



BN361

Benefit Enrollment and Maintenance

Instructor Led Training



Revision History

Revision Date	Summary of Changes
11/24/2025	Removed QMCSO, updates to Reconciliation and Retirement section information.
5/19/2025	Per OHB, updated the number of days employees have to submit supporting documentation for dependents added to coverage from 60 days to 30 days.
1/8/2025	Updated the ACA Lesson based on 2024 ACA Forum



Welcome to Cardinal Training

This training provides participants with the skills and information necessary to use Cardinal and is not intended to replace existing Commonwealth and/or agency policies.

The following HCM training materials are located on the Cardinal website (www.cardinalproject.virginia.gov) under Learning:

- Job Aids on topics across all functional areas
- Functional process and instructional videos

The Cardinal HCM Reports Catalogs are located on the Cardinal website under Resources.

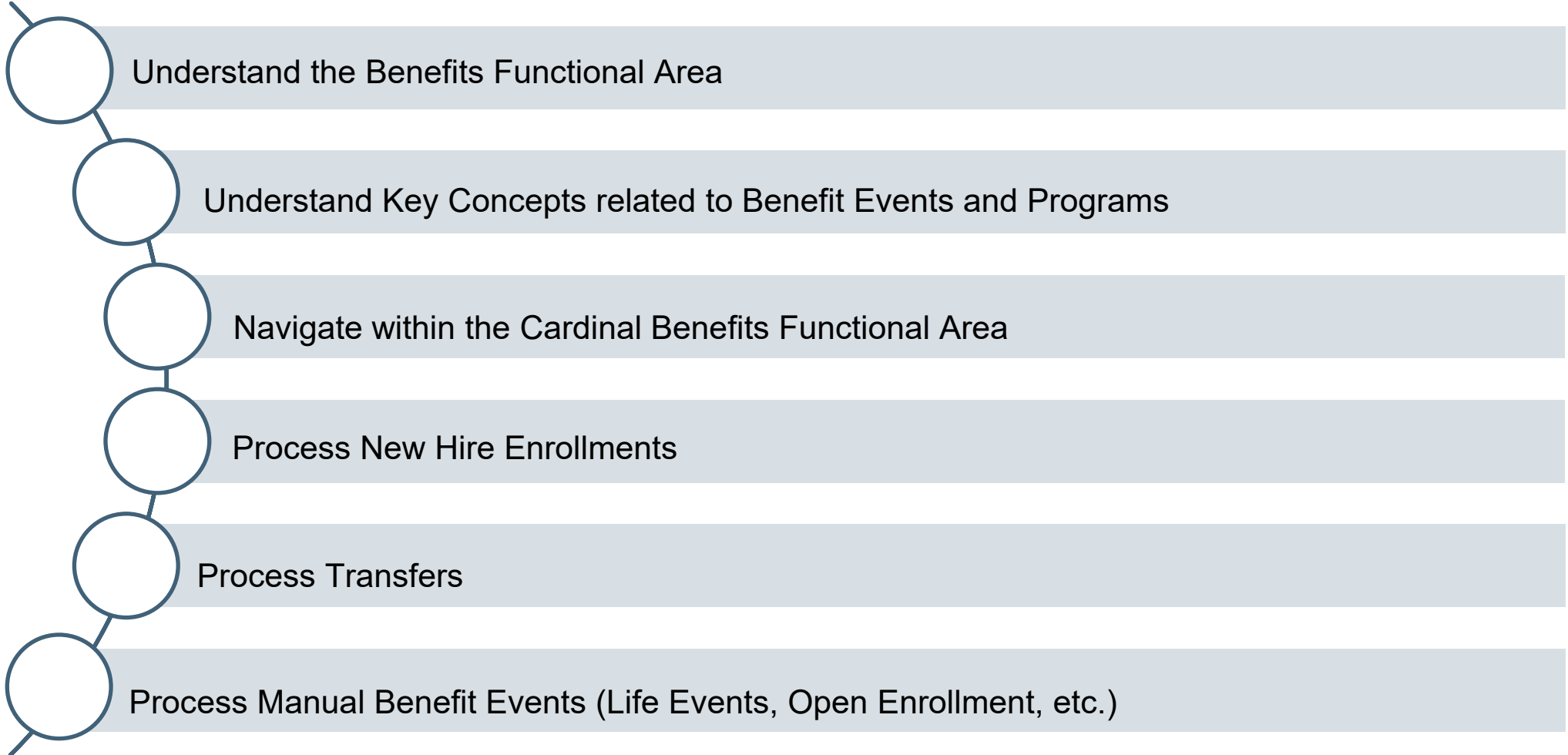
The system screenshots included in the Cardinal HCM training courses show system pages and processes that some users may not have access to due to security roles and/or how specific responsibilities relate to the overall transaction or process being discussed.

- For a list of available roles and descriptions, see the Statewide Security Handbook on the Cardinal website in the Security section under Resources.



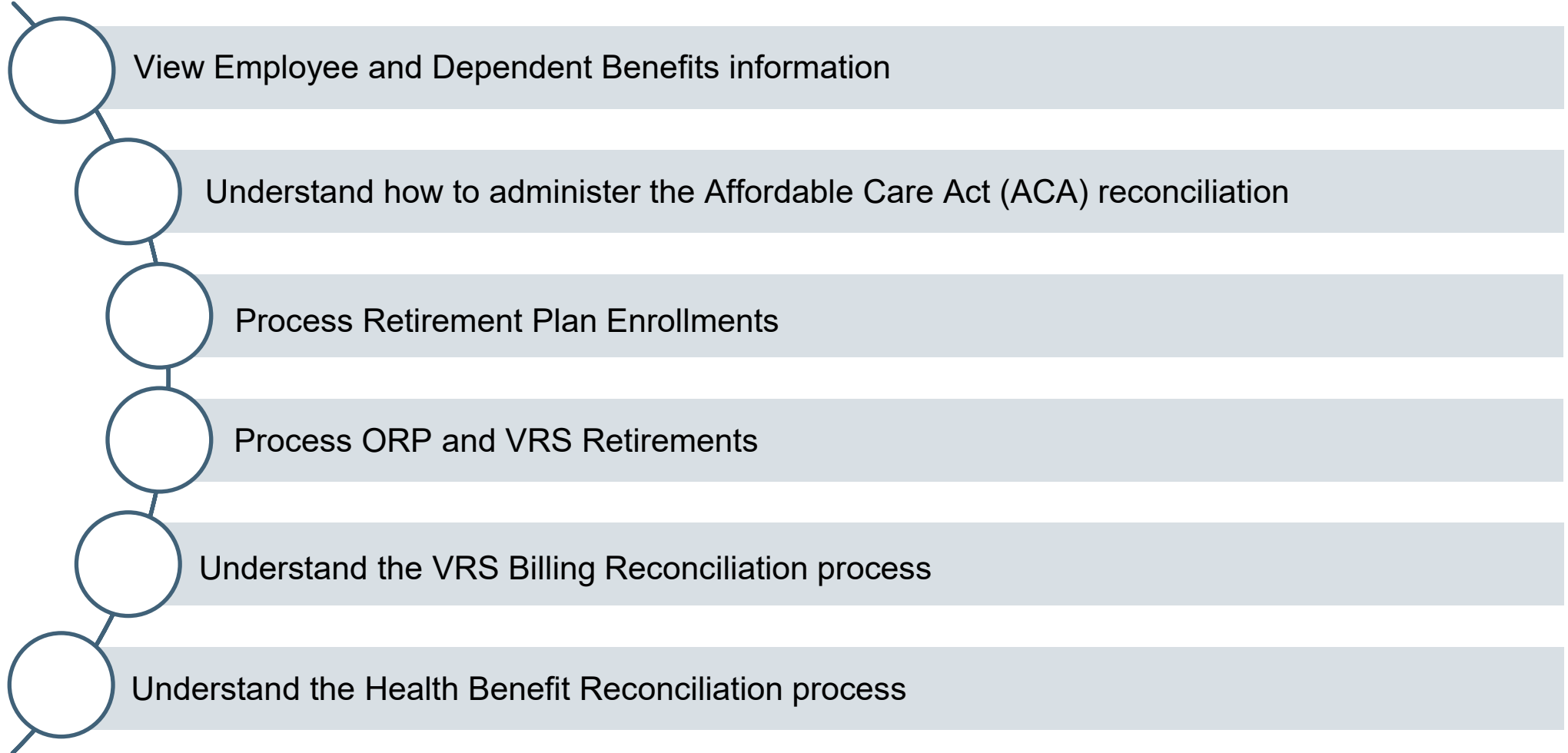
Course Objectives

After completing this course, you will be able to:





Course Objectives (continued)





Agenda

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Benefits Overview

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Benefit Events and Programs

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Benefits Navigation Overview

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Processing New Hire Enrollments

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Processing Manual Benefit Events



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Retirement Plan Enrollments

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Health Benefit & VRS Billing Reconciliations



Lesson

1

Cardinal and Benefits Overview

This lesson covers the following topics:

- Overview of Cardinal
- Cardinal HCM Responsibilities and Relationships
- Overview of the Benefits Functionality



Cardinal Overview

Cardinal provides better access to essential business functions and improved single sign-on technology.

The Cardinal system is comprised of two applications: Human Capital Management (HCM) and Financials (FIN).

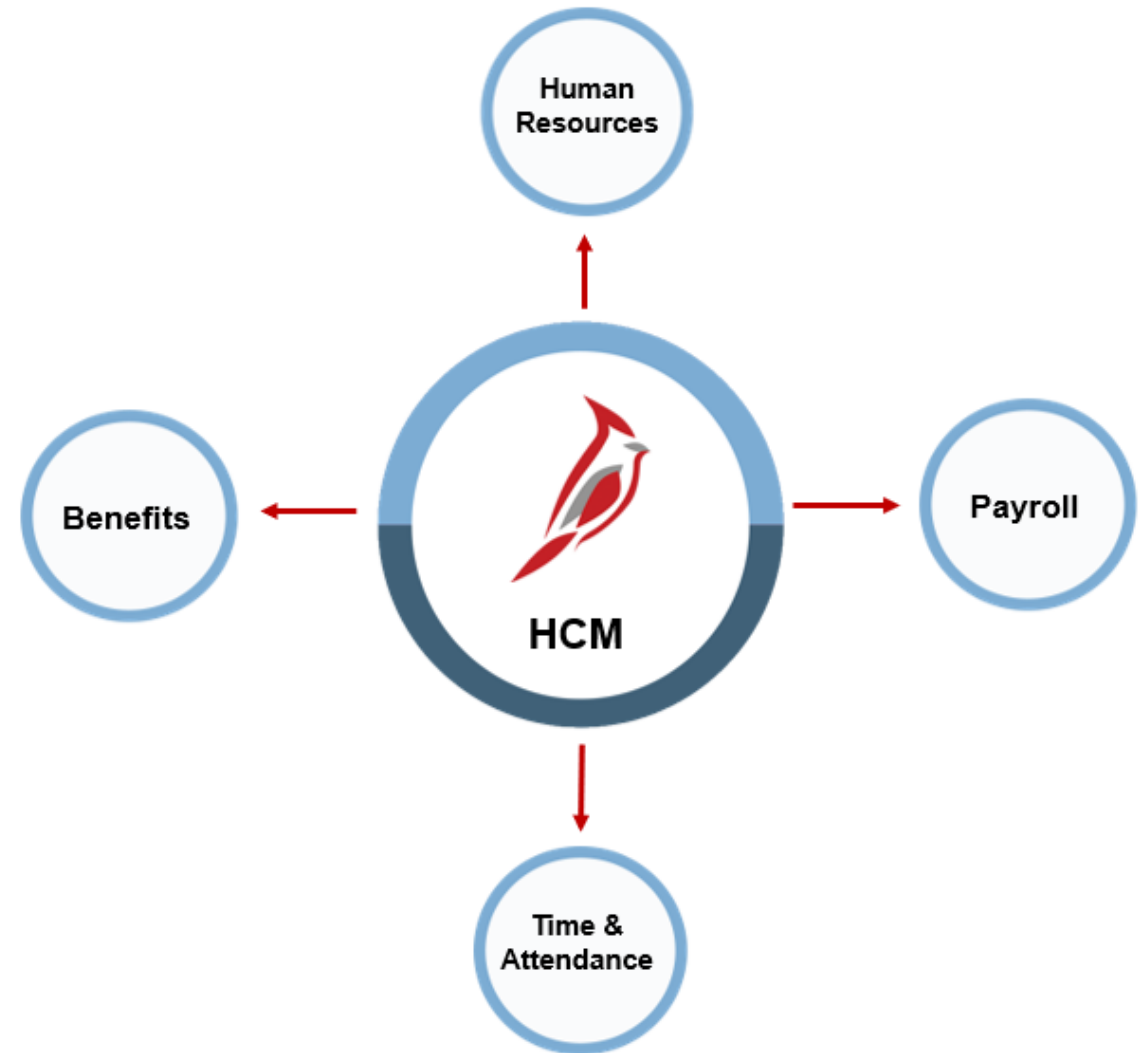




Cardinal Human Capital Management (HCM)

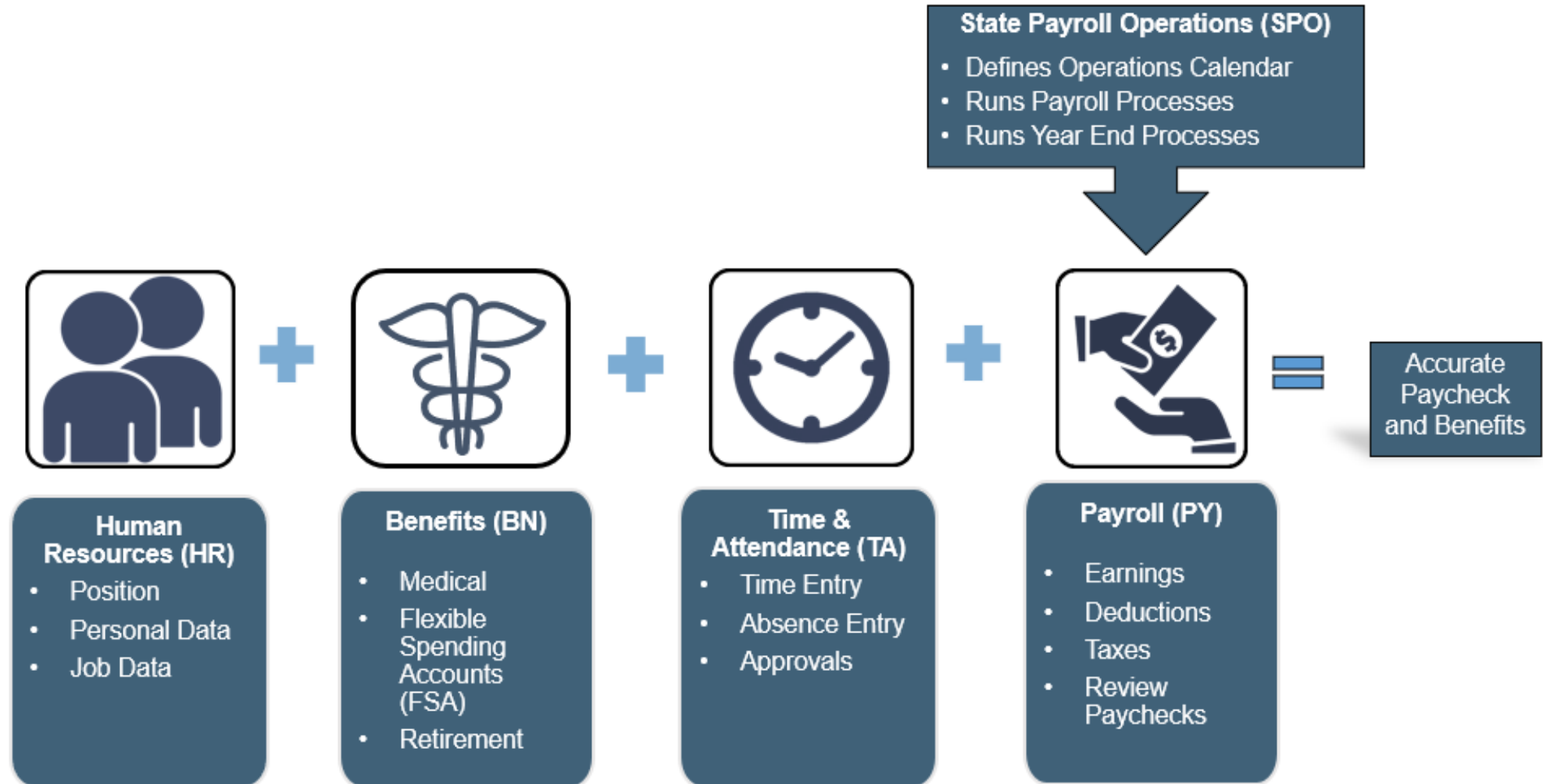
In Cardinal HCM, HR Administrators, BN Administrators, TL Administrators, Payroll Administrators, and State Payroll Operations (SPO) work together so that all employees are paid on time and accurately and are benefited properly.

