***Department of Accounts***

***Payroll Bulletin***

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| **Calendar Year 2019** | **May 17, 2019 (revised 6/12)** | **Volume 2019-05** |

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| *In This Issue of the Payroll Bulletin…....* | * **Payroll Processing – FYE 2019**
* **Change in Cert Deadline for July 5 Bi-Weekly Pay Date**
* **Benefit/Deduction Rates**
* **FY 20 Healthcare Rate Tables**
* **Payroll Operations Calendar – June – November 2019**
 | The Payroll Bulletin is published periodically to provide CIPPS agencies guidance regarding Commonwealth payroll operations. If you have any questions about the bulletin, please call Cathy McGill at (804) 371-7800 or Email at cathy.mcgill@doa.virginia.govState Payroll Operations**Director Cathy C McGill**Assistant Director Carmelita Holmes |

**PAYROLL PROCESSING - FISCAL YEAR-END**

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| Introduction | This Payroll Bulletin addresses payroll processing for Fiscal Year End 2019, Fiscal Year 2020 benefit rates (including healthcare rate tables) and the June – November 2019 payroll operations calendars for CIPPS processing. Please provide a copy of this bulletin to all appropriate personnel within your agency**.** |

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| Key Payroll Operations Dates forJune 2019 | * **June 10 –** Semi-monthly salary certification deadline for **PPE 6/9**.
* **June 13** - Leave keying deadline for PPE 6/9.
* **June 14** - Healthcare reconciliations and related ATAs due to DOA for the May coverage month.
* **June 18** – Bi-weekly wage certification deadline for check date 06/21. This is the last wage payroll charged to FY 19.
* **June 20 –** Last day to certify special payrolls charged to **FY 19**. **You must use a June check date, no July check dates will be allowed.**
* **June 21** – First day to certify semi-monthly salary for PPE 6/24, Payday **July 1**. **All payrolls certified on or after June 21 will be charged to FY 20 and must have July check dates.**
* **June 25 -** Semi-monthly salary certification deadline for **PPE 6/24**. **Will be charged to FY 20.**
* **June 28 –** Leave keying deadline. **CIPPS files close at noon** for fiscal year end processing.
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| Payroll Expenditures | **Salaried payroll expenditures for the June 10 - 24 pay period (July 1, 2019, payday) will be charged to FY 2020 without exception.** Cardinal postings for this payday will be controlled by DOA. To execute this requirement all payrolls certified on June 21, 2019, or later will be charged to FY 2020.**Non-salaried and special pays certified between June 11 and June 20 will be charged to FY 2019. These payruns are for non-salaried (e.g., hourly) and special payrolls only.** *Salaried payroll certifications for the period ending June 24th will not be permitted during this period.*  |

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**PAYROLL PROCESSING - FISCAL YEAR-END,** continued

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| Default Coding | Even though CARS was decommissioned effective July 1, 2016, the programmatic coding used on HMBU1 still follows the CARS format. Speedtypes are used to translate the expenditure coding to the appropriate coding in Cardinal. If you have changes to the default coding for FY 2020, please submit the GLI Default Coding form found under Miscellaneous Forms on the Payroll Forms webpage. A separate form is available for changes to default coding used in retirement and health care automated recons. These transactions are formatted according to Cardinal values. Please ensure that the account has been properly established in Cardinal before submitting your change. |

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| CIPPS Security | Individuals authorized to certify payroll expenditures are no longer identified on the Authorized Signatories Form (DA-04-121); instead, please submit a CIPPS Security form signed by the appropriate security officer (listed on the Authorized Signatories Form) if adding or deleting users. Also keep in mind that updates to Payline/PAT Masking access may also be necessary as assignments change. |

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| Change in Cert Date for July 5 Wage Payroll | Please note that the deadline for certification of the bi-weekly wage payroll for July 5 pay date has been changed to Monday, July 1, to accommodate the additional holiday. |

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| Optional Retirement Rates | The rates for ORPs will not change for FY 20. The employer-contribution rates will be 10.4% and 8.5% for existing “Plan 1” and “Plan 2” participants, respectively. Plan 2 participants continue to contribute 5% from pay. The maximum annual compensation for retirement contributions for the plan year that begins July 1, 2019, (checks dated 7/16/2019 – 7/01/2020) is $280,000 for participants with membership dates on or after April 9, 1996. The maximum is $415,000 for employees who became plan members with any VRS-covered employer before April 9, 1996. Please provide DOA with a list of employees whose annual salary exceeds the maximums no later than July 6 so proper goals can be established. Also, contact DOA if new employees with salaries that exceed the maximum are added during the year. |

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**PAYROLL PROCESSING - FISCAL YEAR-END,** continued

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| VRS Retirement Rates | Contribution rates for VRS-administered programs are found below. The maximum annual compensation for retirement contributions for the plan year that begins July 1, 2019, (checks dated 07/16/2019 – 07/01/2020) is $280,000 for participants with membership dates on or after April 9, 1996. The maximum is $415,000 for **e**mployees who became plan members with any VRS-covered employer before April 9, 1996. Please provide DOA with a list of employees whose annual salary exceeds the maximums no later than July 6 so proper goals can be established. Also, contact DOA if new employees with salaries that exceed the maximum are added during the year.

