

Type: System Enhancements	ID Number: SE 101
Date: September 10, 2012	Subject: New Benefits Enrollment Process in People First

Suggested Audience:

Human Resource Offices and Benefits Staff

Details:

On September 21, 2012, People First will implement major system enhancements that affect how employees manage health and insurance choices in the People First system. As part of these enhancements, **there will be a new *benefits enrollment process***.

Changes to the *benefits enrollment* process include the following:

- Employees must complete both the Address Verification process and the Dependent Certification process prior to completing the Open Enrollment event. Refer to [SE 94 New Address Verification Process](#) and [SE 100 New Dependent Certification Process](#) for details on the new processes.
- Prior to processing a Qualifying Status Change (QSC) event, employees must complete the Dependent Certification process.
- Dependent Registration will occur as part of the Dependent Certification process.
- The enrollment screens have been redesigned to streamline the employee’s enrollment process, while providing the employee with a simple benefits enrollment summary.

Enrollment Summary Screen

- The Enrollment Summary screen (Screenshot 1) has been redesigned to show employees all benefit types they are eligible for in a single screen. The new Enrollment Summary screen includes the following sections:
 - State-Sponsored Plans – This section will include Health, Basic Life, Optional Life, Dental, and Vision insurance plans.
 - Tax-Favored Accounts – This section will include Medical Reimbursement Account, Limited Purpose Medical Reimbursement Account, Dependent Care Reimbursement Account, and Health Savings Account.
 - Supplemental Plans – This section will include Accident, Cancer, Disability, Hospital, and Intensive Care plans.
- The “State-Sponsored Plans,” “Tax-Favored Accounts” and “Supplemental Plans” sections are broken into the following sections:
 - Plan Type – This column shows the type of insurance the employee may be eligible to enroll in (e.g., Health, Life). This column does NOT show the provider information, only the type of insurance plan.
 - Current Plan Enrollments – This section consist of “Plan Name,” “Coverage Level,” and “Monthly Cost” fields and reflects **the plans the employee is currently enrolled in**. Each field within this section is shown in grey font to show they are not editable. The elections in these fields are copied to the “New Plan Enrollments” section and can be updated (changed, enrolled, cancelled) during the Open Enrollment or QSC event.

- During Open Enrollment, this section will be titled “20CY Benefits Enrollment.” CY represents the current plan year (e.g., 2012 will show during the 2013 plan year open enrollment period).
 - During a QSC, this section will be titled “Current Benefits Enrollment.”
- New Plan Enrollments – This section is prepopulated with the employee’s current plan enrollments. This section also consists of “Plan Name,” “Coverage Level,” and “Monthly Cost” fields but **reflects the employee’s new elections**. The elections in this field are shown in black font and can be updated by using the quick links (Change, Add, Cancel) in the “Make a Change” columns.
 - During Open Enrollment, this section will be titled “20NY Benefits Enrollment.” NY represents the new plan year (e.g., 2013 will show during the 2013 plan year open enrollment period).
 - During a QSC, this section will be titled “New Benefits Enrollment.”
 - If “Change” or “Add” is selected for a plan, the employee will be taken to that plan enrollment page to select the desired plan enrollment and the dependents to cover for that plan.
 - “Change” will be enabled if the employee is currently enrolled in the plan type.
 - “Add” will be enabled if the employee is not currently enrolled in the plan type.
 - If “Cancel” is selected, the plan enrollment will be cancelled. For Open Enrollment the plan will be continued through 12/31/20CY (end dated 01/01/20NY). For QSC events, the plan will be continued through the last coverage month that at least one payroll has processed.
 - If the “Cancel” button is clicked for “Basic Life” and the employee is enrolled in “Optional Life”, both plans will be cancelled. Eligibility for the “Optional Life” plan remains dependent upon the employee being enrolled in “Basic Life.”
 - If the employee is not eligible to enroll in the plan type, the “Add” button will grey indicating that the employee is not eligible. For example, if the employee is enrolled in a standard health insurance plan (or not enrolled in health insurance at all), the “Add” button will be shown in grey font on the HSA row and will not be editable because the employee does not meet eligibility criteria.
 - Updates made through the “Make a Change” process are NOT final until the employee enters a People First password and selects the “Complete Enrollment” button. Once the “Complete Enrollment” button is selected, the employee will receive a thank-you message for completing the enrollment process.
 - **Important Note:** The “Benefits Confirmation Statement” will NOT be presented to the employee at this point. However, the thank-you page will provide instructions on where the employee can view and print the “Benefits Confirmation Statement.” If the employee provided a “Notification E-mail Address” he or she will also receive an e-mail confirming the completion of the enrollment changes along with information on where to view and print the “Benefits Confirmation Statement.”