All these roles and their unique responsibilities flow to one another to ensure that all employee records are accurate and up-to-date.





Cardinal HCM Responsibilities and Relationships





Overview of the Benefits Functionality

The Benefits functional area includes all processes and sub-processes required for maintaining benefits for the organization's employees and their dependents.

The Benefits processes and sub-processes are:

**Administer
Event
Maintenance**

**Administer
COBRA**

**Health
Benefits
Reconciliation**

**ACA
Reporting**

**Administer
Open
Enrollment**

Maintain Enrollments for:

- Benefit Events
- Life Event
- QMCSO
- Retirement
- Deferred Compensation
- Annuity

- Health
Reconciliation
- VRS Billing
Reconciliation



Lesson Summary

1

Cardinal and Benefits Overview

In this lesson, you learned:

- An Overview of Cardinal
- About the Cardinal HCM Responsibilities and Relationships
- An Overview of the Benefits Functionality



Lesson

2

Benefit Events and Programs

This lesson covers the following topics:

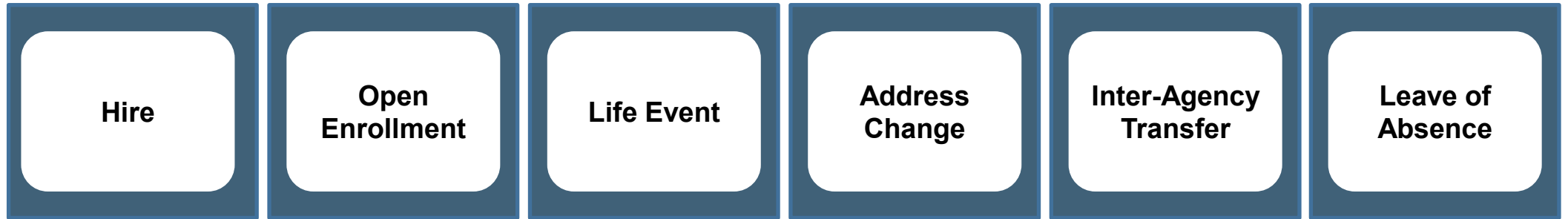
- Benefit Events
- Benefit Event Triggers
- Benefit Admin Process
- Lifecycle of a Benefit Event



Benefit Events

Benefit Events evaluate or reevaluate an employee's benefit eligibility and provide the employee with the opportunity to update their enrollment as needed.

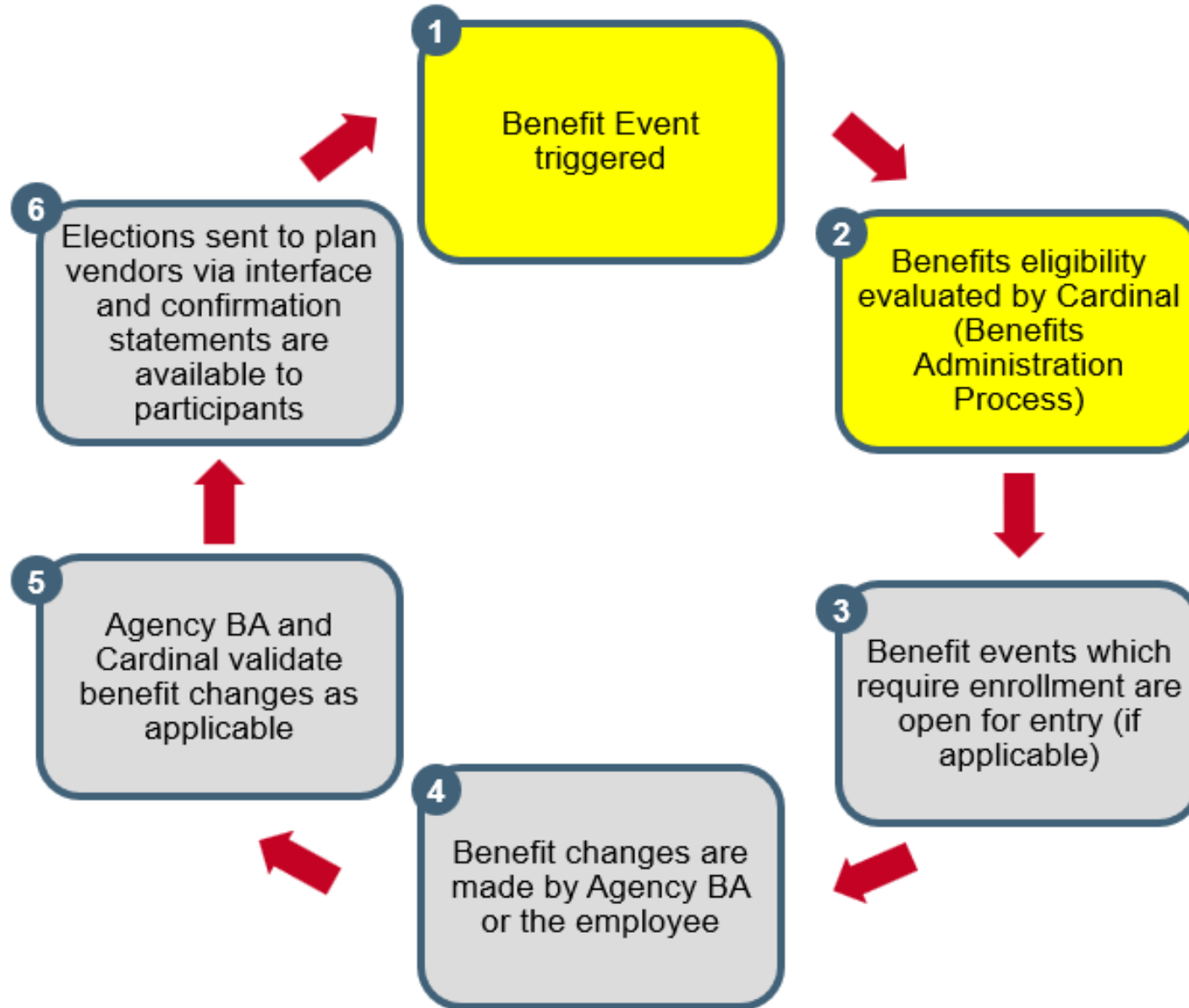
All benefit enrollments or changes are made through a Benefit Event. The types of Benefit Events include:



Only one Benefit Event can be in an “Open for Processing” status at any time. It is extremely important that open events are monitored and processed as soon as possible.



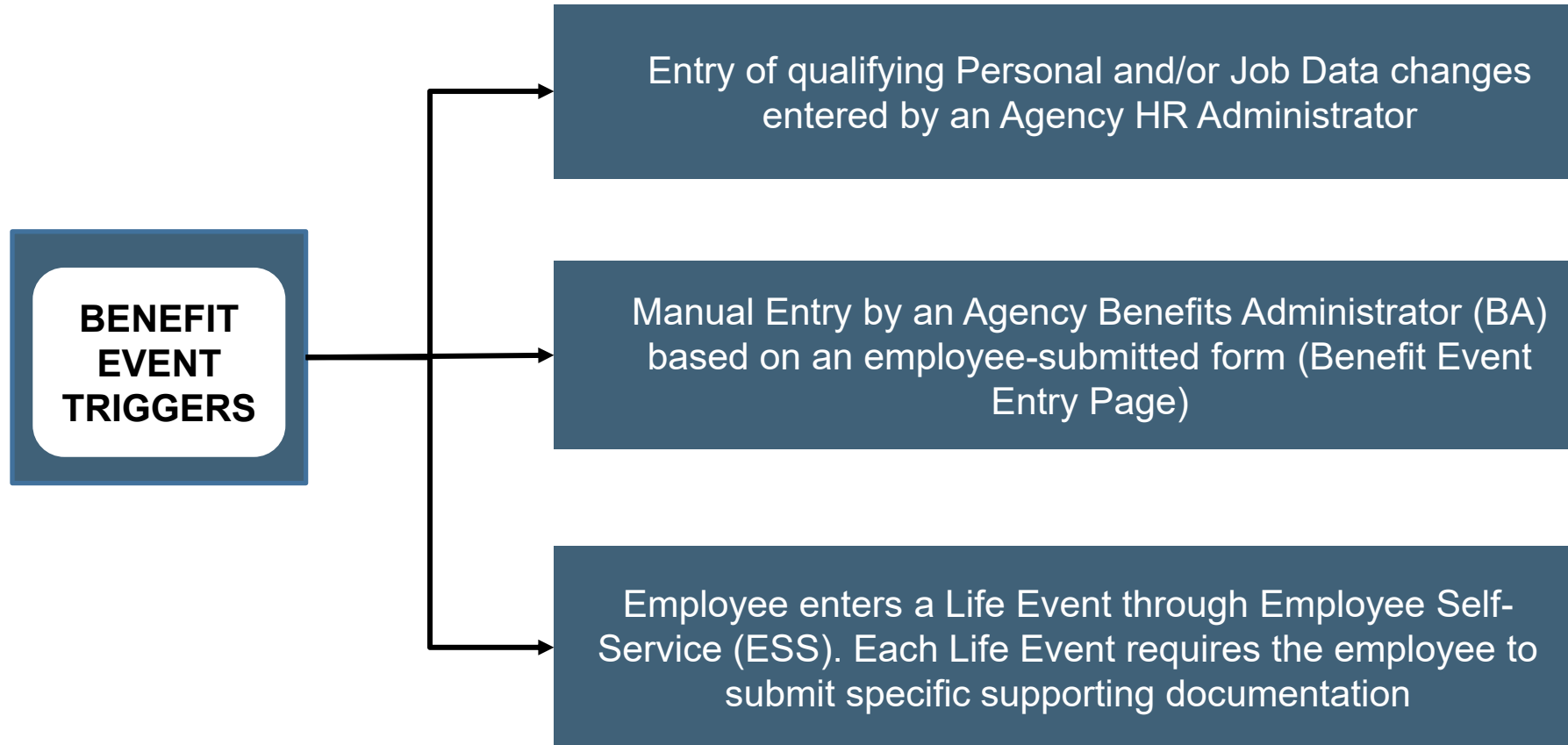
Lifecycle of a Benefit Event





Benefit Events Triggers

Benefit Events can be triggered in three different ways:





Eligibility Determination (Benefits Administration Process)

Most Job Data changes will trigger a Benefit Event. All Benefit Events are evaluated by the Benefit Administration process. However, many are immediately closed because no benefits eligibility change exists (e.g., supervisor change).

Changes that would make the employee eligible to update their benefits include the following:

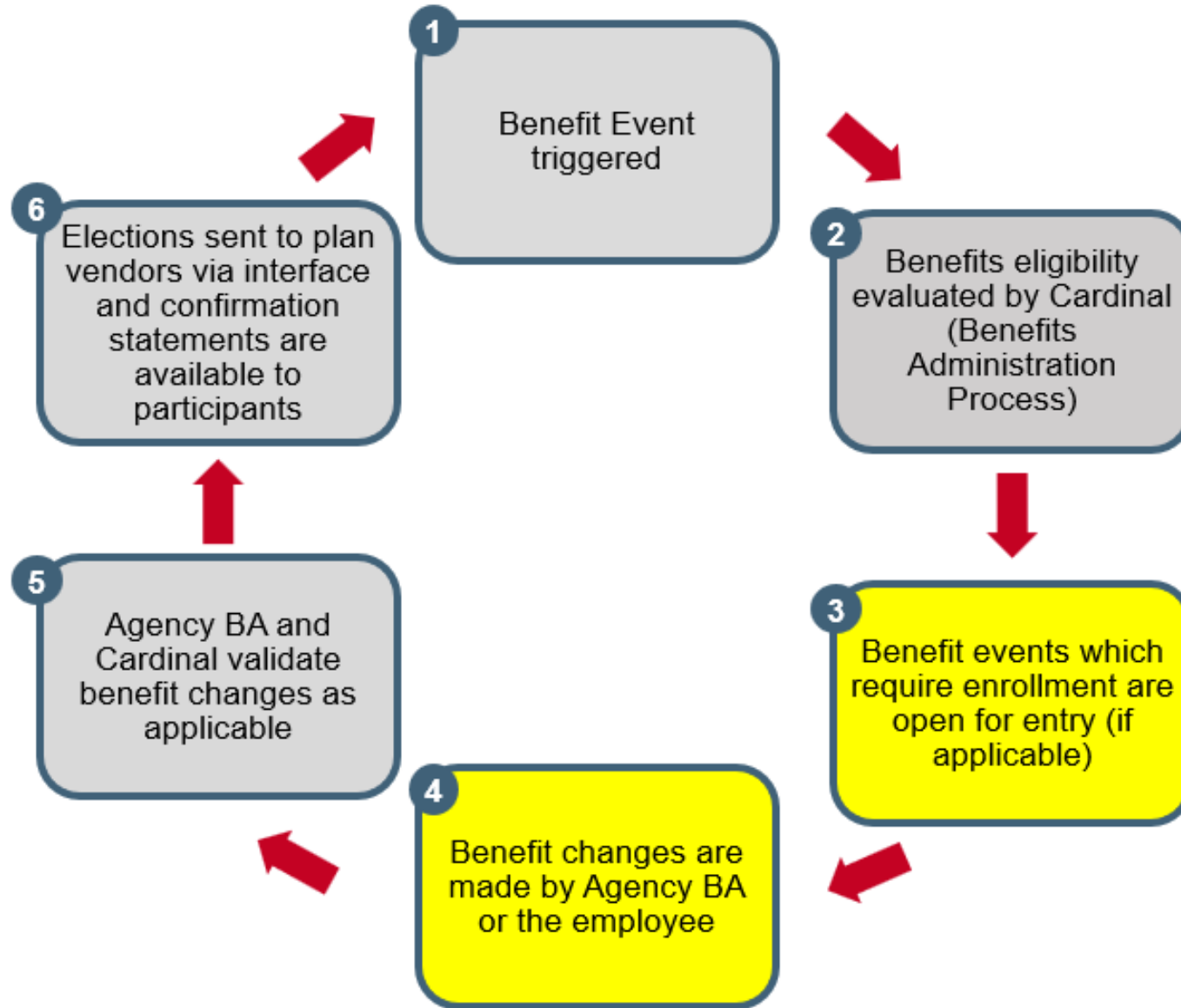
JOB DATA
• Action / Reason • Employee Class • Part / Full / Quasi Status • Pay Frequency • Work Location • Eligibility Configuration Fields

PERSONAL DATA
• Date of Birth • Gender • Marital Status • Address (Zip Code)

Note: The Benefits Administration Process runs for all employees several times after hours. It can also be run manually by BN Administrators for individual employees as needed.