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| **Retirement - Plan 1** | **116 – 5011110** | **127 - 5011650** | **Amt Reported to VRS** | **Total Charged Agency** |
| State Employees – Elected Officials | 13.52% | 5.00%\* | 18.52% | 18.52% |
| State Employees – All Others | 13.52% | N/A | 18.52% | 13.52% |
| State Police (SPORS) | 24.88% | N/A | 29.88% | 24.88% |
| Judicial | 34.39% | 5.00%\* | 39.39% | 39.39% |
| VaLORS | 21.61% | N/A | 26.61% | 21.61% |
| **Retirement - Plan 2** |  |  |  |   |
| State Employees | 13.52% | N/A | 18.52% | 13.52% |
| State Police (SPORS) | 24.88% | N/A | 29.88% | 24.88% |
| Judicial | 34.39% | N/A | 39.39% | 34.39% |
| VaLORS | 21.61% | N/A | 26.61% | 21.61% |

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| **Hybrid** | **116-****5011110** | **105-5011660** | **106-****5011660** | **Total Charged Agency** |
| State Employees | 10.02% - 12.52% | 1.0% | .5% - 2.5% | 13.52% |
| Judicial | 30.89% - 33.39% | 1.0% | .5% - 2.5% | 34.39% |

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| **Group Life Insurance** | **120 - 5011140** | **Amt Reported to VRS** | **Total Charged Agency** |
| 1.31% | 1.31% | 1.31% |
|  |  |  |  |  |
| **Retiree Health Insurance Credit** | **115 - 5011160** |  |  |
| 1.17% | 1.17% | 1.17% |
|  |  |  |  |  |
| **VSDP** | **136/144 - 5011170** |  |  |
| 0.62% | 0.62% | 0.62% |

\* 5% member-portion continues to be paid for Plan 1 elected officials and Judicial coverage by the employer. All other Plan 1 employees pay the member portion. |

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**PAYROLL PROCESSING - FISCAL YEAR-END,** continued

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| Deferred Comp and Annuity Cash Match | The maximum amount of Supplemental Plan cash match that may be made for eligible s/m employees continues to be $20 per pay period. Based on the number of pay periods, maximum deduction amounts per pay period are as follows:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| No Pays | Max. Match Amt |  | No Pays | Max. Match Amt |
| 9 | $53.34 |  | 18 | $26.67 |
| 10 | $48.00 |  | 20 | $24.00 |
| 11 | $43.64 |  | 22 | $21.82 |
| 12 | $40.00 |  | 24 | $20.00 |

Note: Hybrid employees contributing less than 4% voluntary contribution to the hybrid plan are not eligible for the cash match on either the Supplemental Plan or an annuity. |

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| Change in Flex TPA | Starting July 1, 2019, the administration of the Commonwealth of Virginia’s FlexibleReimbursement Accounts (FRAs) Flexible Spending Accounts (FSAs) will move from Anthem Blue Cross/Blue Shield (Conexis/WageWorks) to Aetna Payflex. |

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| Flexible Benefits for Plan Year 2020 | Mass transactions to deactivate the flexible benefit deductions (Deduction 021, Dependent Care, Deduction 022, Medical Reimbursement and Deduction 023, Administration Fees) and zero the amount and goal fields will be executed by DOA on June 28. **DOA will then establish the new deduction amounts for Plan Year 2020 and administrative fees from data provided through BES**. 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. Please review all transactions for accuracy.  |

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| Flexible Benefit Admin Fee  | The flexible spending account administrative fee (Deduction 023) will decrease to $25.20 per year. This is an employee-paid, pre-tax fee withheld the first pay period of each month. The annual fee of $25.20 is pro-rated based on the employee’s number of pays (see fee schedule below).

