

# **HEALTH BENEFITS E-NEWS**

## ***Department of Human Resource Management Office of Health Benefits***

***May 20, 2010***

### ***New Post-Open Enrollment Reason Code for BES Keying Until July 1***

Reason Code 47 has been added to BES for post-Open Enrollment keying actions and may be used by agencies from May 21 through June 30. The 'Receive Date' must be a date during the Open Enrollment period. Use Reason Code 47 with PSB301 for health care or PSB200 for a flexible reimbursement account in the following scenarios:

1. You received an Open Enrollment election request during the Open Enrollment period but failed to key it by the Open Enrollment keying deadline.
  - Remember, missing the keying deadline may cause delays in your employees' access to their health care coverage or flexible reimbursement account on July 1.
  - OHB will monitor these transactions and report to Agency Heads the number of Open Enrollment transactions that were not keyed in a timely manner.
  - Key PSB301 or PSB200 with Reason Code 47 and enter the Open Enrollment information.
2. You need to remove the Open Enrollment election to insert a transaction that is effective prior to July 1.
  - This happens most frequently when a QME or PMIS action occurs after the Open Enrollment period has ended – for example, adding a newborn effective June 1.
  - OHB will monitor these transactions to make sure that the Open Enrollment transaction is restored properly. You may be asked to provide supporting documentation if the Open Enrollment record is not restored to be consistent with the inserted transaction.
  - Only remove an Open Enrollment record that prevents another transaction from being keyed. Key PSB117 to remove the Open Enrollment record, then key the transaction that is effective prior to July 1 (QME). If it's appropriate, restore the Open Enrollment transaction using PSB301 or PSB200 with Reason Code 47.
3. You need to change the Open Enrollment election due to an agency error.
  - For example, you entered the wrong plan code. Remember, all Open Enrollment requests must have been received during the Open Enrollment period.
  - OHB will monitor these transactions and ask for supporting documentation.
  - Do not key PSB117 to delete the 7/1 suspense record. Simply re-key PSB301 or PSB200 with Reason Code 47 and the Open Enrollment suspense record may be corrected.

Reason Code 47 may only be used through June 30. It will be deactivated on July 1.

### ***Subsidized Premium Information Available for State Agencies***

Beginning July 1, 2010, most state employees will continue to receive a subsidized premium to offset increased health plan costs. The Department of Accounts (DOA) has indicated how the subsidy will be administered in the Payroll Bulletin (2009-10) dated May 3, which includes charts indicating what the employee will pay and what the agency will pay in premiums for specific employee classifications. The direct link on the DOA Web site is [www.doa.virginia.gov/Payroll/Payroll\\_Bulletins/2010/2010\\_09.doc](http://www.doa.virginia.gov/Payroll/Payroll_Bulletins/2010/2010_09.doc). Additional premium information may also be found on the DHRM Web site under Benefits Administration, Resources at [www.dhrm.virginia.gov/hbenefits/openenroll10/agencypremiums.html](http://www.dhrm.virginia.gov/hbenefits/openenroll10/agencypremiums.html).

## ***Reminder: Documentation Requirements Related to Dependent Eligibility***

When employees want to add or remove dependents, think documentation!

**When adding dependents:** Employees must show that any dependent added to their health care membership is eligible to be covered. The documentation requirement applies to new hires, dependents added at Open Enrollment and dependents added with a qualifying mid-year event. Information was originally sent to Benefits Administrators in August 2009. See the E-News and attachments sent on August 25, 2009 at [www.dhrm.virginia.gov/hbenefits/ohbcommunications/eNews/ewnewstoc.html](http://www.dhrm.virginia.gov/hbenefits/ohbcommunications/eNews/ewnewstoc.html).

**When taking action with a QME:** Documentation is required for all qualifying mid-year events, whether adding or removing dependents from coverage. Use Reason Code 38, "Child Ceases Eligibility" when removing a dependent. A signed statement from the employee that the child is no longer eligible, why they are not eligible and the date of the event is sufficient documentation.

## ***BES Transaction on Qualified Medical Child Support Orders***

OHB has received questions regarding the new BES transaction, PSB355, implemented at the end of March to help agencies keep track of Qualified Medical Support Orders (QMCSOs). BES transaction PSB355 applies to *all medical child support orders*, whether new or existing.

The addition of the alternate address data on the PSB355 ensures that our plan is in compliance with state and federal rules related to alternate recipient rights under QMCSO and member rights under HIPAA. The alternate address is passed on to the plan administrators so that communications which impact the covered child, such as ID cards, Explanations of Benefits (EOBs) or mailings are provided to the alternative recipient or other authorized designated entity.