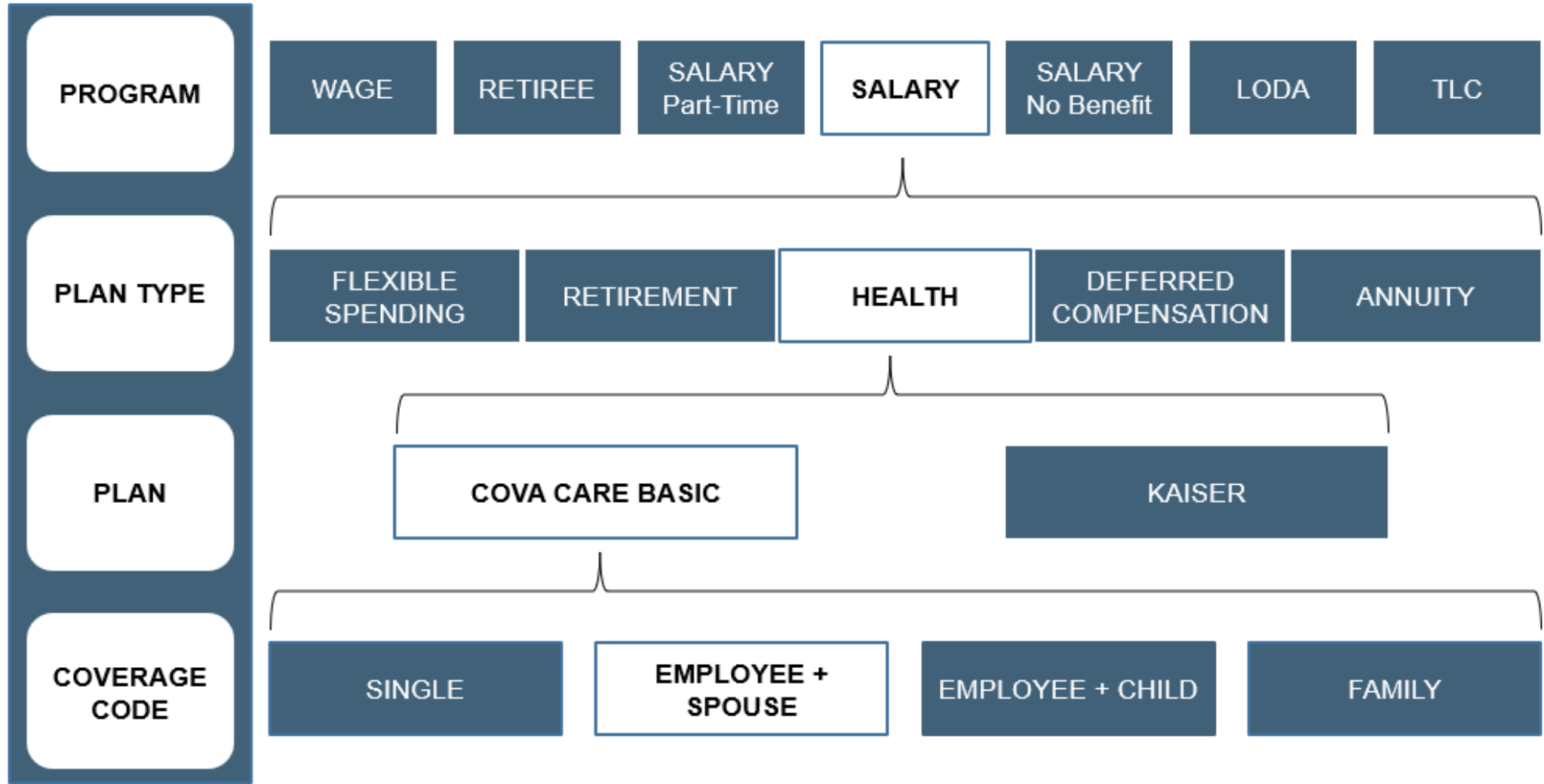


Lifecycle of a Benefit Event (continued.)





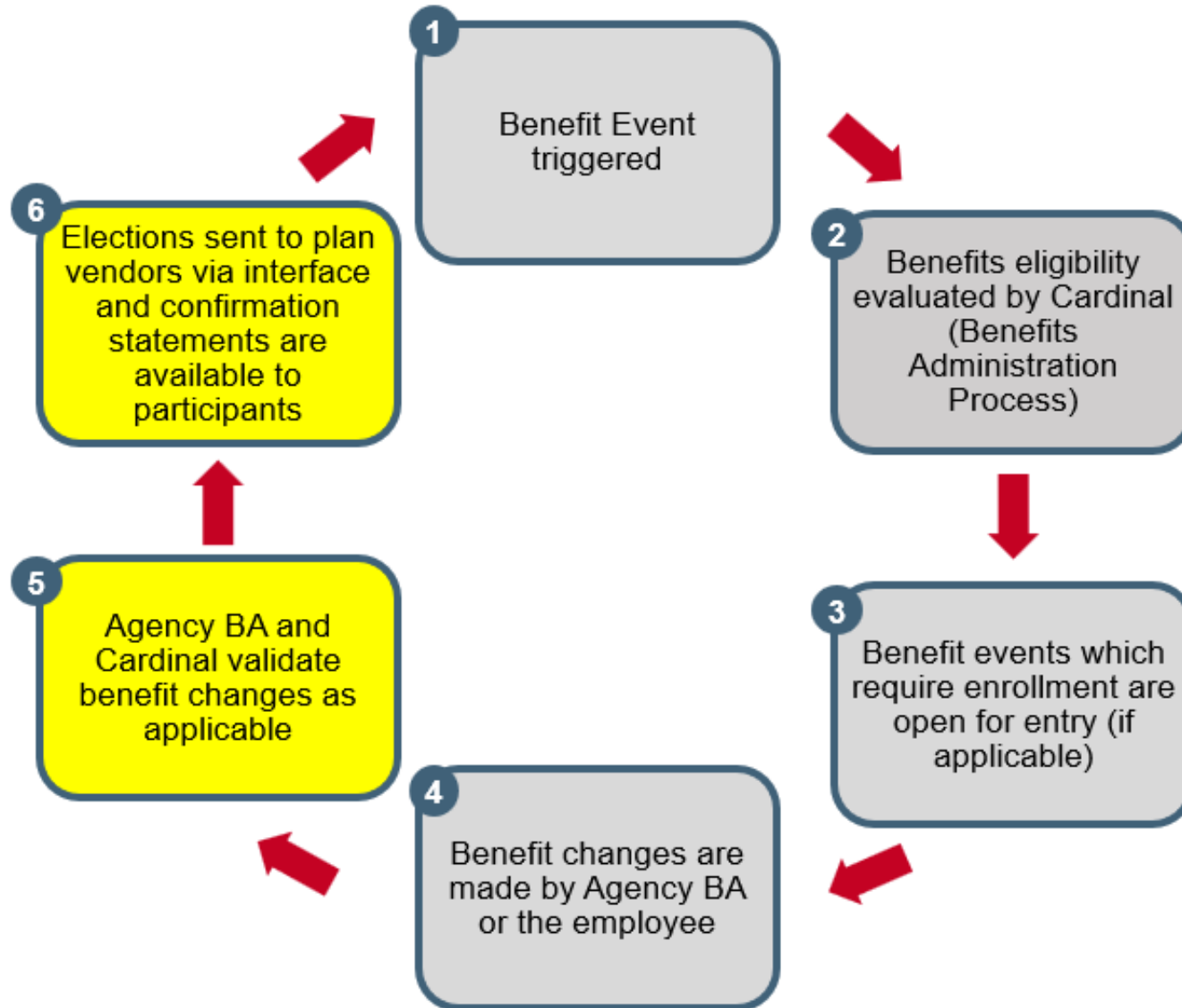
Benefit Program Selection Example



Note: There are also Tricare specific Coverage Codes.



Lifecycle of a Benefit Event (continued)





Lesson Summary

2

Benefit Events and Programs

In this lesson, you learned

- Benefit Events
- Benefit Event Triggers
- Lifecycle of a Benefit Event



Lesson

3

Benefits Navigation Overview

This lesson covers the following topics:

- Benefits Navigation Overview
- Overview of the Benefits Administrator Page Menu



Benefits Navigation Overview

Accessing the various Benefits pages, reports, and queries is completed through both:

- **Benefits Administrator** tile
- **NavBar > Menu > Benefits**

The screenshot displays the Cardinal Benefits Administrator web application. The top header includes the Cardinal logo and a search bar. The main dashboard features four tiles: 'Cardinal Message Board' (showing 0 messages published today and 0 total active messages), 'Cardinal Portal' (with a calendar icon), 'Benefits Administrator' (highlighted with a red border and containing icons for a person, a document, a plus sign, and a house), and 'Benefit Details'. On the right, the 'NavBar: Menu' is expanded, showing a 'Menu' section with a 'Benefits' category. Under 'Benefits', there is a list of links: 'Employee/Dependent Information', 'Review Employee Benefits', 'Enroll In Benefits', 'Manage Automated Enrollment', 'Maintain Primary Jobs', 'Reports', 'Interface with Providers', 'Monitor Savings Plan Extensions', 'Administer COBRA Benefits', 'ACA Annual Processing', 'Employer Information', 'Manage Life Event Instance', and 'Clone TLC Data Sheet'.



Benefits Administrator Page Menu Overview

The **Benefits Administrator Page Menu** is used to access some of the Benefits pages that are utilized to:

- Update/View Employee and Dependent information
- Perform Benefit Enrollments
- Review Employee Benefits information
- Process Benefit Events

The screenshot displays the 'Benefits Administrator' interface. On the left is a sidebar menu with the following items: 'Cardinal Homepage', 'Employee/Dependent Information' (expanded), 'Update Dependent/Beneficiary' (highlighted with a red box), 'Maintain Certifications', 'Enroll in Benefits', 'Review Employee Benefits', and 'Benefits Management'. The main content area is titled 'Update Dependent/Beneficiary' and includes a search form. The form has a header with a 'Find an Existing Value' button and a 'Search Criteria' section. The search criteria section contains several input fields: 'Empl ID' (dropdown: 'begins with'), 'Name' (dropdown: 'begins with'), 'Last Name' (dropdown: 'begins with'), 'Second Last Name' (dropdown: 'begins with'), 'Alternate Character Name' (dropdown: 'begins with'), and 'Middle Name' (dropdown: 'begins with'). Below these fields are three checkboxes: 'Include History', 'Correct History', and 'Case Sensitive'. A text input field for 'Limit the number of results to (up to 300):' is set to '300'. At the bottom are 'Search' and 'Clear' buttons, followed by links for 'Basic Search' and 'Save Search Criteria'.

Cardinal Homepage

Benefits Administrator

Employee/Dependent Information

Update Dependent/Beneficiary

Maintain Certifications

Enroll in Benefits

Review Employee Benefits

Benefits Management

Update Dependent/Beneficiary

Enter any information you have and click Search. Leave fields blank for a list of all values.

Find an Existing Value

Search Criteria

Empl ID begins with

Name begins with

Last Name begins with

Second Last Name begins with

Alternate Character Name begins with

Middle Name begins with

☐ Include History ☐ Correct History ☐ Case Sensitive

Limit the number of results to (up to 300): 300

Search Clear Basic Search Save Search Criteria



Lesson Summary

3

Benefits Navigation Overview

In this lesson, you learned

- Benefits Navigation Overview
- Overview of the Benefits Administrator Page Menu



Lesson

4

Processing New Hire Enrollments

This lesson covers the following topics:

- General Information about New Hire Enrollments
- Processing a New Hire Enrollment
- Viewing employee Benefits information (current and historical)
- Re-opening and reprocessing Benefit Events
- Viewing employee Confirmation Statements



New Hire Enrollments General Information

Reminder: All benefit enrollments or changes are made through a Benefit Event.

New Hire Benefit Events are triggered when an Agency Human Resources (HR) Administrator processes a “New Hire” action:

- **HR2:** This event will automatically enroll the eligible employee in the Imputed Life Insurance Income Plan after the Benefits Administration process runs. The Benefits Administration process runs nightly on a schedule. The event will automatically close after the Benefits Administration process runs. This event must be processed before completing the employee’s other enrollments via the HIR Benefit Event and can be processed manually as needed if the Benefits Administration process has not run
- **HIR:** This event is processed by an Agency BN Admin to complete the employee’s enrollment elections (Medical, FSA, etc.)

The Event Date for both events is driven based on the Effective Date of the “New Hire” action completed by HR.



New Hire Enrollments General Information (continued)

New Hire employees can make their initial plan elections through Employee Self-Service (ESS) if the Agency utilizes ESS. Agency BN Administrators will need to approve any dependents and complete the Benefit Event if the employee elects their plans through ESS.

The Coverage Begin Date for the Imputed Life Insurance Income Plan will be the actual date that the employee was hired.

The Coverage Begin Date for all other elected plans will be the first day of the month following employee's hire date (e.g., employee hired on 10/25/2025, Coverage Begin Date for elected plans will be 11/1/2025).

The Deduction Begin Date is only relevant to employees that are paid through the Cardinal system and is the first day of the pay period in which coverage begins.

Plan elections are transmitted to the Vendor daily (Tuesday – Saturday excluding holidays).

Confirmation Statements are generated each night.

Cardinal sends a complete enrollment file to Vendors on the 1st Monday of each month.



Finalizing Benefit Events Errors

The system performs validations when the **Validate/Finalize** button is clicked. These validations include:

- Validating dependent eligibility
- COVA systematic rules pertaining to valid elections/transactions

If any errors are identified, they will display as a numeric value (e.g., 1, 2, 3) in the **Errors** field to the right of the **Validate/Finalize** button. The corrective action will vary based on the actual error received.



Viewing an Employee's Benefits Enrollments Information

The Benefits enrollment information for an employee can be viewed on the following pages at any time. These page include current, historical, and future dated benefit enrollments for the employee. Therefore, review of these pages is recommended after any Benefit Event is processed to ensure accuracy (e.g., New Hire, Life Event, etc.):

Health Benefits page: Health Benefit enrollments

NavBar > Menu > Benefits > Enroll in Benefits > Health Benefits

Simple Benefits page: Premium Reward and Flex Spending Admin Fee enrollments

NavBar > Menu > Benefits > Enroll in Benefits > Simple Benefits

Life and AD/D Benefits page: Imputed Life Insurance Income Plan enrollment

NavBar > Menu > Benefits > Enroll in Benefits > Life and AD/D Benefits

Spending Accounts page: Flex Spending Medical Plan and Flex Spending Dependent Care Plan enrollments

NavBar > Menu > Benefits > Enroll in Benefits > Spending Accounts

Savings Plans page: Savings Plan enrollments

NavBar > Menu > Benefits > Enroll in Benefits > Savings Plans

Retirement Plans page: Retirement Plan enrollments

NavBar > Menu > Benefits > Enroll in Benefits > Retirement Plans



Viewing an Employee's Current Benefits Enrollments and Deductions

The current Benefits information for an employee can be viewed on the **Current Benefits Summary** page at any time.

This page does not include any historical or future dated benefit elections data for the employee. As the elections are quite frequently effective on the first of the following month, this is not recommended to ensure accuracy after any Benefit Event is processed (e.g., New Hire, Life Event, etc.).

Navigate to the **Current Benefits Summary** page using the following path:

NavBar > Menu > Review Employee Benefits > Current Benefits Summary



Re-Opening a Benefit Event

If any updates/corrections need to be made after processing a Benefit Event, the Benefit Event can be re-opened for edits and then reprocessed. Benefit Events must also be re-opened once the applicable supporting documentation is received in order to update the dependent(s) from “Unapproved” to “Approved”.

Benefit Events are re-opened on the **BenAdmin Event Status Update** page. Navigate to this page using the following path:

On-Demand Event Maintenance page > Events Status Update button

BenAdmin Event Status Update

Help

Update Event Status

Empl ID 00858056800 Thomas Jones30 Ben Record 0

Event Status Update ?

Schedule ID EM00
Event Date 10/25/2022
Event ID 1
Event Class HIR Initial Enrollment
Event Priority 100
Benefit Program SAL
Process Status Finalized - Enrolled
Action Source Job Data Change

☐ Event Disconnected

☐ Address Eligibility Changed
☐ MultiJob Indicator Changed
☐ Job Eligibility Changed
☐ Event Out of Sequence
☐ Finalize/Apply Defaults

Print Option Print Both Forms

*Process Re-Enter

*Event Status Open for Processing

OK Cancel Apply

Refresh



Confirmation Statements General Information

Confirmation Statements contain reflect the plans that were selected and are created in the overnight batch process. The Agency BA has access to view/print all Confirmation Statements (current and historical) for all employees.

Any updates made to an enrollment will be reflected in a new statement generated overnight for the employee to review.

Confirmation Statements are viewed/printed from the **Review Employee Statements** page. Navigate to this page using the following path:

Benefits Administrator tile > Review Employee Benefits > Review Employee Statements



Email Notification Sent to Employee

Benefits Confirmation Available

Inbox x

PeopleSoft@peoplesoft.com
to me

Tue, Feb 4, 11:06 AM

This email is to confirm that the Benefits Department has confirmed your benefits enrollment. Your Benefits Confirmation Statement has been posted on the Employee Self Service website.

Employee ID:

[View Online Statement](#)

Reply

Forward



Lesson Summary

4

Processing New Hire Enrollments

In this lesson, you learned

- General Information about New Hire Enrollments
- How to process a New Hire Enrollment
- How to view employee benefits information (current and historical)
- How to re-open and reprocess Benefit Events
- How to view an employee's Confirmation Statement



Lesson

5

Processing Transfers Overview

This lesson covers the following topics:

- Overview of the Inter-Agency Transfer Process



Processing Inter-Agency Transfers Overview

When employees transfer from one Commonwealth of Virginia Agency to another Commonwealth of Virginia Agency, this is known as an Inter-Agency Transfer. This process must be completed correctly to ensure that there is no break in service or interruption of benefits for the employee.

General Guidelines:

- There are two Agencies involved in this process; the Sending Agency (employee leaving from) and the Receiving Agency (employee going to)
- The two Agencies must coordinate the effective date for the HR transactions to ensure that there is no break in service or interruption of benefits for the employee (same day or next day)
- The Sending Agency must complete the Transfer Out HR transaction **before** the Receiving Agency can complete the Transfer In HR transaction
- The Agency where the employee is employed on the first of the month is responsible for the entire month's employer paid premium



Sending Agency

No action is required by the Sending Agency BN Administrator.