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| --- | --- | --- | --- | --- |
| Number of Pays | 12/24 | 11/22 | 10/20 | 9/18 |
| Fee Amount (Ded 023) | $2.10 | $2.29 | $2.52 | $2.80 |
| YTD Amount (Goal) | $25.20 | $25.20 | $25.20 | $25.20 |

The deduction goal will be set with a deduction end date of 06/30/2020. |

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**PAYROLL PROCESSING - FISCAL YEAR-END,** continued

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| Flex Deductions for PY 2019 | Deduction information for Plan Year 2020 (begins July 1, 2019) will go to a **different** vendor so it will be necessary to maintain a **second set** of flex deductions for the medical and dependent care accounts and the associated administrative fees related to Plan Year 2019 (Anthem/WW/Conexis) retroactive activity for the remainder of this calendar year.YTD balances in deductions 021, Dependent Care, 022, Medical Reimbursement and 023, Admin Fees existing as of 6/28/2019 will automatically be transferred to deduction numbers: 055, PY Dependent, 056, PY Medical Reimbursement and 057, PY Admin Fees. **Adjustments or special pays made through the payroll system after June 28 that impact Plan Year 2019 must be made using the new deductions: old plan – new deduction numbers.** |

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| VOID Check Processing – Checks with Flex Deductions and Dated before 7/1/19 | **Due to the conversion of the flex deduction numbers for Plan Year 2019 as of July 1, we will be unable to process any voided paper checks created prior to July 1 in the normal manner for employees with flex deductions for Plan Year 2019.**  If you need to void a check for an employee with flex deductions from a payroll that was certified before July 1, you will need to deposit it to your agency's account and process a transaction on the HTM00 screen to back out all pay and deductions (make sure you use the prior year flex deduction numbers, 055, 056 and/or 057). Any paper checks that do not include flex deductions can be voided normally. Also **all direct deposit's can be voided normally.** If you have any further questions, please contact Carmelita Holmes at (804) 371-7800. |

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| Recycling Transactions | Review Report 14, Deductions Not Taken and the pending transactions on H1K03 **before you certify the 6/25 – 7/9 pay period** to ensure that all transactions that are recycling for the flex deductions 021, 022 and 023 are deleted since these are related to Plan Year 2019. Contact Brian Warner at DHRM-OHB to determine if it is necessary to collect these amounts. If so, do overrides to take the required amount(s) using the prior year deduction(s) for Plan Year 2019: **055**, PY Dependent Care; **056**, PY Medical Reimbursement; and/or **057**, PY Admin Fees. |

**PAYROLL PROCESSING - FISCAL YEAR-END,** continued

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| Healthcare Premium Schedules | On July 1, 2019, the new healthcare premiums specified in DHRM’s *Spotlight* Spring 2019 Open Enrollment Issue will take effect. All codes and rates for CIPPS processing are provided on the following pages. These rates do not include the premium reward. |

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| **Provider** | **Active Provider Code** | **Involuntary Separation Provider Code** | **Project Code****And Task** |
| COVA Care Basic (Includes basic dental) | 42 | 92 | AHI100 10 |
| COVA Care Expanded Dental | 44 | 94 | AHI100 10  |
| COVA Care Out-of-Network  | 43 | 93 | AHI100 10 |
| COVA Care Out-of-Network and Expanded Dental  | 45 | 95 | AHI100 10 |
| COVA Care Out-of-Network and Vision, Hearing and Expanded Dental  | 47 | 97 | AHI100 10 |
| COVA Care Vision, Hearing and Expanded Dental  | 46 | 96 | AHI100 10 |
| COVA HDHP (High Deductible Health Plan) | 50 | 90 | AHI300 10 |
| COVA HDHP ED (High Deductible Health Plan Expanded Dental)  | 105 | 155 | AHI300 10 |
| COVA Health Aware Basic | 101 | 151 | AHI200 10 |
| COVA HealthAware and Expanded Dental | 103 | 153 | AHI200 10  |
| COVA HealthAware, Expanded Dental and Vision  | 102 | 152 | AHI200 10 |
| Kaiser Permanente HMO (Available in Northern Virginia Only) | 06 | 56 | AHI810 40 |
| Optima Health Vantage HMO (Available in Hampton Roads only) | 30 | 80 | 0000115265 |
| TRICARE | 110 | 160 | AHI820 40 |

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|  | Healthcare premium changes will occur July 1, 2019, with the BES to CIPPS automated update. If you have any questions about the schedules, contact Trenika Satterwhile, via e-mail at trenika.satterwhite@doa.virginia.gov or (804) 225-2246. |

