TIPS

TRIBAL INSURANCE PROCESSING SYSTEM

Tribal Insurance Processing System (TIPS) 101

Participant Guide

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Course Objectives

By the end of this course, you should be able to:

- Describe the FEHB key stakeholders relative to TIPS.
- Identify how TIPS supports Tribal Employers.
- Explain the employee enrollment process.
- Explain the billing and payment processes.
- Enroll employees in TIPS using individual forms and Electronic Uploads.
- Run and review TIPS Reports and Billing Reports in TIPS.
- Describe special transactions including: Billing Unit/POI Transfers, Retroactive Adjustments, and Court Orders.
- Demonstrate how to navigate the TIPS website.
- Submit an inquiry using the ServiceNow Customer Service Portal.

Lesson 1 Objectives: FEHB Overview

By the end of this lesson, you should be able to:

- Describe the FEHB program.
- Identify the legislation that extends FEHB to Indian Tribes, Tribal Organizations, and Urban Indian Organizations.
- Identify who is eligible for FEHB.
- List the key stakeholders in FEHB relative to TIPS.
- Explain how FEHB key stakeholders interact with each other.
- Describe how Tribal Employers join FEHB and the FEHB Tribal Agreement Package.

About NFC: Background

The U.S. Department of Agriculture's (USDA) NFC is located in New Orleans, Louisiana.

NFC's mission is to provide reliable, cost-effective, employee-centric systems and services to Federal organizations, thus allowing its customers to focus on serving the Nation.

NFC provides administrative payments, payroll/personnel processing, and accounting services to over 170 Federal organizations.

## FEHB Overview: FEHB and Tribal Employer Participation

What is FEHB?

– Provides employer-sponsored health insurance to Federal employees.

How did Tribal Employers become eligible for FEHB?

– On March 23, 2010, President Barack Obama signed the Patient Protection and Affordable Care Act (PPACA).
– PPACA extends FEHB to eligible Tribes, Tribal Organizations, and Urban Indian Organizations.

FEHB Key Stakeholders: Overview

The diagram below displays the FEHB key stakeholders and how they interact with each other:
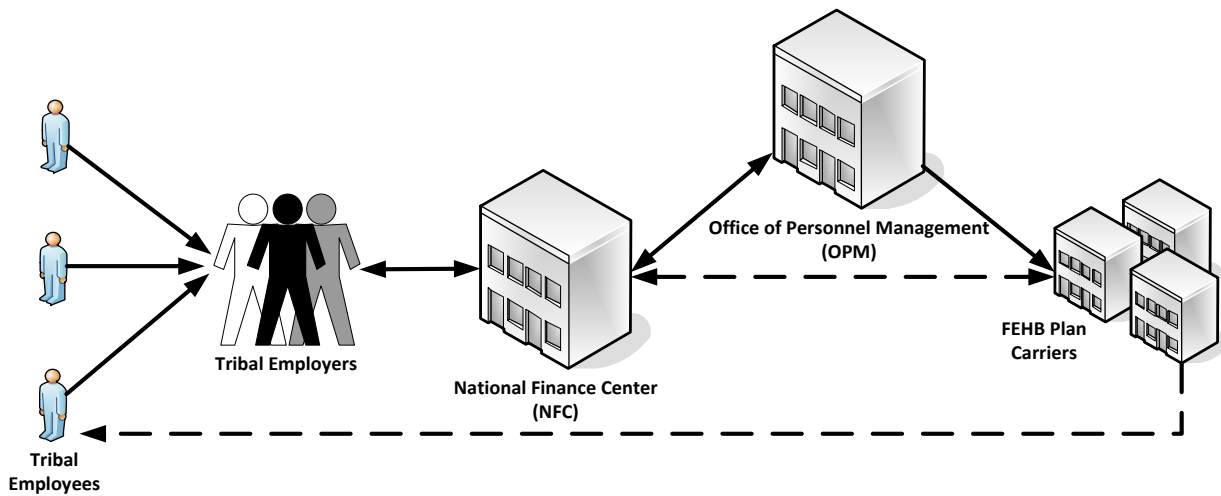
Key Stakeholders

There are five Key Stakeholders for FEHB:

– Tribal Employees
– Tribal Employers
– National Finance Center (NFC)
– Office of Personnel Management (OPM)
– FEHB Plan Carriers

Tribal employees should work with their Tribal Employers to:

– Select plans and submit enrollment requests.
– Submit plan change requests.
– Submit change of personal data requests.
– Cancel enrollment.
– Contact Tribal Employer or FEHB Plan Carriers with specific inquiries.