The Sending Agency HR Administrator completes a “Termination: Transfer Out” transaction with an effective date equal to the date last worked at the Agency by the employee.

This transaction must be completed by the Sending Agency **before** the Receiving Agency HR Administrator processes the “Hire: Transfer In” transaction.

This transaction triggers an “XFO” Benefit Event. This Benefit Event will automatically process and close once the Benefits Administration process runs and completes the following:

- Carries over the eligible* employee’s Health Insurance, Premium Rewards, Imputed Life, and FSA enrollments with no gap
- Any Deferred Compensation, Annuity, and VRS Retirement Plans the employee is enrolled in will be terminated

*This is not applicable if the employee is transferring from one Agency as an hourly employee (no benefits) and transferring into an Agency with a salaried position (eligible for benefits)



Receiving Agency

The Receiving Agency HR Administrator completes a “Hire: Transfer In” transaction with an effective date equal to the date last worked at the previous Agency by the employee (to avoid break in service).

This transaction must be completed by the Receiving Agency **after** the Sending Agency HR Administrator processes the “Termination: Transfer Out” transaction.

This transaction triggers an “XFR” Benefit Event. This Benefit Event will automatically process and close after 29 days.

Generally, this Benefit Event does not allow the employee to make changes to their enrollments. However, this Benefit Event remains open for 29 days for instances where the employee was enrolled in an HMO plan that they are no longer eligible for the new Agency based on region (Northern VA or rest of VA).

Once this Benefit Event closes (after 29 Days), the employee will receive a Confirmation Statement.



Receiving Agency (continued)

The Receiving Agency BN Administrator must complete the following:

- Monitor for open “XFR” Benefit Events. The Benefit Event Status Report should be generated and reviewed regularly to monitor all open Benefit Events to include “XFR” Benefit Events
- Review the employee’s benefits information to ensure that the employee’s Health Insurance, Premium Rewards, Imputed Life, and FSA enrollments carried over with no gap
- If the employee was enrolled in an HMO Plan that they are no longer eligible for, inform the employee to complete a new Benefit Enrollment form and then complete their new election via the “XFR” Benefit Event (within 29 days)
- If the employee was previously enrolled in a Deferred Compensation or Annuity Plan, advise the employee to re-enroll via the Vendor’s website. VRS Retirement Plans will feed back into Cardinal from VNAV as applicable



Lesson Summary

5

Processing Transfers Overview

In this lesson, you learned

- An overview of the Inter-Agency Transfer Process



Lesson

6

Processing Manual Benefit Events

This lesson covers the following topics:

- Manual Benefit Events Overview
- Life Events Overview
- Overview of the Benefit Event Entry Page
- Processing Life Events



Manual Benefit Events General Information

Reminder: All benefit enrollments or changes are made through a Benefit Event.

Manual Benefit Events are triggered when any of the following occur:

- A Personal and or Job Data change is entered by an Agency HR Administrator (some of these triggered Benefit Events will automatically close if the Personal or Job Data change does not make the employee eligible to update their Benefit enrollments)
- Employee submits a Benefit enrollment form, and the Benefits Administrator creates an Event on the Benefit Event Entry page
- Employee enters a Life Event or Open Enrollment through Employee Self-Service (ESS)



Manual Benefit Events General Information (continued)

The date of the Benefits enrollment is driven based on the Event Date. The Event Date is systematically generated based on the information entered on the Benefit Event Entry page.

For Life Events, employees have 30 days* to either:

- Submit a Benefits form with the applicable supporting documentation

OR

- Initiate the Life Event through ESS and then submit the applicable supporting documentation

* **Note:** Enrollment can still be processed after 30 Days, however, OHB approval will be required in these cases.



Manual Benefit Events General Information (continued)

The coverage begin and deduction begin dates will vary based on the specific type of Life Event. Some examples include:

Life Event	Coverage Begin and Deduction Begin Date
Marriage	1 st Day of the Month after the marriage date
Birth	Immediately on date of birth
Divorce	1 st Day of the Month after the divorce date

Plan elections are transmitted to the Vendor nightly (Monday – Friday excluding holidays).

Confirmation Statements will be available after the Benefits Administration process runs.



Life Events General Information

Life Events are a type of Benefit Event and are also referred to as Qualifying Mid-Year Events.

There are various types of Life Events, including:

**MARRIAGE
EVENT**

**BIRTH
EVENT**

**DEATH
EVENT**

**DIVORCE
EVENT**

Reminder: Employees have 30 Days to initiate a Life Event after the event date. Enrollment can still be processed after 30 Days; however, the paperwork must be submitted within 30 days. In all other cases, OHB approval is needed.



Key Benefit Dates Related to Life Events

Benefit Enrollment Field	Definition
ELECTION DATE	The date the employee elects their benefits. This is typically the date the coverage changes are entered into the system.
EVENT DATE	The date used for entry when performing manual Benefit Events. This is based on the date the Life Event occurred.
COVERAGE BEGIN DATE	The date the coverage starts.
DEDUCTION BEGIN DATE	The date the deduction begins for the employee. This will be the Pay Period start date for the Pay Period that the coverage begin date falls in.



Life Event Example: Marriage

Scenario: An employee got married on 11/15. This is a Qualifying Mid-Year Event which allows the employee to update their Benefit enrollments.

On 11/17, the spouse was added as a dependent with an event date of 11/15.

The employee elected to change their benefit plan from “SINGLE” to “EMPLOYEE + SPOUSE” and the enrollment was completed on 11/17.

In this scenario, the following dates apply:

- **ELECTION DATE** = 11/17
- **EVENT DATE** = ____ ?
- **COVERAGE BEGIN DATE** = ____ ?



Benefit Event Entry Page

The **Benefit Event Entry** page simplifies the creation of Benefit Events.

This page performs the following functions:

- Captures Life Event details
 - Life Event Date
 - Paperwork Receipt Date
 - Prior and Future Coverage Levels
 - Type of Benefit Change
- Calculates correct Benefit Event Dates
- Automatically selects the correct Benefit Class
- Creates the Benefit Event

NavBar > Menu > Benefits > Manage Automated Enrollment > Events > Benefit Event



Benefit Event Entry Page (continued)

NavBar > Menu > Benefits > Manage Automated Enrollment > Events > Benefit Event

Cardinal Homepage

Benefit Event

New Window | Help | Personalize Page

Benefit Event Detail

Jason Witten

Employee

ID 00136680400

Benefit Record Number 0

Life Event

1 of 1

View All

Life Event

Life Event Date

Paperwork Receipt Date

+

Health Change

FSA Change

Health Change Needed:

Current Cov. Level:

Future Cov. Level:

Change:

FSA Change Needed:

Change:

Special Processing Message (Health)

Special Processing Message (FSA)

Save

Return to Search



Lesson Summary

6

Processing Manual Benefit Events

In this lesson, you learned

- An Overview of Manual Benefit Events
- An Overview of Life Events
- An Overview of the Benefit Event Entry Page
- How to process Life Events



Lesson

7

Viewing Other Employee and Dependent Benefits Information

This lesson covers the following topics:

- Cardinal Enrollment Report
- Viewing Dependent Information
- Premium Reward Overview
- Monitoring Employee/Dependent Eligibility Information
- Approving Dependents



Cardinal Enrollment Report

NavBar > Menu > Benefits > Reports > Cardinal Enrollment Report

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V
1																						
2																						
3	Cardinal Enrollment Report																					
4																						
5																						
6	Process Instance: 4338175																					
7	Process Run Date: 11/24/2025																					
8	Process AsOfDate: 11/24/2025																					
9	Process Business Unit: 99900																					
10	Process Company:																					
11																						
12	Employee	Last Name	Suffix	First Name MI	Birthdate	Sex	SSN	Business U	Company	Departmer	Status/BPr	Coverage E	Benefit Pla	Descr	Coverage C	Coverage E	Employer F	Employee I	PRW Rate	PRW Benel	PRW Cove	
13		DOE		JOHN		F		99900	ABC	226184	COVA Wage-No Health						0	0	0			
14		DOE		JOHN		M		99900	ABC	226151	COVA Wage-No Health						0	0	0			
15		DOE		JOHN		M		99900	ABC	226213	COVA Wage-No Health						0	0	0			
16		DOE		JOHN		F		99900	ABC	410816	COVA FT E E	ACC4	COVA Cr+I Single	7/1/2020		830	161	0				
17		DOE		JOHN		M		99900	ABC	180781	COVA Wage-No Health						0	0	0			
18		CUP		STANLEY		F		99900	ABC	190705	COVA FT E E	ACC4	COVA Cr+I Single	2/1/2025		830	161	0				
19		DOE		JOHN		F		99900	ABC	226284	COVA Wage-No Health						0	0	0			
20		DOE		JOHN		M		99900	ABC	226296	COVA Wage-No Health						0	0	0			
21		DOE		JOHN		F		99900	ABC	226038	COVA Wage-No Health						0	0	0			
22		DOE		JOHN		M		99900	ABC	110701	COVA Wage-No Health						0	0	0			
23		DOE		JOHN		M		99900	ABC	226126	COVA Wage-No Health						0	0	0			
24		DOE		JOHN		M		99900	ABC	226337	COVA Wage-No Health						0	0	0			
25		DOE		JOHN		M		99900	ABC	226192	COVA Wage-No Health						0	0	0			
26		DOE		JOHN		F		99900	ABC	226118	COVA Wage-No Health						0	0	0			
27		DOE		JOHN		F		99900	ABC	135718	COVA FT E E	ACC4	COVA Cr+I Single	6/1/2012		830	161	0				
28		DOE		JOHN		F		99900	ABC	226098	COVA Wage-No Health						0	0	0			
29		DOE		JOHN		F		99900	ABC	410816	COVA FT E E	ACC4	COVA Cr+I Single	#####		830	161	0				
30		DOE		JOHN		F		99900	ABC	226338	COVA Wage-No Health						0	0	0			
31		DOE		JOHN		M		99900	ABC	226283	COVA Wage-No Health						0	0	0			
32		DOE		JOHN		F		99900	ABC	226420	COVA Wage-No Health						0	0	0			
33		DOE		JOHN		F		99900	ABC	410816	COVA FT E E	ACC4	COVA Cr+I Single	7/1/2020		830	161	17	PRWDEE	7/1/2025		
34		DOE		JOHN		M		99900	ABC	210504	COVA FT E E	ACC4	COVA Cr+I Single	2/1/2025		830	161	0				
35		DOE		JOHN		F		99900	ABC	226060	COVA Wage-No Health						0	0	0			
36		DOE		JOHN		F		99900	ABC	226205	COVA Wage-No Health						0	0	0			



Viewing Dependent Information

Benefits Administrators can view and update dependent information on the **Update Dependent / Beneficiary** page. This page is accessed using the following navigation path:

NavBar > Menu > Benefits > Employee/Dependent Information > Update Dependent/Beneficiary

The key information available to review and/or update on this page for each dependent includes:

- Name, Address, Contact Information (Phone and Email), Date of Birth, Dependent Beneficiary Type (Approved or Unapproved Dependent), Gender, Marital Status, and Disability Status
- Dependents never be deleted (historical data is maintained)
- Duplicate dependents can only be deleted by emailing OHB (do not open a VCCC ticket)

Note: All dependents, regardless of whether they are currently enrolled in a Benefits Plan, will display and be available to view on this page. This data is maintained within Cardinal for cases where the dependent may need to be re-enrolled in a Benefits Plan in the future.



Premium Reward General Information

Eligible employees can receive a Premium Reward to offset the cost of their medical premium. Premium Rewards are centrally processed and established based on the following:

- Participants are included in the Premium Rewards file received by Cardinal if they satisfy the requirements to earn the premium reward
- The Premium Rewards file is automatically uploaded, and the participant is enrolled in the Simple Benefit plan
- An additional pay is established to offset the cost of the medical premium
- If the Additional Pay needs to be manually updated for an employee, reach out to OHB to make the adjustments
- In the scenario that a Premium Reward for an employee needs to be manually updated, the Agency BA will create a manual event (**FSC BAS Action**) on the **Benefit Event Entry** page to open the enrollment options and make the changes

Simple Benefits page: Premium Reward and Flex Spending Admin Fee enrollments

NavBar > Menu > Benefits > Enroll in Benefits > Simple Benefits



Monitoring Employee/Dependent Eligibility Information

The Benefit Eligibility Audit reports are used to monitor and identify employees or dependents meeting specific criteria which may require the Benefits Administrator to act. The Benefits Eligibility Audit reports are generated using the following navigation path:

Menu > Benefits > Reports > Audits > Benefit Eligibility Audits

The user will then have the option to generate one or more of the following Reports:

- Dependent Waiting Approval Report
- Retired, Tricare, and TLC Employees Approaching 65 Report
- Dependent of Retirees/Tricare/TLC employees Approaching 65
- Dependent Child Approaching 26
- Disabled Over-Age Dependent Child

For more information and instructions on how to run these Reports, refer to the **Cardinal HCM Benefits Reports Catalog**, located on the Cardinal website in **Reports Catalogs** under **Resources**.



Lesson Summary

7

Viewing Other Employee and Dependent Benefits Information

In this lesson, you learned

- How to use the Cardinal Enrollment Report
- How to view Dependent Information
- An overview of Premium Rewards
- How to monitor Employee/Dependent eligibility information
- How to approve dependents



Lesson

8

Affordable Care Act (ACA) Administration

This lesson covers the following topics:

- Overview of ACA Reconciliation
- Agency Responsibilities during ACA Reconciliation
- Generating the ACA Reconciliation Report
- Validating ACA Data
- Certifying the ACA Data



ACA Administration Overview

The **ACA Administration** business process involves:

- Capturing the data elements required to create annual regulatory forms for health benefit participants
- Capturing the data elements required to perform annual regulatory reporting to the Internal Revenue Service (IRS)



ACA Reconciliation Data Sources

Health Care Tables: Within Cardinal, the Health Care Tables are utilized to select the applicable plan and coverage code. These Tables are maintained by the Cardinal Post Production Support (PPS) Team.

ACA Tables: OHB maintains the ACA Tables which contain the approved ACA Health Benefit Plans.



ACA Forms

What Form will an Employee Receive?

Agencies with 49 or Less Employees: **Form 1095B**

Form 1095-B **Health Coverage** ☐ VOID ☐ CORRECTED OMB No. 1545-2252 **2024**

Department of the Treasury Internal Revenue Service Do not attach to your tax return. Keep for your records. Go to www.irs.gov/Form1095B for instructions and the latest information.

Part I Responsible Individual

1 Name of responsible individual—First name, middle initial, last name 2 Social security number (SSN) or other TIN 3 Date of birth (if SSN or other TIN is not available)

4 Street address (including apartment no.) 5 City or town 6 State or province 7 Country and ZIP or foreign postal code

8 Enter letter identifying Origin of the Health Coverage (see instructions for codes): ☐ 9 Reserved

Part II Information About Certain Employer-Sponsored Coverage (see instructions)

10 Employer name 11 Employer identification number (EIN)

12 Street address (including room or suite no.) 13 City or town 14 State or province 15 Country and ZIP or foreign postal code

Part III Issuer or Other Coverage Provider (see instructions)

16 Name 17 Employer identification number (EIN) 18 Contact telephone number

19 Street address (including room or suite no.) 20 City or town 21 State or province 22 Country and ZIP or foreign postal code

Part IV Covered Individuals (Enter the information for each covered individual.)

(a) Name of covered individual(s) First name, middle initial, last name	(b) SSN or other TIN	(c) DOB (if SSN or other TIN is not available)	(d) Covered all 12 months	(e) Months of coverage												
				Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
23			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
24			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
25			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
26			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
27			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
28			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions. Cat. No. 60704B Form **1095-B** (2024)

Agencies with 50 or More Employees: **Form 1095C**

Form 1095-C **Employer-Provided Health Insurance Offer and Coverage** ☐ VOID ☐ CORRECTED OMB No. 1545-2251 **2024**

Department of the Treasury Internal Revenue Service Do not attach to your tax return. Keep for your records. Go to www.irs.gov/Form1095C for instructions and the latest information.

