department of Human Resource Management. The main title is "EMPLOYEE DIRECT" with the subtitle "The Portal for State Employees". A left-hand navigation menu lists various options such as "Exit Health Benefits", "Get More Information", "Need Help?", and "Using EmployeeDirect". The main content area is titled "Health Benefits Enrollment and Information" and displays the following details:

ID: 322-28-95 EC026

**This is the Health Benefits Profile that is effective 01/01/2010 for: TESTOR, TESTY T**

Review each section of this *future-dated* profile and [keep a copy](#) for your records. Contact your [Benefits Administrator](#) with any questions.

Remember, a qualifying event is required to change enrollment or elections once they take effect and open enrollment elections cannot be changed after the open enrollment period ends.

**Section 1: Event Confirmation**

Confirmation Number: 0140132  
Event: Spouse Or Child Gained Eligibility Under Their Employer's Plan  
Event Date: 01/01/2010  
Classification: Full-time Employee - NF  
Status: Actively At Work  
Medicare Indicator: No  
Eligibility Terminates: 00/00/0000

**Section 2: Personal Information**

Name : TESTOR, TESTY T  
Gender: Male  
Date Of Birth: 05/06/1950  
Social Security Number: On File  
Street Address: 438 CHANDLER DR  
P. O. Box:  
City: CHESAPEAKE  
State: Virginia  
Zip 5: 23322  
Zip 4: 3838  
Personal Phone: (804) 371-6466  
Personal E-mail: bfarrish@gmail.com  
State Phone: (804) 371-6466  
State E-mail: Not Available

**Section 3: Health Care Coverage Election**

Health Plan: Waived Health Care Coverage  
Membership: Waived Health Care Coverage  
Family Members: *None Covered*  
Total Monthly Premium: \$ 0  
You Pay: \$ 0  
Premium Method: Payroll Withhold By Agency  
Premium Status: Pre-Tax

**Section 4: Medical Flexible Reimbursement Account Election**

MRA Pay Period Amount: \$ 0  
Number Of Pay Periods: 24  
Estimated Plan Year Amount: \$ 280  
Plan Year Election End Date: 06/30/2010

**Section 5: Dependent Care Flexible Reimbursement Account Election**

DCA Pay Period Amount: \$ 0  
Number Of Pay Periods: 24  
Estimated Plan Year Amount: \$ 0  
Plan Year Election End Date: 00/00/0000

[Click here for HEALTH BENEFITS MENU](#)  
[Click here to PRINT A COPY](#)

EmployeeDirect Security Checked

This page permits the employee to view a family member's profile. Participant clicks on a link to continue.

Page 1/1:

The screenshot shows the EmployeeDirect portal for state employees. The header includes the Virginia.gov logo and the Department of Human Resource Management. The main title is "EMPLOYEE DIRECT - The Portal for State Employees". The page is titled "Health Benefits Enrollment and Information". It displays an ID of 322-28-95 and EC010. A section titled "This is the Family Member Profile for:" lists details for a wife: Relationship: Wife, Name: TESTOR, WIFFEE, Date Of Birth: 02/15/1941, Social Security Number: On File, and Eligible For Medicare: No. A link is provided to "Click here when FINISHED with this family member profile". A sidebar on the left contains navigation links for "Exit Health Benefits", "Get More Information" (including Advantage 65, COVA Care, COVA Connect, COVA HDHP, Flex Accounts - FBMC, Kaiser, and Options I & II), "DHRM Website", "Payline Website", "VRS Website", "Need Help?" (Benefits Administrator, E-mail Health Benefits), and "Using EmployeeDirect" (Privacy Statement, Site Requirements, Terms Of Use). The footer indicates "EmployeeDirect Security Checked".

EmployeeDirect: Thank You & Exit Health Benefits Page  
(sample updated only when significantly changed)

This page permits the employee to provide feedback about their visit and to exit the Health Benefits Enrollment and Information option in EmployeeDirect. Participant clicks on a link to continue.

Page 1/1:

The screenshot shows the EmployeeDirect portal for state employees. The header includes the Virginia.gov logo and the Department of Human Resource Management. The main title is "EMPLOYEE DIRECT - The Portal for State Employees". The page is titled "Health Benefits Enrollment and Information". The main content area displays a thank you message: "Thank you for using EmployeeDirect to manage your health benefits!". Below this, it asks the user to "Please take a few minutes to give us feedback about your visit." and provides a link to "Click here to EXIT Health Benefits Enrollment and Information". A sidebar on the left contains navigation links for "Get More Information" (including Advantage 65, COVA Care, COVA Connect, COVA HDHP, Flex Accounts - FBMC, Kaiser, and Options I & II), "DHRM Website", "Payline Website", "VRS Website", "Need Help?" (E-mail Health Benefits), and "Using EmployeeDirect" (Privacy Statement, Site Requirements, Terms Of Use). The footer indicates "EmployeeDirect Security Checked".