

Correcting Enrollment Errors –

When an employing agency fails to:

- Timely* notify, enroll or terminate an employee or his or her dependent, or
- Accurately enroll, default, or reflect an employee’s premium surcharges, or
- Enrolls an employee or dependent when they are not eligible

The agency must correct the error as described in WAC 182-08-187 and Policy 11-3.

**Timely means: (1) an employee was notified within 31 days of becoming newly eligible or regaining eligibility, (2) the enrollment or termination of coverage was entered in Pay1 with the correct eligibility effective date and/or (3) termination date by the employing agency within the lower limit date.*

For terminations, the lower limit date is the farthest back coverage may be retroactively terminated as allowed under Policy 19-1, Addendum 19-1A. The “lower limit date” is three calendar months prior to the current process month. Refer to the [Lower Limit and Current Process Month Calendar](#) on the Perspay website, Quick Reference Guide page.

“Current process month” identifies the specific period of time for which the insurance system is billing an agency. The “begin” and “end” date of an agency’s current process month depends on the [invoicing cycle](#) for the employing agency.

An agency must correct an error timely..

- A. [Failure to notify an employee within 31 days of his or her eligibility for PEBB benefits](#)
 - a. [Newly eligible employees](#)
 - b. [Employees regaining eligibility for the employer contribution](#)
- B. [Failure to accurately enroll insurance coverage as elected by the employee](#)
- C. [Failure to enroll insurance coverage as required by WAC 182-08-197\(1\)\(b\)](#)
- D. [Failure to accurately reflect an employee’s premium surcharge attestation](#)
- E. [Enrolling an employee or dependent when they are not eligible](#)
- F. [Failure to accurately enroll optional long-term disability \(LTD\) insurance](#)

The employing agency must document the recourse solution and provide a copy to the PEBB Program for approval. *A recourse solution may not be accepted and implemented until approved by the PEBB Program.*

Premium Payments and Premium Refunds:

The employing agency must remit to HCA the employer contribution and the employee contribution for health plan premiums, applicable premium surcharges, basic life, and basic LTD from the date insurance coverage begins.

- If a state agency or higher education institution failed to notify a newly eligible employee timely of his or her eligibility for PEBB benefits, the agency or institution may only collect the employee contribution for health plan premiums and premium surcharges for coverage for months following notification of a new enrollment period. ([WAC 182-08-187\(3\)\(a\)](#))

If an employee elects optional LTD coverage and the employing agency failed to correctly enroll the amount of optional LTD coverage:

- When additional premiums are due, the employee is responsible for payment of premiums for the most recent 24 months of coverage. The employing agency is responsible for additional months of premiums.
- When premium refunds are due to the employee, the LTD insurance carrier is responsible for premium refunds for the most recent 24 months of coverage. The employing agency is responsible for additional months of premium refunds.

When an employer mistakenly enrolls an employee or their dependent when they are not eligible, premiums and applicable premium surcharges will be refunded by the employer to the employee without rescinding coverage.

Recourse:

When retroactive correction of an enrollment error occurs, the employing agency must work with the employee and the PEBB Program, and receive approval from the authority to implement retroactive insurance coverage within the following parameters:

- Retroactive enrollment in PEBB health plan;
- Reimbursement of claims paid;
- Reimbursement of amounts paid for by the employee for medical and dental premiums;
- Other legal remedy received or offered; or
- Other recourse, upon approval by the authority

Recourse must not contradict a specific provision of federal law or statute and does not apply to requests for non-covered services or in the case of an individual who is not eligible for PEBB benefits.

An employee who does not agree with the recourse decision of the employing agency or the PEBB Program may appeal the decision by submitting an appeal within 30 days as described in WAC 182-16.