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| **COVA Care Basic (BES – ACC0)** |
| **Provider Code: 42/92** |  |  |  |  |  |  |  |
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| **Employee Coverage Code** | **Semi-Monthly** |  | **Monthly** |
|  |  |  |  |  |  |  |  |
|  | **Employee** | **Agency** | **Total** |  | **Employee** | **Agency** | **Total** |
| S - Employee Only | $46.00  | $343.50  | $389.50  |   | $92.00  | $687.00  | $779.00  |
| D - Employee Plus One | $105.50  | $614.50  | $720.00  |   | $211.00  | $1,229.00  | $1,440.00  |
| F - Family | $143.50  | $901.00  | $1,044.50  |   | $287.00  | $1,802.00  | $2,089.00  |
| O - Employee Only - Part Time | $389.50  | $0.00  | $389.50  |   | $779.00  | $0.00  | $779.00  |
| T - Employee Plus One - Part Time | $720.00  | $0.00  | $720.00  |   | $1,440.00  | $0.00  | $1,440.00  |
| M - Family - Part Time | $1,044.50  | $0.00  | $1,044.50  |   | $2,089.00  | $0.00  | $2,089.00  |
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| **COVA Care OON (BES – ACC1)** |
| **Provider Code: 43/93** |  |  |  |  |  |  |  |
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| **Employee Coverage Code** | **Semi-Monthly** |  | **Monthly** |
|  |  |  |  |  |  |  |  |
|  | **Employee** | **Agency** | **Total** |  | **Employee** | **Agency** | **Total** |
| S - Employee Only | $55.00  | $343.50  | $398.50  |   | $110.00  | $687.00  | $797.00  |
| D - Employee Plus One | $122.00  | $614.50  | $736.50  |   | $244.00  | $1,229.00  | $1,473.00  |
| F – Family | $168.00  | $901.00  | $1,069.00  |   | $336.00  | $1,802.00  | $2,138.00  |
| O - Employee Only - Part Time | $398.50  | $0.00  | $398.50  |   | $797.00  | $0.00  | $797.00  |
| T - Employee Plus One - Part Time | $736.50  | $0.00  | $736.50  |   | $1,473.00  | $0.00  | $1,473.00  |
| M - Family - Part Time | $1,069.00  | $0.00  | $1,069.00  |   | $2,138.00  | $0.00  | $2,138.00  |
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| **COVA Care ED** **(BES – ACC2)** |
| **Provider Code: 44/94** |  |  |  |  |  |  |  |
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| **Employee Coverage Code** | **Semi-Monthly** |  | **Monthly** |
|  |  |  |  |  |  |  |  |
|  | **Employee** | **Agency** | **Total** |  | **Employee** | **Agency** | **Total** |
| S - Employee Only | $62.50  | $343.50  | $406.00  |   | $125.00  | $687.00  | $812.00  |
| D - Employee Plus One | $136.00  | $614.50  | $750.50  |   | $272.00  | $1,229.00  | $1,501.00  |
| F – Family | $188.00  | $901.00  | $1,089.00  |   | $376.00  | $1,802.00  | $2,178.00  |
| O - Employee Only - Part Time | $406.00  | $0.00  | $406.00  |   | $812.00  | $0.00  | $812.00  |
| T - Employee Plus One - Part Time | $750.50  | $0.00  | $750.50  |   | $1,501.00  | $0.00  | $1,501.00  |
| M - Family - Part Time | $1,089.00  | $0.00  | $1,089.00  |   | $2,178.00  | $0.00  | $2,178.00  |
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| **COVA Care OON/ED (BES – ACC3)** |
| **Provider Code: 45/95** |  |  |  |  |  |  |  |
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| **Employee Coverage Code** | **Semi-Monthly** |  | **Monthly** |
|  |  |  |  |  |  |  |  |
|  | **Employee** | **Agency** | **Total** |  | **Employee** | **Agency** | **Total** |
| S - Employee Only | $71.50  | $343.50  | $415.00  |   | $143.00  | $687.00  | $830.00  |
| D - Employee Plus One | $152.50  | $614.50  | $767.00  |   | $305.00  | $1,229.00  | $1,534.00  |
| F - Family | $212.50  | $901.00  | $1,113.50  |   | $425.00  | $1,802.00  | $2,227.00  |
| O - Employee Only - Part Time | $415.00  | $0.00  | $415.00  |   | $830.00  | $0.00  | $830.00  |
| T - Employee Plus One - Part Time | $767.00  | $0.00  | $767.00  |   | $1,534.00  | $0.00  | $1,534.00  |
| M - Family - Part Time | $1,113.50  | $0.00  | $1,113.50  |   | $2,227.00  | $0.00  | $2,227.00  |
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| **COVA Care V/H/ED (BES – ACC4)** |
| **Provider Code: 46/96** |  |  |  |  |  |  |  |
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| **Employee Coverage Code** | **Semi-Monthly** |  | **Monthly** |
|  |  |  |  |  |  |  |  |
|  | **Employee** | **Agency** | **Total** |  | **Employee** | **Agency** | **Total** |
| S - Employee Only | $72.00  | $343.50  | $415.50  |   | $144.00  | $687.00  | $831.00  |
| D - Employee Plus One | $153.50  | $614.50  | $768.00  |   | $307.00  | $1,229.00  | $1,536.00  |
| F - Family | $213.50  | $901.00  | $1,114.50  |   | $427.00  | $1,802.00  | $2,229.00  |
| O - Employee Only - Part Time | $415.50  | $0.00  | $415.50  |   | $831.00  | $0.00  | $831.00  |
| T - Employee Plus One - Part Time | $768.00  | $0.00  | $768.00  |   | $1,536.00  | $0.00  | $1,536.00  |
| M - Family - Part Time | $1,114.50  | $0.00  | $1,114.50  |   | $2,229.00  | $0.00  | $2,229.00  |
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| **COVA Care FULL (BES – ACC5)** |
| **Provider Code: 47/97** |  |  |  |  |  |  |  |
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| **Employee Coverage Code** | **Semi-Monthly** |  | **Monthly** |
|  |  |  |  |  |  |  |  |
|  | **Employee** | **Agency** | **Total** |  | **Employee** | **Agency** | **Total** |
| S - Employee Only | $81.00  | $343.50  | $424.50  |   | $162.00  | $687.00  | $849.00  |
| D - Employee Plus One | $170.00  | $614.50  | $784.50  |   | $340.00  | $1,229.00  | $1,569.00  |
| F - Family | $238.00  | $901.00  | $1,139.00  |   | $476.00  | $1,802.00  | $2,278.00  |
| O - Employee Only - Part Time | $424.50  | $0.00  | $424.50  |   | $849.00  | $0.00  | $849.00  |
| T - Employee Plus One - Part Time | $784.50  | $0.00  | $784.50  |   | $1,569.00  | $0.00  | $1,569.00  |
| M - Family - Part Time | $1,139.00  | $0.00  | $1,139.00  |   | $2,278.00  | $0.00  | $2,278.00  |
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| **COVA HealthAware Basic (BES – CHA)** |
| **Provider Code: 101/151** |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Employee Coverage Code** | **Semi-Monthly** |  | **Monthly** |
|  |  |  |  |  |  |  |  |
|  | **Employee** | **Agency** | **Total** |  | **Employee** | **Agency** | **Total** |
| S - Employee Only | $8.50  | $338.50  | $347.00  |   | $17.00  | $677.00  | $694.00  |
| D - Employee Plus One | $29.00  | $614.50  | $643.50  |   | $58.00  | $1,229.00  | $1,287.00  |
| F - Family | $29.50  | $901.00  | $930.50  |   | $59.00  | $1,802.00  | $1,861.00  |
| O - Employee Only - Part Time | $347.00  | $0.00  | $347.00  |   | $694.00  | $0.00  | $694.00  |
| T - Employee Plus One - Part Time | $643.50  | $0.00  | $643.50  |   | $1,287.00  | $0.00  | $1,287.00  |
| M - Family - Part Time | $930.50  | $0.00  | $930.50  |   | $1,861.00  | $0.00  | $1,861.00  |
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| **COVA HealthAware + ED & Vision (BES – CHA1)** |
| **Provider Code: 102/152** |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Employee Coverage Code** | **Semi-Monthly** |  | **Monthly** |
|  |  |  |  |  |  |  |  |
|  | **Employee** | **Agency** | **Total** |  | **Employee** | **Agency** | **Total** |
| S - Employee Only | $29.50  | $338.50  | $368.00  |   | $59.00  | $677.00  | $736.00  |
| D - Employee Plus One | $68.00  | $614.50  | $682.50  |   | $136.00  | $1,229.00  | $1,365.00  |
| F – Family | $86.00  | $901.00  | $987.00  |   | $172.00  | $1,802.00  | $1,974.00  |
| O - Employee Only - Part Time | $368.00  | $0.00  | $368.00  |   | $736.00  | $0.00  | $736.00  |
| T - Employee Plus One - Part Time | $682.50  | $0.00  | $682.50  |   | $1,365.00  | $0.00  | $1,365.00  |
| M - Family - Part Time | $987.00  | $0.00  | $987.00  |   | $1,974.00  | $0.00  | $1,974.00  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **COVA HealthAware + ED (BES – CHA2)** |
| **Provider Code: 103/153** |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Employee Coverage Code** | **Semi-Monthly** |  | **Monthly** |
|  |  |  |  |  |  |  |  |
|  | **Employee** | **Agency** | **Total** |  | **Employee** | **Agency** | **Total** |
| S - Employee Only | $24.00  | $338.50  | $362.50  |   | $48.00  | $677.00  | $725.00  |
| D - Employee Plus One | $57.50  | $614.50  | $672.00  |   | $115.00  | $1,229.00  | $1,344.00  |
| F – Family | $71.50  | $901.00  | $972.50  |   | $143.00  | $1,802.00  | $1,945.00  |
| O - Employee Only - Part Time | $362.50  | $0.00  | $362.50  |   | $725.00  | $0.00  | $725.00  |
| T - Employee Plus One - Part Time | $672.00  | $0.00  | $672.00  |   | $1,344.00  | $0.00  | $1,344.00  |
| M - Family - Part Time | $972.50  | $0.00  | $972.50  |   | $1,945.00  | $0.00  | $1,945.00  |
|  |  |  |  |  |  |  |  |