Tribal Employers responsibilities include:

– Elect to participate and complete initial enrollment forms.
– Identify eligible Tribal employees.
– Validate Tribal employee enrollment and plan change requests.
– Enter enrollments and plan changes into TIPS.
– Address Tribal employee inquiries.
– Establish payment account for pre-authorized debits and fund account monthly.
– Submit billing, standard form processing, technical, or system related inquiries to NFC.
– Work with NFC to facilitate enrollment reconciliations.

NFC responsibilities include:

– Maintain TIPS and provides TIPS training.
– Collect preauthorized debit payments from Tribal Employers.
– Reconcile administrative and financial adjustments with Tribal Employers.
– House enrollment data.
– Reconcile enrollments with FEHB Plan Carriers.
– Provide TIPS inquiry support to Tribal Employers.
– Provide security training.

OPM responsibilities include:

– Administer FEHB.
– Negotiate FEHB benefits and rates with FEHB Plan Carriers.
– Develop FEHB policy.
– Provide FEHB training.
– Address FEHB policy questions.
– Terminate Tribal Employer Billing Units/POIs.

FEHB Plan Carriers responsibilities include:

– Provide plan information and documentation, including health insurance card.
– Address Tribal Employee inquiries about coverage and claims.
– Provide health insurance coverage to Tribal Employees.
– Process claims.
  Work with NFC to reconcile enrollments using the Centralized Enrollment Clearinghouse System (CLER).

Joining FEHB
Outlined below are the 5 Steps Tribal Employers will need to complete in order to acces TIPS and be successfully implemented into FEHB.

FEHB Agreement Package Completion

Tribal Employer must complete and return the initial documents OPM sent, including:

    a. Agreement to Purchase FEHB
    b. Tribal Employer Profile
    c. DPRS Memorandum of Understanding (MOU)
    d. Bank Account Information Form
    e. Authorized Contact Designation Forms (description of each listed below)

Authorized Contact	Function	Number of Contacts Required
Tribal Executive	• Signs the Agreement to purchase FEHB sent by OPM. • Approves Tribal Benefits Officer (TBO) and TIPS Security Officer (TSO) roles.	1 per Tribal Employer
Chief Financial Officer	• Manages Tribal Employer's financial transactions. • Can approve TBO and TSO roles	1 per Tribal Employer
Tribal Benefits Officer (TBO)	• Serves as the primary contact for Tribal Employees, OPM, NFC, and FEHB Plan Carriers. • Functions as the primary contact in case of non-payment of premiums.	1 per Tribal Employer
TIPS Security Officer (TSO)	• Submits requests for and manages User IDs for Tribal Employer members accessing TIPS in SecureAll. • Resets passwords for Users locked out of TIPS.	1 primary and a minimum of 1 secondary per Tribal Employer
Authorized Maintenance Contact	• Adds and updates contact information in TIPS for a Tribal Employer's Authorized Contacts.	2 per Tribal Employer

*Note: One individual can fill multiple roles

1. **OPM Agreement Package Verification**
   NFC and OPM will work together to verify the completion of a Tribal Employer's agreement package from OPM. A NFC TIPS Operations representative (tipsoperations@usda.gov) will contact the Tribal Benefits Officer with the required steps to establish the Tribal Employer's authorized maintenance contacts, as well as let him/her know if the Tribal Employer's agreement package is missing any required information.

2. **TIPS Security Officer Training**
   A NFC Access Management Branch (NFC Security) representative (NFC.SecurityOFC@usda.gov) will contact TSOs to arrange security training. Security training is required for all TSOs and typically will be delivered via a periodic online webinar.

3. *TIPS User ID Establishment*
   Once a Tribal Employer's TSO has received security training from NFC, they must submit User ID requests to NFC for individuals who will access TIPS. NFC Security will create User IDs based on these requests. TIPS Security Officers may assign one of the following roles to each TIPS User:

Role	Description	TIPS Access
Update/Tribe (e.g. Human Resources Staff)	Standard Tribal Employer User	• Can create/update enrollee SF 2809s and SF 2810s. • Can view/download TIPS Reports including TIPS Billing Reports. • Can submit Electronic Upload files.
Update/Tribe/C (e.g. Authorized Maintenance Contact)	Same as Update/Tribe role with addition of Authorized Contact record update access	• Can create/update enrollee SF 2809s, SF 2810s, and contact records (except TSO). • Can view/download TIPS Reports including TIPS Billing Reports. • Can submit Electronic Upload files.
Audit/Tribe (e.g. Finance Staff)	Same as Update/Tribe role but with read-only access to records	• Can view enrollee, SF 2809s and SF 2810s. • Can view/download TIPS Reports.