Error Correction Process –

Process:

1. The employing agency must notify Outreach and Training (O&T) of the error through [FUZE](#).
2. O&T will work with the employing agency to provide written notification to the employee offering a new 31-day election period and recourse, as appropriate.
 - The employing agency must work with the employee and O&T to determine which recourse option best provides recourse for the employee’s unique situation.
 - The employing agency must document the recourse solution and provide a copy of the solution with the initial notification to O&T for approval. *A recourse solution may not be implemented until approved by the PEBB Program.*
 - Once approved by the PEBB Program, the employee must acknowledge the agreed upon solution by signing the letter or responding to an email outlining the solution.
 - The employing agency must provide a copy of the acknowledged recourse solution to the employee and O&T.
3. Once the PEBB Program receives a copy of the signed recourse solution:
 - If the effective date is within the lower limit date, the agency may key enrollment. *Note: The original effective date must be noted in the Pay1 insurance system for life and LTD. Notify O&T through FUZE: The Basic Life and LTD Date and the Supp Life and Opt LTD fields on the A.41 screen will be updated with the original date of eligibility. The employee must agree to pay back premiums for any optional coverage.*
 - If the effective date is beyond the lower limit date, send a FUZE to O&T for entry into the insurance system.
4. An employee who does not agree with the recourse decision of the employing agency or the PEBB Program may appeal the decision by submitting an appeal within 30 days as described in WAC 182-16.

A. Failure to notify an employee within 31 day enrollment period of his or her eligibility for PEBB benefits:

For failure to provide the notice required in WAC 182-12-113 or the employer group contract before the end of the employee’s 31-day enrollment period, the employing agency must provide the employee a written notice of eligibility for PEBB benefits and offer a new 31-day enrollment period.

Follow the process outlined in this document.

Effective Dates of Coverage:

Failure to notify a newly eligible employee before the end of the employee’s 31-day election period:

If employee returns the enrollment forms within new 31-day election period:	
Medical and Dental	Enrollment is effective the first day of the month following the date the error is identified, unless the PEBB Program determines additional recourse is warranted. If the enrollment error is identified on the first day of the month, the enrollment correction is effective that day.

	<i>Note: Recourse effective dates – Employee may select the first day of any month from the original eligibility effective date to the first day of the month following notification, unless the notification was on the first day of the month, then that day.</i>
Basic Life and LTD	Enrollment is effective retroactive to the first day of the month following the day the employee became newly eligible. If the employee became newly eligible on the first working day of the month, coverage begins on that date.
Optional Life and LTD	Optional Life: Complete the Notification of Enrollment Extension form and send to MetLife with the enrollment form. Optional LTD: Enrollment is effective retroactive to the first day of the month following the day the employee became newly eligible provided back premiums are paid by the employee.
Medical FSA and DCAP <i>(state agencies and higher education institutions only)</i>	Enrollment is limited to three months prior to the date the enrollment is processed, but not earlier than the current plan year or the employee's original effective date.
Premium Surcharges	The enrollment correction is effective the first of the month in which the surcharge should have been collected, or the first of the month in which the surcharge should not have been collected.
<i>If employee does not return forms within the new 31-day election period:</i>	
Medical and Dental	Enroll the employee in Uniform Medical Plan and Uniform Dental Plan as a single subscriber effective the first day of the month following the date the error is identified, unless the PEBB Program determines additional recourse is warranted. If the enrollment error is identified on the first day of the month, the enrollment is effective that day.
Basic Life and LTD	Enrollment is effective retroactive to the first day of the month following the day the employee became newly eligible. If the employee became newly eligible on the first working day of the month, coverage begins that day.
Optional Life and LTD	If the employee later chooses to request optional Life or LTD, the employee must provide evidence of insurability Pend the requested optional LTD coverage in the insurance system for approval. Coverage is effective the first day of the month following carrier approval.
Premium Surcharges	Default the employee to the tobacco use premium surcharge. The premium surcharge effective date is the same date as PEBB medical begins. WAC 182-08-185(1)(a)(i).

