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Overview

Introduction
The Office of Health Benefits in the Department of Human Resource Management (DHRM) administers the Commonwealth of Virginia Flexible Benefits Program. The program allows employees to contribute to a Medical Reimbursement Account (MRA) and/or a Dependent Care Reimbursement Account (DCRA) through payroll deduction on a pre-tax basis. Complete program details can be found at:


The plan qualifies as a cafeteria plan authorized by Section 125 of the Internal Revenue Code. The Internal Revenue Service establishes the calendar year limits and minimum and maximum contribution amounts.

Use or Lose
As with all cafeteria plan contributions and benefits, participation in the Flexible Benefits Program constitutes a salary reduction agreement. Thus, the contributions are withheld from earnings for transfer into a reimbursement account. Participants estimate their health care and/or dependent care assistance expenses before they are incurred. If participants overestimate their expenses, contributions remaining in the reimbursement account(s) at the end of the year are forfeited.

Who is Eligible
All employees who are eligible to participate in the State Health Benefits Program are eligible to participate in the Flexible Benefits Program. Enrollment in the State Health Benefits Program is not required.

Annual Enrollment
In accordance with guidelines established by DHRM, employees must enroll annually, even if the total contribution for the new plan year remains the same. After the open enrollment period (usually mid-April to mid-May), DHRM provides agencies with a report of each participant’s name, employee id number, the amount to be deducted from each pay, and the annual amounts for each plan.

Continued on next page
Overview, Continued

During Fiscal Year-end processing, DOA runs a Mass Transaction update that deactivates the current deduction information. DOA will then establish the new plan year deduction amounts and administrative fees through the daily automated BES to CIPPS update. No data entry will be required by agency personnel for flexible benefit deductions, unless an employee is listed on the REPORT U130, BES/CIPPS TRANSACTION ERROR LISTING.

Detailed information is provided annually in the Fiscal Year-end Payroll Bulletin.

Administrative Fees

This is an employee-paid, pre-tax fee which is withheld the first pay period of each month using deduction frequency 01. Only one fee is assessed per participant, regardless of whether participating in one or both accounts. See the fee schedule in the BES/CIPPS Update section.

The Flex Reimbursement Accounts Error Report (U075) is created and available for review each pay day. The month-to-date value for the administrative fee (deduction 023) is evaluated based upon the number of pays found on H0BUO. Those employees for whom the MTD amount does not appear to be correct are listed. DHRM receives a copy of this report and uses it to contact agencies regarding the discrepancies.

BES to CIPPS Update

The daily BES to CIPPS update program will automatically establish the flex deductions, 021 – Medical Reimbursement, 022 – Dependent Care Reimbursement and 023 – Flex Administration Fee, on H0ZDC.

Continued on next page
Overview, Continued

Central Benefits Administration

The Office of Health Benefits in DHRM:
- Administers statewide reimbursement account programs,
- Operates the automated Benefits Eligibility System (BES), which serves as the official flexible reimbursement account record of the Commonwealth.
- Performs certain TPA disbursement reconciliation activities.

Agency Benefits Administration

Agency benefits administrators are responsible for processing new enrollments and enrollment changes, validating employee eligibility, and maintaining BES information for agency employees. As changes are made to BES, automated updates are preformed to establish/change/deactivate flexible reimbursement deductions in CIPPS.

Detailed administrative guidelines governing flexible reimbursement accounts and BES are available from DHRM.

Continued on next page
Overview, Continued

Central Payroll Administration

State Payroll Operations in the Department of Accounts:
- Runs CIPPS, in which payroll deductions for reimbursement accounts are processed.
- Performs certain accounting and reconciliation activities supporting the Flexible Benefits program, and
- Provides payroll deduction information to the third party administrator and DHRM.

Agency Payroll and Fiscal Administration

Agency payroll officers are responsible for reviewing the daily BES to CIPPS automated update reports (U131 and U130) to determine if any manual action is required. Wherever possible, corrections should be processed thru the payroll system. Agency payroll officers are also responsible for collecting amounts that could not be deducted thru payroll deduction and depositing those funds to the Treasurer. *In all cases a participant is responsible for contributing a full monthly amount in order to remit expenses for reimbursement for that month.*

Adjudication of Flexible Reimbursement Card Transactions

According to IRS guidelines (Revenue Ruling 2003-43, 2006-69), all employee payment card transactions must be validated. In some cases, the TPA is permitted, under the IRS guidelines, to automatically validate (auto-adjudicate) certain transactions. In the event that the TPA cannot auto-adjudicate Flexible Reimbursement card transactions, supporting documentation is requested from the employee. The IRS requires that unsupported transaction amounts must be reported to the Internal Revenue Service (IRS) as income on the employee’s W-2, and are subject to all applicable employment taxes (including federal and state income tax withholding and FICA).