Part I Employee **Applicable Large Employer Member (Employer)**

1 Name of employee (first name, middle initial, last name) 2 Social security number (SSN) 7 Name of employer 8 Employer identification number (EIN)

3 Street address (including apartment no.) 9 Street address (including room or suite no.) 10 Contact telephone number

4 City or town 5 State or province 6 Country and ZIP or foreign postal code 11 City or town 12 State or province 13 Country and ZIP or foreign postal code

Part II Employee Offer of Coverage **Employee's Age on January 1** **Plan Start Month** (enter 2-digit number):

	All 12 Months	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
14 Offer of Coverage (enter required code)													
15 Employee Required Contribution (see instructions)	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
16 Section 4980H Safe Harbor and Other Relief (enter code, if applicable)													
17 ZIP Code													

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions. Cat. No. 60705M Form **1095-C** (2024)

Form 1095-C (2024) Page 3

Part III Covered Individuals If Employer provided self-insured coverage, check the box and enter the information for each individual enrolled in coverage, including the employee. ☐

(a) Name of covered individual(s) First name, middle initial, last name	(b) SSN or other TIN	(c) DOB (if SSN or other TIN is not available)	(d) Covered all 12 months	(e) Months of coverage												
				Jan	Feb	Mar	Apr	May	June	July	Aug	Sep	Oct	Nov	Dec	
18			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
19			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
20			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
21			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
22			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐



ACA Reconciliation Report

The ACA Reconciliation Report is used to review individual health benefit information which is validated prior to ACA reporting at the end of the Calendar Year.

It is recommended to run this report on a Monthly basis

NavBar > Menu > Benefits > ACA Annual Processing > ACA Preparation > ACA Reconciliation Report

For more information and instructions on how to run this report, refer to the **Cardinal HCM Benefits Reports Catalog**, located on the Cardinal website in **Reports Catalogs** under **Resources**.



Each employee will have two lines displaying their ACA Form Data.

[illegible]

Line 1: Offer of Coverage Code(s)

- Displays the values that will populate Box 14/16 on the 1095-C form
 - See the IRS [Indicator Codes for Employee Offer of Coverage](#) for Box 14/16 Values
- Agencies using Form 1095-B will display “1095B” instead of an Offer of Coverage code

Line 2: Months of Coverage

- Displays the months of coverage with a Y/N value
- There will be no Line 2 values if the coverage is in an HMO or TriCare

ValHC field: Estimated Value of Healthcare

- Payroll reporting offers a more precise calculation



Review and Update ACA Participant Data

Agencies review the ACA Reconciliation Report to identify if any updates are required. If discrepancies are identified, one of the following corrective actions may be required:

- The Agency HR and BN Administrators will work together to trigger a Benefit Event and then process the corrective enrollments
- Employees (participants) will only display on the ACA Reconciliation Report if they have a record on the **ACA Employee Eligibility** page. The participant's eligibility may need to be manually corrected on this page if they are not displaying on the ACA Reconciliation Report
- This data is set by system processing, so changes should not have to be made. If you think this data is incorrect, please submit a VCCC ticket with "Cardinal Benefits" in the subject line



ACA Employee Eligibility Page

ACA Employee Eligibility page guidelines:

- On the employee's hire date, a row is automatically added to this page (effective dated based on the hire date) with a status of "Eligible". If the hire date is the first of the month, only one row will be automatically added, and the status will be "Always Eligible"
- For all hire dates other than the first of the month, once the employee's elected benefits become effective, another effective dated row is added to this page with a status of "Always Eligible"
- If the employee is not eligible for health coverage, their status will be "Ineligible"

NavBar > Menu > Benefits > Employee/Dependent Information > ACA Employee Eligibility



Sample ACA Employee Eligibility Page

Always Eligible ▾

Always Eligible

Eligible

Excluded

Ineligible

To be determined

< Benefits Administrator

ACA Employee Eligibility

New Window | Help | Personalize Page

ACA Employee Eligibility

Employee ID

Affordable Care Act Common ID DOT VA Dept of Transportation

Eligibility Information

1 of 1 ▾ | View All

*Effective Date02/01/2020

*ACA Eligibility StatusAlways Eligible ▾

Average Service Hours0.000

Calculation MethodLook Back ▾

Evaluation Begin Date

Administration Begin Date

Stability Begin Date

Effective Sequence0

☐ Non-Assessment Period

Work PeriodMonthly ▾

Measurement Period

Evaluation End Date

Administration End Date

Stability End Date

ACA Calculation Hours

1-1 of 1 ▾

Empl Record	Company	Description	Total Hours		
0				+	-

Total Eligibility Hours

Last Update User ID BATCH

Updated on 06/04/2020 12:33:06PM

OK

Cancel

Apply



ACA Data Validation

The following reports are recommended for use during ACA data validation:

- **Cardinal Enrollment Report:** This report lists all employees and COBRA members enrolled in Healthcare on a specific date. Terminated employees remain on the report for 90 days after the date of termination.
- **Benefit Enrollment Changes Report:** This report lists the benefit changes that were made within a specified date range.
- **Base Benefit Consistency Audit Report:** This report lists data that has been entered into the Benefit Plan, employee data, dependent data, or enrollment data which does not appear to follow policy or regulations.

For more information and instructions on how to run these reports, refer to the **Cardinal HCM Benefits Reports Catalog**, located on the Cardinal website in **Reports Catalogs** under **Resources**.



ACA Certification

The ACA Reconciliation Report must be certified by the Agency during the last month of the calendar year.

Once the ACA Reconciliation Report has been reviewed and all discrepancies have been updated (corrected), the Agency Benefits Administrator must certify the ACA data.

Certification is completed on the **ACA Data Entry** page. This process will include:

- Defining the Agency Contact
- Entering the total Full-Time and total employee counts for each month of the calendar year
- Completing the Certification Statement

NavBar > Menu > Benefits > Employer Information > ACA Data Entry

For more information and instructions on how to complete the ACA Certification, refer to the Job Aid titled **BN361 ACA Data Entry**. This Job Aid is located on the Cardinal website in **Job Aids** under **Learning**.



Lesson Summary

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ACA Administration

In this lesson, you learned

- Overview of ACA Administration
- Overview of the Agency Responsibilities during ACA Reconciliation
- How to generate the ACA Reconciliation Report
- How to validate the ACA Data
- How to certify the ACA Data



Lesson

9

Processing Retirements Overview

This lesson covers the following topics:

- ORP Retirement Overview
- VRS Retirement Overview



ORP Retirement Overview

If the Agency processes ORP Retirements, the Agency will have access to the ORP Retirement Position. There are actions that must be completed by both an Agency HR Administrator and an Agency BN Administrator. The specific actions required will be based on whether the employee is eligible for Medicare at the time of retirement.

Medicare Eligibility:

- Age: Over the age of 65
- Health: Health Condition that makes the individual eligible for Medicare prior to the age of 65



ORP Retirement Overview (Not Medicare Eligible)

Action	Additional Comments	Responsible Party
Retire the employee	Use an Action of “Retirement” and an Action Reason of “Retirement – ORP”. The effective date (one day after last day worked) of this transaction will be used as the effective date for the Hire action.	HR Administrator
Hire the Employee into the ORP Retirement Position	Use an Action of “Hire” and an Action Reason of “Hir ORP Ret”. This will trigger a Job Change Benefit Event.	HR Administrator
Enroll the Employee (and dependents) in a Non-Medicare Medical Plan	This process is performed on the On-Demand Event Maintenance page after the Hire transaction is completed by HR and the Benefits Administration process has run.	BN Administrator

For more information and instructions on how to complete ORP Retirements, refer to the Job Aid titled **BN361_ORP Retiree Guide**. This Job Aid is located on the Cardinal Website in **Job Aids** under **Learning**.



ORP Retirement Overview (Medicare Eligible)

Action	Additional Comments	Responsible Party
Retire the employee	Use an Action of “Retirement” and an Action Reason of “Retirement – ORP”. The effective date (one day after last day worked) of this transaction will be used as the effective date for the Hire action.	HR Administrator
Hire the Employee into the ORP Retirement Position	Use an Action of “Hire” and an Action Reason of “Hir ORP Ret”. This will trigger a Job Change Benefit Event.	HR Administrator
Update the ACA Employee Eligibility page for the employee	Use the effective date for the Hire action and select the ACA Eligibility Status of “Excluded”.	BN Administrator
Enroll the Employee in the Medicare Medical Plan	This process is performed on the On-Demand Event Maintenance page after the Hire transaction is completed by the HR Administrator, and the Benefits Administration process has run.	BN Administrator



ORP Retirement Overview (Medicare Eligible) (continued)

If the retiree’s Spouse is not Medicare eligible, the following steps must also be performed:

Action	Additional Comments	Responsible Party
Hire the Spouse as an employee (ORP Retirement Position) and link the Spouse to the Retiree	Use an Action of “Hire” and an Action Reason of “Hir ORP Ret”. This will trigger a Job Change Benefit Event. The Spouse is added into a Non-Payroll Pay Group.	HR Administrator
Enroll the Spouse (and any other Non-Medicare eligible dependents) in a Non-Medicare Medical Plan	This process is performed on the On-Demand Event Maintenance page after the Hire transaction is completed by the HR Administrator, and the Benefits Administration process has run.	BN Administrator

For more information and instructions on how to complete ORP Retirements, refer to the Job Aid titled **BN361_ORP Retiree Guide**. This Job Aid is located on the Cardinal Website in **Job Aids** under **Learning**.



VRS Retirement Overview

All Agencies can process VRS Retirements. There are actions that must be completed by both VRS and an Agency BN Administrator. The specific actions required will be based on whether the employee is eligible for Medicare at the time of retirement.

- Participants manage their enrollments through the [myVRS](#) portal
- VRS utilizes VNAV to manage all VRS Retirement Job Record
- The VRS Job Record can be created up to 40 days prior to the employee's official retirement date
- Participants will also need to submit a State Health Benefits Enrollment form for Retirees, Survivors, and LTD Participants in the following cases:
 - Employee is Medicare eligible but has dependents that are not Medicare eligible as this will require a split contract
 - If the employee is declining/canceling COVA Retiree/LTD healthcare coverage

For more information and specific instructions on how to process VRS Retirements, refer to the Job Aid titled **VRS Retirement and LTD Processes for HR and BN Admins**. This Job Aid is located on the Cardinal Website in **Job Aids** under **Learning**.



Lesson Summary

9

Processing Retirements Overview

In this lesson, you learned

- Overview of ORP Retirement
- Overview of VRS Retirement



Lesson

10

Retirement Plan Enrollments

This lesson covers the following topics:

- VRS Retirement Enrollment Process Overview
- Deferred Compensation Process Overview
- Annuity Process Overview



Enrollment and VNAV Upload to Cardinal

Enrollment:

Employee enrollment in VNAV is mostly automatic through the nightly HR interface, **VRS Person Extract**. The extract includes new hires, rehires, salary changes, position changes and other Job data updates that may affect an employee's eligibility for Retirement benefits.

Agency VNAV administrators should verify that employees' data is correct in that system. If necessary, agency will manually enroll the employee in VNAV.

VNAV Upload:

The VNAV Upload File is imported into Cardinal daily by the Cardinal PPS Team. This upload will complete the following for each new enrolled employee:

The VNAV Upload process corrects the top row of the employee's Job Record to populate Elig Config Field 1 (Retirement Plan Code) and Elig Config Field 6 (VRS Organization Code)



Enrollment and VNAV Upload to Cardinal (continued)

Benefits Administration Eligibility ?

BAS Group ID	SN2	HCM Release 2 Snapshot	
Elig Fld 1	VSY0000	Elig Fld 2	140001000
Elig Fld 4		Elig Fld 5	
Elig Fld 7		Elig Fld 8	12-24
		Elig Fld 3	Y
		Elig Fld 6	30140
		Elig Fld 9	SF-GB

Retirement Plan Code

VRS Organization Code

Benefit Program Participation Details ?

1 of 1

View All

Effective Date	08/29/2016	Currency Code	USD
Benefit Program	SAL	Salaried Employee Benefit Pgm	

Job Data

Employment Data

Earnings Distribution

Benefits Program Participation

For more information about the Eligibility Configuration fields, refer to the Job Aid titled **BN361_Overview of the Eligibility Configuration Fields**. This Job Aid is located on the Cardinal Website in **Job Aids** under **Learning**.



Running and Reviewing the VRS Elections Upload Error Report

Agency BN Administrators should run the VRS Elections Upload Error Report the day after the VNAV Upload File is imported into Cardinal. This is done to identify any enrollment errors.

NavBar > Menu > Benefits > Reports > VNAV Elections Upload Err Rpt

Some of the common errors include:

- Employee Record not found
- Employee Terminated
- Wage Employee that is not eligible for VRS Retirement

For more information and instructions on how to run this report, refer to the **Cardinal HCM Benefits Reports Catalog**, located on the Cardinal website in **Reports Catalogs** under **Resources**.



Sample VNAV Elections Upload Error Report

Cardinal		Commonwealth of Virginia										Run Date: 11/21/2025		
Report ID: RHR149		VNAV ELECTIONS UPLOAD ERROR REPORT										Run Time: 01:44 00		
Company: [REDACTED]												Page No. 10 of 71		
From Date: 01/01/2025														
To Date: 05/31/2025														
Transaction Errors. Online Entry Required														
Business Unit: [REDACTED]														
<u>Emplid</u>	<u>EmplRcd</u>	<u>Name</u>	<u>Hire Date</u>	<u>PY</u>	<u>Stat</u>	<u>EFFDT</u>	<u>Elig</u>	<u>Elig</u>	<u>4W Vol</u>	<u>Ded</u>	<u>Deduction</u>	<u>Deduction</u>	<u>SPOT Entry</u>	<u>Amount</u>
	1	[REDACTED]				02/01/2025	<u>Fld1</u>	<u>Fld6</u>	<u>Pctg</u>	<u>Code</u>	<u>End Dt</u>	<u>Flat Amt</u>	<u>Type</u>	
								30703	0.00%	PPSRTB	08/31/2023	0.00		0.00
<u>All Error Messages:</u>														
General Deduction End Date is prior to Effective Date														
No updates made because employee is not Active														
<u>Emplid</u>	<u>EmplRcd</u>	<u>Name</u>	<u>Hire Date</u>	<u>PY</u>	<u>Stat</u>	<u>EFFDT</u>	<u>Elig</u>	<u>Elig</u>	<u>4W Vol</u>	<u>Ded</u>	<u>Deduction</u>	<u>Deduction</u>	<u>SPOT Entry</u>	<u>Amount</u>
	1	[REDACTED]				03/01/2025	<u>Fld1</u>	<u>Fld6</u>	<u>Pctg</u>	<u>Code</u>	<u>End Dt</u>	<u>Flat Amt</u>	<u>Type</u>	
	1	[REDACTED]				04/01/2025		30703	0.00%	PPSRTB	02/28/2026	401.58		0.00
								30703	0.00%	PPSRTB	03/31/2026	401.58		0.00
<u>All Error Messages:</u>														
Multiple PPS/Buyback transactions received for same EmplID. Please review and manually enter the correct election.														
<u>Emplid</u>	<u>EmplRcd</u>	<u>Name</u>	<u>Hire Date</u>	<u>PY</u>	<u>Stat</u>	<u>EFFDT</u>	<u>Elig</u>	<u>Elig</u>	<u>4W Vol</u>	<u>Ded</u>	<u>Deduction</u>	<u>Deduction</u>	<u>SPOT Entry</u>	<u>Amount</u>
	0	[REDACTED]	04/25/2025	T		05/01/2025	<u>Fld1</u>	<u>Fld6</u>	<u>Pctg</u>	<u>Code</u>	<u>End Dt</u>	<u>Flat Amt</u>	<u>Type</u>	
							HBV0000	30703	0.00%			0.00		0.00
<u>All Error Messages:</u>														
No updates made because employee is not Active														
<u>Emplid</u>	<u>EmplRcd</u>	<u>Name</u>	<u>Hire Date</u>	<u>PY</u>	<u>Stat</u>	<u>EFFDT</u>	<u>Elig</u>	<u>Elig</u>	<u>4W Vol</u>	<u>Ded</u>	<u>Deduction</u>	<u>Deduction</u>	<u>SPOT Entry</u>	<u>Amount</u>
	0	[REDACTED]	04/25/2025	T		05/01/2025	<u>Fld1</u>	<u>Fld6</u>	<u>Pctg</u>	<u>Code</u>	<u>End Dt</u>	<u>Flat Amt</u>	<u>Type</u>	
							HBV0000	30703	0.00%			0.00		0.00
<u>All Error Messages:</u>														
No updates made because employee is not Active														



Enrollment Error Troubleshooting

If any errors are identified on the **VNAV Elections Upload Error Report**, an Agency HR and BN Administrators must work together to resolve the errors.

The appropriate resolution will vary based on the specific error and could include making updates to the Eligibility Configuration fields for the employee to trigger a Benefit Event and completing the applicable Benefit enrollments.