Screenshot 1: New Summary Enrollment screen for the State Sponsored-Plans, Tax-Favored Accounts, and Supplemental Plans sections

State Sponsored Plans							
Plan Type	2012 Benefits Enrollment			2013 Benefits Enrollment			
	Plan Name	Coverage Level	Monthly Cost	Plan Name	Coverage Level	Monthly Cost	Make a Change
Health	Capital Health Plan HMO	Family	\$30.00	Capital Health Plan HMO	Family	\$30.00	Change
Basic Life	Basic Life Minnesota	\$25,000	\$0.00	Basic Life Minnesota	\$25,000	\$0.00	Cancel
Optional Life	Optional Term Minnesota	5 times salary	\$47.14	Optional Term Minnesota	5 times salary	\$47.14	Change Cancel
Dental							Add
Vision							Add

Tax Favored Accounts							
Plan Type	2012 Benefits Enrollment			2013 Benefits Enrollment			
	Plan Name	Coverage Level	Monthly Cost	Plan Name	Coverage Level	Monthly Cost	Make a Change
MRA/LPMRA	Medical Reimburse Acct	\$3,500	\$291.67	Medical Reimburse Acct	\$2,500	\$208.33	Change Cancel
DCRA							Add
HSA							Add

Supplemental Plans							
Plan Type	2012 Benefits Enrollment			2013 Benefits Enrollment			
	Plan Name	Coverage Level	Monthly Cost	Plan Name	Coverage Level	Monthly Cost	Make a Change
Accident							Add
Cancer							Add
Disability							Add
Hospital 30/20							Add
Hospital 365							Add
Hospital 1-2-3							Add
Intensive Care							Add

- Monthly Cost Section – This section will show the employee’s current monthly cost and the new monthly cost based on the employee’s elections.
- Covered Dependents Section (Screenshot 2) – This section will show all plans that allow the employee to cover dependents. For the plans the employee is enrolled in, “Yes” or “No” will be listed for each dependent, indicating whether or not that dependent is covered. If the employee is not enrolled in the plan, the column for that plan will be blank.

Screenshot 2: Covered Dependents section

Covered Dependents for 2013 Benefits Enrollment										
Name	Relationship	Health	Dental	Vision	Accident	Cancer	Hospital 30/20	Hospital 365	Hospital 1-2-3	Intensive Care
Test Spouse	Spouse	No								
Test Child 1	Child	No								
Test Child 2	Child	No								

- Complete Enrollment Section (Screenshot 3) – This section includes certification language (e.g., “By selecting “Complete Enrollment”...true and accurate...”), Password field and “Complete Enrollment,” “Cancel,” and “Register New Dependent” buttons.
 - The employee must enter his or her People First password in the “Password” field prior to selecting the “Complete Enrollment” button. If the employee selects the “Complete Enrollment” button before entering the password, he or she will receive an error message that the password field is required.

- If the “Cancel” button is selected, the employee will receive a warning that all changes entered will be lost if they continue. If they employee does continue, all changes that were entered will be cleared out and the elections will be set back to what they were the last time the election process was completed.
- If the “Register New Dependent” button is selected, employees will receive a warning that all changes entered will be lost if they continue to “Register New Dependent.” If employees continue, they will have to reenter all changes they processed after they complete the “Register New Dependent” process.
 - When the “Register New Dependent” button is selected and the employee selects to continue to register a new dependent, the employee will be taken to the “Dependent Registration Process” to register any new dependent(s). When registering a new dependent, the employee will be prompted to re-certify all dependents [not just the one(s) added].