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| **COVA HIGH DEDUCTIBLE HEALTH PLAN (BES – CHD)** |
| **Provider Code: 50/90** |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Employee Coverage Code** | **Semi-Monthly** |  | **Monthly** |
|  |  |  |  |  |  |  |  |
|  | **Employee** | **Agency** | **Total** |  | **Employee** | **Agency** | **Total** |
| S - Employee Only | $0.00  | $292.00  | $292.00  |   | $0.00  | $584.00  | $584.00  |
| D - Employee Plus One | $0.00  | $543.00  | $543.00  |   | $0.00  | $1,086.00  | $1,086.00  |
| F - Family | $0.00  | $793.50  | $793.50  |   | $0.00  | $1,587.00  | $1,587.00  |
| O - Employee Only - Part Time | $292.00  | $0.00  | $292.00  |   | $584.00  | $0.00  | $584.00  |
| T - Employee Plus One - Part Time | $543.00  | $0.00  | $543.00  |   | $1,086.00  | $0.00  | $1,086.00  |
| M - Family - Part Time | $793.50  | $0.00  | $793.50  |   | $1,587.00  | $0.00  | $1,587.00  |
|  |  |  |  |  |  |  |  |
| **COVA HIGH DEDUCTIBLE HEALTH PLAN ED (BES – CHD1)** |
| **Provider Code: 105/155** |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Employee Coverage Code** | **Semi-Monthly** |  | **Monthly** |
|  |  |  |  |  |  |  |  |
|  | **Employee** | **Agency** | **Total** |  | **Employee** | **Agency** | **Total** |
| S - Employee Only | $16.00  | $292.00  | $308.00  |   | $32.00  | $584.00  | $616.00  |
| D - Employee Plus One | $29.50  | $543.00  | $572.50  |   | $59.00  | $1,086.00  | $1,145.00  |
| F - Family | $43.00  | $793.50  | $836.50  |   | $86.00  | $1,587.00  | $1,673.00  |
| O - Employee Only - Part Time | $308.00  | $0.00  | $308.00  |   | $616.00  | $0.00  | $616.00  |
| T - Employee Plus One - Part Time | $572.50  | $0.00  | $572.50  |   | $1,145.00  | $0.00  | $1,145.00  |
| M - Family - Part Time | $836.50  | $0.00  | $836.50  |   | $1,673.00  | $0.00  | $1,673.00  |
|  |  |  |  |  |  |  |  |
| **KAISER PERMANENTE HMO (BES – KP)** |
| **Provider Code: 06/56** |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Employee Coverage Code** | **Semi-Monthly** |  | **Monthly** |
|  |  |  |  |  |  |  |  |
|  | **Employee** | **Agency** | **Total** |  | **Employee** | **Agency** | **Total** |
| S - Employee Only | $37.50  | $292.00  | $329.50  |   | $75.00  | $584.00  | $659.00  |
| D - Employee Plus One | $88.50  | $517.50  | $606.00  |   | $177.00  | $1,035.00  | $1,212.00  |
| F - Family | $126.50  | $756.50  | $883.00  |   | $253.00  | $1,513.00  | $1,766.00  |
| O - Employee Only - Part Time | $329.50  | $0.00  | $329.50  |   | $659.00  | $0.00  | $659.00  |
| T - Employee Plus One - Part Time | $606.00  | $0.00  | $606.00  |   | $1,212.00  | $0.00  | $1,212.00  |
| M - Family - Part Time | $883.00  | $0.00  | $883.00  |   | $1,766.00  | $0.00  | $1,766.00  |
|  |  |  |  |  |  |  |  |