For more information about resolving upload errors, refer to the Job Aid titled **BN361_Benefit Upload Error Reports Troubleshooting**. This Job Aid is located on the Cardinal Website in **Job Aids** under **Learning**.



Deferred Compensation Enrollment Steps

Cardinal stores employees' Deferred Compensation plan elections to maintain payroll deductions. VRS is the state Agency responsible for managing COVA's relationship with the Vendor. Enrollment is completed using the following steps:

- Participant (employee) enrolls on the Vendor website or via a form
- The Upload File process is run monthly to import the Vendor's Upload File into Cardinal. This upload will:
 - Evaluate the employee's eligibility for the cash match based upon their retirement enrollment
 - Automatically update the individual employee's supplemental Deferred Compensation election on the **Savings Plan Table (Cardinal Base Benefits page)**
 - Automatically update the individual employee's hybrid voluntary defined contribution election on the **Savings Plan Table (Cardinal Base Benefits page)**



Deferred Compensation Enrollment Steps (continued)

- The Agency Benefits Administrator then runs the **Defined Contribution Elections Upload Details Report** which will identify all transactions received from the vendor for the specified Agency during the specified date range.
- The report includes all warning and error messages generated by the interface for any specific transaction.

For more information and instructions on how to run this report, refer to the **Cardinal HCM Benefits Reports Catalog**, located on the Cardinal website in **Reports Catalogs** under **Resources**.

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Annuity Plans Enrollment Steps

Annuity plans are administered by the Fringe Benefits Management Company (FBMC). Cardinal stores employees' annuity plan elections to maintain payroll deductions. Enrollment is completed using the following steps:

- Participant enrolls via provided methods
- FBMC submits an upload file Semi-Monthly to Cardinal to process changes (the SPO Calendar can be used to identify the specific date)
- The Load FBMC Upload File process is then run to import the FBMC Upload File into Cardinal. This upload will:
 - Evaluate the employee's eligibility for the cash match based upon their retirement enrollment
 - Automatically updates the individual employee's Annuity Plan election on the **Savings Plan Table (Cardinal Base Benefits page)**
- The Agency Benefits Administrator then runs the FBMC Upload Error Report which will identify any enrollments not successfully updated in Cardinal

For more information and instructions on how to run this report, refer to the **HCM Benefits Reports Catalog**, located on the Cardinal website in **Reports Catalogs** under **Resources**.



Sample FBMC Upload Error Report



Commonwealth of Virginia

FBMC UPLOAD ERROR REPORT

Run Date: 03/25/2021

Run Time: 11:44 00

FILE PROCESSED DATE FROM 25-MAR-2021 TO 25-MAR-2021

Page No. 1 of 3

<u>CMP</u>	<u>EMPLID</u>	<u>LAST NAME</u>	<u>EFF DATE</u>	<u>POST-TAX GEN DED</u>	<u>FBMC FEE</u>	<u>DOA FEE</u>	<u>403B TYPE</u>	<u>403B AMOUNT</u>	<u>CATCHUP AMOUNT</u>	<u>TOTAL AMOUNT</u>	<u>ROTH TYPE</u>	<u>ROTH POST TAX AMT</u>	<u>ERROR MSG</u>
				20.00	2.00	0.15	\$	20.25	0.00	20.25	%	5.00	FBMC Agency has no matching Company in Cardinal
				20.00	2.00	0.15	\$	20.25	0.00	20.25	%	5.00	FBMC Agency 00100 does not use Cardinal Payroll.
				20.00	2.00	0.15	\$	20.25	0.00	20.25	%	5.00	Benefit Plan Error - Employee either didn't have benefit eligibility or missing benefit mapping in Cardinal
				20.00	2.00	0.15	\$	20.25	0.00	20.25	%	5.00	ERROR - Election not processed; No Match on EMPLID or SSN, research and update manually
				20.00	2.00	0.15	\$	20.25	0.00	20.25	%	5.00	Invalid company for the Employee in Cardinal . Please Research and Manually Update.
				20.00	2.00	0.15	\$	20.25	0.00	20.25	%	5.00	SSN on file does not match SSN for EMPLID.
CCC			04/01/2020	10.00	0.00	0.00	%	0.00	0.00	0.00	%	0.00	Employee HR status is inactive in cardinal.
COF			11/10/2019	0.00	0.00	0.00	%	0.00	0.00	0.00	\$	110.00	403b ERROR-Election exists for same EFFDT and amount, research and manual update if necessary.
CVA			04/01/2020	0.00	0.00	0.00	%	0.00	0.00	0.00	%	0.00	MISC Ins. Warning-Added End Date to MISC Ins, Deduction Amt: 0.00.
DMV			04/01/2020	0.00	0.00	0.00	%	0.00	0.00	0.00	%	0.00	MISC Ins. Error-enrollment exists for employee with a date greater than the new election, manually update if needed.
DOA			04/01/2020	10.00	0.00	0.00	%	0.00	0.00	0.00	%	0.00	SSN on file does not match SSN for EMPLID.
DSP			04/01/2020	0.00	0.00	0.00	%	0.00	0.00	0.00	%	0.00	Election not processed, Both EMPLID and SSN not found on incoming file.
DSP			04/01/2020	10.00	1.35	0.15	%	0.00	0.00	0.00	%	0.00	Election received for employee who is currently on Leave of Absence /Suspension
DSP			04/01/2020	20.00	2.00	0.15	%	0.00	0.00	0.00	%	0.00	Invalid company for the Employee in Cardinal . Please Research and Manually Update.
JSR			04/01/2020	0.00	0.00	0.00	\$	0.00	0.00	0.00	\$	0.00	403b ERROR-Election exists for same EFFDT and



Lesson Summary

10

Retirement Plan Enrollments

In this lesson, you learned

- Overview of the VRS Retirement Enrollment Process
- Overview of the Deferred Compensation Process
- Overview of the Annuity Process



Lesson

11

Health Benefit & VRS Billing Reconciliations

This lesson covers the following topics:

- Overview of the Health Benefit Reconciliation Process
- Generating and Reviewing Health Benefit Reconciliation Reports
- Overview of the VRS Billing Reconciliation Process
- Generating and Reviewing VRS Billing Reports



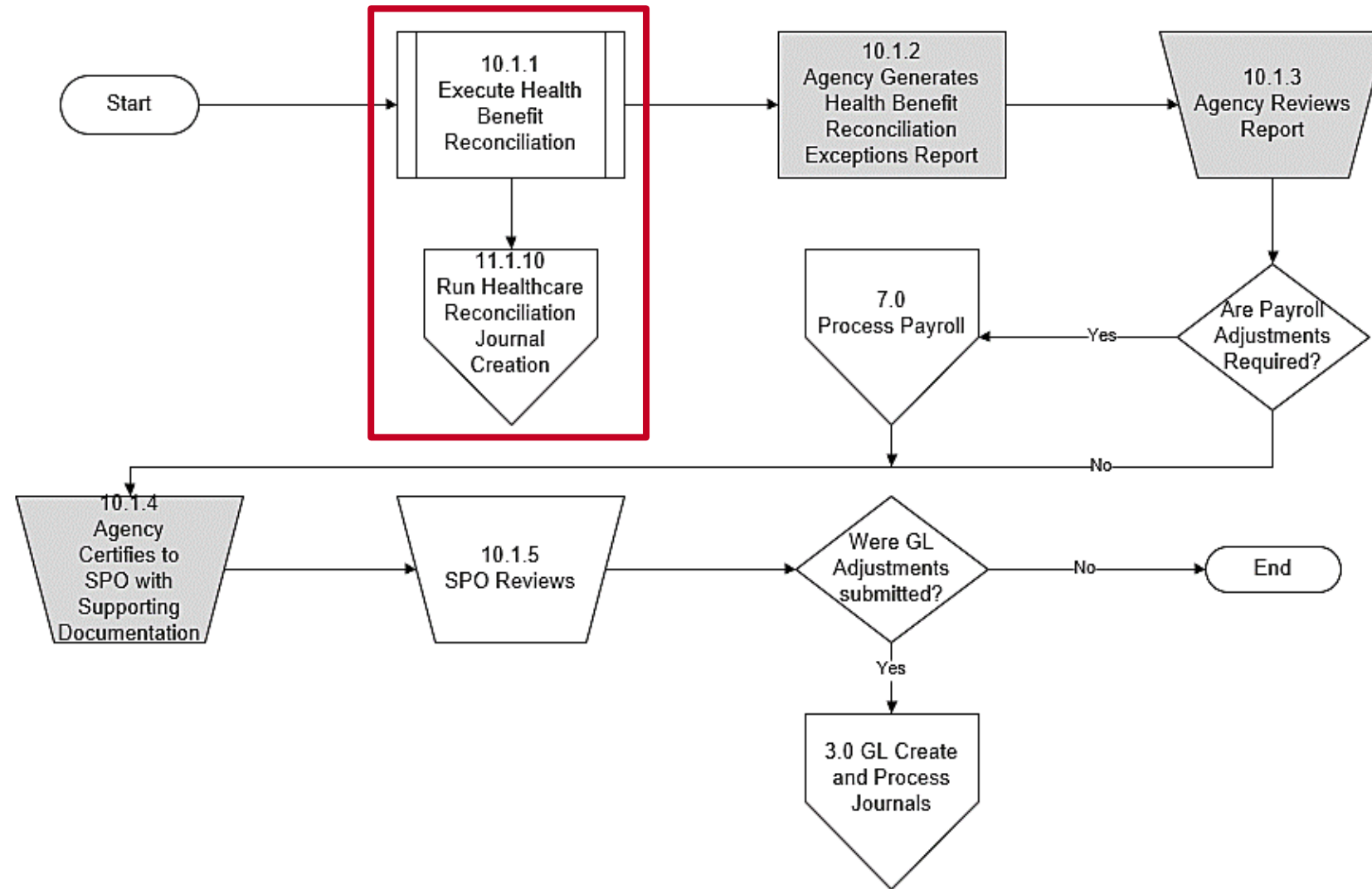
Health Benefit Reconciliation Overview

The Health Benefit Reconciliation process is completed to identify differences between the expected contributions and the amounts collected in Cardinal Payroll for health benefits.

- This reconciliation is completed monthly by an Agency BN or PY Administrator
- This process is only completed by Payroll Agencies. For Agencies supported by the Payroll Service Bureau (PSB), PSB will complete the reconciliation



Health Benefit Reconciliation Process Flow





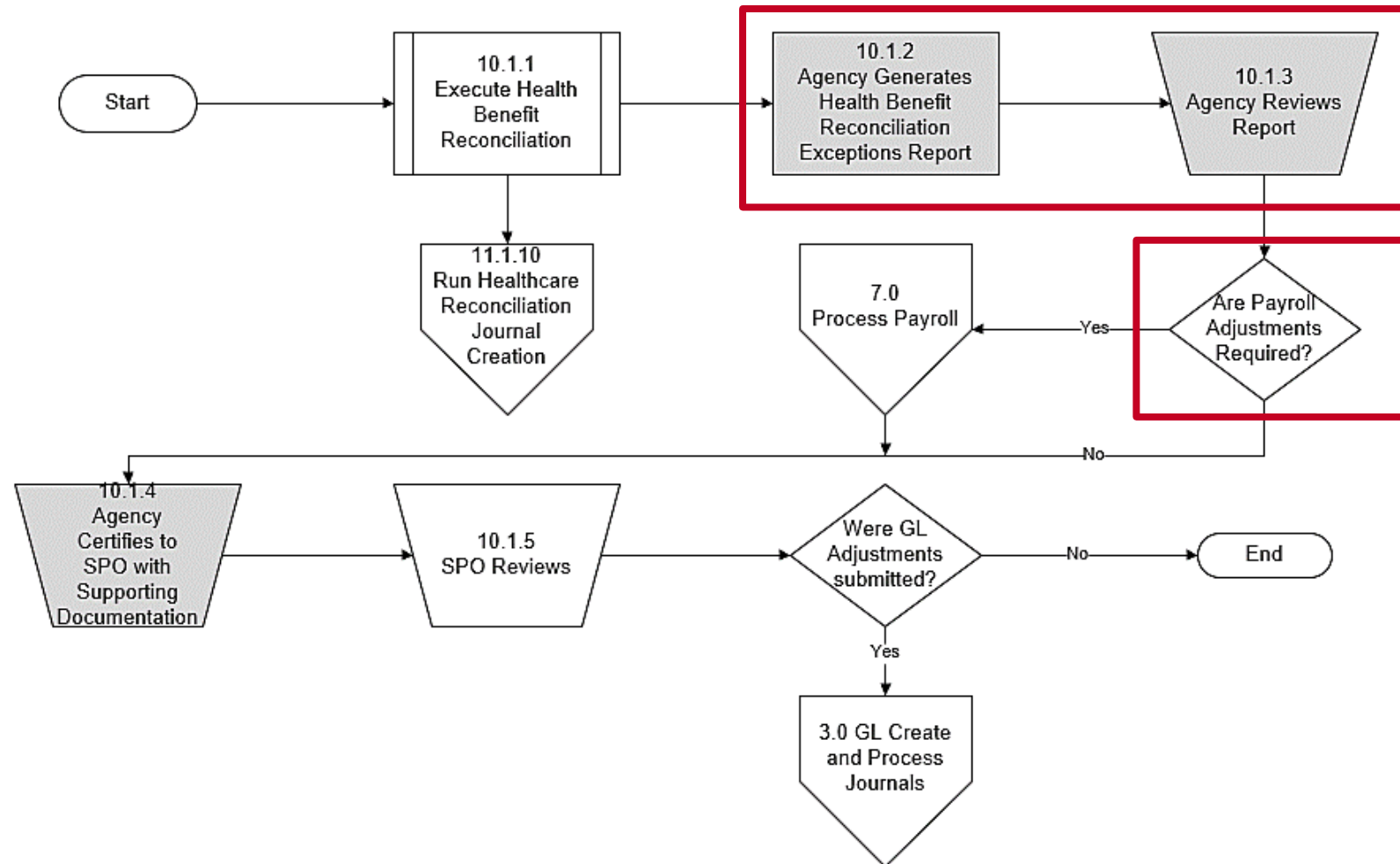
Health Benefit Reconciliation Overview (continued)

The Health Benefit Reconciliation Program is run monthly by the Cardinal PPS Team. This program:

- Automatically compares Cardinal effective dated health benefit enrollments with payroll deductions to determine and report variances in the health benefit premium
- This program does not include retroactive adjustments for previous months
- Automatically generates General Ledger Journals (Healthcare Reconciliation Journal Creation Program) to refund overpayments and charge under collections to the Agencies. This program is run by the Cardinal PPS Team



Health Benefit Reconciliation Process Flow (continued)



Note: For Agencies supported by Payroll Service Bureau (PSB), the steps in gray will be completed by PSB, not the Agency BA.



Reviewing Health Benefit Reports

After the Health Benefit Reconciliation Program is run and the payroll schedule posts, Agency personnel (Benefits Administrators and Payroll Administrators) generate and review the following reports:

- Health Benefit Reconciliation Exception Report

NavBar > Menu > Benefits > Reports > Health Benefit Recon Exception

- Benefit Contribution Register

NavBar > Menu > Benefits > Reports > Contributions and Deductions > Benefit Contribution Register

Health Benefit Reconciliation Exception Report:

- Lists variances between monthly payroll contributions and the enrollment records (e.g., discrepancies between employee premiums, employer premiums, and total premiums)
- Lists variances between the expected amount and payroll amount for Premium Rewards

Agency personnel use this report to identify required General Ledger adjustments and contact SPO accordingly.

For more information and instructions on how to run these reports, refer to the **Cardinal HCM Benefits Reports Catalog**, located on the Cardinal website in **Reports Catalogs** under **Resources**.



Reviewing Health Benefit Reports (continued)

Benefit Contribution Register:

- Lists the employee and employer benefit contributions for all Benefit Plans (summarizes the benefit contributions made in payroll (Cardinal Payroll only) by the employee and the employer)
- Contribution amounts for the current period and the year-to-date are included in this report
- Access is based on Agency Level Security in order to limit the information available for review by a specific user

Agency Benefit Administrators use this report to review the employee and employer benefit contributions.

For more information and instructions on how to run these reports, refer to the **Cardinal HCM Benefits Reports Catalog**, located on the Cardinal website in **Reports Catalogs** under **Resources**.