In these situations DOA loads transactions to adjust taxable buckets for the individuals who have enough current non-taxable amounts sufficient to accommodate the adjustment. For those without sufficient amounts, a W-2C is created by DOA and submitted to the IRS.
Deduction Changes

Mid-Year FRA Deduction Changes

The program must follow all rules and regulations associated with IRS Code Section 125. According to IRS Code, once an employee makes an enrollment election the amount or the benefits cannot be changed during the course of the plan year unless a qualifying event, as defined by the IRS, has occurred.

Changes to payroll deduction amounts are not discretionary. Plan deductions as indicated on pre-tax enrollment forms must be taken unless other deductions take priority (e.g. healthcare, garnishment, and child support) or there are not sufficient funds from which to take a deduction.

Family Status Change

According to IRS regulations governing Section 125 Cafeteria Plans, when an employee experiences a change in family status, a change can be made to their pre-tax salary reduction election form and processed thru BES.

Determination of family status changes must be made by agency Benefits Administration in accordance with DHRM policy and IRS regulations. Questions should be referred to the Office of Health Benefits in DHRM. Qualifying events which may allow a Family Status Change include but are not limited to:

- marriage or divorce
- spouse or dependent’s death
- dependent’s birth or adoption
- spouse begins or ends employment
- spouse or employee change from full-time to part-time employment or vice versa
- spouse or employee take an unpaid leave of absence

The proposed change must be consistent with the type of family status change experienced. The timeframe for notification is within thirty-one (31) days of the qualifying event. After 31 days, DHRM must approve requested changes before they are made in BES.
Deduction Refund Policy

Administrative Errors and Deduction Refund Guidelines

Generally, refunds to employees of deductions for flexible reimbursement accounts are not allowed unless the deduction was withheld due to administrative error. **The Office of Health Benefits in DHRM must approve all refunds before they are processed through payroll.** Once approved, the CIPPS deduction refund process can be used to refund the employee deduction. The refund must be processed along with the employee’s regular payment. Process the refund on HTODA, “Employee Deduction Refund/Adjustment.” Reference CAPP - Cardinal Topic 50600, *Tax and Deduction Overrides*, for instructions.

Tax Consequences of Flexible Reimbursement

State employees enjoy the tax savings of the pre-tax deduction option authorized by section 125 of the Internal Revenue Code. Under IRS rules, the deduction actually constitutes a salary reduction. Consequently, when an employee participating in a reimbursement account receives a refund in a calendar year subsequent to the year the deduction was made, a corrected W-2 (Form W-2C) and a 941-X may be required.

Special Considerations

Special care should be taken when processing pre-tax deduction refunds. The agency may need to collect any appropriate taxes due directly from the employee when Reimbursement Account deduction refunds are processed for employees who are no longer receiving regular pay. Upon receipt of the delinquent taxes, the employee’s masterfile will have to be updated and taxes deposited. Refer to CAPP – Cardinal Topic Nos. 50605, *Tax and Deduction Adjustments*, and 20319, *Electronic Federal Tax Payments System (EFTPS)*, for procedures.
BES/CIPPS Processing Features

**Benefits Eligibility System**
BES is the official flexible reimbursement and healthcare enrollment system of the Commonwealth and the “driver” of flex and health insurance transactions created in CIPPS.

**BES/CIPPS Interface**
Based on BES updates, a nightly interface automatically establishes and maintains the employee’s flex account deduction data on the H0ZDC screen, eliminating, to a degree, duplicate manual data entry in CIPPS. Agencies still receive BES/Agency Transaction Turnaround Documents for all BES updates. Agencies must validate that the proper deductions were set up in CIPPS by the interface. The interface also establishes Health Care deductions. Refer to CAPP – Cardinal Topic No. 50430, *Health Insurance*.

**Timing Considerations**
The timing of transactions entered into BES and CIPPS affects the interface:

- An employee must first be hired in CIPPS, using the Menu/Link functions or individual screen access (H0BNE), to be automatically updated through the interface. Refer to CAPP – Cardinal Topic No. 50305, *New Hires/Rehires*, to establish the employee’s record in CIPPS.
- If no match on agency and employee number is made between BES and CIPPS, the transaction is rejected and listed on Report U130, BES/CIPPS Transaction Error Listing. These rejected transactions will not recycle and must be manually entered in CIPPS, as described later in this topic.

The effective date of the BES transaction dictates when the entry will update CIPPS. Those transactions which do not contain a future effective date will show on the morning of the second day after entry in BES.

*Continued on next page*
BES/CIPPS Processing Features, continued

Valid Transactions

Valid transactions will update CIPPS. These transactions are listed on Report U131, BES/CIPPS Update Listing. This update listing shows old/new values for the flexible reimbursement accounts and administrative fees as well as the two medical insurance CIPPS codes: provider and plan.

