

**Benefits – Health for Qualified Domestic Partner**

**PA30**

- Purpose** Use this procedure to update an employee’s dental and/or medical plan for qualified domestic partner status.
- Trigger** Perform this procedure when setting up a qualified domestic partner medical coverage.
- Prerequisites**
  - The dental and/or medical plan must be already set-up on the *Health Plans* (0167) infotype.
- End User Roles** In order to perform this transaction you must be assigned the following role: Benefits Processor

Change History	
Date	Change Description
7/20/2009	New procedure created.
7/9/2010	Converted into new MS Word format. Change all references of ‘ <i>Same Sex Domestic Partner</i> ’ to ‘ <i>Qualified Domestic Partner</i> ’. Updated all screenshots.
03/25/2013	Note added about Same Gender Marriage

**Menu Path** Human Resources → Personnel Management → Administration → HR Master Data → Maintain

**Transaction Code** PA30

<p><b>Helpful Hints</b></p>	 Dental and medical insurance coverage updates will be done by an interface from Health Care Authority (HCA). Changes to the dental and medical insurance coverage should not be done in HRMS except when changing the dependent coverage to Qualified Domestic Partner Status/Children/Family. The HCA interface will only update an employee’s dependent coverage to the following: Employee + Spouse, Employee + Children, or Employee + Family.
	<p>As of December 6, 2012 Washington State recognizes <b>same gender marriage</b>. For PEBB benefits purposes, spouses are eligible regardless of the spouse’s gender.</p> <p>However, federal law has not changed and same-gender marriages are not recognized at the federal level. Therefore, imputed income and additional post-tax premiums apply to same-gender marriages in the same way that they apply to domestic partnerships. The only exception is if the same-gender spouse qualifies as a tax dependent under IRC Section 152, as modified by IRC Section 105(b).</p> <p>Therefore, when coding dependent coverage for same-gender marriages in HRMS, use the existing domestic partnership codes (MED5 – MED8 and DEN1 – DEN4) in</p>

the Dependent Coverage field on infotype 0167.

Dependent Coverage (1) 8

Restrictions

Dep.	Description
MED1	Employee
MED2	Employee + Spouse
MED3	Employee + Children
MED4	Employee + Family
MED5	Emp + NQ DP
MED6	Emp + NQ Children
MED7	Emp + NQ Family
MED8	Emp + Child + NQ DP

Use MED5 – MED8 for same-gender marriages.

Dependent Coverage (1) 9

Restrictions

Dep.	Description
DEN0	Dental All others
DEN1	Dental + NQ DP
DEN2	Dental + NQ Children
DEN3	Dental+NQ Family
DEN4	Dental+Child+NQ DP
DNT1	Dental Employee
DNT2	Dental EE + Spouse
DNT3	Dental EE + Children
DNT4	Dental EE + Family

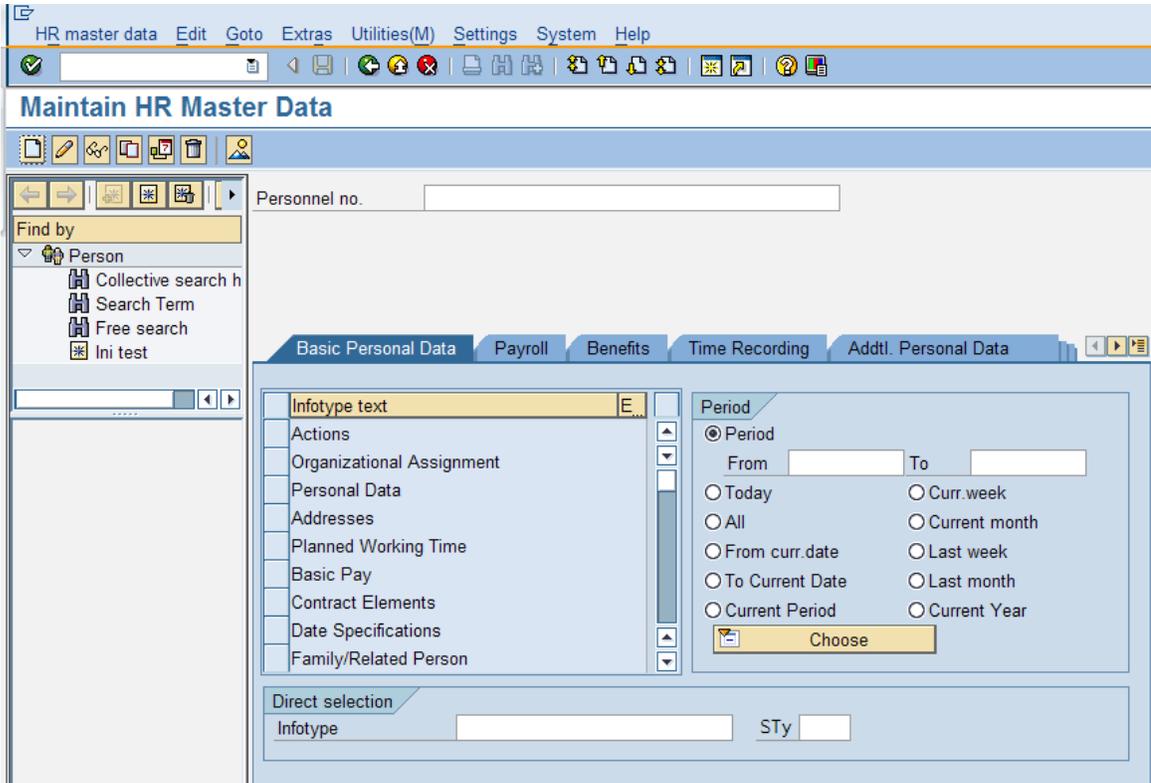
Use DEN1 – DEN4 for same-gender marriages.