Screenshot 3: Complete Enrollment section

By selecting "Complete Enrollment," I hereby certify that the information entered is true and correct and that all dependents listed above are [eligible](#). I understand that my elections can only be changed during Open Enrollment or as the result of a [Qualifying Status Change \(QSC\) event](#) as defined by the federal Internal Revenue Code and/or the Florida Administrative Code. I agree to notify People First of any QSC events within the prescribed time frame and to supply the appropriate supporting documentation upon request; otherwise, any requested changes will not be allowed. If any dependent is determined to be ineligible or I fail to notify People First of a loss of eligibility or any supporting documentation is not provided upon request, I understand that I may be liable for any and all claims paid for any dependent deemed ineligible.

Password *

Plan Enrollment Screens

- Spouse program participants will continue to call the People First Service Center to process changes to health insurance plan enrollment.
- The tabular navigation has been eliminated. To access a Plan Tab, the employee must navigate from the Enrollment Summary screen by selecting either the “Change” or “Add” buttons in the “Make a Change” column.
- With the exception of the Medical Reimbursement Account (MRA) and Limited Purpose MRA, all plans have been separated into their own plan tab (e.g., the hospital plans will no longer be combined on one plan page).
- The plan enrollment screens have the same look and feel as the current plan enrollment screens. For example, employees can select the plan and coverage level that best meets their family’s needs and will be able to elect which dependents to cover. However, the “Next Plan” and “Summary/Enroll” buttons have been replaced with “Select” and “Back” buttons. In most cases both buttons will take the employee back to the Enrollment Summary screen. If the “Select” button is chosen, the plan elections will be populated in the New Plan Enrollments section (changes are NOT final until the employee enters a People First “Password” and selects the “Complete Enrollment” button). If the “Back” button is selected, the employee will be returned to the Enrollment Summary page, but NO changes will be populated in the New Plan Enrollments section.
 - When an employee selects a Health Investor Health Plan (HIHP) and clicks the “Select” button, he or she will be taken to the new Health Savings Account (HSA) page (Screenshot 4) to make HSA elections prior to returning to the Enrollment Summary page.
 - On the HSA page the employee will be able to enter an employee contribution amount for the HSA. The employee will also be presented with two check boxes asking if they want to receive the employer contribution. The employee MUST

select one of the check boxes to either elect to receive the HSA employer contribution or to waive the employer contribution to the HSA.

- The employee **MUST** open a State of Florida HSA bank account through Tallahassee State Bank to be eligible to receive both the employee and employer contribution to the HSA.
- **Important Note:**
 - If an employee is enrolled in a MRA in the current plan year, the employee must cancel the MRA enrollment for the next plan year to be eligible to receive the HSA contribution. In addition, if an employee is enrolled in a MRA in the current plan year, due to the MRA grace period, the effective date of the HSA (if elected) will be April 1, 20NY (new plan year) (Screenshot 5).

Screenshot 4: New HSA enrollment page

HSA

Plan Name	Annual Amount	Curr.
Health Savings Account	0.00	USD

Page 1 of 1

I want to receive HSA employer contributions. I understand that I must open a [Tallahassee State Bank Account](#) to receive any HSA contributions.

I do not want to enroll in an HSA and understand that I am forfeiting any employer HSA contributions.

Select Back

Screenshot 5: New HSA enrollment page – MRA grace period message

Instructions and Messages

 Per IRS tax laws, the MRA grace period makes you ineligible for the HSA until April 1.

Process Benefit Elections

This screen may contain information that is confidential under state or federal law. Improper access or release of such information may be a violation of these laws.

Select Back

HSA

Plan Name	Annual Amount	Curr.
Health Savings Account	0.00	USD

Page 1 of 1

I want to receive HSA employer contributions. I understand that I must open a [Tallahassee State Bank Account](#) to receive any HSA contributions.

I do not want to enroll in an HSA and understand that I am forfeiting any employer HSA contributions.

Select Back