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| --- |
| **OPTIMA HEALTH VANTAGE (BES - OH130 )** |
| **Provider Code: 30/80** |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Employee Coverage Code** | **Semi-Monthly** |  | **Monthly** |
|  |  |  |  |  |  |  |  |
|  | **Employee** | **Agency** | **Total** |  | **Employee** | **Agency** | **Total** |
| S - Employee Only | $37.50  | $342.50  | $380.00  |   | $75.00  | $685.00  | $760.00  |
| D - Employee Plus One | $88.50  | $615.00  | $703.50  |   | $177.00  | $1,230.00  | $1,407.00  |
| F - Family | $126.50  | $892.50  | $1,019.00  |   | $253.00  | $1,785.00  | $2,038.00  |
| O - Employee Only - Part Time | $380.00  | $0.00  | $380.00  |   | $760.00  | $0.00  | $760.00  |
| T - Employee Plus One - Part Time | $703.50  | $0.00  | $703.50  |   | $1,407.00  | $0.00  | $1,407.00  |
| M - Family - Part Time | $1,019.00  | $0.00  | $1,019.00  |   | $2,038.00  | $0.00  | $2,038.00  |
|  |  |  |  |  |  |  |  |
| **TRICARE (BES – TRC)** |
| **Provider Code: 110/160** |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Employee Coverage Code** | **Semi-Monthly** |  | **Monthly** |
|  |  |  |  |  |  |  |  |
|  | **Employee** | **Agency** | **Total** |  | **Employee** | **Agency** | **Total** |
| S - Employee Only | $30.50  | $0.00  | $30.50  |   | $61.00  | $0.00  | $61.00  |
| D - Employee Plus One | $60.00  | $0.00  | $60.00  |   | $120.00  | $0.00  | $120.00  |
| F - Family | $80.50  | $0.00  | $80.50  |   | $161.00  | $0.00  | $161.00  |
| O - Employee Only - Part Time | $30.50  | $0.00  | $30.50  |   | $61.00  | $0.00  | $61.00  |
| T - Employee Plus One - Part Time | $60.00  | $0.00  | $60.00  |   | $120.00  | $0.00  | $120.00  |
| M - Family - Part Time | $80.50  | $0.00  | $80.50  |   | $161.00  | $0.00  | $161.00  |
|  |  |  |  |  |  |  |  |