Failure to notify an employee regaining eligibility for the employer contribution before the end of the 31-day election period:

<i>If employee returns the enrollment forms within new 31-day election period:</i>	
Medical and Dental	Enrollment is effective the first day of the month following the date the error is identified, unless the PEBB Program determines additional recourse is warranted. If the enrollment error is identified on the first day of the month, the enrollment correction is effective that day. <i>Note: Recourse effective dates – Employee may select the first day of any month from the original eligibility effective date to the first day of the month following notification, unless the notification was on the first day of the month, then the effective date is that day.</i>

Basic Life and LTD	Enrollment is effective retroactive to the first day of the month the employee regained eligibility for the employer contribution.
Optional Life and LTD	<p>Enrollment is effective as follows:</p> <ul style="list-style-type: none"> • The first day of the month the employee regained eligibility, at the same level of coverage the employee continued during the period of leave, without evidence of insurability. • If the employee was not eligible to continue optional LTD insurance during the period of leave, optional LTD coverage is reinstated the first day of the month the employee regained eligibility, at the level of coverage the employee was enrolled in prior to the period of leave, without evidence of insurability provided back premiums are paid by the employee. • If the employee was eligible to continue optional life and/or optional LTD insurance during the period of leave but did not, the employee must provide evidence of insurability and receive approval from the carrier. <p>Pend the requested LTD coverage in the insurance system for approval. Coverage is effective the first of the month following carrier approval.</p>
Medical FSA and DCAP <i>(state agencies and higher education institutions only)</i>	<p>The employee may adjust his or her election as follows:</p> <ul style="list-style-type: none"> • The employee may participate at the amount originally elected with a corresponding increase in contributions for the balance of the plan year, or • Participate at a reduced amount for the plan year by maintaining the per-pay period contribution.
Premium Surcharges	Enrollment is effective the first day of the month following the date the error is identified, unless the PEBB Program determines additional recourse is warranted. If the enrollment error is identified on the first day of the month, the enrollment correction is effective that day.
<i>If employee does not return forms within the new 31-day election period:</i>	
Medical and Dental	Enroll the employee in Uniform Medical Plan and Uniform Dental Plan as a single subscriber effective the first day of the month following the date the error is identified, unless the PEBB Program determines additional recourse is warranted. If the enrollment error is identified on the first day of the month, the enrollment is effective that day.
Basic Life and LTD	Enrollment is effective retroactive to the first day of the month following the day the employee regained eligibility for the employer contribution.
Optional Life and LTD	<p>If the employee later chooses to request optional life or LTD, the employee must provide evidence of insurability.</p> <p>Pend the requested Optional LTD coverage in the insurance system for approval. Coverage is effective the first day of the month following carrier approval.</p>
Premium Surcharges	Default the employee to the tobacco use premium surcharge. The premium surcharge effective date is the same date as PEBB medical begins. WAC 182-08-185(1)(a)(i)

B. Failure to accurately enroll insurance coverage as elected by the employee:
(e.g., employee submitted enrollment forms timely and enrollment was not entered into the insurance system; incorrect enrollment was entered into the insurance system, etc.)

Follow the process outlined in this document.

Effective Dates of Correction:

Enrollment is corrected as follows:	
Medical and Dental	<p>Enrollment is effective the first day of the month following the date the error is identified, unless the PEBB Program determines additional recourse is warranted. If the enrollment error is identified on the first day of the month, the enrollment correction is effective that day.</p> <p><i>Note: Recourse effective dates – Employee may select the first day of any month from the original effective date to the first day of the month following notification, unless the notification was on the first day of the month, then the effective date is that day.</i></p>
Basic Life and LTD Optional LTD	<p>Optional Life: Complete the Notification of Enrollment Extension form and send to MetLife.</p> <p>See the LTD Insurance section of this document for instructions on correcting enrollment errors.</p>
Medical FSA and DCAP <i>(state agencies and higher education institutions only)</i>	<p>The employee may adjust his or her election as follows:</p> <ul style="list-style-type: none"> • The employee may either participate at the original election amount with a corresponding increase in contributions, or • The employee may participate at a reduced amount by maintaining the per-pay period contribution in effect.
Premium Surcharges	<p>For newly eligible employees or an employee regaining eligibility:</p> <ul style="list-style-type: none"> • The premium surcharge effective date is the same date as PEBB medical begins. WAC 182-08-185(1)(a)(i) <p>For a change in status of the premium surcharge:</p> <ul style="list-style-type: none"> • A change that results in a premium surcharge will begin the first day of the month following the status change. If that day is the first of the month, the change begins that day. • A change that results in removing the surcharge will begin the first day of the month following receipt of the attestation. If that day is the first of the month, the change begins that day.

