

Benefit Premium Process for Under 30 Hour Employees

(Including LWOP, Seasonal, Temporary, etc.)

On December 9, 2020, Jennifer Bowling sent a communication with the subject line: "Benefit Premium Process Change Coming In January 2021" regarding the upcoming changes to the benefit premium collection process.

This message is to further clarify the new process and how it affects employees who are paid less than 30 hours in a pay period where they would owe the employer portion of the medical and dental premium.

New Process for 2021 Calendar Year for Employees Paid Less Than 30 Hours within a Pay Period

- **Employee portion:** employees will be required to pay the employee portion in the current pay period. If an employee does not have sufficient funds, ADOA GAO will mail an Unpaid Benefit Premium Statement to the employee address on record.
- **Employer portion:** employees paid less than 30 hours will continue to pay in arrears the employer portion of the benefit premium. ([Use payroll calendar to back bill the benefit premium.](#))

Paycheck Date 1/14/2021 - Transition Period

For pay period **12/26/2020 - 1/8/2021** this is considered a transition period, which we have planned for. Employees **will not** be required to pay the employer portion during this period regardless of the hours paid.

- Do not run the Under 30 Hour report
- Do not collect the Employer portion
- Do not submit a GAO73B

Paycheck Date 1/28/2021 - Resume GAO73B Process

For pay period **1/9/2021 - 1/22/2021** and for the remainder of the plan year, please run Benefit Dataware Warehouse reports to determine if the employee owes the employer portion. Please note: Going forward, employees will continue to pay the Employer portion in arrears, while the Employee portion will be paid current.

- Run the Under 30 Hour report **on 1/28/2021 to check for <30 hours worked during the pay period 1/9/2021 to 1/22/2021. The employer portion of the premium was paid on the checkdate 1/14/2021.**
- Determine employees that owe the Employer portion for remaining pay periods of plan year 2021.
- Submit a GAO73B as applicable.

Employee Terminations

- It will be critical for agencies to ensure that HRIS is updated timely (within one pay period) that employees that are no longer working for State Agency.
- If there is a delay with updating HRIS, benefit premiums may be collected in error.
- If an employee benefits premium taken out of final paycheck in error or has received an Unpaid Benefit Premium Statement in error, please submit a Benefits Operations Research Request form so the Benefits Operations Team can research. Examples are provided on page 2.

Resources

[2021 Premium Paid Current Benefit Premium Calendar](#)

[2021 Unpaid Benefit Premium Calendar](#)

Please let us know if you have any questions.

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EXAMPLES

	Data Warehouse		GAO Form		
	Date to Run Under 30 Hours (compute week)	Pay Period to select on Warehouse Report)	GAO-73B Period Select same dates as Under 30 Hour Warehouse Report	GAO-73B OTD Date (auto populates) Paydate premium was originally paid by agency.	GAO-73B Submission Deadline Date to GAO
EXAMPLE 1	1/27/2021 - 1/29/2021	1/9/21 - 1/22/21	1/9/21 - 1/22/21	1/14/2021	1/29/21 (12:00 p.m.)
EXAMPLE 2	2/10/2021 - 2/12/2021	1/23/2021 - 2/5/2021	1/23/2021 - 2/5/2021	1/28/2021	2/12/2021 (12:00 p.m.)

Screen Shots of Under 30 Hour Report and GAO-73B Form

Example 1

Home > Central Benefits > Under 30 Hour Report

AGENCY PAY PERIODS: 1/9/2021 - 1/22/2021

AGENCY CODE	PREPARED BY		DATE PREPARED	PHONE #	REVIEWED BY		DATE REVIEWED	PHONE #
EIN	NAME				EIN	NAME		
123456	Ben Efit		01/27/21	867-5309	5679	Premi Um	1/27/2021	867-5309

EIN	EMPLOYEE FULL NAME	DEDUCTION CODE	DEDUCTION DESCRIPTION	DEDUCTION AMOUNT	SELECT UNDER 30 HOUR REPORT PAY PERIOD	COMMENT
1	111111	MON	MEDICAL-UHC-ER PORTION	605.27	Period 1/9/21-1/22/21	On 1/27/21 run 30 Hour Report for 1/9-1/22.
		MOH	UNITED HEALTHCARE EPO - UNES - ER	(605.27)	OTD Date 1/14/2021	Original Deduction Date 1/14/21

Example 2

Home > Central Benefits > Under 30 Hour Report

AGENCY PAY PERIODS: 1/23/2021 - 2/5/2021

AGENCY CODE	PREPARED BY		DATE PREPARED	PHONE #	REVIEWED BY		DATE REVIEWED	PHONE #
EIN	NAME				EIN	NAME		
123456	Ben Efit		02/10/21	867-5309	5679	Premi Um	2/10/2021	867-5309

EIN	EMPLOYEE FULL NAME	DEDUCTION CODE	DEDUCTION DESCRIPTION	DEDUCTION AMOUNT	SELECT UNDER 30 HOUR REPORT PAY PERIOD	COMMENT
1	111111	MON	MEDICAL-UHC-ER PORTION	605.27	Period 1/23/21-2/5/21	On 2/10/21 run 30 Hour Report for 1/23-2/5.
		MOH	UNITED HEALTHCARE EPO - UNES - ER	(605.27)	OTD Date 1/28/2021	Original Deduction Date 1/28/21