

Systems Guide

For

Health Benefits Administrators

Prepared by
Office of Health Benefits
Department of Human Resource Management

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Basic Information		
	Where to Get More Help - Contact Information	3
	Overview of Health Benefits Systems	4
	Responsibilities of Benefits Administrator	
	▪ Access to BES/PMIS and HuRMan	5
	▪ Contacts Database	5
	▪ Enrollment / Election Changes	5
	▪ Agency Turnaround Documents	6
	▪ Mandatory Notices	6
	▪ Reports and Reconciliations	7
Codes & Charts		
	BES Codes	9
	General Information Codes by Agency / Group	13
	Leave of Absence Code Rules	14
	Reason Code Rules	15
Keying Instructions		
	Changing Flexible Reimbursement Account (FRA) Election	17
	Changing Health Care Election	17
	Changing Personal Information (Address, Birth Date, E-mails, Phones or SSN)	17
	Changing Status of an Employee	18
	Correcting Data Entry Error	18
	Creating Initial BES Record	18
	Handling EmployeeDirect Pending Request	19
	Handling Leave of Absence Record	19
	Handling Paper Enrollment Form Change Request	20
	Handling Suspense Record	20
	Reinstating a Terminated BES Record	20
	Revising Agency's Contacts	20
	Terminating a BES Record	21
	Transferring Eligibility to the Retiree Program	21
	Transferring to a Split Contract at the Initial Transfer to the Retiree Program	23
	Transferring to a Split Contract when Already Enrolled in the Retiree Program	24
Screens - BES		
	BENEFIT PMIS Benefits Transactions	25
	PMIS PMIS / BES Broadcast Screen	26
	PSBHLP Benefits Help Screen	27
	PSBPEN Benefits Pending Display / Accept / Reject	28
	PSB000 Participant Create / Participant Change	30
	PSB100 Contacts Change	32
	PSB109 Transfer Inactive Record	33
	PSB111 Medicare HIC Number Update	35
	PSB116 Reactivate Terminated Participant	36
	PSB117 Delete Benefits Suspense Records	37
	PSB200 FSA Update / Flexible Spending Accounts Update	38
	PSB301 BES Update / BES Change	39
	PSB305 Participant Data as of [Date]	40
	PSB306 Flexible Spending Accounts Display	41
	PSB309 Participant History Scroll	42
	PSL002 Leave Expire Report	44

Table of Contents - Page 2 of 2

Page

Screens - EmployeeDirect		
	Health Benefits Welcome Page	45
	Health Benefits Menu Page	46
	QME Change Request Pages	48
	Request to Change Health Benefits Profile Page	51
	Request to Change Health Care Plan Page	52
	Request to Change Family Member's Profile Page	53
	Review Health Benefits Profile Page	54
	Review Family Member's Profile Page	57
	Thank You & Exit Health Benefits Page	58
	Sample E-mails from EmployeeDirect	59

Where to Get More Help - Contact Information

Department of Human Resource Management (DHRM)	
<i>Web Site Home:</i>	www.dhrm.virginia.gov
<i>Employee Benefits:</i>	www.dhrm.virginia.gov/employeebenefits.html
<i>Information Technology:</i>	http://web1.dhrm.virginia.gov/itech
<i>Resources for Benefits Administrators:</i>	www.dhrm.virginia.gov/resources/benefitsadmin/benefitsadmintoc.html
Office of Health Benefits (OHB)	
<i>E-mail:</i>	ohb@dhrm.virginia.gov
<i>Phone:</i>	(804) 225-3642 in Richmond or (888) 642-4414 toll-free
<i>Fax:</i>	(804) 371-0231
Information Technology Help Desk (ITECH)	
<i>E-mail</i>	ihelp@dhrm.virginia.gov
<i>Phone:</i>	(804) 225-2133

Overview of Health Benefits Systems

Primary Objective	
	<p>The primary objective of the Health Benefits Systems is to collect, validate, and distribute eligibility and enrollment data for participants and their dependents in two separate programs.</p> <ul style="list-style-type: none"> • State Health Benefits Program <ul style="list-style-type: none"> • Eligible Employees • Retiree Health Benefits Program <ul style="list-style-type: none"> • Retirees • Survivors • Long-Term Disability participants • Extended Coverage (COBRA) participants
Major Components or Functions	
<i>EmployeeDirect:</i>	Participants use a secure, web-based, self-service tool called EmployeeDirect or submit a paper enrollment form to their agency's Benefits Administrator to request enrollment and election changes. EmployeeDirect takes minutes, eliminates the enrollment form, and automatically notifies the Benefits Administrator of change requests. It also gives direct links to Plan Administrators, Payline, and the Virginia Retirement System.
<i>Benefits Eligibility System (BES):</i>	Agencies enter approved requests into a central Benefits Eligibility System (BES). BES is a secure, transaction-based, on-line system that verifies eligibility against built-in rules and validations that ensure compliance with State and Federal regulations. It is integrated with PMIS to automatically update when HR transactions have a critical impact on benefits. BES is the Commonwealth's official source of eligibility and enrollment.
<i>Plan Administrator's Transaction Files:</i>	New enrollments, terminations, and changes in enrollment are provided from BES to Plan Administrators using the HIPAA 834 Transaction File format. Plan administrators connect to the Commonwealth's secure FTP server for file transfers. The Plan Administrator's Daily Change File is used to update their eligibility information so members have ready access to their benefits and timely, accurate claims processing. The Monthly Audit File is used to report and reconcile discrepancies. All data exchanges are covered by Business Associate Agreements.
<i>Agency Reports:</i>	Agency Reports transfer specific data from BES to the appropriate agency to verify data entry, collect premiums, issue mandatory notices, and reconcile processing problems. Agency reports are distributed to secure, agency-specific HuRMan FTP folders located in the DHRM repository. Most reports are regularly scheduled.
<i>Contacts Database:</i>	The Contacts Database is used to send communications and materials to agency representatives. It requires a primary Benefits contact, the Benefits Administrator. It also permits a secondary Benefits contact, and a primary and secondary Payroll contact.
<i>Benefits Administrator:</i>	Understanding and mastering the agency's Benefits Administrator role in creating and maintaining timely, accurate BES records is vital to the success of the Health Benefits Program and the systems that support it.

Responsibilities of the Benefits Administrator - Page 1 of 4

Access to BES / PMIS and HuRMan

Go to DHRM website.

Click Information Technology.

Click Documentation.

Click Browser Based Access to HuRMan and follow instructions for access. Two completed forms are required:

- Information Security Access Form (PMIS and BES users)
- DHRM Computer Applications Access Request Form

Contact the ITECH Help Desk with questions about the forms or access.

Health Benefits Systems Guide

Go to DHRM website.

Click HR Community.

Click Benefits Administration.

Click Resources.

Click Health Benefits Systems Guide (under "Instructions & Policies").

- Generally updated annually.
- Mid-year changes communicated through E-News.

Contacts Database

Revise the agency's contacts in BES for each agency/group you represent using PSB100.

- Benefits Contact 1 receives all communications and materials from OHB, including e-mails from EmployeeDirect.
- Benefits Contact 2 and Payroll Contacts only receive communications from OHB.

Updates entered by the end of a month are generally effective the first week of the following month.

Contact OHB with questions.

Enrollment / Election Changes

Advise participants about using EmployeeDirect or a paper enrollment form. Both are found on the DHRM website. Change requests must be received by the 31-day deadline.

Evaluate change requests submitted by participants and ask for supporting documentation.

Update BES within 5 - 7 business days of the change request and before the effective date if possible to avoid a delay in coverage.

- Open Enrollment actions have a specific deadline communicated before the Open Enrollment period begins.
- Update personal information and health care first, then the flexible reimbursement accounts election.

Complete Section 6 if a paper enrollment form is submitted.

Responsibilities of the Benefits Administrator - Page 2 of 4

Enrollment / Election Changes (continued)

Special Alerts!

- Eligibility files are available to health care administrators the next business day after keyed in BES. Open Enrollment actions are available the day after the BES keying deadline.
- One combined ID card is issued for those NOT eligible for Medicare. Those eligible for Medicare will receive a health care coverage card and a prescription drug card when it applies. Cards are sent to members within 7 - 10 business days after the eligibility file is received.
 - Cards print only when information on the card changes.
 - Additional cards are available by calling the ID Card Order Line.
- Eligibility files are available to FRA administrator on the 10th and 25th of the month. FRA actions are available on the next scheduled file after keyed in BES and following the effective date. Open Enrollment actions are available the day after the BES keying deadline.
- FRA Confirmation Statements are sent within 7 - 10 business days after the eligibility file is received.
 - Participants should report errors to the agency for immediate correction.

Agency Turnaround Documents

Generated and placed in HuRMan folder daily under PM4270.

- Represent successful BES transactions created by PMIS, keyed by the agency, or approved by EmployeeDirect before 6:15 PM.

Review and resolve any discrepancy immediately. Be sure to verify pay codes on the turnaround document for elections submitted by EmployeeDirect.

Ensure payroll deductions are set-up accurately and on time.

- BES automatically sets-up CIPPS deductions.
- Deductions are reflected in the paycheck for the period ending on the 9th of the month following the effective date.

Turnaround documents and all supporting documentation are subject to audit by OHB. Keep good records and follow your agency's established recordkeeping procedures.

Mandatory Notices

Issue according to specific rules on the form and under Resources for Benefits Administrators on the DHRM website.

- *General Notice of Extended Coverage Rights and Employee/Retiree Privacy Notice:* send to participants and spouses who enroll in health care or a medical flexible reimbursement account.
- *Medicare Part D General Notice of Creditable Coverage:* send to participants and spouses who enroll in health care.
- *Certificate of Group Health Plan Coverage:* send to participants and dependents removed from health care.
- *Extended Coverage Election Notice:* send to participants and dependents that qualify for Extended Coverage (COBRA).

Responsibilities of the Benefits Administrator - Page 3 of 4

Reports and Reconciliations	
	<p>Review and take appropriate action for each report promptly. Follow your agency's instructions for financial and accounting reconciliations.</p> <ul style="list-style-type: none"> • Go to DHRM Website. • Click Information Technology. • Click File Repository. • Enter your HuRMan folder user name and password. • Select Agency Repository. • Click on the file desired. It opens automatically for you to view or print. If a file is missing, there is no report for that period.
Agency Exception Report:	<p>File Name: PM9641</p> <p>This report is produced <i>monthly</i> and lists a variety of discrepancies found on BES records that need attention and reconciliation. Use this report to update these records.</p>
Agency Monthly Enrollment Report:	<p>File Name: Monthly-Enrollment-Rpt</p> <p>This <i>monthly</i> report lists all eligible employees as of the first of each month. It includes personal information and elections for health care and flexible reimbursement accounts. It may be used to meet various agency needs.</p>
Agency Transaction Turnaround Document:	<p>File Name: PM4270</p> <p>This <i>daily</i> report is the official record of a BES change created by PMIS, keyed by the agency, or approved by EmployeeDirect. Both the old and new data is shown when something has changed. It is important to confirm that the changes made are accurate.</p>
Dependent Age Termination Report:	<p>File Name: PM3841</p> <p>This <i>annual</i> report is produced during the first part of <i>January</i>. It lists dependent children removed from BES effective the last day of the previous year because they have reached the age that makes them ineligible for coverage. Use this report to send mandatory notices.</p>
Dependents Approaching Eligibility Thresholds - Age 23 Report:	<p>File Name: PM9640</p> <p>This report is produced in <i>July and October</i> of each year and identifies participants who have children reaching Age 23 sometime during the current year. Note that this report does not include children of participants who were entered into BES after the report's run date. Use this report to (1) notify participants that the dependent child will be terminated at the end of the year in which the child reached Age 23 and (2) to encourage participants to begin the lengthy process to ensure continuous coverage for an adult incapacitated child that may remain eligible for the program.</p>

