



# COMMONWEALTH OF VIRGINIA HEALTH BENEFITS

## COMMONWEALTH OF VIRGINIA DEPARTMENT OF HUMAN RESOURCE MANAGEMENT

### Benefits Administrator Memo

**#22-03**

**To:** Benefits Administrators  
**From:** State and Local Health Benefits Programs  
**CC:** All OHB  
**Date:** April 7, 2022  
**Re:** Health Benefits Direct for Open Enrollment – Release 3 Agencies

---

Health Benefits Direct, which resides in EmployeeDirect, will be available to employees for Open Enrollment from May 2 through May 16. This tool permits employees to review their health benefits record and make Open Enrollment changes online, including updates to address, phone, and email.

Employees will need to register or log in with their EmployeeDirect user name and password to get to Health Benefits Direct. Employee-specific information, as it is recorded in BES, is needed when they are a new user or have forgotten their EmployeeDirect credentials

Please review the [attached reference sheet](#) for information on handling EmployeeDirect transactions.

**Reminder:** Supporting documentation must be received in order to approve election requests to add new dependents to health coverage.

#### **Error Codes in Health Benefits Direct**

Error Codes appear in emails sent by Health Benefits Direct (HBD) when the transaction request fails. The Benefits Administrator and the user get the email with the error code. The email tells the user to contact their BA. The BA should check all failed emails and follow up with the user. We are providing this chart to help the BA know why the change request failed.

#### **Common Error Codes on Failed HBD Change Requests:**

000128 Participant termed – no action should be taken  
000219 Membership Invalid- employee on leave. Agency needs to key Open Enrollment  
000304 Social Security Number Invalid  
000311 Last Name Error – Have user try again

000312 First Name Error – Have user try again  
000693 Record must include either a Street Address or PO Box – Have user try again  
000898 Participant/Dependent Record Already On File  
000950 Participant Already on File as a Dependent-dependent record must be removed first  
000961 Request to Add Dependent failed because they are over Age 26  
001203 False Failure – Have user verify their record  
001307 HCA pay period amount exceeds the annual maximum allowed – have user try again with a smaller amount  
001326 PO Box Data Cannot Be Entered For the Street Address – Have user try again  
002074 Request to Add Dependent failed because they have an active Participant Record- Participant record must be waived first  
002085 Dependent is an Active Dependent under another Participant – Active Dependent record must be termed first  
Progression - Have user try their request again

## EmployeeDirect Reminders

If employees are only reviewing elections in Health Benefits Direct and no change is made, the Submit button will not be highlighted since there are no new changes/elections to submit.

Be sure that your agency contact information is correct in our Benefits Administrator Contacts Database. **The BA email is also used by Health Benefits Direct.** Please use the PSB100 transaction in BES to update the fields for Benefits Administrator, Benefits Manager and State Payroll Officer. View the Health Benefits Systems Guide on the DHRM website for assistance.

## 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 name, the last four digits of the ID number, and a brief description of the issue. The [Agency Request for Assistance Form](#) is available on the DHRM Web site.