**For inquiries regarding this process, contact NFC Security, NFC.SecurityOFC@usda.gov.

4. **Online Inquiry Submission Website (ServiceNow) Setup**
A TIPS Contact Center representative will contact the TBO with the steps required to establish a Tribal Employer's account for ServiceNow use. ServiceNow is an online inquiry submission website that lets TBOs submit inquiries or help desk requests to the TIPS Contact Center via the internet.

   ***Please note that Service Now User IDs differ from TIPS User IDs.*

5. **TIPS Training (optional)**
A NFC Training and Communications Branch (TCB) representative will contact Tribal Employers regarding regional TIPS training. It is strongly recommended that TIPS users attend TIPS training before accessing the system.

Lesson 1: Knowledge Check

1. Who are the five key FEHB stakeholders?

2. What is the name of the insurance system for Tribal Employers maintained by NFC?

3. What contact is responsible for entering enrollment and plan changes into TIPS?

4. What contact works with NFC to establish TIPS user identifications for the Tribal Employer?

Lesson 1 Summary: FEHB Overview

Now that you have completed this lesson, you should be able to:

- Describe the FEHB program.
- Identify the legislation that extends FEHB to Indian Tribes, Tribal Organizations, and Urban Indian Organizations.
- Identify who is eligible for FEHB.
- List the key stakeholders in FEHB relative to TIPS.
- Explain how FEHB key stakeholders interact with each other.
- Describe how Tribal Employers join FEHB and the FEHB Tribal Agreement Package.

Lesson 2 Objectives: TIPS and Enrollments

By the end of this lesson, you should be able to:

- Define TIPS.
- Identify how TIPS supports Tribal Employers.
- Identify the components of a SF 2809 and SF 2810 in TIPS.
- Explain the process for performing employee enrollment transactions in TIPS.
- Explain the enrollment reconciliation process.

What is the Tribal Insurance Processing System (TIPS)?
TIPS is:

- A web-based system of record for FEHB enrollment information.
- Administered by NFC.
- Used by Tribal Employers to perform FEHB enrollments.

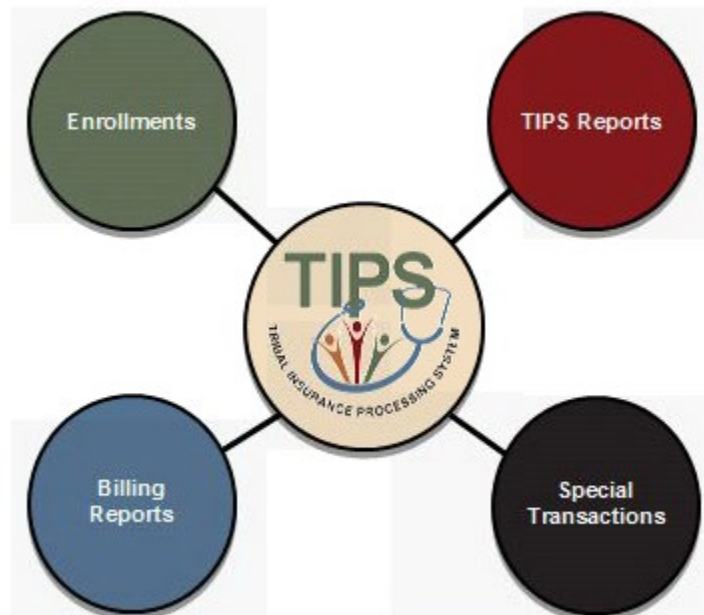The following section will provide an overview of the system and TIPS processes.

Figure 1: **TIPS Main Page**

Functions of TIPS

There are four primary functions in TIPS:

- Submitting new Enrollments and Enrollment Changes
- Viewing Billing Reports
- Generating and downloading TIPS Reports
- Completing Special Transactions

What information do I need to submit enrollments in TIPS?

Enrollments are based on the SF 2809 and SF 2810:

Figure 2: SF 2809 & SF 2810

SF 2809 Overview

The SF 2809 has nine parts. Only seven are included on the SF 2809 in TIPS.