Sample Health Benefit Recon Exceptions Report (1)



Report ID: RHR070

Commonwealth of Virginia

HEALTH BENEFITS RECON EXCEPTIONS REPORT

Run Date: 11/21/2025

Run Time: 01:01 00

Page No. 136 of 484

Business Unit: [REDACTED]

Coverage Year: 2025

Coverage Month: June

Benefit Group ID: [REDACTED]

Health Plan	Employee Name	EMPLID	Cvg Cd	Ded Cls	Expected Premium	Collected Premium	GL Actvy Charge (Credit)	Ded Not Taken	Arrears Paid Back	Refunds Processed	Possible Action Required
			4	B	522.00	0.00	522.00	0.00	0.00	0.00	Addl premium required
			4	N	2,056.00	0.00	2,056.00	0.00	0.00	0.00	Addl premium required
			1	B	177.00	0.00	177.00	0.00	0.00	0.00	Addl premium required
			1	N	783.00	0.00	783.00	0.00	0.00	0.00	Addl premium required
			1	B	177.00	0.00	177.00	0.00	0.00	0.00	Addl premium required
			1	N	783.00	0.00	783.00	0.00	0.00	0.00	Addl premium required
ACC5 Total							9,970.00				
Deduction: CoVA Care Total							43,137.00				
Deduction: CoVA High Deductible Hlth Plan											
CHD			4	N	1,810.00	0.00	1,810.00	0.00	0.00	0.00	Addl premium required
CHD Total							1,810.00				
Deduction: CoVA High Deductible Hlth Plan Total							1,810.00				
Deduction: Sentara											
OH			4	B	289.00	0.00	289.00	0.00	0.00	0.00	Addl premium required
			4	N	2,004.00	0.00	2,004.00	0.00	0.00	0.00	Addl premium required
			1	B	86.00	0.00	86.00	0.00	0.00	0.00	Addl premium required
			1	N	769.00	0.00	769.00	0.00	0.00	0.00	Addl premium required
			4	B	289.00	0.00	289.00	0.00	0.00	0.00	Addl premium required
			4	N	2,004.00	0.00	2,004.00	0.00	0.00	0.00	Addl premium required
OH Total							5,441.00				
Deduction: Sentara Total							5,441.00				
TDW295071 Group Total							\$ 50,388.00				
Deduction: CoVA Care											
ACC4			1	B	156.00	0.00	156.00	0.00	0.00	0.00	Addl premium required
			1	N	783.00	0.00	783.00	0.00	0.00	0.00	Addl premium required
ACC4 Total							939.00				
Deduction: CoVA Care Total							939.00				
Deduction: Sentara											



Sample Health Benefit Recon Exceptions Report (2) (continued)



Report ID: RHR070

Commonwealth of Virginia

HEALTH BENEFITS RECON EXCEPTIONS REPORT

Run Date: 11/21/2025

Run Time: 01:01 00

Business Unit:

Page No. 138 of 484

Coverage Year: 2025

Coverage Month: June

Employee Health Premium Reward Variances between Benefits and Payroll

Employee Name	EMPLID	Expected Premium Reward	Payroll Premium Reward	Prem Rwd Difference	Possible Action Required
		17.00	0.00	17.00	Employee did not receive correct Premium Reward. Pay difference on next pay period
		17.00	0.00	17.00	Employee did not receive correct Premium Reward. Pay difference on next pay period
		34.00	0.00	34.00	Employee did not receive correct Premium Reward. Pay difference on next pay period
		17.00	8.50	8.50	Employee did not receive correct Premium Reward. Pay difference on next pay period
		17.00	8.50	8.50	Employee did not receive correct Premium Reward. Pay difference on next pay period

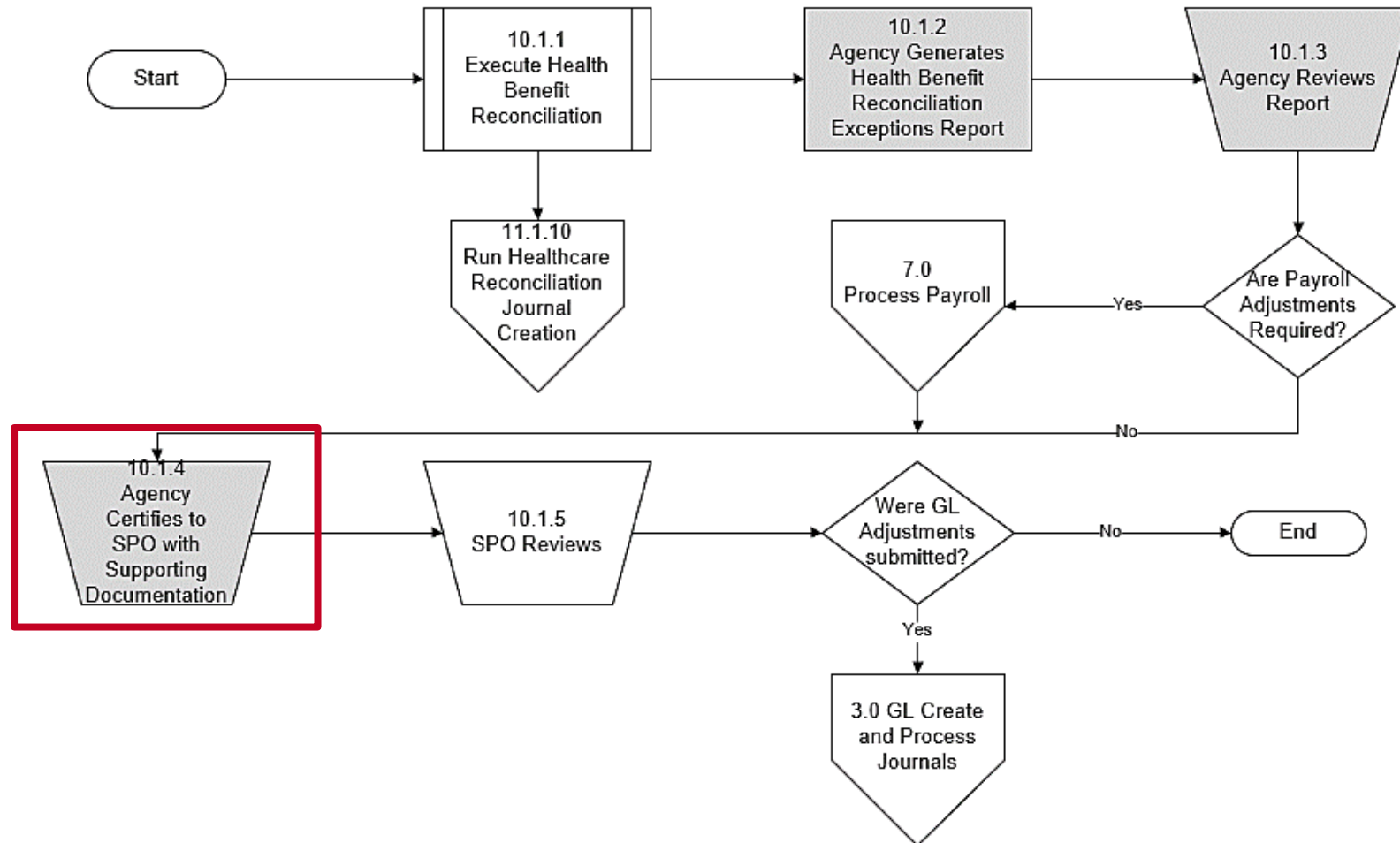


Sample Benefit Contributions Register Report

PeopleSoft MONTHLY BENEFIT CONTRIBUTIONS REGISTER									
Report ID: BEN003					Page No. 1				
Company: ACS Agriculture & Consumer Svcs					Run Date 01/06/2023				
As Of Date:08/31/2022					Run Time 14:13:09				
Ben Program Salaried Employee Benefit Pgm									
Plan Type Medical									
Ben Plan ACC0									
Employee Name	Ben Rcd ID	Employee Rcd ID	Empl Status	Department ID	Department Name	----- Employee Deductions -----		----- Company Contributions -----	
						This Period	YTD	This Period	YTD
	0		A	33200	D and F	217.00	1,627.50	1,268.00	9,510.00
	0		A	33500	Vet Srv	94.00	705.00	709.00	5,317.50
	0		A	33200	D and F	295.00	2,212.50	1,859.00	13,942.50
	0		A	37200	Charit Reg	295.00	2,212.50	1,859.00	13,942.50
	0		A	37500	W and M	94.00	705.00	709.00	5,317.50
	0		A	37400	Plant Ind	94.00	705.00	709.00	5,317.50
	0		A	33200	D and F	94.00	705.00	709.00	5,317.50
	0		A	33400	MPI Srv	217.00	325.50	1,268.00	1,902.00
	0		R	37400	Plant Ind	217.00	2,095.50	1,268.00	13,056.00
	0		A	33200	D and F	94.00	705.00	709.00	5,317.50
	0		A	37200	Charit Reg	217.00	325.50	1,268.00	1,902.00
	0		A	35600	Grain	94.00	705.00	709.00	5,317.50
	0		A	34200	AFID	94.00	705.00	709.00	5,317.50
	0		A	31200	Finance	217.00	1,627.50	1,268.00	9,510.00
	0		A	37400	Plant Ind	295.00	442.50	1,859.00	2,788.50
	0		A	33500	Vet Srv	217.00	1,627.50	1,268.00	9,510.00
	0		A	33300	Lab Srv	295.00	2,212.50	1,859.00	13,942.50
	0		A	31200	Finance	94.00	705.00	709.00	5,317.50
	0		A	30500	Comm	295.00	2,212.50	1,859.00	13,942.50
	0		A	37300	Pesticide	217.00	889.50	1,268.00	6,156.00
	0		A	30600	Policy	295.00	2,212.50	1,859.00	13,942.50
	0		A	33300	Lab Srv	295.00	2,212.50	1,859.00	13,942.50
	0		A	37200	Charit Reg	217.00	1,627.50	1,268.00	9,510.00
	0		A	33100	AFIS Admin	295.00	2,212.50	1,859.00	13,942.50
	0		A	33500	Vet Srv	94.00	705.00	709.00	5,317.50
	0		A	33200	D and F	94.00	705.00	709.00	5,317.50
	0		A	35400	Livestock	295.00	2,212.50	1,859.00	13,942.50
	0		A	31400	Info Sys	295.00	442.50	1,859.00	2,788.50
	0		A	31200	Finance	94.00	423.00	709.00	3,190.50
	0		A	37500	W and M	94.00	141.00	709.00	1,063.50
	0		A	33200	D and F	295.00	2,212.50	1,859.00	13,942.50
	0		A	31400	Info Sys	295.00	442.50	1,859.00	2,788.50
	0		A	35100	CS Admin	217.00	1,627.50	1,268.00	9,510.00
	0		A	33100	AFIS Admin	295.00	2,212.50	1,859.00	13,942.50
	0		A	33200	D and F	295.00	2,212.50	1,859.00	13,942.50
	0		A	37400	Plant Ind	94.00	705.00	709.00	5,317.50
	0		A	37500	W and M	295.00	2,212.50	1,859.00	13,942.50
	0		A	33200	D and F	217.00	1,627.50	1,268.00	9,510.00
	0		A	33500	Vet Srv	295.00	2,212.50	1,859.00	13,942.50
	0		A	33500	Vet Srv	295.00	2,212.50	1,859.00	13,942.50
	0		A	33200	D and F	295.00	2,212.50	1,859.00	13,942.50



Health Benefit Reconciliation Process Flow (continued)



Note: For Agencies supported by Payroll Service Bureau (PSB), the steps in gray will be completed by PSB, not the Agency BA.



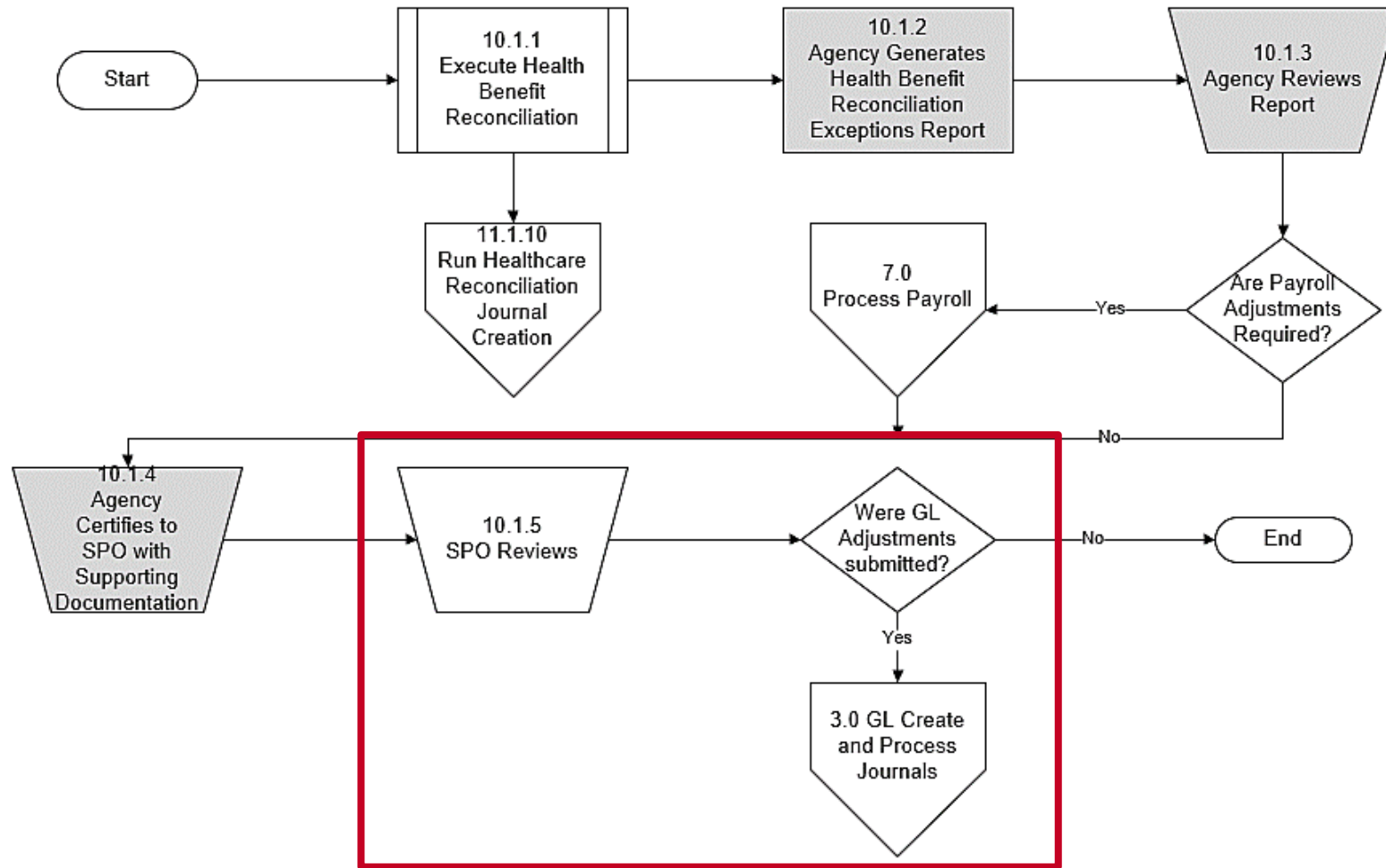
Agency Certification

Once the review is complete, the Agency completes the following:

- Agency Fiscal Officer certifies accuracy by signing the Certification Form after all health benefit premium amount variances and employee Premium Reward variances are reviewed
- Signed Certification Form and all supporting documentation (Certification Packet) is submitted to State Payroll Operations (SPO)



Health Benefit Reconciliation Process Flow (continued)





State Payroll Operations (SPO)

SPO reviews the Certifications Packets as they are received and:

- Verifies the adjustments requested (works with Agency or PSB as needed)
- Submits the GL Journal spreadsheet in accordance with published Cardinal Financials guidelines



VRS Billing Reconciliation Overview

The VRS Billing Reconciliation program runs monthly to compare the VRS retirement billing file with retirement deductions processed through Cardinal Payroll.

The reconciliation identifies differences between the expected retirement contribution amounts according to the employee retirement plan enrollments in VNAV and the retirement contributions actually collected through the combination of employee and employer deductions in Cardinal Payroll.

Examples of discrepancies that could require review and correction include:

- Employee is termed in Cardinal but is still active in VNAV
- New hire isn't showing up in VNAV (but is in Cardinal)
- Retroactive plan changes or enrollments in VNAV
- Employee takes Leave without Pay, and payroll did not collect full month

Resolution to identified discrepancies could include actions to be taken by Agency HR, BN, and PY Administrators.



VNAV to Cardinal Interface

The VNAV snapshot is interfaced to Cardinal at the beginning of each month.

