

HEALTH BENEFITS E-NEWS

*Department of Human Resource
Management
Office of Health Benefits*

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Overview of Transfer Process Between State Agencies

The following information is critical to maintain health benefits coverage for employees who are transferring between Cardinal HCM and PMIS/BES agencies.

Inter-Agency Transfers and Health Benefits Coverage

Active employees who are transferring between a PMIS/BES agency and a Cardinal HCM agency must be terminated from their old agency (regardless of whether that termination is in PMIS/BES or Cardinal HCM) prior to being hired into the new agency. Coverage in the old agency ends at the end of the month following the separation and is reinstated in the new agency with the same elections on the first of the month following the hire date in the new agency if rehired within 30 days.

When these employees are active in both agencies or the transactions are not keyed in order by the old agency and the new agency, healthcare vendors receive incorrect data files. When this data mismatch occurs, the **transferring employee may lose health benefits coverage**.

- If an employee is moving from a Cardinal HCM agency (R1&R2) to a PMIS/BES agency (R3), Cardinal HCM must have a Termination transaction. The PMIS/BES agency will need to send a request for assistance to OHB at OHB@dhrm.virginia.gov to terminate any active records in BES before keying the transfer. The PMIS/BES agency is responsible for entering the hire or rehire transaction in PMIS (or other system of record).
- If an employee is moving from a PMIS/BES agency to a Cardinal HCM agency, PMIS (or other system of record) will process a separation/transfer to the non-PMIS agency and Cardinal HCM will have a Hire transaction.

The agency Benefits Administrators should coordinate to determine the employee's plan, membership, dependent data, flexible spending elections and premium reward status.

Cardinal Release 1 & 2 Agencies: Instructions for VRS Retirees

If your R1 or R2 agency has employees who are transitioning into the VRS retirement/LTD group (005), the Office of Health Benefits (OHB) will have to update the transaction in the Benefits Eligibility System (BES).

Please submit a request for assistance to ohb@dhrm.virginia.gov for each new retiree and include a copy of the Retiree/LTD Enrollment Form. OHB will establish a CRM case to ensure we can account for the form and BES action.

- The R1/R2 agency must establish the employee's retirement record in Cardinal before OHB can make the BES update. *(Note: OHB cannot update BES on the same day of the Cardinal transaction.)*
- OHB will update the BES transaction at least one day after the Cardinal action to be sure the enrollment is included on the nightly vendor files.
- Once the enrollment has been entered into BES, OHB will send a confirmation message to the agency Benefits Administrator and copy VRS at retireehealth@varetire.org so they will know the enrollment has been established in our system.

Also, it is still the agency's responsibility to provide the enrollment form to VRS for their internal processes. In the confirmation message, OHB will remind the agency, if they have not already done so, to send the enrollment form to VRS.

Please do not reply to this e-mail. You may send inquiries to the Office of Health Benefits mailbox at ohb@dhrm.virginia.gov