Responsibilities of the Benefits Administrator - Page 4 of 4

Reports and Reconciliations (continued)	
Leave Expire Report:	<p>BES Transaction: PSL002, Agency Number or PSL002, Agency Number, Group Number</p> <p>This <i>on-line</i> report displays BES records with a leave end date that has expired or will expire within the next 45 days. It is important to monitor it on a regular basis. The oldest leave end date is at the top of the report. All records displayed require a follow-up action that changes the employee's status or updates the leave end date. Expired leave end dates must be resolved before BES can be updated. Records not updated within 30 days of the Leave End Date will be reported by DHRM to Agency HR heads.</p> <ul style="list-style-type: none"> • Key follow-up actions prior to the leave end date and at least 4 business days prior to the BES term date to assure uninterrupted health benefits coverage. Health benefits are not affected if the BES term date is blank or displays « No benefits. ». • Successful follow-up transactions automatically update this report.
Open Enrollment Report:	<p>File Name: Open Enrollment Rpt</p> <p>This report is published during the <i>Open Enrollment period</i> and identifies employees who have made open enrollment election changes as of the date of the report. This report includes information that may be used to meet various agency needs.</p>
Participants and/or Dependents Recently Terminated:	<p>File Name: PM4175</p> <p>This <i>monthly</i> report shows participants and/or dependents that have recently lost coverage. This report can be used to insure that appropriate Extended Coverage notices and HIPAA certificates have been sent. Remember all individuals who have their coverage terminated should be sent a HIPAA certificate even though they may not have experienced an Extended Coverage qualifying event.</p>
Persons Eligible For Medicare In [Month]:	<p>File name: PM9645-4</p> <p>This <i>monthly</i> report identifies individuals in Agencies 005 - 007 that are approaching Age 65 and are currently enrolled in a health care plan for those not eligible for Medicare. Enrolled individuals are automatically transferred to Advantage 65 + Dental & Vision unless a different option is requested. When a split contract is required and the combined premium exceeds the premium amount for a "Family" membership in the plan selected for the persons not eligible for Medicare, the Office of Health Benefits will key a special exception where the Medicare plan premium is \$0. Use this report to notify the individual of available plan options and the automatic transfer. The Office of Health Benefits provides sample letters.</p>

BES Codes - Page 1 of 4

<i>Category</i>	<i>Code</i>	<i>DB</i>	<i>Description</i>
BES Reason Codes	01	Initial Enroll	Initial Enrollment
	02	OHB Override	Used By the Office of Health Benefits
	03	Switch MCare Pln	Switch Medicare Plan
	05	Mve Affect Elig	Move Affecting Eligibility for Health Care Plan
	06	Upd Prem Code	Update Premium Code
	07	Marriage	Marriage
	08	Death of Sp	Death of Spouse
	09	Lost MCare/Caid	Lost Eligibility under Medicare or Medicaid
	10	Divorce	Divorce
	13	S/C-Lost ER Pln	Spouse or Child Lost Eligibility under Their Employer's Plan
	15	Birth/Adoption	Birth or Adoption
	17	Death of Ch	Death of Child
	18	Rmve Dep-Unspec	Remove family member-unspecified reason
	19	Add-Exst Family	Exception for Those Already under Family Coverage
	27	Trm-Not Elig	Term - Participant Is No Longer Eligible
	28	S/C-Elig ER Pln	Spouse or Child Gained Eligibility under Their Employer's Plan
	29	Trm-RE Death	Term - Death of Retiree Group Participant
	37	Upd Prsnl Info	Update Personal Information
	38	Ch Ceases Elig	Child Covered under your Plan Lost Eligibility
	41	Trm-RE Request	Term - Request By Retiree Group Participant
	45	Trnsfr-COBRA	Transfer to COBRA Coverage
	48	Trnsfr-Retiremt	Transfer to Retirement Coverage
	49	EE-Unpd LV Bgn	Employment Change-Unpaid Leave of Absence Begins
	50	EE-UnPd LV End	Employment Change-Unpaid Leave of Absence Ends
	53	Trnsfr-Splt Cnt	Transfer to Split Contract - creates Linked Spouse or Linked Child
	54	Trnsfr-LTD	Transfer to Long-Term Disability Coverage
	56	Open Enrollment	Open Enrollment
	57	Upd Dep Info	Update Family Member's Personal Information
	61	DepCare Chg	Dependent Care Cost or Coverage Change
62	Other ER OE/Chg	Other Employer's Open Enrollment or Plan Change	
65	Trm-EE Death	Term - Death of Employee Group Participant	
66	Elig-MCare/Caid	Gained Eligibility under Medicare or Medicaid	
67	J/D/Odr-Rmve Ch	Judgment, Decree, or Order to Remove Child	
68	Trm-Prem Not Pd	Term - Premium Not Paid - Retiree Program Only	
69	Trnsfr-Sp Pln	Waive Own Coverage to be Under Spouse's State Plan	
70	HIPAA Spcl Enrl	HIPAA Special Enrollment	
71	J/D/Odr-Add Ch	Judgment, Decree, or Order to Add Child	
73	Trnsfr-Survivor	Transfer to Survivor Coverage	
75	Upd N-PMIS LV	Update Non-PMIS Leave of Absence	
76	Lost GovSpr Pln	Lost Eligibility under Governmental Plan	
77	EE-Chg FT to PT	Employment Change-Full-time to Part-time	
78	EE-Chg PT to FT	Employment Change-Part-time to Full-time	
79	Non-Pay-LWOP	Non-Pay of Premiums While on LWOP	
BES Transaction Codes		BENEFIT	Display Transactions Available To BES
		PMIS	Display PMIS/BES Broadcast Screen
		PSB000	Create Non-PMIS Record
		PSB100	Contacts Change
		PSB109	Transfer from Employee Program to Retiree Program
		PSB111	Update Medicare HIC Number
		PSB116	Remove Term Date - Reinstate Previous Coverage
		PSB117	Delete Suspense Record
		PSB200	Enroll or Change Flexible Reimbursement Accounts
		PSB301	Enroll, Change or Waive Health Care Coverage
		PSB305	Display BES Data As of [Date]
		PSB306	Display Flexible Reimbursement Accounts History
		PSB309	Display BES Data History
	PSBHLP	Display Help Screen 1 of 4	

BES Codes - Page 2 of 4

<i>Category</i>	<i>Code</i>	<i>DB</i>	<i>Description</i>
		PSBPEN PSL002	Approve/Reject Employee-Direct Pending Request Display Leave Expire Report
Bill Premium	02 03 04 06 07 08 09 12 19	02 03 04 06 07 08 09 12 19	Bill Sent to Participant VRS Withhold Medicare + Family Agency Payroll DOA - Line Of Duty Special Arrangement with Last Agency Unpaid Premium - Claims On Hold Bill Sent to Participant - ARRA (Subsidy) Unpaid Premium - Claims On Hold - ARRA (Subsidy)
Dependent Relationship	D H OF OM S SD SS W	20 01 98 97 10 21 11 02	Daughter Husband Other female child Other male child Son Step-daughter Step-son Wife
Leave Code	02 03 05 06 09 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 30 31 32 33 40 42 43 44 45 46 47 48 99	02 03 05 06 09 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 30 31 32 33 40 42 43 44 45 46 47 48 99	LWFP - Educational LWOP - Suspension: Standards of Conduct Violation LWOP - Military LWFP - Mobility Leave LWOP - Personal STD - No Workers Compensation LTD - No Workers Compensation STD - Workers Compensation LTD - Workers Compensation WLTD - No Workers Compensation WLTD - Workers Compensation LWOP - Suspension: Pending Investigation LWOP - Educational LWOP - Medical LWOP - Workers Compensation Layoff - Placement Only Layoff - Severance & Placement Layoff - Severance & Retirement Layoff - Severance Only TWFR--Reduced Hours TWFR--Unpaid LWPP - Educational LWPP - Medical LWPP - Personal with FMLA LWPP - Workers Compensation LWFP - Bone Marrow LWFP - Medical LWFP - Military LWFP - Personal LWFP - Pre-Disciplinary LWFP - Pre-Layoff Leave LWFP - Suspension LWFP - Workers Compensation Separated
Medicare	E N Y	7 0 6	NOT Eligible for Medicare by Exemption NOT Eligible for Medicare Eligible for Medicare

BES Codes - Page 3 of 4

<i>Category</i>	<i>Code</i>	<i>DB</i>	<i>Description</i>
Membership	S	0	Self Only
	DM	3	Self + Child
	DS	4	Self + Spouse
	F	1	Self + Family
	W	5	Waived Coverage
Participant Status	D	27	LTD Participant - No Workers Compensation
	DW	28	LTD Participant - Workers Compensation
	EX	25	Excluded from Retiree Health Benefits Program
	LC	32	Split Contract - Linked Child
	LS	31	Split Contract - Linked Spouse
	NE	45	Non-PMIS Employee - Excluded from health care coverage
	NF	01	Non-PMIS Employee - Full-time 40 hours
	NN	46	Non-PMIS Employee - Working LTD - No Workers Compensation
	NP	43	Non-PMIS Employee - Part-time 20 - 31 hours
	NQ	41	Non-PMIS Employee - Full-time 32 - 39 hours
	NY	47	Non-PMIS Employee - Working LTD - Workers Compensation
	PE	44	PMIS Employee - Excluded from health care coverage
	PF	00	PMIS Employee - Full-time 40 hours
	PN	29	PMIS Employee - Working LTD - No Workers Compensation
	PP	42	PMIS Employee - Part-time 20 - 31 hours
	PQ	40	PMIS Employee - Full-time 32 - 39 hours
	PY	30	PMIS Employee - Working LTD - Workers Compensation
	R	02	Retiree
SC	33	Surviving Child	
SS	34	Surviving Spouse	
X	04	Extended Coverage (COBRA) Participant	
Pay Code	12	12	12 pay periods per year beginning in July
	18	18	18 pay periods per year beginning in August
	19	19	18 pay periods per year beginning in September
	20	20	20 pay periods per year beginning in September
	24	24	24 pay periods per year beginning in July
Plan	65DV	37	Advantage 65 + Dental & Vision
	65MO	48	Advantage 65 Medical Only
	A65	27	Advantage 65
	ACC0	42	COVA Care (with basic dental)
	ACC1	43	COVA Care + Out-of-network
	ACC2	44	COVA Care + Exp Dental
	ACC3	45	COVA Care + Exp Dental + Out-of-network
	ACC4	46	COVA Care + Exp Dental + Vision & Hearing
	ACC5	47	COVA Care + Exp Dental + Out-of-network + Vision & Hearing
	B1	02	Option I
	B2	03	Option II
	B2DV	36	Option II + Dental & Vision
	CHD	50	COVA HDHP - High Deductible Health Plan
	KP	06	Kaiser Permanente HMO
	MODV	49	Advantage 65 Medical Only + Dental & Vision
	OCC0	142	COVA Connect (with basic dental)
	OCC1	143	COVA Connect + Out-of-network
	OCC2	144	COVA Connect + Exp Dental
	OCC3	145	COVA Connect + Exp Dental + Out-of-network
	OCC4	146	COVA Connect + Exp Dental + Vision & Hearing
OCC5	147	COVA Connect + Exp Dental + Out-of-network + Vision & Hearing	
W	00	Waived Coverage	

BES Codes - Page 4 of 4

<i>Category</i>	<i>Code</i>	<i>DB</i>	<i>Description</i>
Plan - Low-Income Subsidy	65D1	91	Advantage 65 + Dental & Vision Low-Income Subsidy 1
	65D2	92	Advantage 65 + Dental & Vision Low-Income Subsidy 2
	65D3	93	Advantage 65 + Dental & Vision Low-Income Subsidy 3
	65D4	94	Advantage 65 + Dental & Vision Low-Income Subsidy 4
	65D5	95	Advantage 65 + Dental & Vision Low-Income Subsidy 5
	65D6	96	Advantage 65 + Dental & Vision Low-Income Subsidy 6
	65D7	97	Advantage 65 + Dental & Vision Low-Income Subsidy 7
	65D8	98	Advantage 65 + Dental & Vision Low-Income Subsidy 8
	65D9	99	Advantage 65 + Dental & Vision Low-Income Subsidy 9
	A651	51	Advantage 65 Low-Income Subsidy 1
	A652	52	Advantage 65 Low-Income Subsidy 2
	A653	53	Advantage 65 Low-Income Subsidy 3
	A654	54	Advantage 65 Low-Income Subsidy 4
	A655	55	Advantage 65 Low-Income Subsidy 5
	A656	56	Advantage 65 Low-Income Subsidy 6
	A657	57	Advantage 65 Low-Income Subsidy 7
	A658	58	Advantage 65 Low-Income Subsidy 8
	A659	59	Advantage 65 Low-Income Subsidy 9
	B11	61	Option I Low-Income Subsidy 1
	B12	62	Option I Low-Income Subsidy 2
	B13	63	Option I Low-Income Subsidy 3
	B14	64	Option I Low-Income Subsidy 4
	B15	65	Option I Low-Income Subsidy 5
	B16	66	Option I Low-Income Subsidy 6
	B17	67	Option I Low-Income Subsidy 7
	B18	68	Option I Low-Income Subsidy 8
	B19	69	Option I Low-Income Subsidy 9
	B21	71	Option II Low-Income Subsidy 1
	B22	72	Option II Low-Income Subsidy 2
	B23	73	Option II Low-Income Subsidy 3
	B24	74	Option II Low-Income Subsidy 4
	B25	75	Option II Low-Income Subsidy 5
	B26	76	Option II Low-Income Subsidy 6
	B27	77	Option II Low-Income Subsidy 7
	B28	78	Option II Low-Income Subsidy 8
	B29	79	Option II Low-Income Subsidy 9
	B2D1	81	Option II + Dental & Vision Low-Income Subsidy 1
	B2D2	82	Option II + Dental & Vision Low-Income Subsidy 2
	B2D3	83	Option II + Dental & Vision Low-Income Subsidy 3
	B2D4	84	Option II + Dental & Vision Low-Income Subsidy 4
B2D5	85	Option II + Dental & Vision Low-Income Subsidy 5	
B2D6	86	Option II + Dental & Vision Low-Income Subsidy 6	
B2D7	87	Option II + Dental & Vision Low-Income Subsidy 7	
B2D8	88	Option II + Dental & Vision Low-Income Subsidy 8	
B2D9	89	Option II + Dental & Vision Low-Income Subsidy 9	

