NCFlex HBR Admin Manual Review

January 2023
Agenda

- NCFlex Team and NCFlex Vendors
- History of NCFlex
- Eligibility
- Enrollment Procedures
- HBR and Payroll Contacts
- Leave of Absence
- Coverage Termination
- Qualifying Life Events (QLE)
- Annual Enrollment
- HIPPA
- Resources
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NCFlex Vendors

Dedicated NCFlex Account Managers to assist HR, Benefits and Payroll staff

History of NCFlex

• State of NC established NCFlex on December 5, 1994 by Governor’s Executive Order #66

• State Human Resources Director to coordinate the program

• Benefits began for the first time on January 1, 1996

• Offered to eligible State of North Carolina employees

• Established under the IRS Code Section 125

• Employees purchase benefits on a pre-tax basis
Eligibility

• Employees of a state agency, university, participating community college or participating charter school, working 20 or more hours per week in one of the following positions: Permanent, Probationary, or Time-Limited

• For Disability Plan, must be working 30 or more hours per week

• University system employees are not eligible for NCFlex Group Term Life, AD&D or Disability

• Must be Actively at Work or on a Paid Leave of Absence to enroll or make changes to coverage under the NCFlex plans

• Dependent eligibility for most plans
  o Legally married spouse
  o Children until the end of the month in which they turn 26
  o Children of any age who are unable to make a living because of a mental or physical handicap
  o HCFSA and DDCFSA have special rules
Eligibility (cont.)

• Voya has additional requirements for child eligibility:
  o Accident, Critical Illness, Term Life and Voluntary AD&D plans
  o Unmarried children up to age 26

• Important considerations:
  o An employee must be enrolled in a plan for their dependent to participate
  o An employee nor their dependent can be dually enrolled
  o For Voluntary AD&D and Group Term Life, if a person is eligible to participate as an employee, they must choose to be covered as an employee, not as a dependent

• Disabled children
  o If a child ages off but is disabled, reach out to NCFlex (prior to age out if possible) via an exception, have employee upload any supporting documentation in the enrollment system
  o The child must have been on the employees plan they wish to keep them on prior to turning age 26
Eligibility (cont.)

New Hires and Newly Eligible

- Employees must enroll within 30 days of hire date, or newly eligible date
- Benefits are effective first of the month following hire date
  - Disability is effective the first of the month after an employee enrolls, unless the enrollment date is the first of the month, then the plan is effective that day
- If employee moves from part-time permanent (less than 20 hours) to full time permanent (more than 20 hours), the employee is ‘Newly Eligible’ and has 30 days to enroll
  - Submit NCFlex exception for processing

Rehires and Transfers

- Rehires
  - Break more than 30 days
  - Treated as new hire for NCFlex
- Transfers
  - Break is 30 days or less
  - Employee must keep same NCFlex elections
  - HBR responsible to notify enrollment vendor
Eligibility (cont.)

• For Transfers, if there is a gap in coverage, this gap will need to be bridged by the enrollment system and the receiving agency should take the additional premiums from payroll.

Nine (9) or Ten (10) Month Employees

• Employing Unit should ensure that per pay period deductions are calculated to cover the premiums due for the entire plan year.

• If the employing unit does not deduct correctly for a full 12 months of premiums, the HBR is responsible for collecting any missed premiums during the period the employee is not working, submitting to vendor and letting vendor know who and what the premiums are for.
Enrollment Procedures

- Employees can enroll via web (benefits enrollment platform) or telephone.
- Employees of the University System of NC have two enrollment platforms.
- Effective date of benefits:

<table>
<thead>
<tr>
<th>NCFlex</th>
<th>Effective Date</th>
<th>Terminations*</th>
<th>Changes**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coverage</td>
<td>New Hires</td>
<td>30 days to elect. Effective first of the month following the date of hire.***</td>
<td>Coverage is lost at the end of the month of termination or loss of eligibility, or retro back to the end of the last period that premium was payroll deducted.</td>
</tr>
<tr>
<td>All Benefits</td>
<td></td>
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</tbody>
</table>

- Annual Enrollment changes become effective January 1 of the following year (unless Evidence of Insurability – EOI – is required).