June 2019

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sunday** | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Saturday** |
|  |  |  |  |  |  | **1** |
| **2** | **3** | **4**Bi-weekly wage certification deadline period #1 (PE: 5/23; 5/25;5/26)VNAV/CIPPS Update | **5**New Hire Center ReportDeferred Comp Transaction UploadTPA Upload | **6** | **7****Payday for bi-weekly wage employees** | **8** |
| **9** | **10**Semimonthly salaried certification deadline period #1-(5/25-6/09)**CHARGE FY 2019** | **11****CHARGE FY 2019** | **12****CHARGE FY 2019** | **13**Leave keying deadline(5/25-6/09)**CHARGE FY 2019** | **14****Payday for****semi-monthly salaried employees****Shared Savings Incentive Upload**Healthcare Cert Due**CHARGE FY 2019** | **15** |
| **16** | **17****CHARGE FY 2019** | **18**Bi-weekly wage certification deadline period #2 (PE: 6/6; 6/8; 6/9)TPA UploadVNAV/CIPPS Update-ORPHE**CHARGE FY** **2019** | **19** New Hire Center Report**CHARGE FY 2019** | **20****Last day to certify off-cycle for** **FY 19 – NO EXCEPTIONS** | **21****Payday for bi-weekly wage employees****Starting this day****CHARGE FY 2020****Must have July Check Date** | **22** |
| **23** | **24****CHARGE FY 2020****Must have July Check Date** | **25**Semimonthly salaried certification deadline period #2-(6/10-6/24)**CHARGE FY 2020****Must have July Check Date** | **26****CHARGE FY 2020****Must have July Check Date** | **27****CHARGE FY 2020****Must have July Check Date** | **28*****CIPPS closes at Noon***Leave keyingdeadline(6/10-6/24)**CHARGE FY 2020****Must have July Check Date** | **29** |
| **30** |  |  |  |  |  |  |

# July 2019

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sunday** | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Saturday** |
|  | **1****Payday for****semi-monthly salaried employees**Bi-weekly wage certification deadline period #1 (PE: 6/20; 6/22; 6/23) | **2**VNAV/CIPPS Update | **3**New Hire Center ReportDeferred Comp Transaction UploadTPA Upload | **4****State Holiday: Independence Day** | **5****State Holiday:****Day After Independence Day****Payday for bi-weekly wage employees** | **6** |
| **7** | **8** | 9 | **10**Semimonthly salaried certificationDeadline Period #1 (6/25-7/09) | **11** | **12****QTR Cert Due** | **13** |
| **14** | **15**Leave keyingDeadline(6/25-7/09) | **16****Payday for****semi-monthly salaried employees** **Shared Savings Incentive Upload**Bi-weekly wage certification deadline period #2 (PE: 7/4; 7/6; 7/7) | **17**New Hire Center ReportVNAV/CIPPS Update-ORPHE | **18** | **19****Payday for bi-weekly wage employees**TPA Upload | **20** |
| **21** | **22** | **23** | **24** | **25** | **26**Semimonthly salaried certification deadlinePeriod #2 (7/10-7/24) | **27** |
| **28** | **29** | **30**Bi-weekly wage certification deadline period #1 (PE: 7/18; 7/20; 7/21) | **31**New Hire Center ReportLeave keyingdeadline(7/10-7/24)Healthcare Cert Due |  |  |  |