General Information Codes by Agency / Group - Page 1 of 1

	Category	Agency / Group	Participant Status						Bill Premium	Medicare
Employing Agency	Eligible Employees	090-999 \ 001-999 Paycode	PQ	PF	PP	PN	PY	PE	06 07	N
			NQ	NF	NP	NN	NY	NE		
Office of Health Benefits	Extended Coverage (COBRA) Regular FT Military PT Military Disability Extension	006 / 005	X						02 09 12 19	N Y E
		006 / 007								
		006 / 009								
		006 / 008								
Office of Health Benefits	Non-Annuitant Survivors	006 / 006	LC	LS	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	
	Virginia Retirement System	VRS Service Retirees/Annuitant Survivors	005 / 001	R	LC	LS	SC	SS	EX	02 03 07 12
VRS Disability Retirees		005 / 002	R	LC	LS	EX			02 03 07 12	N Y E
VSDP Long-Term Disability Participants		005 / 004	D	DW	LC	LS	EX		02 07 08 12	N Y E
Last Employing Agency	ORP Retirees	007 / 008	R	LC	LS	EX			02 07 12	N Y E
	ORP Long-Term Disability Participants	007 / 004	D	DW	LC	LS	EX		02 07 08 12	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									
Plan	ACC0	ACC1	ACC2	ACC3	ACC4	ACC5	CHD	KP	W
	OCC0	OCC1	OCC1	OCC3	OCC4	OCC5			
Membership	S	DM	DS	F	W				
Dependent Relationship	D	S	SD	SS	OF	OM	H	W	
Medicare = Y									
Plan	65MO	A65	65DV	MODV	B1	B2	B2DV	W	
	Low-Income Subsidy Plans - Page 12								
Membership	S	W							

Leave of Absence Code Rules - Page 1 of 1

<i>Category</i>	<i>LV</i>	<i>Description</i>	<i>LV End Date Not to Exceed</i>	<i>BES Term Date Is End of Month After:</i>
Layoff & Temporary Work Force Reduction	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
Leave with Full Pay	40	Bone Marrow	1 month	NA
	02	Educational	24 months	NA
	42	Medical	24 months; 480 hours with FMLA	NA
	43	Military	4 months	NA
	06	Mobility Leave	12 months	NA
	44	Personal	4 months; 12 weeks with 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	
Leave with Partial Pay	30	Educational	24 months	LV End Date not to exceed 24 months
	31	Medical	24 months; 12 weeks with 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
Leave Without Pay	17	Educational	24 months	LV End Date not to exceed 24 months
	18	Medical	12 months*; 12 weeks with FMLA	LV End Date not to exceed 12 months
	05	Military	60 months	LV Begin Date*; Layoff supersedes;
	09	Personal	12 months*; 12 weeks with FMLA	LV End Date not to exceed 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
Long-Term Disability	11	No Workers Compensation	Indefinite, 18-month increments	LV Begin Date; Layoff supersedes
			12 weeks with FMLA	LV End Date
	13	Workers Compensation	Indefinite, 18-month increments	LV Begin Date; Layoff supersedes
			12 weeks with FMLA	LV End Date
Short-Term Disability:	10	No Workers Compensation	125 work days, 180-182 calendar days;	LV Begin Date + 6 months
			12 weeks with FMLA	LV Begin Date + 3 months
	12	Workers Compensation	125 work days, 180-182 calendar days;	LV Begin Date + 6 months
			12 weeks with FMLA	LV Begin Date + 3 months
Working Long-Term Disability	14	No Workers Compensation	Indefinite, 12-month increments	NA
	15	Workers Compensation	Indefinite, 12-month increments	NA

*24 months on exception

*Eligible for 24 months COBRA with employer contribution

Reason Code Rules - Page 1 of 2

- See Reason Code Rules - Page 2 of 2 for descriptions that explain the codes used on this chart.
- Some BES actions require multiple transactions and multiple reason codes. When multiple reason codes are required, enter a separate transaction for each reason code.

<i>Category</i>	<i>Short Name</i>	<i>Event Date</i>	<i>RC</i>	<i>Health Care</i>				<i>MRA</i>				<i>DCA</i>				<i>COBRA</i>	<i>HIPAA</i>	<i>Effective</i>	
	Birth/Adoption	day of birth/adopt	15	E	C	A	*	-	E	I	*	*	E	I	-	-	GP	-	R5
Enroll or	Ch Ceases Elig	last day covered	38	-	C	-	RC	-	-	I	R	-	-	-	R	C	EN	Y	ER
Make Changes	Death of Ch	day of death	17	-	C	-	R	-	-	-	R	C	-	-	R	C	-	-	ER
	Death of Sp	day of death	08	E	C	A	R	-	E	I	R	C	E	I	R	C	GP	-	ER
Health Care:	DepCare Chg	day of change	61	-	-	-	-	-	-	-	-	-	E	I	R	C	-	-	ER
Use PSB301	Divorce	day judge signed	10	E	C	*	RS	-	E	I	R	C	E	I	R	C	EN	Y	ER
	EE-Chg FT to PT	last day FT	77	E	-	A	-	W	-	-	-	-	-	-	-	-	GP	-	R
MRA or DCA:	EE-Chg PT to FT	last day PT	78	E	C	A	-	-	-	-	-	-	-	-	-	-	GP	-	R
Use PSB200	EE-Unpd LV Bgn		49																
	EE-UnPd LV End		50																
	Add-Exst Family	day received	19	-	-	A	-	-	-	-	-	-	-	-	-	-	GP	-	ER
	Elig-MCare/Caid	first day covered	66	-	C	-	R	*	-	I	R	C	-	-	-	-	-	Y	R
	HIPAA Spcl Enrl	last day covered	70	E	C	A	-	-	-	-	-	-	-	-	-	-	GP	-	R
	Initial Enroll	hire date	01	E	-	A	-	-	E	-	-	-	E	-	-	-	GP	-	R3
	J/D/Odr-Add Ch	day notice rec'd	71	-	C	A	-	-	E	I	-	-	-	-	-	-	GP	-	R
	J/D/Odr-Rmve Ch	day notice rec'd	67	-	C	-	R	W	-	-	R	-	-	-	-	-	-	-	R
	Lost GovSpr Pln	last day covered	76	E	C	A	-	-	-	-	-	-	-	-	-	-	GP	-	R
	Lost Mcare/Caid	last day covered	09	E	C	A	-	-	E	I	R	C	-	-	-	-	GP	-	R
	Marriage	day of marriage	07	E	C	A	*	*	E	I	R	-	E	I	R	C	GP	-	R
	Mve Affect Elig	day of change	05	*	C	*	*	-	-	-	-	-	-	-	-	-	GP	-	R
	Non-Pay - LWOP	last day paid	79	-	-	-	-	W	-	-	R	C	-	-	R	C	-	-	E
	Open Enrollment	day received	56	E	C	A	R	W	E	-	-	-	E	-	-	-	GP	Y	*4
	Other ER OE/Chg	day chg effective	62	E	C	A	R	W	-	-	-	-	-	-	-	-	GP	Y	R
	Rmve DepUnspec	day received	18	-	-	-	R	-	-	-	-	-	-	-	-	-	-	Y	R
	S/C-Elig ER Pln	first day covered	28	-	C	-	R	W	-	-	R	C	E	I	R	C	-	Y	R
	S/C-Lost ER Pln	first day not covered	13	E	C	A	-	-	E	I	-	-	E	I	R	C	GP	-	R
	Switch Mcare Pln	last day/old plan	03	-	C	-	-	-	-	-	-	-	-	-	-	-	GP	-	R
	Upd Prsnl Info	day received	37	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	*8
	Upd Dep Info	day received	57	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	E
	Upd N-PMIS LV	effective date	75	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	E
	Upd Prem Code	last day/old code	06	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	E
	OHB Override	assigned by OHB	02	E	C	A	R	W	E	I	R	C	E	I	R	C	-	-	*1

Reason Code Rules - Page 2 of 2

Category	Short Name	Event Date	RC	Health Care						MRA				DCA				COBRA	HIPAA	Effective	
Transfer	Trnsfr-COBRA	term date	45	-	C	-	R	-	-	-	-	-	-	-	-	-	-	-	-	E	
Eligibility	Trnsfr-LTD	term date	54	E	C	-	R	W	-	-	-	-	-	-	-	-	-	-	-	E	
	Trnsfr-Retiremt	term date	48	E	C	-	R	-	-	-	-	-	-	-	-	-	-	-	-	E	
PSB109	Trnsfr-Splt Cnt	term date	53	E	-	A	-	-	-	-	-	-	-	-	-	-	-	-	-	E	
	Trnsfr-Sp Pln	term date	69	-	-	-	-	W	-	-	-	-	-	-	-	-	-	-	-	E	
	Trnsfr-Survivor	term date	73	-	C	-	R	-	-	-	-	-	-	-	-	-	-	-	-	E7	
Category	Short Name	Event Date	RC	Health Care						MRA				DCA				COBRA	HIPAA	Effective	
Terminate	Trm-EE Death	day of death	65	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	EN	Y	E6
Eligibility	Trm-RE Death	day of death	29	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	EN	Y	E
	Trm-Not Elig	last day covered	27	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	EN	Y	E
PSB301	Trm-Prem Not Pd *	last day covered	68	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	EN	Y	E
	Trm-RE Request	last day covered	41	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	EN	Y	E

* restricted to agencies 005 - 007

Descriptions That Explain The Codes Used On The Reason Codes Rules Chart

Health Care	Effective Date
E Enroll	E Changes are effective the first of the month following the event.
C Change plan	E6 Changes are effective the first of the second month following the event.
A Add eligible dependent	E7 Changes are effective the first of the month following the event if submitted within 60 days of the event.
R Remove dependent	ER Changes in health care coverage are effective the first of the month following the event. Changes in flexible reimbursement accounts are effective the first of the month following receipt of your request or following the event, whichever is later. When the later date is the first of the month, changes are effective that day.
RC Remove child only	R Changes are effective the first of the month following receipt of your request or following the event, whichever is later. When the later date is the first of the month, changes are effective that day.
RS Remove spouse only	R3 Elections are effective the first of the month following receipt of your request or following the event, whichever is later. When the later date is the first of the month, elections are effective that day. Exception! When you start work and request enrollment on or before the first working day of a month, are effective the first day of that month.
W Waive coverage	R5 Changes in health care coverage are retroactively effective the first of the month in which the child is born, adopted, or placed for adoption. Changes in flexible reimbursement accounts are effective the first of the month following receipt of your request or following the event, whichever is later. When the later date is the first of the month, changes are effective that day.
* Agency Assistance Form	*1 Effective date determined by Office of Health Benefits.
MRA and DCA	*4 Elections are effective July 1 following the Open Enrollment period.
E Enroll	*8 Changes are effective the first of the current month. When a suspense record exists, changes are effective on the suspense record's effective date.
I Increase election amount	
R Reduce election amount	
C Cancel election	
* Agency Assistance Form	
COBRA	
EN Election Notice to those removed that qualify	
GP General Notice and Privacy Notice to employees and spouses added	
HIPAA	
Y Certificate of Group Coverage to those removed	

Changing Flexible Reimbursement Account (FRA) Election

- PMIS Employee:*
- Use PSB200 and the appropriate reason code.
 - If the pay code is not correct, use PSE211 for classified employees or PSE083 for faculty to correct the pay code, and then key the FRA election.
 - Verify changes on PSB305 and make corrections if necessary.

- Non-PMIS Employee:*
- Use PSB200 and the appropriate reason code.
 - If the pay code is not correct, be sure to correct it on this screen.
 - Verify changes on PSB305 and make corrections if necessary.