** For birth, adoption or placement for adoption, the effective date for most plans is the date of event.

*** Voluntary Disability plan, the effective date is the first day after enrollment in the plan, unless enrollment is on the first day of the month, benefits are effective that day.
Enrollment Procedures (cont.)

Vendor notification

• Vendors are notified of terminations or changes in status on electronic files from the enrollment platform
• The enrollment platform will report COBRA-qualifying life events so that COBRA notifications can be mailed
• The COBRA vendor is currently iTedium

Change of Name or Address

• These changes should be made through their HRIS system or the enrollment platform for hand keyed employing units
• This info will feed from the enrollment system to the vendors

Changing a Beneficiary

• NCFlex Cancer, Critical Illness, Core and Voluntary AD&D, and Term Life beneficiary designations should be made in the enrollment platform and can be changed anytime during the plan year.

Premium Deductions

• Deductions for NCFlex premiums are taken in the month the coverage is for
Enrollment Procedures (cont.)

NCFlex Exception Process

- For changes outside of a QLE or Annual Enrollment window
- Submitted by HBR on behalf of the employee
- Typically administrative error or unavoidable situation
- Include all pertinent information such as:
  - Details of why the window was missed and life event (if applicable)
  - Has the employee utilized benefits – HBR should reach out to vendors prior to exception request
  - Which plan(s) and coverage level(s) are affected, include any dependent info
- We review on a case-by-case basis
- Section 125 and plan rules taken into account to be in compliance
- If granted any retro payments will be required or retro premiums refunded
  - An excel spreadsheet is sent to the enrollment system twice a week of approvals
  - Once changes are made by the enrollment system and NCFlex is notified, an approval letter is sent to the HBR and sometimes vendors or payroll are copied
  - Vendors are notified of changes via file feed each Monday
HBR and Payroll Contacts

• Vendors have dedicated account managers and contacts for HBRs and Payroll Centers

• Please do not give out to employees
  o Employees should use contact information for the vendors on the back of the guide, also located on each plan page on ncflex.org

• Reach out to these contacts for:
  o Complicated claim items, vendors may reach directly to employees if needed
  o Answers to benefit questions not found in the guide
  o Other product specific inquiries that cannot be found in the NCFlex resources
  o Employee payment activity while on leave to help reinstate benefits correctly when the employee returns
Leave of Absence*

*UNC Institutions and Affiliates have additional guidelines

• Paid leave
  o Benefits will continue, cannot make changes

• Disability through the NC Retirement System
  o Short-Term Disability
    o Follow payment rules for Leave of Absence
  o Payroll Center policy determines if benefits may be deducted from Short Term check
  o Long Term/Extended Short Term
    o Benefits should be terminated in Enrollment System
Leave of Absence (cont.)

• Waiver of Premium is available on the following plans if an employee goes out due to a disability
  o Cancer
  o AD&D
  o Term Life
  o Vendor form completed and reviewed

• Most plans have a time limit to apply – see pg. 14 of Admin Manual
Leave of Absence (cont.)

• Unpaid leave
  o Benefits are termed in the enrollment platform
  o Premiums paid directly to vendors (separate from COBRA)
  o Prepay or pay as you go
  o Employee may decide not to pay for benefit(s) while on unpaid leave and not have the coverage (EOI may be required upon return)

• Leave of Absence Chart (pg. 16) notes where to send payments, this may be shared with employees

• Additional considerations if a leave of absence falls around Annual Enrollment

• Continuation periods of coverage (pg. 18)
  o This chart details how long an employee can continue under the “active group” while on a leave of absence and what type of coverage is offered after that period
  o For Voya plans (Accident, Critical Illness, Term Life and AD&D), regardless of if the employee is on paid leave or unpaid leave, there are rules around when an employee has to port coverage with the vendor
Leave of Absence (cont.)

Reinstatement from Unpaid leave (within the same plan year their benefits termed due to LOA)

- Employee may choose to not re-enroll in their benefits, HCFSA is the only benefit re-enrollment is required

- Employee must enroll in same benefits they had prior to going out, not make changes

- HCFSA deductions, employee can choose to pro-rate or reinstate the full yearly amount (pg. 20 has an example)
  - New yearly amount cannot fall below what has been reimbursed to the employee

- EOI may be required for gap in premium payment

- Disability plan, if the employee re-enrolls within 30 days of returning:
  - And break was less than 90 days, no EOI is required and the plan is reinstated retro back to when it ended and premiums taken from payroll
  - And break was more than 90 days, no EOI is required
Leave of Absence (cont.)

