



**COMMONWEALTH OF VIRGINIA  
DEPARTMENT OF HUMAN RESOURCE MANAGEMENT**

**Benefits Administrator Memo**

**#19-02**

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**To:** Benefits Administrators  
**From:** State and Local Health Benefits Programs  
**CC:** All OHB  
**Date:** April 18, 2019  
**Re:** Open Enrollment Instructions

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**Open Enrollment is May 1 – 15, 2019**

During Open Enrollment, changes in health care coverage and flexible spending account (FSA) elections are permitted for the plan year that begins July 1, 2019 and ends June 30, 2020. Employees may submit Open Enrollment election requests using EmployeeDirect or by using the Enrollment Form for Employees beginning May 1.

The deadline for agencies to receive enrollment forms is by the close of business on Wednesday, May 15. EmployeeDirect continues to be available through 11:59 pm on May 15.

The Spotlight newsletter contains Open Enrollment information including premiums and plan changes. It is mailed to home addresses and will be distributed electronically to those employees with an email address in BES. All Open Enrollment information, access to EmployeeDirect, and enrollment forms may be found on the DHRM website at [www.dhrm.virginia.gov](http://www.dhrm.virginia.gov).

**EmployeeDirect has a New Application: Introducing Health Benefits Direct for Open Enrollment**

Health Benefits Direct, which resides in EmployeeDirect, will be available to employees for Open Enrollment from May 1 through May 15. This new tool permits employees to review their health benefits record and make Open Enrollment changes online, including updates to address, phone, and email.

1. Employees will need to register or log in with their EmployeeDirect user name and password to get to Health Benefits Direct. The following information, as it is recorded in BES, is needed when they are a new user or have forgotten their EmployeeDirect credentials.
  - Identification Number – the 7-digit number assigned to their BES record
  - Date of Birth
  - Last four digits of their Social Security Number
  - Email Address

Make sure your employees know this information before they visit EmployeeDirect. If they have problems with EmployeeDirect, help is available at [Edirectissues@dhrm.virginia.gov](mailto:Edirectissues@dhrm.virginia.gov).

2. When the employee selects Health Benefits Direct, their health benefits record(s) will be displayed. Records are displayed by Effective Date and Record Status. A record's status may be approved, pending approval, or in-process. Additional on-line change requests are not permitted until in-process and pending approval records are updated.
  - Approved records have been updated in BES with an effective date.
  - Pending records are in BES and require action by the Benefits Administrator. These are usually created when an employee adds a family member to their health care coverage which requires proof that the dependent is eligible.
  - In-process records are change requests waiting to be processed by BES.

Most employees will have only their current record displayed when they first enter. It will be effective May 1, 2019 and the record status will be approved.

3. When the employee selects 'Request Change', their change request for Open Enrollment is started and completed in six sequential steps:

Step 1: Choose to make Open Enrollment changes effective 7/1/19.

Step 2: Review their health benefits eligibility information and notify their Benefits Administrator of any discrepancy.

Step 3: Review their personal information and update their address, phone, and email. They can also notify their Benefits Administrator of any discrepancy they cannot update.

Step 4: Review their health care coverage election and enroll, waive, or change their health care plan and add an eligible family member or remove a covered family member. They can also report any discrepancy in existing covered family members to their Benefits Administrator.

Step 5: Enter a pay period amount to enroll in one or both flex accounts.

Step 6: Read and accept the Enrollee Statement, and then submit their change request.

4. When the employee submits their change request for Open Enrollment, transactions are submitted by batch to BES for processing. As BES processes each transaction, it is marked 'approved', 'failed', 'no changes' or 'pending approval'. This is not an immediate process – it will depend on volume and may take hours.
  - Approved transactions create a BES Turnaround document and update Health Benefits Direct.
  - Failed transactions and transactions that produced no changes do not update BES or Health Benefits Direct. These transactions should be discussed with the employee to

resolve the change request. An enrollment form may be required to make the Open Enrollment election.

- Transactions that are pending approval require the Benefits Administrator to execute PSBPEN in BES. These are typically created when the employee adds a family member to their health care coverage which requires documentation that proves they qualify before it can be approved. It is important to handle pending records by May 31 when possible and not later than June 30.
5. Emails are sent to the employee and their Benefits Administrator after each BES transaction. There are four types of emails that may be received when Health Benefits Direct is used:
- xxx9999 LastName – Health Benefits Direct Question  
This email is sent from the user to their Benefits Administrator when the user clicks ‘Contact your Benefits Administrator’. It is usually used to ask a specific question or to report a discrepancy that they are not able to update.
  - xxx9999 LastName – Personal Information Change Request – (Approved/Failed/No Changes)  
This email is sent from ‘No Reply’ to the user and their Benefits Administrator when a change is requested to address, phone or email.
  - xxx9999 LastName – Health Care Change Request – (Approved/Failed/No Changes/Pending Approval) This email is sent from ‘No Reply’ to the user and their Benefits Administrator when a health care coverage change is requested.
  - xxx9999 LastName – Flex Accounts Change Request – (Approved/Failed/No Changes)  
This email is sent from ‘No Reply’ to the user and their Benefits Administrator when a flex accounts change is requested.