Changing Health Care Election

- Special Alerts!**
- If 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 to the record.
 - If 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, OHB will enter all 8s in the social security number field and a system-generated number will be assigned by BES.
 - When an employee chooses to waive their own coverage and be covered as a dependent under their spouse’s plan, the employee’s BES record must be waived first. Then, the employee can be added as a dependent by the spouse’s agency.
 - A split contract is required when a participant enrolled in the Retiree Program chooses to cover a dependent and one or both of them are eligible for Medicare. See instructions for “Transferring to a Split Contract when Already Enrolled in the Retiree Program”.

- PMIS Employee, Non-PMIS Employee and Participant in Retiree Program:*
- Use PSB301 and the appropriate reason code.
 - Key the day before the Effective Date in the Delete Date field for a dependent being removed from coverage.
 - Replace a Delete Date with all zeros to remove it.
 - Verify changes on PSB305 and make corrections if necessary.

Changing Personal Information (Address, Birth Date, E-mails, Phone Numbers, or SSN)

- PMIS Employee:*
- Use PSE091 to update address, birth date, State e-mail, phone numbers, or SSN.
 - Use PSB301 and reason code 37 to update personal e-mail. When the personal e-mail is removed, a State e-mail already in PMIS will populate both the State and personal e-mails.
 - Verify changes on PSB305 and make corrections if necessary.

- Non-PMIS Employee and Participant in Retiree Program:*
- Use PSB301 and reason code 37 to update address, personal e-mail, or phone numbers.
 - Use PSB000 to update birth date or SSN.
 - Verify changes on PSB305 and make corrections if necessary.

Changing Status of an Employee

Special Alerts!

- When an employee’s status changes from part-time to full-time, health care or flexible reimbursement accounts changes are not permitted. The health care premium is automatically reduced to reflect the State’s contribution.
- When an employee’s status changes from full-time to part-time, the flexible reimbursement accounts are not changed but the health care is automatically changed to Waived.

PMIS Employee:

- The PMIS transaction automatically changes the participant’s status in BES.

Non-PMIS Employee:

- Use PSB000 and reason code 77 to change the status.
- Verify the change on PSB305 and make corrections if necessary.

Correcting Data Entry Errors

*PMIS Employee,
Non-PMIS Employee and
Participant in Retiree Program:*

- If you find a data-entry error, re-key with the correction.
- If the correction fails, contact a member of the OHB Systems Team for assistance. If necessary, you may be asked to send a Request for Assistance form with supporting documentation.

Creating Initial BES Record

Special Alerts!

- BES requires a social security number to determine eligibility for health benefits and create the initial BES record. Once eligibility is validated, a separate 7-digit number is assigned by BES and used for identification purposes.
- Participants without a social security number must be handled by DHRM. Contact the DHRM Help Desk for assistance.

PMIS Employee:

A PMIS employee is one employed by a state agency that uses the State’s Personnel Management Information System (PMIS) for personnel actions.

- The PMIS transaction automatically creates a BES record where the plan and membership are Waived.

Non-PMIS Employee:

A Non-PMIS employee is one employed by a state agency that uses an outside system for personnel actions. A BES record must be created by the employing agency for an employee never in BES or one rehired more than 30 days after termination. The plan and membership are Waived until the employee requests enrollment. Employees rehired within 31-days of termination are re-instated with the same election choices they had at termination. See Reinstate a Terminated Participant’s BES Record.

- Use PSB000.
- On the next screen, be sure to key W in the plan and membership fields.

Participant in Retiree Program:

Participant records in the Retiree Program are considered Non-PMIS records. Most records in the Retiree Program are transferred from the State (Employee) Program. Sometimes, however, a participant not previously covered is eligible for coverage and a new BES record must be created. A good example is the Survivor not previously covered by a deceased participant.

- Use PSB000.
- On the next screen, be sure to key the appropriate reason code, plan and membership.

Handling EmployeeDirect Pending Request

Special Alerts!

- When a participant uses EmployeeDirect to submit a change request, EmployeeDirect notifies the participant’s BA and creates a pending record in BES. This eliminates the paper enrollment form.
- EmployeeDirect does not create a pending record in BES for some requests. Personal information updates and most Open Enrollment requests do not create a pending record. Open Enrollment requests where a dependent is added will have a pending record.
- All participants except LS and LC, with an active BES record, have access to EmployeeDirect for Health Benefits.
- If a participant has difficulty with the EmployeeDirect Login, verify their ID, birth date, and e-mails in BES and have them try again.
- Use PSBPEN for the participant or for the agency to review a pending record. Contact the participant to resolve any issues. Be sure to ask for supporting documentation.
- Use PSBPEN for the participant and key A to approve or R to reject the record in the End field. Rejected records are deleted from BES.
- Verify approved changes on PSB305 and make corrections if necessary.
- The participant may use EmployeeDirect to review an approved request or to re-submit a rejected request.

*PMIS Employee,
Non-PMIS Employee and
Participant in Retiree Program:*

Handling Leave of Absence Record

Special Alerts!

- A term date is automatically populated in BES when an employee begins or extends a leave of absence that affects health benefits. The term date is removed when the employee returns from the leave of absence.
- The Leave Expire Report (PSL002, Agency Number or PSL, Agency Number, Group Number) displays BES records with a leave end date that has expired or will expire within the next 45 days. It is important to monitor this report on a regular basis and key follow-up actions timely.

PMIS Employee:

- Update leave of absence status in PMIS using PSE003.
- Use PSB301 and reason code 79 if the employee fails to pay the appropriate premium while on LWOP.
- Send Request for Assistance form to OHB if the employee fails to pay the appropriate premium while on Layoff.

Non-PMIS Employee:

- Use PSB301 and reason code 75 to update leave of absence status.
- Use PSB301 and reason code 79 if the employee fails to pay the appropriate premium while on LWOP.
- Send Request for Assistance form to OHB if the employee fails to pay the appropriate premium while on Layoff.

Keying Instructions - Page 4 of 8

Handling Paper Enrollment Form Change Request

Special Alert!

*PMIS Employee,
Non-PMIS Employee and
Participant in Retiree Program:*

- Be sure the enrollment form includes the date received, the event date, and supporting documentation. Refer to the Reason Codes Rules Chart for changes permitted.
- Key changes to personal information first, then key changes to the health care election followed by changes to the flexible reimbursement account (FRA) election. See specific keying instructions for the changes requested.

Handling Suspense Record

Special Alerts!

*PMIS Employee,
Non-PMIS Employee and
Participant in Retiree Program:*

- When transactions are effective in the future, a suspense record is created in BES. When the future date arrives, the record moves from suspense to current. A transaction attempted with an effective date prior to the effective date of a BES suspense record will fail. When this happens, the suspense record must be deleted, the new transaction entered, and the deleted suspense record re-keyed.
- You cannot re-key an Open Enrollment transaction after the BES keying deadline for Open Enrollment. Send a Request for Assistance form to OHB.
- Use PSB305 and tab to the SUSP at the top of the screen to view the suspense record. Print the suspense record and related dependent screen.
- Use PSB117 to delete the suspense record.
- Key the new transaction. Or, have the member use EmployeeDirect for the new transaction. A successful EmployeeDirect transaction will create a BES pending record that must be handled before you re-key the deleted suspense record.
- Re-key the deleted suspense record using the printed information. Make sure you key the same dates used on the deleted suspense record.
- Verify suspense record updates on PSB305 by transmitting on "Susp>" at the top of the screen.

Reinstating a Terminated BES Record

*PMIS Employee,
Non-PMIS Employee and
Participant in Retiree Program:*

- Use PSB116 and the BES term date will be removed.

Revising Agency's Contacts

Special Alerts!

*PMIS Employee,
Non-PMIS Employee and
Participant in Retiree Program:*

- Agency contacts are stored in BES for each Agency / Group Number.
- Benefits Contact 1 is required and receives all communications and materials from OHB including emails from EmployeeDirect. Benefits Contact 2 and Payroll Contacts only receive communications from OHB.
- Updates entered by the end of the month are generally effective the first week of the following month.
- Use PSB100, Agency Number, Group Number.

Terminating a BES Record

Special Alerts!	<ul style="list-style-type: none"> • Coverage ends at the end of the month following the event date. • When an employee dies, dependents enrolled at the time of the employee's death may choose to continue the employee's coverage for an extra month. BES automatically sets the term date to the end of the second month following the death unless the extra coverage is declined.
<i>PMIS Employee:</i>	<ul style="list-style-type: none"> • The BES record is automatically terminated when the PMIS transaction to end employment is keyed. In the event of an employee's death, PMIS allows the BES term date to be changed if the extra month of coverage is declined.
<i>Non-PMIS Employee:</i>	<ul style="list-style-type: none"> • Use PSB301 and the appropriate reason code (27 or 65). In the event of an employee's death where the extra month of coverage is declined, use reason code 27 rather than reason code 65.
<i>Participant in Retiree Program:</i>	<ul style="list-style-type: none"> • Use PSB301 and the appropriate reason code (27, 29, 68 or 41).

Transferring Eligibility to the Retiree Program

Special Alerts!	<ul style="list-style-type: none"> • The Retiree Program provides health benefits for Retirees, Survivors, Long-Term Disability Participants, and Extended Coverage (COBRA) Participants. Coverage in the State (Employee) Program must be terminated in BES before a transfer to the Retiree Program can occur. A paper enrollment form must be submitted. • Do not key a transfer if coverage in the Retiree Program is declined! • When a participant chooses to cover a dependent and one or both of them are eligible for Medicare as of the effective date of the transfer, it is necessary to create a split contract. Key the participant's election first using the instructions below and then key the split contract record for the dependent(s) using the instructions found under "Transferring to a Split Contract at the Initial Transfer to the Retiree Program".
Transfer to Extended Coverage (COBRA):	<ul style="list-style-type: none"> • Use PSB109 for the participant (or dependent) who qualifies for Extended Coverage (COBRA). Transmit next to the appropriate Extended Coverage (COBRA) agency/group. • Next, transmit next to the appropriate qualifying event. • Next, transmit again next to the same Extended Coverage (COBRA) group. • The following screen should display reason code 45 and X for the participant's status. Key the plan and membership. Key zeros in the delete date for dependents to continue coverage. Be sure to Transmit! • Verify changes on PSB305 and make corrections if necessary.
Transfer to LTD Coverage:	<ul style="list-style-type: none"> • Use PSB109 for the participant. Transmit next to the appropriate LTD agency/group. • The following screen should display reason code 54 and D for the participant's status. Change the participant's status if it should be DW. Key the plan and membership. Key zeros in the delete date for dependents to continue coverage. Be sure to Transmit! • Verify changes on PSB305 and make corrections if necessary.

Transferring Eligibility to the Retiree Program (continued)

Transfer to Retiree Coverage:

- Use PSB109 for the participant. Transmit next to the appropriate Retiree agency/group.
- Next, transmit next to “Enroll as Retiree”.
- The next screen should display reason code 48 and R for the participant’s status. Key the plan and membership. Key zeros in the delete date for dependents to continue coverage. **Be sure to Transmit!**
- Verify changes on PSB305 and make corrections if necessary.

Transfer to Survivor Coverage:

- Sometimes an eligible Survivor was not previously covered by a deceased participant. In this case, see instructions “Creating Initial BES Record”.
- Use PSB109 for the participant. Transmit next to the appropriate Survivor agency/group.
- Next, transmit next to “Enroll as Survivor”.
- The following screen should display reason code 73 and SS or SC for the participant’s status. Key the plan and membership. Key only the relationship and the SSN for each dependent to be covered; BES will add the other dependent information. **Be sure to Transmit!**
- Verify changes on PSB305 and make corrections if necessary.

Transfer to Waived in the Retiree Program and Covered By Spouse’s State Plan:

- Contact the spouse’s agency or OHB to confirm that the participant has been added as a dependent.
- Use PSB109 for the participant. Transmit next to the appropriate Retiree or LTD agency/group.
- Next, transmit next to “Enroll as Dependent on Spouse’s State Plan”.
- The following screen should display reason code 69 and Waived as the plan and membership. **Be sure to Transmit!**
- Verify changes on PSB305 and make corrections if necessary.

Transferring to a Split Contract at the Initial Transfer to the Retiree Program:

Special Alert!

When a participant transferring into 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. A split contract has at least two participants - the original participant and the original participant's linked spouse or linked child.

Each participant in the split contract must choose a plan based on their Medicare eligibility. Medicare-eligible persons have "Self Only" membership and may choose different Medicare plans. Two or more persons not eligible for Medicare must choose the same plan and a membership that corresponds to the number of persons covered by that plan.

- When the combined premium of the split contract records exceeds the premium amount for a "Family" membership in the plan selected for the persons not eligible for Medicare, send a Request for Assistance to OHB. OHB will key a special exception that adjusts the premium.