UNC System Leave of Absence

• Premium payments are collected by the employer and sent directly to the vendors
• Employees do not pay vendors directly
• If an employee fails to pay premiums while out on leave, be sure to term benefits in the enrollment system timely to avoid retro cancellation
• A letter is available that should be provided to employees going out on leave
• For questions, contact a UNC System Office Benefits Administrator (pg. 13 of the Admin Manual)
Coverage Termination

• Employee no longer meets the eligibility requirements
• HCFSA Employee and Employer risk (pg. 22)
• Coverage Continuation options at:
  o Separation of employment
  o Retirement
  o Loss of eligibility
  o Death of Employee

• Coverage Continuation options chart in Admin Manual
  o Notes options by plan
  o Notes if employee will be contacted or should reach out to vendor
  o Notes COBRA vendor if applicable

• NCFlex Enrollment Guide lists options but with less detail
Qualifying Life Events (QLE)

• Set election rule
  o Under IRS section 125 pre-tax rules, once an election is made, that election is set for the entire calendar year, unless there is an eligible QLE

• Employee has 30 days from date of event to make a change

• Effective first of month following date of event

• Exceptions for:
  o Change in Medicaid or CHIP status
  o Birth or Adoption
  o Ineligible dependent due to death
  o Qualified Medical Child Support Orders (QMCSO)
Qualifying Life Events (QLE)

• “Consistent With” rule
  o Election change corresponds to the event (i.e. adding or removing coverage)

• No changes to plan options
  o Cancer
  o Dental
  o Vision
    ▪ If QLE allows the addition of Vision dependents, may move from Core Wellness Exam to another Vision option in order to cover the eligible dependents (This would be done by exception process)

• Qualifying Life Event Chart
  o Outlines events and actions
  o Dependent Day Care Section
Qualifying Life Events (QLE)

• Documentation is required for most life events
  o [https://oshr.nc.gov/media/4268/open](https://oshr.nc.gov/media/4268/open) - document detailing required documentation
  o Usually falls in line with what the State Health Plan requires

• We do not require Dependent verification at this time, but do require SSNs

• When reviewing and approving documentation for a life event, be sure it supports the change
  o Ex. Someone is adding dental for their spouse due to a “loss of other coverage”, the document should show the spouse lost dental coverage
Annual Enrollment

• Generally, October time-frame

• Coordinated with the State Health Plan

• Changes effective Jan 1st
  o EOI – Benefits effective once approved

• New hires during 4th quarter
  o (1) Choose current plan year elections
  o (2) Make any Annual Enrollment changes to next plan year, such as FSA

• Print out confirmation statement
HIPAA

• Health Insurance Portability and Accountability Act

• NCFlex vendors follow HIPAA

• Typically dependents 18 years or older, vendor only discuss with that person

• Vendors have HIPAA forms where an employee can grant a spouse or other person to discuss

• For complicated claims items brought to vendor attention, the vendor may contact employee directly to resolve
Page 35 details out some additional information you may find useful on each benefit.

- FSA limits and rollover amounts
- FSA deadline to file claims
- Group Policy numbers
- Claim processing information
- Single Sign On from the enrollment platform option
- Tax information
- Pre-existing condition limitations
List of Participating Groups

• Starting on page 41, you’ll find a list of participating NCFlex groups, with all HR Integrated Payroll System agencies broken out.

• Use this as a tool to consider if an employee is a transfer from another NCFlex participating employer

• If you need contact information for one of the employers, reach out to the NCFlex team
Resources

• HBR Administration Manual
• NCFlex Enrollment Guide and Benefits Guide
• NCFlex Team and Vendor Account Managers
  o Main NCFlex email is ncflex@nc.gov
• Attend fall Train-the-Trainer
• NCFlex.org
  o HBR section
  o New Hire section
  o Plan information and links
  o Videos
• Monthly HBR newsletter and alerts
Thank you!