478-2-.03 General Provisions. Amended.

(1) **Applicability.** All employees who become eligible for coverage under the Flexible Benefit Plan shall be enrolled or permitted to change coverage type only in accordance with these regulations; all departments covered by the Act shall administer the Plan and any departmental sponsored optional plans in accordance with these regulations. (07-30-86/08-08-86)

(2) **Conformity with Federal Requirements.** This Plan shall be administered in accordance with the applicable federal laws, including but not limited to the Internal Revenue Code of 1986, as amended, and any other applicable federal laws and the regulations promulgated there under. (12-20-88/01-19-89)

(3) **Records.** The Plan records shall be maintained as directed by the Commissioner in accordance with the provisions of the Georgia Records Act and the applicable provisions of Title 33 of the Official Code of Georgia Annotated. Each department shall maintain the employee personnel and payroll records in accordance with the Georgia Records Act. (Authority O.C.G.A. 50-18-94) (07-30-86/08-08-86)

(a) **Minimum Record Standards.** The individualized option statement shall constitute the summary enrollment form and summary declination form if the employee chooses not to enroll in the particular option of the Plan, except for the Health Benefit Plan option. Enrollment, changes to the health option and declination forms shall be required in accordance with the State Health Benefit Plan Regulations. Each department shall maintain in the employee’s personnel or payroll file the original or a clearly legible copy of the employee’s signed option statement; if the employee is enrolled in the life insurance benefits, a signed beneficiary form and a decision statement of medical underwriting requirements, if applicable; if the employee is enrolled in the disability options, a decision statement of medical underwriting requirements, if applicable; and if the employee is enrolled in health benefits, a signed health benefit form indicating
the employee’s selection shall be maintained in the employee’s personnel or payroll
file. (06-28-90/07-01-90)

(b) Record Transfer Upon Employment Transfer. Each department shall transfer the
employee’s option statement, beneficiary form, and medical underwriting forms, if
applicable, to the receiving department. These records substantiate the agreement
between the employer and the employee for salary reduction and can be modified
only in compliance with these regulations and the Flexible Benefit Plan. The
receiving department is authorized to utilize the shared computerized data base
maintained by the departments and the Administrator to determine the insurance
options for which the employee is enrolled until the employee records have been
transferred. (06-28-90/07-01-90)

(4) Employee and Department Responsibilities. The employee and department
share the responsibility for assuring that the premium payments and spending account
contributions for the options selected are being accurately deducted or reduced from the
employee’s compensation. Both the employee and the department share the responsibility
for assuring compliance with all contractual and administrative requirements as outlined
in the communications materials. The employee shall not be permitted to change the
selected options after the first of the month in which the deductions or reductions are
scheduled, except in accordance with these regulations. (12-20-88/01-19-89)

(a) If the benefit percentage reimbursement level or coverage level is less than that
selected by the employee and it is reasonable to conclude by documentation that the
employee selected the coverage, premium amounts shall be collected for the
applicable reduction or deduction. In such cases, appropriate adjustments
corresponding to the applicable premium shall be made in the employee’s benefits.
Documentation shall include the employee’s completed salary agreement and forms
that are required by the Administrator or contractors providing benefits. Benefit
adjustments will go into effect on the first eligible effective date or if more than twelve
(12) months of premium payments are to be collected, the most recent open
enrollment period effective date. Benefit adjustments for the health benefits option will go into effect in accordance with the Regulations of the State Personnel Board for Health Benefit Plan. (06-28-90/07-01-90)

(b) If the benefit percentage reimbursement level or coverage level is greater than that selected by the employee and continues without notification of the error to the department or the Administrator on or before the end of the month following three (3) monthly reductions/deductions or the end of the month of the seventh (7th) semi-monthly reduction/deduction, the employee shall be deemed to have selected the options corresponding to the deduction or reduction amount. If the employee notifies the department or the Administrator of an erroneous deduction or reduction prior to or at the time stipulated in this paragraph of the incorrect premium or contribution payments, the employee shall be refunded or paid the amount of deduction or reduction when there is no liability incurred against the option. (06-28-90/07-01-90)

(c) If the Administrator concludes from documentation that the employee was not provided information on which to make benefit selections, the employee shall be provided the opportunity to enroll under the same conditions that would have applied had the employee been offered benefits in accordance with these Regulations. (12-20-88/01-19-89)

(d) If the Administrator concludes from documentation that the contractual requirements were not met jointly by the department and employee for the benefit reimbursement level or coverage level selected by the employee, coverage will be adjusted retroactively to comply with the contractual agreements. Documentation must indicate a failure by the department and employee to comply with the contractual provisions. (06-28-90/07-01-90)
(5) **Employee’s Responsibility.** The Employee is responsible for the requirements as outlined below. (12-20-88/01-19-89)

(a) Beneficiary Form. The employee is responsible for the accuracy of his Flexible Benefit Program beneficiary form for the life and accidental death and dismemberment options. Benefits will be paid on the basis of the most recently filed beneficiary form. A new beneficiary form is not considered filed until signed by the employee and received by and filed with the employee’s department. If there is a conflict regarding the payment of benefits, proceeds will be paid in accordance with applicable laws, regulations, policies and contracts. (03-27-97/04-09-97)

(b) Medical Underwriting. The employee is responsible for the completion of all phases of the medical underwriting process when required by contract for the requested type or level of insurance coverage. If the employee fails to complete all phases of the required process by the established deadlines, upon notification from the Administrator or insurance contractor, the department has the responsibility to notify the employee and adjust the employee’s request to the guaranteed amount or discontinue as appropriate. Notification of the failure by the employee to complete the medical underwriting process may be through written correspondence or electronic means. (03-27-97/04-09-97)

(c) Appeals of Medical Underwriting Decisions. The employee may appeal medical underwriting decisions in accordance with specific insurance contract provisions. Should the initial negative decision be reversed, salary reductions/deductions shall be contributed retroactive to the effective date of the requested coverage. (06-28-90/07-01-90)

(6) **Gender and Number.** Except when otherwise indicated by the context, any masculine terminology herein shall also include the feminine, and the definition of any terms in the singular shall also include the plural. (07-30-86/08-08-86)
Note: Dates following each paragraph represent (approval/effective) dates.

Authority O.C.G.A. Secs. 45-18-52, 45-18-51(g).

History. Original Rule entitled “General Provisions” was filed on September 25, 1986; having become effective August 8, 1986, as specified by the Board.
Amended: F. May 17, 1989; eff. Jan. 19, 1989, as specified by the Board.
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