When the original participant is NOT eligible for Medicare and a dependent is eligible for Medicare:

- First, make sure the original participant's record has been transferred to the Retiree Program.
- Then, use PSB109 for the dependent eligible for Medicare. Transmit next to the same group in which the original participant is enrolled.
- Next, transmit next to "Enroll as Linked Spouse or Linked Child".
- The following screen should display reason code 53 and LS or LC for the participant's status. Key the Medicare plan, S in membership, and Y in the Medicare field. **Be sure to transmit!**
- On the last screen, key the HIC#. **Be sure to transmit!**
- Use PSB305 on the original participant to view the split contract records.

When the original participant is eligible for Medicare and the dependent(s) are NOT eligible for Medicare:

- First, make sure the original participant's record has been transferred to the Retiree Program in a plan for those eligible for Medicare.
- Then, use PSB109 for the oldest dependent NOT eligible for Medicare (usually the spouse). Transmit next to the same group which the original participant is enrolled.
- Next, transmit next to "Enroll as Linked Spouse or Linked Child".
- The following screen should display reason code 53 and LS or LC for the participant's status. Key the same plan that previously covered this person. Key the membership. Key only the relationship and the SSN for each dependent to be covered; BES will add the other dependent information. **Be sure to transmit!**
- Use PSB305 on the original participant to view the split contract records.

When the original participant and the dependent are both eligible for Medicare:

- First, make sure the original participant's record has been transferred to the Retiree Program in a plan for those eligible for Medicare.
- Then, use PSB109 for the dependent eligible for Medicare. Transmit next to the same group which the original participant is enrolled.
- Next, transmit next to "Enroll as Linked Spouse or Linked Child".
- The following screen should display reason code 53 and LS or LC for the participant's status. Key the Medicare plan, S in membership, and Y in the Medicare field. **Be sure to transmit!**
- On the last screen, key the HIC#. **Be sure to transmit!**
- Use PSB305 on the original participant to view the split contract records.

Transferring to a Split Contract when Already Enrolled in the Retiree Program

Special Alert!

When a participant already enrolled 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. A split contract has at least two participants - the original participant and the original participant's linked spouse or linked child.

Each participant in the split contract must choose a plan based on their Medicare eligibility. Medicare-eligible persons have "Self Only" membership and may choose different Medicare plans. Two or more persons not eligible for Medicare must choose the same plan and a membership that corresponds to the number of persons covered by that plan.

- When the combined premium of the split contract records exceeds the premium amount for a "Family" membership in the plan selected for the persons not eligible for Medicare, send a Request for Assistance to OHB. OHB will key a special exception that adjusts the premium.

When the original participant is NOT eligible for Medicare and a dependent is eligible for Medicare:

- First, use PSB301 and reason code 66 for the original participant. Key the day before the Effective Date in the Delete Date field to remove the dependent eligible for Medicare from coverage.
- Then, use PSB109 for the dependent eligible for Medicare. Transmit next to the same group in which the original participant is enrolled.
- Next, transmit next to "Enroll as Linked Spouse or Linked Child".
- The following screen should display reason code 53 and LS or LC for the participant's status. Key the Medicare plan, S in membership, and Y in the Medicare field. **Be sure to transmit!**
- On the last screen, key the HIC#. **Be sure to transmit!**
- Use PSB305 on the original participant to view the split contract records.

When the original participant is eligible for Medicare and the dependent(s) are NOT eligible for Medicare:

- First, use PSB301 and reason code 66 for the original participant. Key the Medicare plan, S in membership, Y in the Medicare field, and the day before the Effective Date in the Delete Dare field to remove the dependent(s) from coverage. On the next screen, key the HIC#. **Be sure to transmit!**
- Then, use PSB109 for the oldest dependent NOT eligible for Medicare (usually the spouse). Transmit next to the same group which the original participant is enrolled.
- Next, transmit next to "Enroll as Linked Spouse or Linked Child".
- The following screen should display reason code 53 and LS or LC for the participant's status. Key the same plan that previously covered this person. Key the membership. Key only the relationship and the SSN for each dependent to be covered; BES will add the other dependent information. **Be sure to transmit!**
- Use PSB305 on the original participant to view the split contract records.

When the original participant and the dependent are both eligible for Medicare:

- First, use PSB301 and reason code 66 for the original participant. Key the Medicare plan, S in membership, Y in the Medicare field, and the day before the Effective Date in the Delete Dare field to remove the dependent(s) from coverage. On the next screen, key the HIC#. **Be sure to transmit!**
- Then, use PSB109 for the dependent eligible for Medicare. Transmit next to the same group which the original participant is enrolled.
- Next, transmit next to "Enroll as Linked Spouse or Linked Child".
- The following screen should display reason code 53 and LS or LC for the participant's status. Key the Medicare plan, S in membership, and Y in the Medicare field. **Be sure to transmit!**
- On the last screen, key the HIC#. **Be sure to transmit!**
- Use PSB305 on the original participant to view the split contract records.

BES Screen: PMIS

Transaction Code: PMIS

Transaction Title: PMIS/BES Broadcast Screen

Function: This transaction provides information regarding recent updates to PMIS and BES.

- This transaction displays important information to PMIS and BES users and should be reviewed regularly.
- Information may be posted on multiple screens.

Users: All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.

Procedure:

- From HOME position, key: PMIS and Transmit.
- PMIS screen returns.
- Review information on first page.
- If multiple pages are present, tab to Next> and Transmit to see the next page. Repeat until all pages have been reviewed.

Screen 1/1:

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

PMIS                               Next> PER129BBK 12/22/2009 13:37:16
Dept of Human Resource Management Personnel Management Information System
Agency 129 Leave Expire List ->

DISABLE INACTIVE USER-IDS

Effective 08/01/2008, PMIS/BES Unisys user-IDs that have been
inactive for over 60 days will be disabled. Please contact
the DHRM Help Desk to reactivate any disabled user-ID.

User-IDs inactive for over one year will be removed.

000001 This Is Screen 1 of 5 - Transmit From Next> To View Next Screen
```


BES Screen: PSBPEN

Transaction Code: PSBPEN

Transaction Title: Benefits Pending Display / Accept / Reject

Function: This transaction is used to manage BES changes requested through EmployeeDirect because of a qualifying mid-year event or initial enrollment.

- This transaction is used to accept or reject a pending transaction.
- Users may select to view a complete list of pending transactions by agency or a specific pending transaction by identification number.

Users: All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.

Procedure: *For Agency-Specific List of Pending Transactions:*

- From HOME position, key: PSBPEN, Agency Number and Transmit.
- PSBPEN screen listing all pending transactions returns.
- Tab to the desired pending transaction and Transmit.

For Person-Specific Pending Transaction:

- From HOME position, key: PSBPEN, Identification Number and Transmit.
- PSBPEN screen for the specific pending transaction returns.

To Accept or Reject A Pending Transaction:

- From PSBPEN screen for a specific pending transaction, verify that the change requested satisfies current benefits administration rules.
- Tab to Accept/Reject and type either Accept (A) to authorize the change, or Reject (R) to delete the change. Then, Transmit.
- BES will automatically display a PSB305 screen when the PSBPEN transaction is successful.

Continued on next page.

BES Screen: PSBPEN (continued)

Screen 1/1:

```

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

PSBPEN,234567890 *PENDING*      BES UPDATE                      Term Date 000000
----- 108 PER129BBK          12/22/2009 14:15:35
SSN 234567890  Sex M  Agy/Grp 129 - 001  Birth 05061950  BES Beg 070103
Addr 438 CHANDLER DR                      PO Box
City CHESAPEAKE      State VA  ZIP 23322 - 3838  Loc 550
Rsn 08 Death of Spouse  Receive 122209  Event Date 120509  Eft Date 010110
Plan [redacted]  Emp NF Mbr F  Pre-Tax Y  Bill 6  Pay 24
Last TESTOR          First TESTY      MI T  SI  Suf
Medical Reimb 0020  Dep Care 0000
Day Phn 8043716466  Home Phone 8043716465  Spouse Agy 000  Medicare
----- Dependents ----- Delete
Rel  Last Name      First Name  MI Suf  Birth  SSN  S D M  Date
W  TESTOR          WIFFEE     [redacted] 021541 345678901 N N N [redacted]
D  TESTOR          JAZZY     101488 225149632 N N N
S  KIDDO          TESTY     101907 336251414 N N N
S  TESTOR          TODD      110708 225363651 N N N
S  NN              N         051206 234562345 N N N

Employee Direct 12/22/2009 14:12:26  ACCEPT/REJECT: [redacted] End
000002 Screen Call-Up Complete -- Proceed
  
```

BES Screen: PSB000

Transaction Code: PSB000

Transaction Title: Participant Create / Participant Change

Function: This transaction is used to manage BES data for non-PMIS participants.

- This transaction is primarily used to create a new non-PMIS BES record.
- It also allows the following changes to a current non-PMIS participant's BES record: Social Security Number, Date of Birth, Sex, Pay Code, Status and Agency/Group number.

Users: All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.

Procedure: *To create a new non-PMIS BES record:*

- From HOME position, key: PSB000, Identification Number and Transmit.
- PSB000 screen returns for data entry. Re-enter the participant's identification number and Transmit.
- PSB101 screen returns for data entry. Enter appropriate data items. Tab to END and Transmit.
- A successful PSB000 will automatically return a PSB301 screen for data entry. Verify the enrollment displayed on the PSB301 and make changes if necessary. Tab to XMIT and Transmit.
- BES will respond with a message at the bottom of the screen. The "Transaction Complete" message appears when the transaction is successful.
- A successful PSB301 is required to complete the action.

To change a current non-PMIS participant's record:

- From HOME position, key: PSB000, Identification Number and Transmit.
- PSB104 screen returns for data entry. Enter appropriate data items. Tab to END and Transmit.
- BES will respond with a message at the bottom of the screen. The "Transaction Complete" message appears when the transaction is successful.

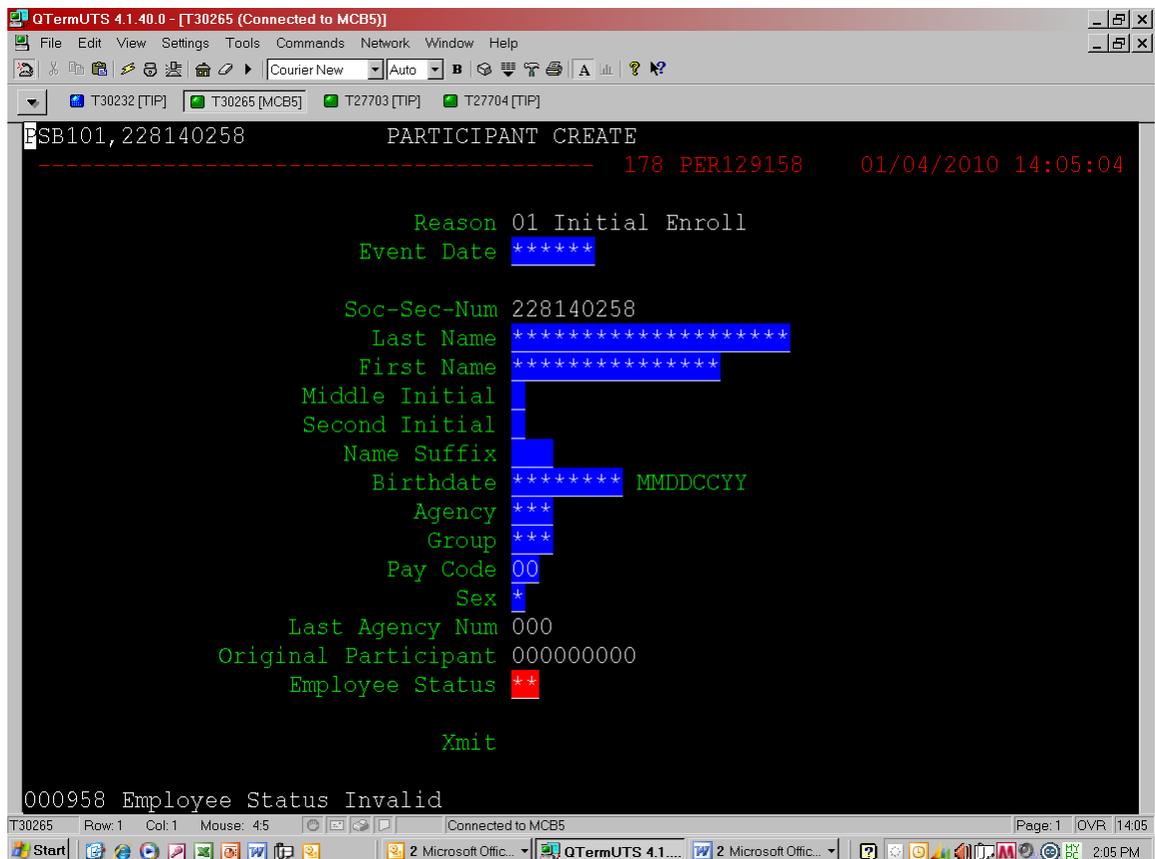
Continued on the next page.

BES Screen: PSB000 (continued)

Screen 1/3:



Screen 2/3:



BES Screen: PSB000 (continued)

Screen 3/3:

```
QTermUTS 4.1.40.0 - [T30265 (Connected to MCB5)]
File Edit View Settings Tools Commands Network Window Help
Courier New Auto B
T30232 [TIP] T30265 [MCB5] T27703 [TIP] T27704 [TIP]
PSB104,339215478 PARTICIPANT CHANGE
----- 178 PER129158 01/04/2010 14:06:14
Reason 57 Par Per Update
Event Date 010410
Soc-Sec-Num 339215478
Last Name RABBIT
First Name ROGER
Middle Initial
Second Initial
Name Suffix
Birthdate 12151971 MMDDCCYY
Agency 158
Group 001
Pay Code 24
Sex M
Last Agency Num 000
Original Participant 000000000
Employee Status NF
Xmit
00002 Screen Call-Up Complete -- Proceed
T30265 Row:1 Col:1 Mouse: 24:39 Connected to MCB5 Page:1 OVR 14:07
Start 2 Microsoft Off... QTermUTS 4... 2 Microsoft Off... 2:07 PM
```

BES Screen: PSB100

Transaction Code: PSB100

Transaction Title: Contacts Change

Function: This transaction is used to update the agency's representatives in the Contacts Database.

- The Contacts Database is used to send communications and materials to agency representatives.
- This transaction requires a primary Benefits contact, the Benefits Administrator.
- This transaction permits a secondary Benefits contact, and a primary and secondary Payroll contact.

Users: All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.

Procedure:

- From HOME position, key: PSB100, Agency Number, Group Number and Transmit.
- PSB100 screen returns for data entry. Tab to XMIT and Transmit.
- BES will respond with a message at the bottom of the screen. The "Transaction Complete" message appears when the transaction is successful.

Screen 1/1:

```
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
```

BES Screen: PSB109

Transaction Code: PSB109

Transaction Title: Transfer And Re-enroll An Inactive Participant (one that is no longer an active employee)

Function: This transaction is used to transfer and re-enroll a retiree, a linked spouse or linked child, a new survivor, a LTD participant, or an Extended Coverage (COBRA) participant in the appropriate BES Agency / Group.

- This transaction allows Agency/Group transfers to Agencies 005 - 007. It also allows Agency/Group transfers between Agencies 005 - 007.
- This transaction requires that the BES record have a termination date if the transfer is a participant, or BES delete date if the transfer is a dependent.
- A successful PSB109 transfers the terminated record to the new Agency / Group and automatically displays a PSB301 screen for data entry.
- The PSB301 transaction must be successfully executed to re-enroll and activate coverage in the new Agency / Group.

Users: All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.

Procedure:

- From HOME position, key: PSB109, Identification Number and Transmit.
- PSB109 screen returns for data entry.
- Verify the Social Security Number and Name of the individual about to be transferred. Cancel the transaction if it is wrong.
- Verify the Effective Date and the Event Date. Contact OHB if it is not correct.
- Enter the Receive Date. Tab to the appropriate Agency/Group and Transmit.
- A successful PSB109 will automatically display a PSB301 screen for data entry.
- Verify the enrollment displayed on the PSB301 and make changes if necessary. Be sure the appropriate reason code is entered. Tab to XMIT and Transmit to complete the transfer.
- BES will respond with a message at the bottom of the screen. The "Transaction Complete" message appears when the transaction is successful.
- A successful PSB301 is required to complete the action.

Continued on next page.

BES Screen: PSB109 (continued)

Screen 1/4:

QTermUTS 4.1.40.0 - [T27704 (Connected to TIP)]

File Edit View Settings Tools Commands Network Window Help

T30232 [TIP] T30265 [MCBS] T27703 [MCBS] 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 type="checkbox"/> 005/001 VRS Service Retiree/Survivor	<input type="checkbox"/> 006/006 Non-Annuitant Survivor
<input type="checkbox"/> 005/002 VRS Disability Retiree/Surv	<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

Screen 2/4:

QTermUTS 4.1.40.0 - [T27704 (Connected to TIP)]

File Edit View Settings Tools Commands Network Window Help

T30232 [TIP] T30265 [MCBS] T27703 [MCBS] 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

BES Screen: PSB109 (continued)

Screen 3/4:

QTermUTS 4.1.40.0 - [T27704 (Connected to TIP)]

File Edit View Settings Tools Commands Network Window Help

T30232 [TIP] T30265 [MCBS] T27703 [MCBS] T27704 [TIP]

PSB109,234567890

----- 54 PER1291HB 12/22/2009 14:56:14

You are about to move TESTY T. TESTOR
to COBRA - Regular

Please transmit next to the reason why this move is occurring.

- <- Employment ended (other than gross misconduct)
- <- Hours of employment reduced causing loss of coverage / employer contribution

000002 Screen Call-Up Complete -- Proceed

T27704 Row: 1 Col: 1 Mouse: 7.22 Connected to TIP Page: 1 OVR 14:56

Screen 4/4:

QTermUTS 4.1.40.0 - [T27704 (Connected to TIP)]

File Edit View Settings Tools Commands Network Window Help

T30232 [TIP] T30265 [MCBS] T27703 [MCBS] T27704 [TIP]

PSB109,225149632

----- 54 PER1291HB 12/22/2009 14:59:25

You are about to move JAZZY TESTOR
to COBRA - Regular

Please transmit next to the reason why this move is occurring.

- <- Child ceased to be eligible for coverage
- <- Employee providing coverage ended employment (other than gross misconduct) causing loss of coverage
- <- Employee providing coverage reduced hours of employment causing a loss of coverage
- <- Employee providing coverage died (unlikely if survivor benefits are offered)

000002 Screen Call-Up Complete -- Proceed

T27704 Row: 1 Col: 1 Mouse: 6.26 Connected to TIP Page: 1 OVR 14:59

BES Screen: PSB111

Transaction Code: PSB111

Transaction Title: Medicare HIC Number Update

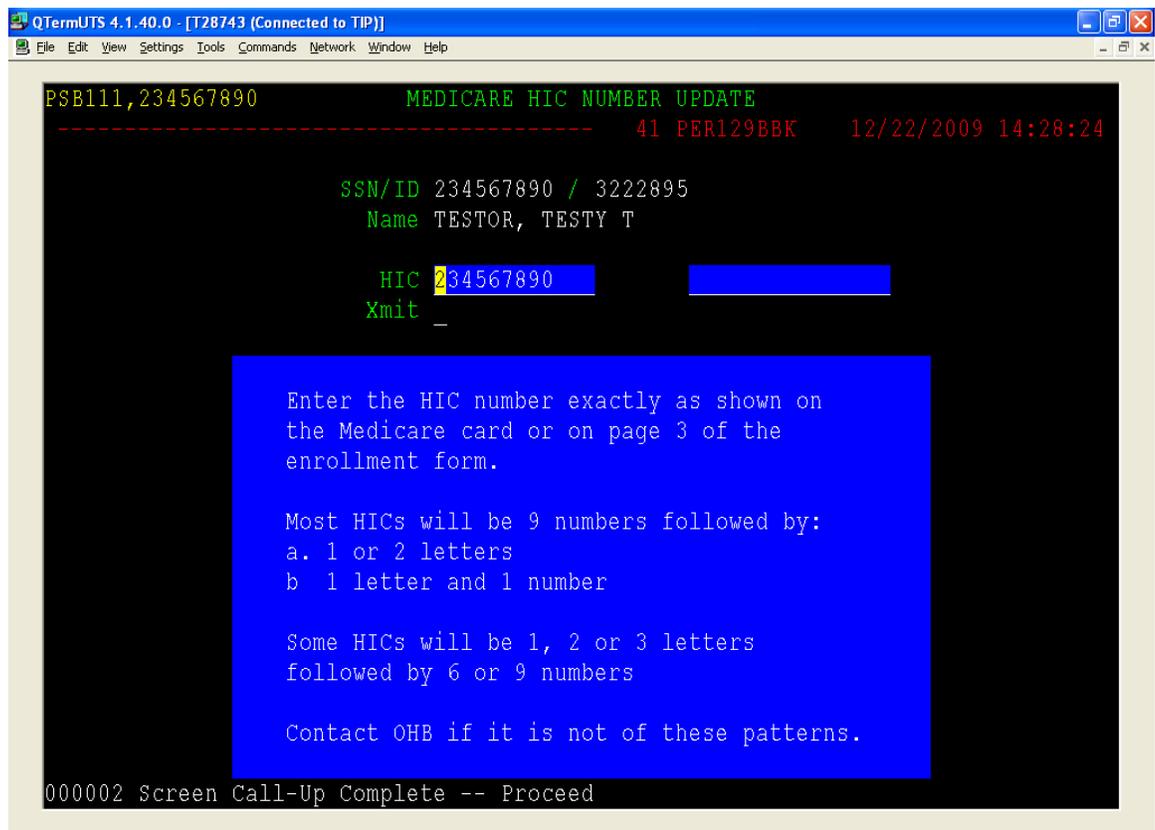
Function: This transaction is used to enter a HIC number for those initially enrolled in a Medicare-eligible plan.

Users: All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.

Procedure:

- From HOME position, key: PSB111, Identification Number and Transmit.
- PSB111 screen returns for data entry.
- Verify the Social Security Number and Name of the individual about to be transferred. Cancel the transaction if it is the wrong individual.
- Enter the HIC Number using the Medicare or Railroad identification card for reference. Position 1 must be H for Social Security benefits or R for Railroad benefits. Positions 2-12 must be entered as shown on the Medicare or Railroad identification card. If the transaction fails or if the number is entered incorrectly, contact the Office of Health Benefits for assistance. Tab to XMIT and Transmit.
- BES will respond with a message at the bottom of the screen. The "Transaction Complete" message appears when the transaction is successful.

Screen 1/1:



```
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
```

BES Screen: PSB116

Transaction Code: PSB116

Transaction Title: Reactivate Terminated Participant

Function: This transaction is used to remove the term date from a participant's BES record.

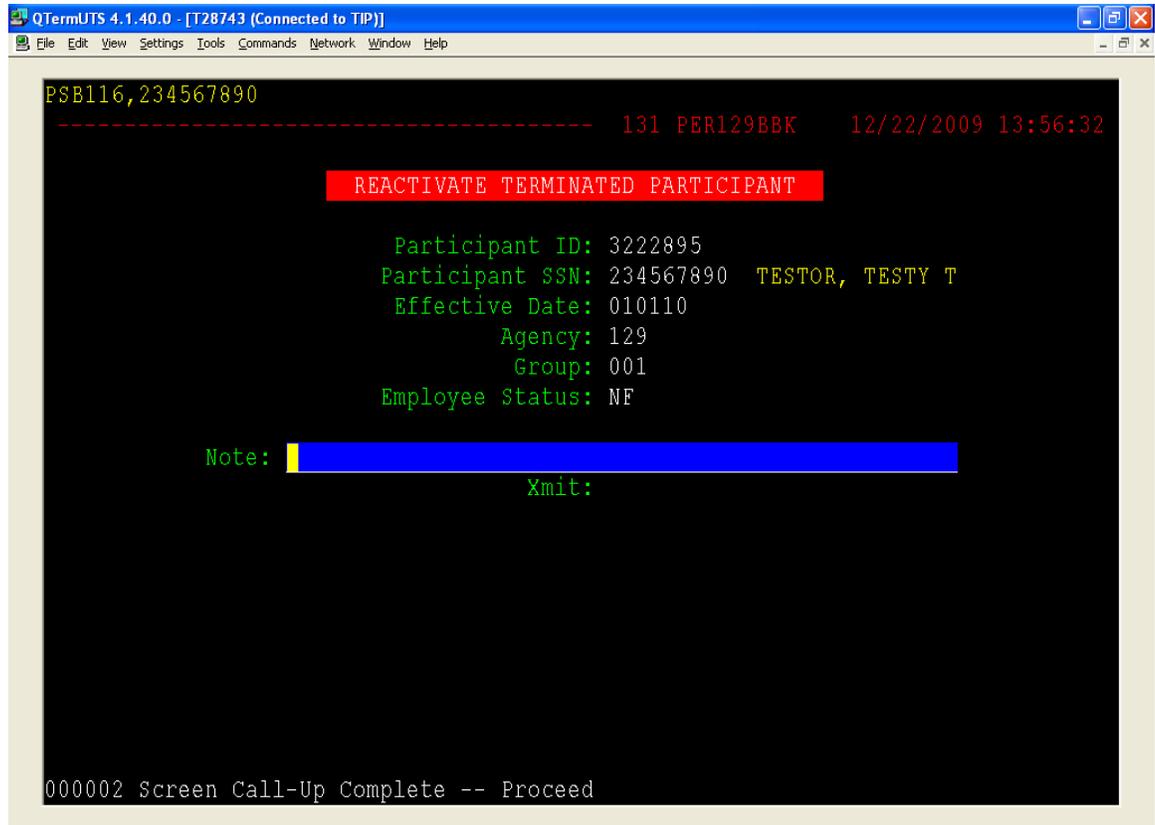
- This transaction removes the term date and reactivates a participant's record in the same Agency / Group prior to the termination.
- It also allows the Agency / Group to be changed to any valid code for which the user is authorized to update and the record will be reactivated in the new Agency / Group.

Users: All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.

Procedure:

- From HOME position, key: PSB116, Identification Number and Transmit.
- PSB116 screen returns for data entry. Verify the Social Security Number and Name of the individual about to be reactivated. Cancel the transaction if it is wrong. Tab to XMIT and Transmit.
- The PSB305 screen will automatically display when the transaction is successful. Verify that the information is accurate.
- Use PSB301, reason code 57, and the same Receive Date and Event Date shown on the PSB305 to correct personal information for the participant or a dependent.
- Use PSB301, reason code 27, and a term date that is one day less than the effective date shown on the PSB305 if the Agency/Group is not correct. Then, repeat the PSB116 to reactivate.
- Contact the Office of Health Benefits for assistance if the effective date shown on the PSB305 is not correct.

Screen 1/1:



```
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: [REDACTED]
Xmit:

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

BES Screen: PSB117

Transaction Code: PSB117

Transaction Title: Delete Benefits Suspense Records

Function: This transaction is used to delete a transaction on a current participant's record that has not yet become effective.

- BES stacks successful transactions on a current participant's record by effective date and will not allow a transaction to be inserted between effective dates.
- To insert a transaction between effective dates, it is necessary to delete the suspense transaction, key the new transaction, and as needed, re-key the deleted suspense transaction.
- This transaction requires a date equal to or after the current date. All transactions with an effective date greater than the date specified will be deleted.

Users: All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.

Procedure:

- From HOME position, key: PSB117, Identification Number and Transmit.
- PSB117 screen returns for verification. Tab to XMIT and Transmit.
- BES will respond with a message at the bottom of the screen. The "Transaction Complete" message appears when the transaction is successful.
- Continue per instructions for the PSB301 transaction to key the new transaction, and as needed, re-key the deleted suspense transaction.

Screen 1/1:

```
QTermUTS 4.1.40.0 - [T27703 (Connected to MCB5)]
File Edit View Settings Tools Commands Network Window Help
Courier New | Auto | B | A | ?
T30232 [TIP] T30265 [MCB5] T27703 [MCB5] T27704 [TIP]
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
T27703 Row:1 Col:17 Mouse: 5:4 Connected to MCB5 Page:1 |OVR| 14:50
```

BES Screen: PSB200

Transaction Code: PSB200

Transaction Title: Flexible Spending Accounts Update

Function: This transaction is used to manage flexible spending accounts data for current BES participants.

- This transaction is used to enroll and make changes to flexible spending accounts for current BES participants.
- This transaction requires a participant's identification number and a BES reason code. If the user fails to include a BES reason code in the call-up command, BES will present an intermediary screen from which the user may select an appropriate BES reason code.

Users: All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.

Procedure:

- From HOME position, key: PSB200, Identification Number, Reason Code and Transmit.
- First PSB200 screen returns for data entry. Verify Reason Code. Enter Event Date and Receive Date. Tab to XMIT and Transmit.
- Second PSB200 screen returns for data entry. Verify Pay Code. Enter Per Pay Amounts. Tab to XMIT and Transmit.
- BES will respond with a message at the bottom of the screen. If the transaction fails, make the correction, tab to XMIT and Transmit again. The "Transaction Complete" message appears when the transaction is successful.
- Verify that the information displayed on the PSB305 accurately reflects the participant's request for change. If not, repeat the PSB200 transaction.

Continued on next page.

BES Screen: PSB200 (continued)

Screen 1/2:

QTermUTS 4.1.40.0 - [T30265 (Connected to MCB5)]

File Edit View Settings Tools Commands Network Window Help

Courier New 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 Off... QTermUTS 4... 2 Microsoft Off... 2:21 PM

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 -----						----- Dependent Care -----					
PayDte	Amt	PayDte	Amt	PayDte	Amt	PayDte	Amt	PayDte	Amt	PayDte	Amt
121609	20	041610	20	121609	0	041610	0				
123109	20	043010	20	123109	0	043010	0				
011610	20	051610	20	011610	0	051610	0				
013110	20	053110	20	013110	0	053110	0				
021610	20	061610	20	021610	0	061610	0				
022810	20	063010	20	022810	0	063010	0				
031610	20			031610	0						
033110	20			033110	0						

Estimated Medical Annual Amount 280 Estimated Dependent Annual Amount 0

Note: Xmit:

000002 Screen Call-Up Complete -- Proceed

BES Screen: PSB301

Transaction Code: PSB301

Transaction Title: BES Change

Function: This transaction is used to manage BES data for current BES participants.

- This transaction is the most frequently used data-entry transaction in BES. It is used to enroll and make changes to a current BES record.
- This transaction requires a participant's identification number and a BES reason code. If the user fails to include a BES reason code in the call-up command, BES will present an intermediary screen from which the user may select an appropriate BES reason code.

Users: All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.

Procedure:

- From HOME position, key: PSB301, Identification Number, Reason Code and Transmit.
- First PSB301 screen returns for data entry. Verify Reason Code. Enter the Receive Date and Event Date. Tab to XMIT and Transmit.
- Second PSB301 screen returns for data entry. Enter appropriate data items. Tab to END and Transmit.
- BES will respond with a message at the bottom of the screen if the transaction fails. If this happens, make the correction, tab to END and Transmit again.
- The PSB305 screen will automatically display when the transaction is successful.
- Verify that the information displayed on the PSB305 accurately reflects the participant's request for change. If not, repeat the PSB301 transaction.

Continued on next page.

BES Screen: PSB301 (continued)

Screen 1/2:

QTermUTS 4.1.40.0 - [T30265 (Connected to MCB5)]

File Edit View Settings Tools Commands Network Window Help

Courier New Auto B

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

PSB351,055747404,07

----- 231 PER129158 01/04/2010 14:22:23

BES UPDATE SSN or ID: 055747404
 Reason Code: 07 Marriage
 Event Date: *****
 Receive Date: *****
 Xmit: -

A095

Reason Codes Valid For A 01/04/2010 Effective Date

01 Initial Enroll	27 Trm-Not Elig	62 Other ER OE/Chg	79 LWOP Non-Pay
03 Switch Mcare Pln	28 S/C-Elig ER Pln	65 Trm-EE Death	
05 Mve Afect Elig	29 Trm-RE Death	66 Elig MCare/Caid	
06 Chg Bill Premium	37 Upd Prsnl Info	67 J/D/Odr-Rmve Ch	
07 Marriage	38 Ch Ceases Elig.	68 Trm-Prem Not Pd	
08 Death of Spouse	41 Trm-RE Request	69 Waive/On Sp Pln	
09 Lost MCare/Caid	45 Trnsfr-COBRA	70 HIPAA Sp Enroll	
10 Divorce	48 Trnsfr-Retiremt	71 J/D/Ord-Add Ch	
13 S/C-Lost ER Plan	49 Unpd LV Bgn-EE	73 Trnsfr-Survivor	
15 Birth/Adoption	50 Return LWOP	75 Chg Leave Stat	
17 Death of Child	53 Trnsfr-Splt Cnt	76 Lost GovSpr Pln	
18 Rmve Dep-Unspec	54 Transfer to LTD	77 Chg FT to PT-EE	
19 Add-Exst Family	57 Upd Dep Info	78 Chg PT to FT-EE	

000693 Warning: Field Must Be Filled

T30265 Row: 1 Col: 1 Mouse: 2:1 Connected to MCB5 Page: 1 OVR | 14:22

Start 2 Microsoft Offi... QTermUTS 4... 2 Microsoft Offi... 2:22 PM

Screen 2/2:

QTermUTS 4.1.40.0 - [T28743 (Connected to TIP)]

File Edit View Settings Tools Commands Network Window Help

PSB301,234567890,10

BES CHANGE

----- 103 PER129BBK 12/22/2009 13:48:28

SSN 234567890 Sex M Agy/Grp 129 - 001 Birth 05061950 BES Beg 070103

Addr 438 CHANDLER DR PO Box

City CHESAPEAKE State VA ZIP 23322 - 3838 Country US

Rsn 10 Divorce Receive 122209 Event Date 120209 Effct Date 010110

Plan CHD Emp NF Mbr F PreTax Y Bill 6

Last TESTOR First TESTY MI T SI Suf

Day Phn 8043716466 Home Phone 8043716465 Medicare N

----- [Dependents] ----- Delete

Rel	Last Name	First Name	MI	Suf	Birth	SSN	D	M	Date
S	NN	N			051206	234562345	N	N	
S	TESTOR	TODD			110708	225363651	N	N	
S	KIDDO	TESTY			101907	336251414	N	N	
D	TESTOR	JAZZY			101488	225149632	N	N	
W	TESTOR	WIFFEE			021541	345678901	N	N	

Note ++++ End

000003 USPS Reformatted and Verified Address - Only Change If Person Has Moved

BES Screen: PSB305

Transaction Code: PSB305

Transaction Title: Participant Data As of [Date]

Function: This transaction is used to view BES data from the current record of a participant or dependent that has not been terminated.

- This transaction requires the identification number or the first and last name of the participant or dependent to be displayed.
- This transaction displays BES data from a current record using several data-specific screens. The screen call-up command defaults to a primary screen that displays the most important BES data. Links at the top of the primary screen indicate and allow quick access to additional BES data on file. If a link does not appear, the data is not on file.
- Links at the top of each additional information screen allow the user to move back and forth between all data-specific screens.

Users: All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.

Procedure:

- From HOME position, key: PSB305, Identification Number and Transmit.
- PSB305 screen returns displaying the current record.

From a participant's detailed display screen:

- Suspense> links to the next record in suspense
- 1stDep> links to the first covered dependent's detail display record
- LK> links to a linked participant's detailed display record
- DSc(N)> indicates the number of covered dependents and links to a list of the covered dependents

Screen1/1:

QTermUTS 4.1.40.0 - [T28743 (Connected to TIP)]