The system may display three types of messages at various points in the process. The messages you see may differ from those shown on screen shots in this procedure. The types of messages and responses are shown below:

Message Type	Description
<b>Error</b> 	<b>Example:</b>  Make an entry in all required fields. <b>Action:</b> Fix the problem(s) and then click  (Enter) to validate and proceed.
<b>Warning</b> 	<b>Example:</b>  Record valid from xx/xx/xxxx to 12/31/9999 delimited at end. <b>Action:</b> If an action is required, perform the action. Otherwise, click  (Enter) to validate and proceed.
<b>Confirmation</b>  or 	<b>Example:</b>  Save your entries. <b>Action:</b> Perform the required action to proceed.

**Procedure**

1. Start the transaction using the above menu path or transaction code **PA30**.



2. Complete the following fields:

R=Required Entry O=Optional Entry C=Conditional Entry		
Field Name	R/O/C	Description
Personnel no.	R	The employee's unique identifying number. <b>Example:</b> 40000264

3. Click the  tab.
4. Click the gray box to the left of  to select.
5. Click  (Overview) for an overview of all action associated with the Health Plans (0167).

6. Select the medical or dental record you would like to update by clicking blue box to the left of the record.

09/30/2007	12/31/2010	MEDI	Medical	GHC	Group Health Coop Classic
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7. Click  (Copy) to copy and continue.

Personnel No. 40000264 Name CARTER JOSEPHINE

PersArea 1111 Information Services Division EEGroup 0 Permanent

PSubarea 0001 Non Represented EESubgroup 06 M-OT Elig>40hrs/wk Status Active

Choose 01/01/1800 to 12/31/9999 STy.

Start Date	End Date	Type	Text	Plan	Text
12/01/2006	12/31/9999	DENT	Dental	DEL T	Delta Dental
09/30/2007	12/31/9999	MEDI	Medical	GHC	Group Health Coop Classic
12/01/2006	09/29/2007	MEDI	Medical	GHC	Group Health Coop Classic

8. Complete the following fields:

R=Required Entry O=Optional Entry C=Conditional Entry		
Field Name	R/O/C	Description
Start (date)	R	The effective date of the action. <b>Example:</b> 1/1/2011
Dependent Coverage	R	This is the type of family composition covered by a dental and/or medical plan.  Click  (Matchcode) to open the selection list.  The only coverage an agency should select is the Domestic Partner selections. <b>Example:</b> MED5 Emp + NQ DP

The screenshot shows a web application interface for managing health plans. At the top, there is a menu bar with 'Infotype', 'Edit', 'Goto', 'Extras', 'System', and 'Help'. Below the menu is a toolbar with various icons. The main content area is titled 'Copy Health Plans' and contains the following information:

Personnel No. 40000264 Name CARTER JOSEPHINE  
 PersArea 1111 Information Services Division EEGroup 0 Permanent  
 PSubarea 0001 Non Represented EESubgroup 06 M-OT Elig>40hrs/wk Status Active  
 Start 01/01/2011 to 12/31/9999  
 Plan GHC Group Health Coop Classic

Below this information are tabs for 'Plan data', 'Administration', 'Costs', 'Dependents', and 'Additional data'. The 'Plan data' tab is selected, showing the following details:

General plan data  
 Benefit area US USA  
 Plan type MEDI Medical  
 Benefit plan GHC Group Health Coop Classic  
 Health Plan Option GHC Group Health Cooperative  
 Dependent Coverage MED5 Emp + NQ DP

Planning Parameters  
 Cost Rule Variant GHC4 Employee + NQ DP

9.  (Enter) to validate the information.
10.  (Save) to save.
11. You will be taken back to the List Health Plans (Overview) screen. You may repeat steps 6-10 to update the medical or dental dependent coverage if needed.

Infotype Edit Goto Extras System Help

**List Health Plans**

Personnel No. 40000264 Name CARTER JOSEPHINE

PersArea 1111 Information Services Division EEGroup 0 Permanent

PSubarea 0001 Non Represented EESubgroup 06 M-OT Elig>40hrs/wk Status Active

Choose 01/01/1800 to 12/31/9999 STy.

Start Date	End Date	Type	Text	Plan	Text
12/01/2006	12/31/9999	DENT	Dental	DELT	Delta Dental
01/01/2011	12/31/9999	MEDI	Medical	GHC	Group Health Coop Classic
09/30/2007	12/31/2010	MEDI	Medical	GHC	Group Health Coop Classic
12/01/2006	09/29/2007	MEDI	Medical	GHC	Group Health Coop Classic

12. You have completed this transaction.

<b>Results</b>
You have successfully changed the employee's medical and/or dental dependent coverage.
<b>Comments</b>
None.