Benefits

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Objectives

- Provide contact information where employees can get more information regarding benefits
- Provide overview on the benefits available to State of Florida employees
- Explain the conditions and limitations of OPS employment benefit eligibility
- Give useful tips for enrolling in benefits & FSAs/HSAs
- Provide overview of SMS/SES Disability Benefits
- Provide explanation and examples of Under/Overpayment Benefits Report
Stay Informed - People First

- My Benefits Website
  - Benefits Guide
  - Learn about changes
  - Read about plans
  - Use Cost Estimators
  - Insurance Company Contact Info
  - http://mybenefits.myflorida.com/

- How employees will receive information
  - Employees MUST verify mailing and home address in People First
  - Benefits Summary will be mailed and available online
  - Confirmations will be mailed and available online
  - New hire letter
Measurement Periods

- **New Hire Measurement Period**
  - The period of 12 consecutive months starting the first day of the month following the initial hire date and ending the last day of the twelfth month for non-eligible OPS employees

- **Open Enrollment Measurement Period**
  - The period of 12 consecutive months from October 3 through the following October 2 of each year

- **Stability Period**
  - The period of 12 consecutive months starting from the first day of enrollment (or possible enrollment if coverage is waived) in health insurance
Eligible Variable Hour (OPS) Employees

- Any state employee working an average of 30 hours or more per week will be eligible for:
  - Health Insurance: same premiums as Career Service; eligible for spouse program and HSA contribution
  - Basic life: employee must enroll and pay $3.58 monthly premium
  - Spouse life and child life (as long as they are enrolled in the basic life plan)
  - Dental, vision and other supplemental plans
  - Health Savings Account- Enrolled in HIHP Health Plan
  - Dependent Care FSA

- **Not** eligible for optional life, Health Care FSA (formerly known as MRA) or Limited Purpose FSA

Qualifying Events

- Eligible employees are subject to the rules of the program
- OPS **eligible** moving to FTE is **no longer** a QSC event

OPS Payroll vs. Benefits Month

- OPS Payroll processed mid-month to mid-month
- OPS Benefits are calendar month
Life Insurance

- **Securian**
  - Employer paid premium $3.58/ $25,000 basic life insurance:
    - $25,000 Basic Life for Full-Time Employees at no cost to employee
    - $25,000 Basic Life for Part-Time Employee at a pro-rated premium
    - OPS employees are eligible; must pay entire premium
    - Over $500,000 requires medical underwriting
    - Maximum Coverage $1,000,000
    - Spouse and Dependant children are eligible for life insurance coverage
    - **Spouse**- $4.50/ $15,000 or $6.00/ $20,000
      - Medical Underwriting
    - **Dependent** $0.85-$10,000 in coverage
    - Employee is the beneficiary on all spouse and dependent policies

Tips

- Encourage employees to visit the myBenefits website when they have questions about their benefits
- Remind employees to review their current Benefits Statement
- Employees may contact the People First Service Center regarding benefits
- Contact JAC if the employee has any problems with their enrollment
Emergency Reinstatements

- Only health insurance
- Must be a true emergency
  - Employee, or their dependent, needs immediate/urgent medical treatment or required medicines
- Must follow emergency reinstatement rules
  - Employee provides payment for underpayment
  - A copy of the payment is sent to JAC via email
  - You place payment in the mail for employee

When to Send Payment to People First

- Initial enrollment after payroll cutoff
  - Health insurance only
- While employee is on Leave Without Pay (LWOP)
  - FMLA
  - Personal
  - Suspension
  - Military
- When there is an increase in premiums
  - Optional Life
  - Going from individual to higher coverage level
Danger Zones

- Please remember People First and JAC can not accept paper enrollment forms.
- Employees must complete their own enrollments online; however, you can assist them or they can contact the People First Service Center if needed.
- If the employee is having trouble enrolling online, they should call the People First Service Center for assistance.
- Please do not use an employee’s People First number to enroll as the employee.
- Remind employees to print confirmation(s) for their records.
- Dependent Social Security numbers and information must be accurate; an IRS penalty can result.

Questions?
Flexible Spending Accounts

- Health Care FSA (formerly known as MRA)
  - Standard HMO and PPO Members
  - Maximum Annual Contribution
    - $2,600 per year or $216.66 per month
- Health Savings Account (HSA)
  - Health Investor HMO and PPO – Only with HIHP Plan
  - Maximum Annual Contribution (includes State Contribution)
    - Individual = $3,400
    - Family = $6,750
- Limited Purpose FSA (formerly known as LPMRS)
  - Only for Employees Enrolled in the Health Investor HMO and PPO
  - Maximum Annual Contribution
    - $2,600 per year or $216.66 per month
    - Can only be used for preventative care expenses not covered by health plan, dental, and vision
- Dependent Care FSA (formerly known as DCRA)
  - Maximum Annual Contribution
    - $5,000 per year or $416.00 per month
    - Dependent Care Only

Flexible Spending and Tax Favored Accounts
The easiest way to access the funds in your FSA accounts is to use your Benny MasterCard debit card. When you pay with the card, your purchase amount is deducted from the appropriate balance in your Flexible Spending Account. Certain payments will require further verification, so please hold on to your itemized bills and receipts. Custom Design Benefits will request documentation only when it is needed.
How Do I Get My Money If I Didn’t Use My Benny Card?