File Edit View Settings Tools Commands Network Window Help

```

PSB306,3222895,010110
----- 167 PER129BBK 12/22/2009 13:49:30
FLEXIBLE SPENDING ACCOUNTS DISPLAY
Soc-Sec: ClickToView ID: 322-28-95
Name: TESTOR, TESTY T
Paycode: 24

----- Medical Reimbursement -----
PayDte  Amt  PayDte  Amt  PayDte  Amt  PayDte  Amt  PayDte  Amt
121609  20  041610  20  121609  0  041610  0
123109  20  043010  20  123109  0  043010  0
011610  20  051610  20  011610  0  051610  0
013110  20  053110  20  013110  0  053110  0
021610  20  061610  20  021610  0  061610  0
022810  20  063010  20  022810  0  063010  0
031610  20  031610  0
033110  20  033110  0

----- Dependent Care -----
PayDte  Amt  PayDte  Amt  PayDte  Amt  PayDte  Amt
As of 010110 EstYTD  40  EstAnn  280  As of 010110 EstYTD  0  EstAnn  0

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

BES Screen: PSB309

Transaction Code: PSB309

Transaction Title: Participant History Scroll

Function: This transaction is used to view a history of all BES transactions on the record of a participant or dependent.

- This transaction requires the identification number of the participant or dependent to be displayed.
- If the identification number has both participant and dependent records, BES will return an intermediary screen for the user to select which records are desired.
- The screen call-up command defaults to a primary screen that lists all transactions by the key-date. The oldest transaction is listed first. The transaction listed last is the current data.
- From the primary screen, users may link directly to a transaction's detailed display screen. Links on the detailed display screen allow the user to move back and forth between detailed display screens.

Users: All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.

Procedure:

- From the HOME position, key: PSB309, Identification Number and Transmit.
- If the identification number has both participant and dependent records, BES returns an intermediary screen for the user to select which records are desired. Make a selection and Transmit.
- PSB309 primary screen returns. To view a transaction's detailed display screen, tab to the desired transaction and Transmit.
- PSB309 detailed display screen returns.
- To move back and forth between detailed display screens, tab to the desired link at the top of the screen and Transmit.

From a participant's detailed display screen:

- Next> links to the next screen
- Prior> links to the previous screen
- Orig> links to the first page of the primary PSB309 screen
- PSc> links to the last viewed page of the primary PSB309 screen
- LK> links to a linked participant's detailed display record
- DSc(N)> indicates the number of covered dependents and links to a list of the covered dependents

From a dependent's detailed display screen:

- Orig> links to the first page of the primary PSB309 screen
- PSc> links to the participant's primary PSB309 screen
- DSc> indicates the number of covered dependents and links to a list of the covered dependents

Continued on next page.

EmployeeDirect: Health Benefits Welcome Page

Function: 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.

Procedure: Employee clicks on a link to continue.

Screen 1/1:

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?

- › E-mail Health Benefits

Using EmployeeDirect

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

Health Benefits Enrollment and Information

Welcome to the quick and easy way to manage your enrollment and election choices for health care coverage and flexible reimbursement accounts!

▶ [Click here to CONTINUE to your Health Benefits Menu](#)

Thank you for using EmployeeDirect

EmployeeDirect: Health Benefits Menu Page

Function: 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.

Procedure: Employee clicks on a link to continue.

Screen 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" with the tagline "The Portal for State Employees". On the left side, 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, and Options I & II), "DHRM Website", "Payline Website", "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 "ID: 322-28-95" and "EC010". Below this, it states "This is the Health Benefits Menu for: TESTOR, TESTY T". A note says "For more information or to request a change not listed, contact your Benefits Administrator." A prompt says "Click on a link to continue." followed by 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".

Screen 2/4: Pending record in BES:

The screenshot shows the EmployeeDirect website interface, similar to the previous one. The main header and navigation menu are identical. The main content area is titled "Health Benefits Enrollment and Information" and shows "ID: 322-28-95" and "EC042". Below this, it states "This is the Health Benefits Menu for: TESTOR, TESTY T". A note says "For more information or to request a change not listed, contact your Benefits Administrator." A prompt says "Click on a link to continue." followed by several links: "Cancel Pending Change Request", "View Current Health Benefits Profile", and "View Pending Change Request Received On 12/23/2009". Below 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".

EmployeeDirect: Health Benefits Menu Page (continued)

Screen 3/4: Suspense record in BES:

The screenshot shows the EmployeeDirect portal for Virginia.gov, Department of Human Resource Management. The page title is "EMPLOYEE DIRECT The Portal for State Employees". The main content area is titled "Health Benefits Enrollment and Information". It displays the employee ID "322-28-95" and "EC026". A message states: "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](#)." A link "Click on a link to continue." is followed by several options: "Update Address, E-Mail, or Phone", "View Current Health Benefits Profile", and "View Health Benefits Profile That Takes Effect 01/01/2010" (Confirmation Number: 0140132, Reason: Spouse Or Child Gained Eligibility Under Their Employer's Plan). A sidebar on the left contains navigation links under "Exit Health Benefits", "Get More Information", "Need Help?", and "Using EmployeeDirect". A security check message "EmployeeDirect Security Checked." is at the bottom.

Screen 4/4: Suspense record only in BES:

The screenshot shows the EmployeeDirect portal for Virginia.gov, Department of Human Resource Management. The page title is "EMPLOYEE DIRECT The Portal for State Employees". The main content area is titled "Health Benefits Enrollment and Information". It displays the employee ID "496-70-10" and "EC018". A message states: "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](#)." A link "Click on a link to continue." is followed by several options: "Initial Enrollment Request", "Update Address, E-Mail, or Phone", and "View Health Benefits Profile That Takes Effect 01/01/2010" (Confirmation Number: 0000001, Reason: Profile Update). A sidebar on the left contains navigation links under "Exit Health Benefits", "Get More Information", "Need Help?", and "Using EmployeeDirect". A security check message "EmployeeDirect Security Checked." is at the bottom.

EmployeeDirect: QME Change Request Pages

Function: 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.

Procedure: Employee clicks on a link to continue.

Screen 1/6: Type of event:

The screenshot displays 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". 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 shows ID: 322-28-95 and EC010. The text explains that certain qualifying mid-year events permit specific enrollment and election changes with supporting documentation, and that change requests must be received within 31 days of the qualifying mid-year event. It includes a link to continue and a list of event categories: ALL Events, Events affecting your family member's employment, Events affecting your number of family members, Events affecting your employment, and Events affecting your marital status. A link to cancel and return to the Health Benefits Menu is also present. The footer indicates "EmployeeDirect Security Checked".

Continued on next page.

EmployeeDirect: QME Change Request Pages (continued)

Screen 2/6: ALL events:

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

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

EmployeeDirect: QME Change Request Pages (continued)

Screen 3/6: Events affecting your family member's employment:

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](#) ▶ [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

Screen 4/6: Events affecting your number of family members:

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](#) ▶ [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 Medicare Or Medicaid](#)
- ▶ [View ALL EVENTS](#)

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

EmployeeDirect Security Checked

EmployeeDirect: QME Change Request Pages (continued)

Screen 5/6: Events affecting your employment:

The screenshot shows the Virginia.gov EmployeeDirect portal. The header includes the Virginia.gov logo, Department of Human Resource Management, and the EmployeeDirect 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 ID: 322-28-95 and EC010. It includes a help text paragraph, a 'Click on a link to continue.' instruction, and a list of five employment change events, each with a 'Help' icon and a link. The events are: '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'. There is also a 'View ALL EVENTS' link and a 'Click here to CANCEL and return to Health Benefits Menu' link. At the bottom, it says 'EmployeeDirect Security Checked'.

Screen 6/6: Events affecting your marital status:

The screenshot shows the Virginia.gov EmployeeDirect portal. The header includes the Virginia.gov logo, Department of Human Resource Management, and the EmployeeDirect 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 ID: 322-28-95 and EC010. It includes a help text paragraph, a 'Click on a link to continue.' instruction, and a list of three marital status events, each with a 'Help' icon and a link. The events are: 'Death Of Spouse', 'Divorce', and 'Marriage'. There is also a 'View ALL EVENTS' link and a 'Click here to CANCEL and return to Health Benefits Menu' link. At the bottom, it says 'EmployeeDirect Security Checked'.

EmployeeDirect: QME Change Request - Event Date Page

Function: This page permits the employee to enter the date of the qualifying mid-year event.

Procedure: Employee enters date and clicks on a link to continue.

Screen 1/1: Date of event:

Virginia.gov

Department of Human Resource Management

EMPLOYEE DIRECT

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 [Help](#)

Divorce Decree: MM/DD/YYYY

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

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

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

EmployeeDirect Security Checked

EmployeeDirect: Request to Change Health Benefits Profile Page

Function: This page permits the employee to submit changes to their Health Benefits Profile.

Procedure: Employee enters permitted changes and clicks on "submit" link.

Screen 1/1:

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

Health Benefits Enrollment and Information
ID: 322-20-95 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 of USPS.

Street Address: 430 CHANDLER DR [text]
P. O. Box: [text]
City: CHESAPEAKE [text]
State: Virginia [dropdown]
Zip 5: 23322 [text]
Zip 4: 3838 [text]
Personal Phone: (804) 371-6465 [text]
Personal E-mail: bfamsh@gmail.com [text]
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 [dropdown] TESTOR, WIFFEE
Daughter: Covered [dropdown] TESTOR, JAZZY
Son: Covered [dropdown] KIDDO, TESTY
Son: Covered [dropdown] TESTOR, TODD
Son: Covered [dropdown] 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 [text]
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 [text]
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

EmployeeDirect: Request to Change Health Care Plan Page

Function: This page permits the employee to select a different health care plan before submitting their change request.

Procedure: Employee clicks on a link to continue.

Screen 1/1:

The screenshot displays the Virginia.gov EmployeeDirect portal. The header includes the Virginia.gov logo and the text "Department of Human Resource Management" and "EMPLOYEE DIRECT The Portal for State Employees". The main content area is titled "Health Benefits Enrollment and Information" and shows an ID of 322-28-95 and EC010. The page provides information about health care plan options and includes a list of links for various plans such as COVA Care, COVA Connect, COVA HDHP, Kaiser Permanente, and COVA Connect. A sidebar on the left contains links for "Get More Information", "Need Help?", and "Using EmployeeDirect".

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

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

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

EmployeeDirect: Request to Change Family Member's Profile Page

Function: This page permits the employee to enter changes to a family member's profile before submitting their change request.

Procedure: Employee clicks on a link to continue.

Screen 1/1:

The screenshot shows the Virginia.gov EmployeeDirect portal. The header includes the Virginia.gov logo and the text "Department of Human Resource Management" and "EMPLOYEE DIRECT The Portal for State Employees". The main content area is titled "Health Benefits Enrollment and Information" and displays the ID "322-28-95" and "EC010". Below this, it states "This is the Family Member Profile for:" and provides a form with the following fields: Relationship (Wife), Last Name (TESTOR), First Name (WIFFEE), Middle Initial, Suffix, and Date Of Birth (02/15/1941). The Social Security Number is listed as "On File". A link is provided: "Click here when FINISHED with this family member profile". The footer of the page reads "EmployeeDirect Security Checked".

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

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

Need Help?
› Benefits Administrator

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

EmployeeDirect: Review Health Benefits Profile Page

Function: This page permits the employee to view their Health Benefits Profile based on the type of records available in BES.

Procedure: Employee clicks on a link to continue.

Screen 1/3: Current record in BES:

The screenshot shows the EmployeeDirect web portal interface. At the top, it displays the Virginia.gov logo and the Department of Human Resource Management. The main header reads "EMPLOYEE DIRECT - The Portal for State Employees". A left-hand navigation menu includes links for "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", "VRS Website", "Need Help?" (with sub-links for Benefits Administrator and 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 shows the employee ID 322-28-95 and EC010. A notice states: "This is the Health Benefits Profile that is effective 12/23/2009 for: TESTOR, TESTY T". Below this, a paragraph explains that the current profile should be reviewed and a copy saved, and that a qualifying mid-year event is required for changes. 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: bfarnish@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: \$ 280, 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". A small footer note reads "EmployeeDirect Security Checked".

EmployeeDirect: Review Health Benefits Profile Page (continued)

Screen 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: 3638
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

EmployeeDirect: Review Health Benefits Profile Page (continued)

Screen 3/3: Suspend 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 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: CHICSAPOAKE
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: 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

EmployeeDirect: Review Family Member's Profile Page

Function: This page permits the employee to view a family member's profile.

Procedure: Employee clicks on a link to continue.

Screen 1/1:

The screenshot displays 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". 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 shows an ID of 322-28-95 and EC010. It indicates that the profile is for a family member and lists details such as 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 when finished with the profile. The footer indicates "EmployeeDirect Security Checked".

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

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

This is the Family Member Profile for:

Relationship: Wife
Name: TESTOR, WIFFEE
Date Of Birth: 02/15/1941
Social Security Number: On File
Eligible For Medicare: No

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

EmployeeDirect Security Checked

EmployeeDirect: Thank You & Exit Health Benefits Page

Function: This page permits the employee to provide feedback about their visit and to exit the Health Benefits Enrollment and Information option in EmployeeDirect.

Procedure: Employee clicks on a link to continue.

Screen 1/1:

The screenshot shows the EmployeeDirect website interface. At the top, there is a header with the Virginia.gov logo and the text 'Department of Human Resource Management'. Below this is a large banner with the text 'EMPLOYEE DIRECT' and 'The Portal for State Employees'. The main content area is titled 'Health Benefits Enrollment and Information'. It features a central message: 'Thank you for using EmployeeDirect to manage your health benefits!' followed by a request for feedback: 'Please take a few minutes to give us [feedback](#) about your visit.' Below this is a link: 'Click here to **EXIT** Health Benefits Enrollment and Information'. At the bottom of the page, it says 'EmployeeDirect Security Checked'. On the left side, there is a navigation menu with the following sections: 'Get More Information' (with links to Advantage 65, COVA Care, COVA Connect, COVA HDHP, Flex Accounts - FBMC, Kaiser, and Options I & II), 'Need Help?' (with a link to E-mail Health Benefits), and 'Using EmployeeDirect' (with links to Privacy Statement, Site Requirements, and Terms Of Use).

Sample E-mails from EmployeeDirect:

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](#)

Sample E-mails from EmployeeDirect:

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