C. Failure to accurately enroll insurance coverage as required by WAC 182-08-197(1)(b):
(e.g., employee not defaulted in the insurance system when forms were not received or were received after the enrollment period)

Follow the process outlined in this document.

Effective Dates of Correction:

Enrollment is corrected as follows:	
Medical and Dental	<p>Enrollment is effective the first day of the month following the date the error is identified, unless the PEBB Program determines additional recourse is warranted. If the enrollment error is identified on the first day of the month, the enrollment correction is effective that day.</p>

	<i>Note: Recourse effective dates – Employee may select the first day of any month from the original effective date to the first of the month following notification, unless the notification was on the first day of the month, then the effective date is that day.</i>
Basic Life and LTD	Enrollment is effective retroactive to the first day of the month following the day the employee became newly eligible or regained eligibility for the employer contribution.
Optional Life and LTD	Optional Life: Complete the Notification of Enrollment Extension form and send to MetLife. The employee must provide evidence of insurability for any optional life and optional LTD. Pend the requested Optional LTD coverage in the insurance system for approval. Coverage is effective the first day of the month following carrier approval.
Premium Surcharges	Enrollment is effective the first day of the month following the date the error is identified, unless the PEBB Program determines additional recourse is warranted. If the enrollment error is identified on the first day of the month, the enrollment correction is effective that day.

D. Failure to accurately reflect an employee’s premiums surcharge attestation

(e.g., employee was defaulted in error, the question number was not keyed requiring the employee to reattest, etc.)

Follow the process outlined in this document.

Effective Date of Correction:

<i>Enrollment is corrected as follows:</i>	
Premium Surcharges	Enrollment is effective the first day of the month following the date the error is identified, unless the PEBB Program determines additional recourse is warranted. If the enrollment error is identified on the first day of the month, the enrollment correction is effective that day.

E. Employee or dependent enrolled when they are not eligible.

(e.g. failure to terminate an account, mistakenly enrolled when not eligible, etc.)

Follow process outlined in this document.

Effective Dates of Correction:

<i>Enrollment is corrected as follows:</i>	
Medical and Dental	Enrollment is terminated the last day of the month in which the error was identified.
Basic Life and LTD Optional LTD	Enrollment is terminated the last day of the month in which the error was identified.

F. Failure to accurately enroll optional long-term disability (LTD) insurance:

Note: This process applies when the error is discovered beyond the lower limit date.

Process and Effective Dates:

1. The employing agency must notify Outreach and Training (O&T) of the error through [FUZE](#).
2. Complete the Long-Term Disability Insurance Correction form, available on the [Forms](#) page of the Perspay website.
3. Provide a copy of the form to the employee, file a copy of the form and supporting documentation for your records, and send the original form to Outreach and Training through FUZE.
4. Enroll the employee in his or her elected LTD coverage back to the correct effective date of coverage.
 - If the corrected error results in a higher coverage amount, the employee is responsible for premiums for the most recent twenty-four months of coverage. The employing agency is responsible for additional months of premiums.
 - If the corrected error results in a lower coverage amount (including no coverage), refund the overpaid premiums to the employee. If the correction requires a refund, the carrier will refund for the most recent 24 months of coverage as a premium credit to the employer. Notify PEBB for refund of premiums from the carrier.
5. An employee who does not agree with the decision of the employing agency or the PEBB Program may appeal the decision by submitting an appeal within 30 days as described in WAC 182-16.

References: [WAC 182-08-187](#), [Policy 11-3](#), [Policy 19-1](#), [Addendum 19-1A](#)