- Complete a CLAIM FORM only if your Benny card was not used.
  - **Medical**: Complete required information on claim form. The claim can be submitted online through People First/ FSA & HSA Information.
  - **Vision and Dental**
  - **Dependent Care**: Complete required information on the claim form and upload or attach receipt for expenses from Dependent Care Provider.

FSA/HSA Claim Forms

- **Online Claim Submission**
- Claim forms can be downloaded from the Chard Snyder website.
  
  http://www.chard-snyder.com/
  
  - Enter website
  - Go to forms at the top of the page
  - Select the appropriate claim form
Account Options When Employment Ends

- Flexible Spending Account Options When Employment Ends Form
- Current Status of Medical Reimbursement Account
- Participation Options
- Payment Options

Questions?
State Group Disability Coverage
SMS/SES Employees

SMS/SES Disability

- Definitions
- Eligibility and Enrollment
- Exclusions
- Effective Date of Coverage
- Cost
- Benefits
- Filing a Claim
- Termination of Benefits
- Required Documentation
Definitions

- Basic Daily Earnings
- Employee
- Physician
- Sickness/ Injury
- Total Disability

State Group Disability Income Plan Benefit

II. Calculation of Benefits

The following worksheet may be used to estimate the Plan benefit.

Step 1: Annualize Salary

a. Employees paid biweekly multiply their gross biweekly pay amount times 26.1.

\[
\text{biweekly pay} \times 26.1 = \text{annual salary}
\]

b. Employees paid monthly multiply their gross monthly pay times 12.

\[
\text{monthly pay} \times 12 = \text{annual salary}
\]

Step 2: Determine Basic Daily Earnings

Divide annual salary by 364 benefit days to determine Basic Daily Earnings.

\[
\frac{\text{annual salary}}{364} = \text{Basic Daily Earnings}
\]

Step 3: Estimate Daily Benefit

Multiply the Basic Daily Earnings by 65% to estimate the daily benefit.

\[
\text{Basic Daily Earnings} \times .65 = \text{daily benefit}
\]

Reminder: the benefit will be reduced if you are receiving other disability benefits as described in section G above.
Cost of Disability Coverage

- Employer Paid Premium
- Voucher Processing
- Underpaid Premium

Eligibility and Earnings

- The “first benefit day”
- Leave Status
- Reduction of Benefit
- Suspension of Benefit
Filing a Claim

- Employee Coverage
- State Group Disability Income Plan Claim Form
- Resubmission of Forms and Documents
- Physician’s Statement
Questions?
Under/Overpayment Benefits Report

- Overview of Under/Overpayment Report
- How to read the Under/Overpayment Report
- What Causes Under/Overpayments in Benefits Premiums
- State Premium Amount Underpaid
- Employee and Employer Refunds and Move Money Requests
- Employee Underpayment in Premiums
What is the Under/Overpayment Benefits Report?

- The report identifies employees and employers whose benefits are either underpaid or overpaid for the requested coverage period.

What Does the Under/Overpayment Report Show?

- Employee Underpayment
- Employer Underpayment
- Employee and Employer Overpayment
- Move Money Request
Under/Overpayment Fields

- **Employee Due**: Employee contribution due for the insurance plan for the coverage month.
- **Employee Paid**: Employee contribution paid for the insurance plan for the coverage month.
- **Employee Variance**: Employee underpayment or overpayment amount for the insurance and coverage month.
- **Employer Due**: Employer contribution due for the insurance plan for the coverage month.
- **Employer Paid**: Employer contribution paid for the insurance plan for the coverage month.
- **Employer Variance**: Employer underpayment or overpayment amount for the insurance plan and coverage month.

Circuit Role and JAC Role

- **Circuit**:  
  - Review Under/Overpayment Report  
  - Inform Employee’s of Underpayments

- **JAC**:  
  - Request all overpayment refunds from People First for both employee and employer  
  - Create JT Back-up Documentation for Voucher  
  - Voucher Underpaid Portion  
  - Submit Move Money Request to People First
How to Read Under/Overpayment Report

What Causes Under/Overpayments?

- Pay Increase
- Position Changes
- QSC Events
- New Hire/Payroll Cutoff
- LWOP
- Termination
- People First
- Warrant Cancellation/On-demand
- Supplemental Payroll
- Personal Payment- Employee
- Voucher
- Age/Date of Birth
Questions?

"Nurse, get on the internet, go to SURGERY.COM, scroll down and click on the 'Are you totally lost?' icon."

Contact Information

- **JAC Contacts**
  - State Attorney Offices
    - Call Amber Moore at 850-488-2415 or email at benefits@justiceadmin.org
  - Public Defender Offices, Guardian Ad Litem Offices, Capital Collateral Regional Offices and Criminal Conflict and Civil Regional Offices
    - Call Amy Maros at 850-488-2415 or email at benefits@justiceadmin.org

- **People First**
  - Call at 866-663-4735
  - Fax at 800-422-3128
  - [https://peoplefirst.myflorida.com/peoplefirst(bD1IbiZjPTIzMA==)/logon.htm](https://peoplefirst.myflorida.com/peoplefirst(bD1IbiZjPTIzMA==)/logon.htm)