**August 2019**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sunday** | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Saturday** |
|  |  |  |  | **1****Payday for****semi-monthly salaried employees** | **2****Payday for bi-weekly wage employees**VNAV/CIPPS Update  | **3** |
| **4** | **5**Deferred Comp Transaction UploadTPA Upload | **6** | **7** | **8** | **9** | **10** |
| **11** | **12**Semimonthly salaried certification deadline Period# 1 (7/25-8/09) | **13**Bi-weekly wage certification deadline period #2 (PE: 8/1; 8/3; 8/4) | **14**New Hire Center Report | **15**Leave keyingdeadline(7/25-8/09) | **16****Payday for****semi-monthly salaried employees****Shared Savings Incentive Upload****Payday for bi-weekly wage employees** | **17** |
| **18** | **19**TPA UploadVNAV/CIPPS Update-ORPHE | **20** | **21** | **22** | **23** | **24** |
| **25** | **26**Semimonthly salaried certification deadline Period #2 (8/10-8/24) | **27**Bi-weekly wage certification deadline period #0 (PE: 8/15; 8/17;8/18) | **28**New Hire Center Report | **29**Leave keyingdeadline(8/10-8/24) | **30****Payday for****semi-monthly salaried employees** **Payday for bi-weekly wage employees**Healthcare Cert Due | **31** |

**September 2019**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sunday** | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Saturday** |
| **1** | **2****State Holiday: Labor Day** | **3** | **4**VNAV/CIPPS Update | **5**Deferred Comp Transaction UploadTPA Upload | **6** | **7** |
| **NATIONAL PAYROLL WEEK** |
| **8** | **9** | **10**Bi-weekly wage certification deadline period #1 (PE: 8/29; 8/31; 9/1)Semimonthly salaried certification deadline Period#1 (8/25-9/9) | **11**New Hire Center Report | **12** | **13****Payday for bi-weekly wage employees**Leave keyingdeadline(8/25-9/09) | **14** |
| **15** | **16****Payday for****semi-monthly salaried employees** **Shared Savings Incentive Upload**TPA Upload | **17**VNAV/CIPPS Update-ORPHE | **18** | **19** | **20** | **21** |
| **22** | **23** | 24Bi-weekly wage certification deadline period #2 (PE: 9/12; 9/14;9/15)Semimonthly salaried certification deadline Period#2 (9/10-9/24) | **25**New Hire Center Report | **26** | **27****Payday for bi-weekly wage employees**Leave keyingdeadline(9/10-9/24)**Military Leave Reset** | **28** |
| **29** | **30****Payday for****semi-monthly salaried employees** Healthcare Cert Due |  |  |  |  |  |

**October 2019**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sunday** | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Saturday** |
|  |  | **1** | **2**VNAV/CIPPS Update | **3**Deferred Comp Transaction UploadTPA Upload | **4** | **5** |
| **6** | **7** | **8**Bi-weekly wage certification deadline period #1 (PE: 9/26; 9/28; 9/29) | **9**Semi-monthly salaried certification deadline Period #1 (9/25-10/09)New Hire Center Report | **10** | **11****Payday for bi-weekly wage employees****QTR Cert Due** | **12** |
| **13** | **14** **State Holiday: Columbus Day** | **15**Leave keyingdeadline(9/25-9/09) | **16****Payday for****semi-monthly salaried employees****Shared Savings Incentive Upload** | **17**VNAV/CIPPS Update-ORPHE | **18** | **19** |
| **20** | **21**TPA Upload | **22**Bi-weekly wage certification deadline period #2 (PE: 10/10; 10/12; 10/13) | **23**New Hire Center Report | **24** | **25****Payday for bi-weekly wage employees** | **26** |
| **27** | **28**Semi-monthly salaried certification deadline Period#2 (10/10-10/24) | **29** | **30** | **31**Leave keyingdeadline(10/10-10/24)Healthcare Cert Due |  |  |

**November 2019**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sunday** | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Saturday** |
|  |  |  |  |  | **1****Payday for****semi-monthly salaried employees**  | **2** |
| **3** | **4**VNAV/CIPPS Update | **5**Bi-weekly wage certification deadline period #1 (PE: 10/24; 10/26; 10/27)Deferred Comp Transaction UploadTPA Upload | **6**New Hire Center Report | **7** | **8****Payday for bi-weekly wage employees** Semimonthly salaried certificationPeriod 1-(10/25-11/09) | **9** |
| **10** | **11****State Holiday: Veterans’ Day** | **12** | **13** | **14**Leave keyingdeadline(10/25-11/09)TPA Upload | **15****Payday for****semi-monthly salaried employees****Shared Savings Incentive Upload**TPA Upload | **16** |
| **17** | **18** | **19**Bi-weekly wage certification deadline period #2 (PE: 11/7; 11/9; 11/10)VNAV/CIPPS Update-ORPHE | **20**New Hire Center Report | **21** | **22****Payday for bi-weekly wage employees**Semimonthly salaried certification deadline Period #2 (11/10-11/24) | **23** |
| **24** | **25** | **26** | **27**Leave keyingdeadline(10/25-11/09)Healthcare Cert Due | **28****State Holiday:** **Thanksgiving Day** | **29****State Holiday:** **Day After Thanksgiving Day****Payday for****semi-monthly salaried employees** | **30** |
| **Half-Day Holiday:****Files close at noon** |