Transfers Between Agencies Other Than at the Beginning of the Month

DHRM policy requires that when an employee transfers from their current agency to a new agency after the first day of a month, the entire monthly flexible reimbursement commitment should be collected by the current agency, with the new agency collecting funds for the month following the transfer. Systems limitations prevent the BES/CIPPS interface from operating in this manner. Accordingly, agencies should carefully monitor employee transfer transactions in CIPPS. Employee transfers are reflected on the receiving agency’s U131 with a code of ‘TR’ under the ‘CHG IND’ column.

Particular scrutiny should be applied to transactions with an effective date other than the first of the month. The transaction entered into PMIS by the new agency to transfer an employee's PMIS and BES records immediately initiates the process that results in a flexible reimbursement deduction being established in CIPPS. This typically results in the CIPPS deductions being established prematurely at the receiving agency.

Transactions That Require Direct Data Entry in CIPPS

BES is the initial point of entry for most flexible reimbursement transactions. However, the following transactions require direct entry in CIPPS:

- Transactions rejected during the BES/CIPPS interface process.
- Leave Without Pay (LWOP) – BES does not capture LWOP status

Continued on next page
BES/CIPPS Processing Features, continued

The daily BES to CIPPS update programs will automatically establish the flex accounts 021, 022 and 023 on H0ZDC. The amount established for the Flex Administration Fee deduction is based upon the number of times an employee will be paid during the plan year. The Admin fee deduction amount will calculate based on the Number of Pays on H0BUO.

Note: For new hires, overnight the system defaults ‘number of pays’ based on the pay frequency. For example, Frequency 70 defaults to 24 and Frequency 90 defaults to 12, etc. For new hires with non-routine pay schedules, such as 18 pays, the number of pays must be overridden the day after the employee record is entered on H0BNE.

<table>
<thead>
<tr>
<th>Number of Pays</th>
<th>12/24</th>
<th>11/22</th>
<th>10/20</th>
<th>9/18</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fee Amount (Ded 023) for one or both accounts</td>
<td>3.65</td>
<td>3.99</td>
<td>4.38</td>
<td>4.87</td>
</tr>
<tr>
<td>YTD Amount (Goal)</td>
<td>43.80</td>
<td>43.80</td>
<td>43.80</td>
<td>43.80</td>
</tr>
</tbody>
</table>

- Goal—Will be set at 43.80. Note: This will be true for new participants added after open enrollment as well. For these individuals, the goal amount will need to be recalculated based on the number of remaining months in the plan year and the Goal overridden on H0ZDC.
- Utility field - Will be set at ‘000000010000000000’. A value of “1” in the eighth position will cause the goal amount to decrement.
- FR—Frequency will be set to 01. This will allow the Admin fees to be withheld the first pay period of each month only.
- End Date—The deduction end date will be set to 06/30/XXXX where XXXX represents the calendar year of the end of the plan.

Continued on next page
BES/CIPPS Processing Features, Continued

CIPPS Deduction Numbers

CIPPS deduction numbers and names assigned to the reimbursement accounts follow:

<table>
<thead>
<tr>
<th>CIPPS Deduction #</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>021</td>
<td>Dependent Care</td>
</tr>
<tr>
<td>022</td>
<td>Medical Reimbursement</td>
</tr>
<tr>
<td>023</td>
<td>Flex Administrative Fee</td>
</tr>
</tbody>
</table>

H0ZDC

While deduction activity for Flexible Reimbursement Accounts should be largely controlled by the automated BES to CIPPS daily update, there may be times when manual date entry will be required.

BES/CIPPS Processing Features, Continued

**NO**
Enter applicable deduction number; 021 and/or 022, and 023.

**NAME**
These fields are displayed after entering the deduction number.

**AMT/PCT**
For deductions 021 and 022, enter the deduction amount to be withheld (2 decimal places) each pay period. For deduction 023, enter the appropriate amount based on the employees’ number of pays.

<table>
<thead>
<tr>
<th>Number of Pays</th>
<th>12/24</th>
<th>11/22</th>
<th>10/20</th>
<th>9/18</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fee Amount (Ded 023) for one or both accounts</td>
<td>3.65</td>
<td>3.99</td>
<td>4.38</td>
<td>4.87</td>
</tr>
</tbody>
</table>

**GOAL**
For deduction 021 and 022, this field remains zero.

For deduction 023 enter $43.80. Note: The automated update will set this value; however, for new participants after open enrollment the Goal amount will need to be recalculated based on the number of remaining months in the plan year and overridden.

**UTILITY**
No data entry is required. The field is automatically populated when the enter key is pressed with the appropriate setup for deduction 023 with a value of “1” in the eighth position which will cause the goal amount to decrement. The final result should be ‘00000001000000000’.