### **Keying BES for Enrollment Form Requests**

The deadline for keying Open Enrollment requests submitted by enrollment form is 5:30 pm on Friday, May 31. Access to benefits that take effect on July 1 is likely delayed if the May 31 deadline is missed. BES is available daily but is generally down from 5:30 pm – 7:00 pm each day. It is also unavailable on Sunday mornings.

It is important to review and certify the entire enrollment form and key all changes accurately. Send Open Enrollment requests for employees in Layoff (Leave Codes 21, 22, 23, 24, or 25) to the Office of Health Benefits by May 31 for entry into BES.

Use the following BES transactions:

- PSB301 Health care coverage elections and personal information changes
- PSB200 FSA elections

Use the following reason codes:

- Reason Code 56 until May 31
- Reason Code 47 after May 31 and until July 1
- Reason Code 37 for personal information changes

A successful BES transaction creates a BES Turnaround document that is posted in the agency's HuRMan folder on the following business day. If a mistake is found on an Open Enrollment transaction before the May 31 deadline, do not delete the transaction from BES. Key the agency's error correction using Reason Code 56 again.

After the May 31 deadline and until July 1, Reason Code 47 may be used to correct an agency's Open Enrollment error or to replace an Open Enrollment election deleted to enter a transaction with an earlier effective date. Note: To delete a suspense transaction that added a new family member, send a request for assistance to the Office of Health Benefits.

### **Newly-Eligible Employees and QME Requests for May 1 and June 1**

Newly-eligible employees and employees with a qualifying mid-year event with coverage effective May 1 or June 1 may also make a separate election for July 1. While the health care coverage election carry over to the next plan year, the FSA election ends on June 30. FSAs require an election each plan year.

- Health Care: Since the new Optima Health Vantage HMO is not available until July 1, 2019, newly-eligible employees may make a second election to enroll in this plan if they live or work in the service area. QMEs requests for a plan change will need to be reviewed and approved by OHB.
- FSAs: Newly-eligible employees may elect to enroll in one or both of the FSAs for the remainder of the plan year, the plan year beginning 7/1/2019, or both plan years. BAs should confirm the employee's intent and request a separate form for each plan year's election.
- All 7/1/2019 election requests will need to be submitted to OHB for BES entry.

These additional election requests must be received within the employee's newly-eligible or QME election window.

### **Premium Rewards Tracked in BES**

Current premium rewards end June 30, 2019. Employees must complete and submit a health assessment during Open Enrollment to receive a Premium Reward for July 1. Additional information on Premium Rewards is available in the Spotlight and on the Open Enrollment page at <http://www.dhrm.virginia.gov/healthcoverage/open-enrollment>.

New rewards earned for July 1, 2019 will be posted to BES as reported from ActiveHealth and approved by DHRM. The reward description, No Reward, Participant Only, Spouse Only, or Participant and Spouse is found on the PSB305. In addition, the premium amounts (State, Participant, and Reward) are on the PSB305 marked as "PRRate". If a reward shown in BES is not reflected in the employee's paycheck, contact your payroll office.

Premium amounts are also found on BES Turnaround documents and the BES Enrollment Report. BES Turnaround documents are created the day after the transaction is keyed in BES. The BES Enrollment Report is created on the 3rd, 10<sup>th</sup>, 17<sup>th</sup>, and 24<sup>th</sup> of each month. The BES Enrollment Report created on June 24 will begin showing the July 1 elections and premium amounts.

## Open Enrollment Data Exchanges Schedule

- June 4: Plan Administrators begin to receive Open Enrollment elections from BES and will mail health care coverage ID cards, FSA confirmation statements and Health FSA MasterCard benefit cards to home addresses prior to July 1.
- June 24: The BES-Enrollment-Rpt and the corresponding PM9103-BOM-Enrollment flat file for July 1 enrollment and premiums is posted in HuRMan. Sort the report by the column titled "Last Update Effective" to see the 7/1/2019 changes.
- July 2: The Department of Accounts receives the July 1 elections for CIPPS. New plan year payroll deductions begin on the first paycheck following July 3.

## Need Help?

EmployeeDirect access:	Email: <a href="mailto:edirectissues@dhrm.virginia.gov">edirectissues@dhrm.virginia.gov</a>
HuRMan access:	Email: <a href="mailto:ihelp@dhrm.virginia.gov">ihelp@dhrm.virginia.gov</a>
BES or BES Reports:	Email: <a href="mailto:ohb@dhrm.virginia.gov">ohb@dhrm.virginia.gov</a>
General Open Enrollment questions:	Email: <a href="mailto:openenrollment@dhrm.virginia.gov">openenrollment@dhrm.virginia.gov</a>
Policy, eligibility and general questions:	Email: <a href="mailto:ohb@dhrm.virginia.gov">ohb@dhrm.virginia.gov</a>
	Fax: 804-371-0231
	Phone: 888-OHB-4414 (888-642-4414)
	804-225-3642 in Richmond

When you contact the Office of Health Benefits (OHB) about specific issues, be sure to include the employee's ID number, name, and a brief description of the issue. The [Agency Request for Assistance Form](#) is available on the DHRM Web site.