Once the Agency confirms the snapshot, the Cardinal PPS Team completes the following:

- Load the VRS Monthly Retirement Billing File to Cardinal
- Run the VRS Billing Reconciliation Program. The VRS Billing Reconciliation Program includes retroactive adjustments for previous months as corrections are made



VRS Billing Reports and Queries

Once the VRS Billing Reconciliation Program is run, there are two reports and one query that Agency PY Administrators and SPO will run to complete the reconciliation.

- VRS Billing Detail Query
- VRS Billing Exceptions Report
- VRS Billing Summary Report



VRS Billing Detail Query

This query lists the transactions from the VRS Billing Upload File. It includes the total contribution amounts for each transaction and each Retirement Plan and Includes error messages if a transaction could not be reconciled. Navigate to this query using the following path:

NavBar > Menu > Reporting Tools > Query > Query Viewer > V_VRS_BILLING REPORT

V_VRS_BILLING_REPORT - VRS Billing Detail Report

Year2025

Month (Leave Blank for All)6

Emplid (Leave Blank for All)

Bus Unit (Leave Blank for All)

View Results

Download results in : Excel Spreadsheet CSV Text File XML File (566 kb)

View All

First4501-530 of 530Last

Row	Company	Bill Bus Unit	Job Bus Unit	Dept ID	Cardinal VRS Org Code	Months-Pays	Grandfathered	BIB VRS Org Code	EMPLID	Name	Empl Status	MONTH YEAR	VRS Plan Code	RETIRE_EE_AMT	RETIRE_ER_AM	PPS_TAX	PPS_AMT	GRP_LIFE_AMT	LTD_AMT	HIC_AMT	Error Ind	Error Message
501	MAS				30602	12-24		30602			A	6 2025 HB		415.83	1301.54	N	0.00	122.67	51.95	116.43		
502	MAS				30602	12-24		30602			A	6 2025 HB		285.83	894.65	N	0.00	84.32	35.73	80.03		
503	MAS				30602	12-24		30602			A	6 2025 HB		252.82	791.32	N	0.00	74.55	31.60	70.79		
504	MAS				30602	12-24		30602			A	6 2025 HB		273.07	854.72	N	0.00	80.56	34.13	76.46		
505	MAS				30602	12-24		30602			A	6 2025 HB		216.67	678.17	N	0.00	63.92	27.05	60.67		
506	MAS				30602	12-24		30602			A	6 2025 HB		280.00	876.40	N	0.00	82.60	35.00	78.40		
507	MAS				30602	12-24		30602			A	6 2025 HB		276.67	865.97	N	0.00	81.62	34.55	77.47		
508	MAS				30602	12-24		30602			A	6 2025 HB		515.00	1611.95	N	0.00	151.92	64.35	144.20		
509	MAS				30602	12-24		30602			A	6 2025 HB		282.61	884.57	N	0.00	83.37	35.33	79.13		
510	MAS				30602	12-24		30602			A	6 2025 HB		287.75	838.06	N	0.00	78.99	33.47	74.97		
511	MAS				30602	12-24		30602			A	6 2025 HB		209.57	655.95	N	0.00	61.82	26.20	58.65		
512	MAS				30602	12-24		30602			A	6 2025 HB		209.57	655.95	N	0.00	61.82	26.20	58.65		
513	MAS				30602	12-24		30602			A	6 2025 VN		281.96	655.95	N	0.00	61.82	26.20	58.65		



VRS Billing Exceptions Report

This report lists the variances between the retirement costs in VNAV and the retirement contributions in Cardinal Payroll. Exceptions are grouped by VRS Org Code and Retirement Plan. Navigate to this report using the following path:

NavBar > Menu > Benefits > Reports > VRS Billing Exceptions



Commonwealth of Virginia

VRS BILLING EXCEPTIONS REPORT

Report ID: RHR078

Run Date: 11/17/2025

Run Time: 04:03 00

Business Unit:

Current Year: 2025

Current Month: JUN

POSTED

Page No. 1 of 520

EMPLID	Name	Pay Status	Dedcd	Benefit Plan	EE VRS Bill	EE Payroll Deduction	EE Recon GL Adjustment	ER VRS Bill	ER Payroll Deduction	ER Recon GL Adjustment
		A	HVRMDB	HVRMDB	300.00	380.00	-80.00	939.00	1,189.40	-250.40
Section Total					300.00	380.00	-80.00	939.00	1,189.40	-250.40
Benefit Section: Group Term Life										
		A	GRPLFR	GTLR	0.00	0.00	0.00	0.00	21.24	-21.24
		A	GRPLFR	GTLR	0.00	0.00	0.00	88.50	112.10	-23.60
Section Total					0.00	0.00	0.00	88.50	133.34	-44.84
Benefit Section: Retiree Health Credit										
		A	RETHCR	RTCRDR	0.00	0.00	0.00	0.00	20.16	-20.16
		A	RETHCR	RTCRDR	0.00	0.00	0.00	84.00	106.40	-22.40
Section Total					0.00	0.00	0.00	84.00	126.56	-42.56
Benefit Section: VSDP LTD										
		A	SDLTDR	VSDPR	0.00	0.00	0.00	37.50	47.50	-10.00
Section Total					0.00	0.00	0.00	37.50	47.50	-10.00
ORG Code Total					300.00	380.00	-80.00	1,149.00	1,496.80	-347.80
BU Total					300.00	380.00	-80.00	1,149.00	1,496.80	-347.80



VRS Billing Summary Report

This report is used to identify and review the differences between the total retirement costs in VNAV, and the contributions deducted in Cardinal Payroll. It compares totals and is grouped by VRS Org Code and Retirement Plan. You can navigate to this report using the following path:

NavBar > Menu > Benefits > Reports > VRS Billing Summary

 Report ID: RKR079 Commonwealth of Virginia VRS BILLING SUMMARY REPORT Run Date: 11/21/2025 Run Time: 12:49 00												
Page No. 1 of 49												
POSTED												
Billing Month : June 2025												
BU	VRS Org Code	Benefit Plan Type	GL Acct EE	VRS Bill Amt EE	Payroll Amt EE	GL Adjstamt EE	Rounding Non Billed EE	GL Acct ER	VRS Bill Amt ER	Payroll Amt ER	GL Adjstamt ER	Rounding Non Billed ER
10000	30100	Employee Retirement DB	5011110	30,526.21	30,606.15	-80.00	0.06	5011110	92,987.70	93,238.18	-250.40	-0.08
		General Deduction	5011110	0.00	0.00	0.00	0.00	5011110	0.00	0.00	0.00	0.00
		Group Term Life		0.00	0.00	0.00	0.00	5011140	8,545.33	8,590.20	-44.84	-0.03
		Retiree Health Credit		0.00	0.00	0.00	0.00	5011160	8,110.80	8,153.60	-42.56	-0.24
		VSOB LTD		0.00	0.00	0.00	0.00	5011170	3,190.04	3,199.81	-10.00	0.23
		Org Code Total		30,526.21	30,606.15	-80.00	0.06		112,933.87	113,181.79	-347.80	-0.12
		Plan Type Total										
		Employee Retirement DB		30,526.21	30,606.15	-80.00	0.06		92,987.70	93,238.18	-250.40	-0.08
		VSOB LTD		0.00	0.00	0.00	0.00		3,190.04	3,199.81	-10.00	0.23
		Group Term Life		0.00	0.00	0.00	0.00		8,545.33	8,590.20	-44.84	-0.03
10100	30101	Employee Retirement DB	5011110	49,346.75	50,080.55	-733.78	-0.02	5011110	150,938.23	152,099.68	-1,161.75	0.30
		General Deduction	5011110	0.00	0.00	0.00	0.00	5011110	0.00	0.00	0.00	0.00
		Group Term Life		0.00	0.00	0.00	0.00	5011140	13,933.67	14,063.61	-129.93	-0.01
		Retiree Health Credit		0.00	0.00	0.00	0.00	5011160	13,232.33	13,347.89	-115.37	-0.19
		VSOB LTD		0.00	0.00	0.00	0.00	5011170	4,899.50	4,956.48	-57.27	0.29
		Org Code Total		49,346.75	50,080.55	-733.78	-0.02		183,003.73	184,467.66	-1,464.32	0.39
		Plan Type Total										
		Employee Retirement DB		49,346.75	50,080.55	-733.78	-0.02		150,938.23	152,099.68	-1,161.75	0.30
		VSOB LTD		0.00	0.00	0.00	0.00		4,899.50	4,956.48	-57.27	0.29
		Group Term Life		0.00	0.00	0.00	0.00		13,933.67	14,063.61	-129.93	-0.01
10300	30103	Employee Retirement DB	5011110	97,247.18	97,351.90	-104.80	0.08	5011110	273,742.01	274,069.24	-328.01	0.78
		General Deduction	5011110	306.30	306.30	0.00	0.00	5011110	0.00	0.00	0.00	0.00
		Group Term Life		0.00	0.00	0.00	0.00	5011140	25,923.20	25,954.67	-30.92	-0.55
		Retiree Health Credit		0.00	0.00	0.00	0.00	5011160	24,498.02	24,517.72	-29.34	-0.36
		VSOB LTD		0.00	0.00	0.00	0.00	5011170	10,617.39	10,631.30	-13.10	-0.82
		Org Code Total		97,553.48	97,658.20	-104.80	0.08		334,770.62	335,172.93	-401.37	-0.95
		Plan Type Total										
		Employee Retirement DB		97,247.18	97,351.90	-104.80	0.08		273,742.01	274,069.24	-328.01	0.78
		VSOB LTD		0.00	0.00	0.00	0.00		0.00	0.00	0.00	0.00
		Group Term Life		0.00	0.00	0.00	0.00		25,923.20	25,954.67	-30.92	-0.55



Review and Resolve Discrepancies

Agency Payroll Administrators are required to review the VRS Billing Reports and Queries.

As needed, Agency Payroll Administrators will work with HR/BN Administrators to make corrections in VNAV and/or Cardinal



Lesson Summary

11

Health Benefit & VRS Billing Reconciliations

In this lesson, you learned

- An Overview of the Health Benefit Reconciliation Process
- How to Generate and Review Health Benefit Reconciliation Reports
- An Overview of the VRS Billing Reconciliation Process
- How to Generate and Review VRP Billing Reports



Course Summary

BN361

Cardinal Employee Benefit Enrollment and Maintenance

In this course, you learned

- An overview of Cardinal and Benefits
- The key concepts pertaining to Benefit Events and Programs
- An overview of Benefits navigation
- How to process New Hire Enrollments and Manual Benefit Events
- How to view other Employee and Dependent Benefits information
- How to administer ACA Administration
- An overview of Retirement Plan Enrollments
- An overview on how to process Retirements
- How to complete Health Benefits Reconciliation



Appendix

- Event Statuses
- Event Process Statuses
- Process Indicators
- Flowchart Key



Recommended Agency BA Reports Cadence

Report Name	Report Description	Cadence
Cardinal Enrollment Report	This report provides employee benefit enrollment information including health, FSA, premium reward, and medical premiums.	
Benefit Eligibility Audits Report	Lists employees and associated dependents approaching an age-related milestone that requires health care enrollment changes to remain compliant with policy. Report also identifies outstanding approvals for new dependents and disabled dependents that may need to be re-certified as disabled.	Daily
Benefit Event Status Report	This report lists all participants in a particular process status or set of status levels.	Daily
Base Benefit Consistency Audit Report	This report displays data that has been entered into the benefit plan, employee data, dependent data, or enrollment data pages which does not appear to follow policy or regulations. The identified items could simply require corrections to some data elements or could require enrollment changes.	Monthly
VRS Missing Query	This query provides Agencies the missing setup for the Retirement Benefit Deductions. It includes employees that are missing any of the following: Elig Config 1, VRS Addl Pay, Retirement Plan.	Weekly

Notes: For a full list of Benefit Reports and Queries refer to the **Cardinal HCM Benefits Reports Catalog** which is located on the Cardinal website under **Resources**. Cadence is a suggestion; reports and queries can be run ad-hoc.



Event Statuses

An Event typically has 3 statuses: Open, Close, or Void. Events must have an Event Status of "Open" to be processed or reprocessed:

Event Status	Description
Open (O)	Cardinal will process on the next run of the Benefits Administration process. Only one event per Employee ID and Benefit Record Number combination can be opened at one time. The Event Status can be updated to "Close" automatically by Cardinal or manually on the Event Status Update page.
Close (C)	Not currently processed by the system. Closed events can be updated to "Open", either automatically by Cardinal or manually on the Event Status Update page.
Void (V)	Has been backed out of the system and all related eligibility processing has been reversed. Use the Event Status Update page to change the Event Status to "Void". Events with an Event Status of "Void" can be updated to "Open" or "Close" through the Event reprocessing steps.



Event Process Statuses

The Event Process Status indicates if a step has been completed and displays any processing errors for each completed step:

Process Status	Reason
Assign Benefit Program	
Assign None (AN)	Benefits Administration was unable to assign a benefit program. This could be a result of the Benefit Flag set to a terminated Employee Record.
Assign Error (AE)	Benefits Administration was unable to assign Benefit Program due to missing or incorrect information.
Assigned (AS)	Benefits Administration assigned a Benefit Program because a prior event is Open. It is possible the Open Event is appearing on the MSC Event Evaluation report.
Prepare Options	
Prepare Error (PE)	Error in preparation of options. The system has encountered an error. This could be a result of a missing ICI ABBR or a missing payroll calendar.
Prepared (PR)	Cardinal calculated eligible options, credits, rates, and proof requirements for the employee associated with the event, and current elections have been identified for proof, eligibility level, and default processing.
Notified (NT)	The employee accessed the Self-Service event but has not submitted elections.



Event Process Statuses (continued)

Process Status	Reason
Enter Elections	
Elections Error (EE)	Cardinal encountered an error while attempting to process the employee's elections. This could be a result of the dependent effective dates, a mismatch between coverage code and listed dependents, or a missing pay calendar.
Re-Enter (RE)	BA reopened event
Elections Entered (ET)	BA (or the employee through ESS) entered new elections, which are ready for validation through the Benefits Administration Process.
Finalize Enrollments	
Finalized – Benefit Pgm None (FA)	Employee event has no program assignment or current elections. This could be a result of the Benefit Flag set to a terminated Empl Rcd. It could also be the result of an address change when employee is not active.
Finalized – Prepare None (FP)	Benefit Administration is acknowledging that the employee's eligibility has not changed.
Finalized – Enrolled (FE)	Benefits Administration processing is complete for the employee event. All elections have been validated and loaded.



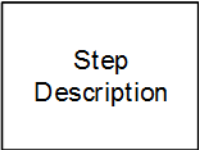
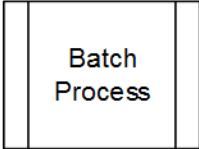
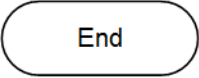
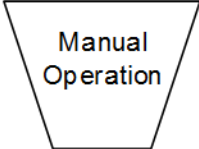
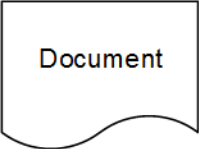
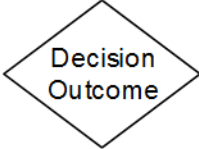
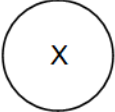
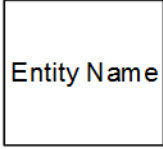
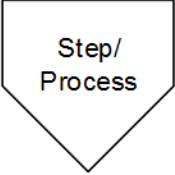
Process Indicators

The Process Indicator tells Cardinal how far back to open the event. Below are the descriptions for each Process Indicator:

Symbol	Name	Description
A	Assign Benefit Program	Cardinal is attempting to reprocess the participant to a “Prepared” status.
E	Elect Options	Cardinal is revalidating elections for the event and resetting the final process to a “Finalized – Enrolled” status.
N	Normal Processing	Cardinal is following standard processing procedures.
P	Prepare Options	Cardinal is re-evaluating the participant’s option eligibility and attempting to reprocess the participant to a “Prepared” status.
R	Re-Enter	Cardinal reopens the data entry page to enable election changes, resulting in a “Re-Enter” or “Elections Entered” status.
V	Void	Cardinal is voiding an event. When you void an event, it stays in the status that it was in when it was voided.



Flowchart Key

	Depicts a process step or interface.		Indicates point at which the process begins. Does not represent any activity.
	Specifies a batch process.		Indicates point at which the process ends. Does not represent any activity.
	Depicts a process step that is preformed manually.		Depicts a document of any kind, either electronic or hard copy.
	Defines the possible outcomes of a decision or analysis that took place in a step immediately preceding.		Indicates an on-page or intra process connector. Used to avoid complex overlapping connector lines or to continue a process on a subsequent page.
	Represents an entity (person, organization, etc.).		Connects steps between business processes.