**CALC GN**
Systematically populated.
BES/CIPPS Processing Features, Continued

**FR**

Enter the deduction frequency:

<table>
<thead>
<tr>
<th>For Deduction Number…</th>
<th>Enter</th>
<th>Indicating the deduction will be taken…</th>
</tr>
</thead>
<tbody>
<tr>
<td>021 or 022</td>
<td>09</td>
<td>Each payday</td>
</tr>
<tr>
<td>023</td>
<td>01</td>
<td>the first pay period of each month only</td>
</tr>
</tbody>
</table>

**PRTY**

Do not enter information.

**START DATE (OPTIONAL)**

Do not enter information.

**END DATE (OPTIONAL)**

For 021, 022 and 023, enter the deduction end date as 06/30/XXXX where XXXX represents the calendar year of the end of the plan.

**DED MTD**

Do not enter. Automatically updates each time the deduction is taken.

**DED YTD**

Do not enter.
Leave Without Pay (LWOP)

Employee Payment

Employees on leaves of absence during any plan year must continue contributing to their reimbursement account(s) by paying the contributions and administrative fees on an after-tax basis. Agencies must deposit the funds to the reimbursement accounts. This can be done in one of two ways.

- Depositing the funds directly to the reimbursement accounts using a Deposit Ticket (DT).
- When the employee’s check has been deposited to an agency’s cash account, the funds can be transferred by processing a payment in the Accounts Payable Module (AP) by the paying agency and receipt is recorded in the Accounts Receivable Module (AR) by the recipient agency.

Notify DOA of the DT or Inter-Agency Transaction by either:

FAX # (804) 225-3499 or Mail a copy to:

Department of Accounts
Benefits Accounting Unit- Flex
P. O. Box 1971
Richmond VA 23218-1971

Deposit Ticket (DT) Method

Process a deposit in Cardinal to reflect the payment for admin fees, dependent care and medical reimbursement funds into the Flexible Reimbursement Account, using the following coding (Cardinal bank code is 1200):

<table>
<thead>
<tr>
<th>Account Name</th>
<th>GL Unit</th>
<th>Fund</th>
<th>Account</th>
<th>Dept</th>
<th>PC BU</th>
<th>Project</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dep Care</td>
<td>16200</td>
<td>07210</td>
<td>4009010</td>
<td>97200</td>
<td>16200</td>
<td>ATP62016*</td>
</tr>
<tr>
<td>Med Reim</td>
<td>16200</td>
<td>07220</td>
<td>4009017</td>
<td>97200</td>
<td>16200</td>
<td>ATP62016*</td>
</tr>
<tr>
<td>Admin Fees</td>
<td>16200</td>
<td>07231</td>
<td>4002700</td>
<td>97200</td>
<td>16200</td>
<td>ATP62016*</td>
</tr>
</tbody>
</table>

*NOTE: Project number used relates to Plan Year; i.e., 62016 = Plan Year July 1, 2015 - June 30, 2016

Continued on next page
Leave Without Pay (LWOP), Continued

Inter-agency Transfer (ATA Method I)
If the employee’s check has been deposited to the agency’s cash account, the funds can be transferred by processing a payment in the Accounts Payable Module (AP) by the paying agency and receipt is recorded in the Accounts Receivable Module (AR) by the recipient agency. The Cardinal Vendor ID for the Flex Account is 0000050488 (Commonwealth of Virginia), Location EDI-10 (DHRM-PYRL-FLEXIBLE REIMB). When these types of transactions occur, processing steps are similar to standard AP vouchers or AR deposits (see CAPP - Cardinal Topic No. 20310, Expenditures and Topic No. 20205, Deposits). See CAPP – Cardinal Topic No. 20405, Inter-Agency Transactions for further guidance.

Internal Control

Agencies must ensure there is proper documentation (e.g. BES turnaround document) prior to initiating any change to an employee’s reimbursement account, that all deductions are collected appropriately and that maximum deferral amounts are not exceeded.

Records Retention

Retain all source documents three years or until audited, whichever is later.

Contacts

DOA Contacts
Director, State Payroll Operations
Voice: (804) 225-2245
E-mail: Payroll@virginia.gov

Payroll Support Analyst/Trainer
Voice: (804) 786-1083
E-mail: Payroll@doa.virginia.gov
Subject Cross References

References


CARS to Cardinal Transition

Cardinal Transition

CIPPS interfaces to both CARS and Cardinal. No additional action needs to be taken by agencies in order to record CIPPS entries. After CARS has been decommissioned, agencies will no longer use NSSA to establish programmatic data in CIPPS. Instructions on how to load this information to CIPPS will be distributed at a later time.