



Oregon

Theodore R. Kulongoski, Governor

Public Employees' Benefit Board

1225 Ferry Street SE
Salem, Oregon 97301-4281
503-373-1102
FAX 503-373-1654

TO: Agency Representatives
FROM: Isabel Joslen, PEBB Agency Liaison
RE: Agency Update 03-17-2008

The following items are of interest in this issue:

1. PDB DATA TEAM UPDATE

The PDB Team has a new member! Amy Boughton has been assigned to the PDB Data Team. To help you better we have changed our customer service model as follows:

How to contact the PDB Data Team—via e-mail or by calling the new centralized support number:

PDB.Administration@state.or.us

OR

503-378-6632

Areas of responsibility:

Amy	Miriam	Nancy
PDB Support	PDB Support	PDB Support
Home Page Alerts – Affidavit Pending	Home Page Alert – PDB Rejections	Plan Discrepancy Reports
Home Page Alerts – Agency Unsaved Enrollment	PDB.Admin Mailbox	User Access Forms
Home Page Alerts – Member Unsaved Enrollment	Procedures	Dependent Administration
Home Page Alerts – Medical Opt Out	PDB Short Cuts	PEBB Resource Site
Home Page Alerts – Termination Approval Page	Special Projects	Special Projects
Home Page Alerts – OSPS Rejections		
Home Page Alerts – Pending Coverage		
Special Projects		

2. HOME PAGE ALERTS

Home Page Alerts must be cleared by Friday of each week. If not, unsaved enrollments will not be included in the weekly files to plans--member eligibility is not established.

Amy is monitoring these alerts closely and will be working with agencies to clear them and ensure corrections are done in PDB and the benefit/payroll systems. She will be contacting agencies via e-mail.

The PDB Data Team monitors and resolves all Unsaved Enrollment by Members as this alert has special rules. Agencies should not save any unsaved enrollments created members.

3. NEWLY ELIGIBLE or NEW HIRE ENROLLMENTS AND CORRECTIONS

Some of you have requested clarification on how to process enrollments and corrections for newly eligible employees or new hires. Please refer to the OARs when you are not certain if you can make changes or updates. Here are basic rules to remember:

1. The coverage effective date is generally the first of the month following receipt of the form **OR** when the electronic enrollments are saved, whichever is later (OAR 101-020-0002). If the member **saves** the enrollment the month after they first created the enrollment, the effective date is the first of the following month of when they saved the enrollment, not when they created them. **Agencies cannot save enrollments for members. It is the responsibility of the member to save their selections in a timely manner.**
2. Newly eligible employees have 60 days from the eligibility date to submit enrollment forms to their agencies or to enroll online. Enrollments received after 60 days must be sent to PEBB Member Services Team as an appeal.
3. The employee does not need to submit the medical/dental and optional benefits enrollment forms at the same time. They have 60 days to complete the process. Remember that the rule still applies to the coverage effective date—the medical/dental plans may have different dates than the optional benefits. However, medical, dental and basic life enrollments must have the same coverage effective date.
4. Members can enroll online for medical/dental plans and submit forms for optional benefits later as long as their enrollment forms are received by the agency within 60 days of their eligibility date.
5. Members can request corrections to their enrollments within 60 days of their eligibility date in writing to their agency—they must complete new enrollment forms (OAR 101-020-0037). **The corrections must be done retroactive to the original effective date.** For example, the member enrolled in medical plan A effective 1-1-2008 and then realized that they wanted medical plan B. The agency can change plans under the enrollment correction rule. The correction must be done retroactive to 1-1-2008, not the month in which they request the correction. The same process applies to FSA plans. Make sure benefit and payroll systems are updated with the correct information.

If you are not sure on how to process a correction, contact the PDB Team at PDB.Administration@state.or.us.

4. RECONCILIATION REPORTS FROM PLANS

We continue to work with all plans on clearing the reconciliation reports. This report is very important to maintain and resolve, because it lists discrepancies between the eligibility and premiums paid. A discrepancy between eligibility and premiums may result in termination of coverage for a member. Coverage is provided only if the member and their dependents are eligible and premiums have been paid.

Here is the schedule:

Regence—will provide you with a monthly report. However, you may work reports on a bi-monthly basis. For example, review and resolve the January report discrepancies, but do not work the February report. If you provide the resolutions to the January report within 10 business days of receipt, Regence will update their system and clear that discrepancy for the next discrepancy report. You may also send your findings as you complete them—the sooner the better. Remember that you may work this report on a monthly basis.

Kaiser—will provide you a report every other month. If you provide your findings within 10 business days from receipt of the report, you will ensure that discrepancies will be cleared by the next report.

Samaritan and Providence—because these two plans are self funded, they are providing discrepancies to PEBB. PEBB will work with you to clear any discrepancies.

5. AGENCY TRAINING AND WORK SESSIONS

We successfully moved to our new home—DAS East (also known as the General Service Building.) Our new home has a computer lab with 18 computer stations. To take advantage of this resource, we are scheduling monthly training and work sessions for all users. Look for the invitation in your e-mail. Here is information for the next available session:

When: April 10, 2008 9:00 to 4:00

Who should attend: If you provide new hire orientation, provide benefit information to your employees, process enrollments forms **and** are a user of the system, you should attend this training. **This is also a good refresher course.**

Where: Department of Administrative Services East – General Service Building
PEBB Basement Computer Lab – Mt. Hood Room
1225 Ferry Street SE
Salem, OR 97301

How to register: Send us an e-mail at PDB.Administration@state.or.us to register. Registrations will be processed on a first come first serve basis, please include your name, your agency and working title.

You will receive a confirmation notice when you have been scheduled for the training session.

6. Mid Year Plan Change Matrix

For the last few months, the Member Services Team has been working diligently in reviewing the mid year plan change matrix to ensure compliance with federal guidelines. In their review they found that we needed to make changes to comply with rules and regulations. One of those changes affects a long time process— changes that affect eligibility allows members to Enroll, Change and Cancel plans. There are some restrictions for Domestic Partners. Here is a summary of the changes allow:

- Enroll:** Enroll in basic plans and optional plans
Change: Change medical plans, dental plans and optional benefits. For example, adding a spouse will allow the member to change their current medical plan. Plan changes can only be done to a different plan type--from a PPO to an HMO (but not from one PPO to another PPO).
Cancel: Cancel optional benefits.
Exceptions: No change allowed related to domestic partnership for FSA plans.

During this review process, we recognized the need to rename/combine some of the system QSCs to be consistent with the new matrix.

Attached are two documents for your reference:

- **Mid Year Plan Change Matrix**—this is **the eligibility matrix** members will be able to see on the PEBB website. This is the document you should use when processing mid year changes.
- **PDB QSC Matrix**—this is **the system matrix**. This list is for **agency use only**—not for member distribution. This QSC matrix has two worksheets—Name Changes and QSC Rules.
 - **Name Changes**—lists all QSC name changes we have made to be consistent with the mid year plan change matrix.
 - **QSC Rules**—lists all active QSCs in the system and the rules. This worksheet has a column for mid year plan matrix reference. The system rules will let you know what kind of change you will be able to make when using a specific QSC. **Pay very close attention to FSA change requests.**

It is important that you use these two matrices when processing employee update forms.

- *The Mid Year Plan Change Matrix will allow you to make the correct eligibility determination when processing update forms.*
- *The PDB QSC Matrix will allow you to select the correct QSC to make the change.*

If you have any questions about any items on this update, please send us an e-mail at pdb.administration@state.or.us.