SF 2809 Paper Copy	SF 2809 in TIPS
A. Enrollee and Family Member Information B. FEHB Plan You Are Currently Enrolled In C. FEHB Plan You Are Enrolling In or Changing To D. Event That Permits You To Enroll, Change, or Cancel E. Election NOT to Enroll F. Cancellation of FEHB G. Suspension of FEHB H. Remarks I. To Be Completed By Agency or Retirement System	A. Enrollee Information and Enrollee Information Continued: Family Members B. FEHB Plan You Are Currently Enrolled In (If Applicable) C. FEHB Plan You Are Enrolling In or Changing To D. Event That Permits You To Enroll, Change, or Cancel E. Cancellation F. Remarks G. To be completed by Tribal Employer

SF 2809 in TIPS

Figure 3: **SF 2809 in TIPS**

Tribal HR SF 2809 Information

When completing a SF 2809 in TIPS begin by selecting a:

- o Tribal Employer

- o Billing Unit / POI

Figure 4: **Tribe HR SF 2809 Selection**

Part A – Enrollee Information

Enter Tribal Employee's:

- Full Name
- Telephone Number
- Social Security Number
- Date of Birth
- Sex
- Marital Status
- Mailing Address
- Medicare Information
- Other Insurance Information
- Email Address (Optional)

Figure 5: **Part A Enrollee Information**

Part B and C – FEHB Plan You Are: Currently Enrolled In / Enrolling in or Changing To

Enter Tribal Employee's:

o New enrollment code if the Tribal Employee is enrolling in FEHB or selecting a new FEHB plan

Current enrollment code pre-populates with information from previous SF 2809.

The FEHB Plan you are currently enrolled in is never editable.

Figure 6: **Part B & C FEHB Plan**

What Are Enrollment Codes?

Enrollment codes are specific to:

- o *Self Only Plans*

- o *Self & Family Plans*

- o *Self Plus One*

Enrollment code is a three digit alphanumeric code:

- o Codes ending in 1 and 4 refer to *Self Only Plans*

- o Codes ending in 2 and 5 refer to *Self & Family Plans*

- o Codes ending in 3 and 6 refer to *Self Plus One Plans*

Self	Self & Family	Self Plus One
224	225	226
JN1	JN2	JN3
JN4	JN5	JN6
471	472	473
474	475	476
111	112	113
104	105	106
2G1	2G2	2G3
2G4	2G5	2G6
421	422	423

A list of enrollment codes is available in the paper SF 2809 on OPM's website.

Part D – Event That Permits You to Enroll, Change, or Cancel
Enter Tribal Employee's:

- o Event Code

    - ▪ Refers to a specific Qualifying Life Event (QLE)

    - ▪ A valid event code is required on all SF 2809s

- • Select a Date of Event:

    - ▪ The date an employee becomes eligible for enrollment, change of coverage, or cancellation as defined by the event code

- • The event code chart (found on following page) governs date windows in which changes of coverage are allowed with corresponding QLEs. The TIPS system validates date of event, date received and effective date of action fields based upon OPM's guidelines.

- • Check Premium Conversion if Tribal Employee participates.

    - ▪ The Premium Conversion box must be checked for Series 1 event codes.

    - ▪ If an employee's Billing Unit/ POI does not participate in premium conversion, the employee will be unable to check the Premium Conversion box.

Part D - Event That Permits You To Enroll, Change, or Cancel			Part F - Cancellation of FEHB
1. Event code	2. Date of event (MM/DD/YYYY)	☑ Premium Conversion	☐ I CANCEL my enrollment.

Figure 7: **Part D Event That Permits Enroll, Change, or Cancel**

Sample Event Codes

Premium Conversion	Non-Premium Conversion	Description
1A	5A	Initial Opportunity to Enroll
1B	5B	Open Season
1C	5C	Change in family status that increases or decreases number of eligible family members
1D	5D	Reemployment after a break in service of more than three days

A list of event codes can be found on OPM's website.

Part F – Cancellation

In order to submit a SF 2809 for cancellation, check the box in part F.

- Enrollees in premium conversion may only cancel following a valid event.

- Cancellations can only be effective retroactively or in the current month. The only exception is Open Season Cancellations with QLEs 1B and 5B. Open Season Cancellations must be effective 12/31 of that year.

- Employees NOT participating in premium conversion may cancel at any time.

  - Event Code and Date of Event are NOT required for a cancellation if the employee is not participating in premium conversion.

Part D - Event That Permits You To Enroll, Change, or Cancel			Part F - Cancellation of FEHB
1. Event code	2. Date of event (MM/DD/YYYY)	☑Premium Conversion	☐I CANCEL my enrollment.

Figure 8: **Part F Cancellation**

Part I – To be completed by Tribal Employer

Enter:

- Date employee's SF 2809 was received by Tribal Employer

  - Date received is the date the HR office receives the form requesting the change or enrollment in coverage.

- The date that any enrollment, change in coverage, or cancellation takes effect

  - Effective date of action is the date that the change of coverage or enrollment becomes active.

- The telephone number for the HR contact responsible for the employee or Tribal Employer benefits

- Name and Address of Tribal Employer

- The name of the Tribal Employer official authorizing this form

Part I - To be completed by Tribal Employer			
REMARKS			
1. Date received (MM/DD/YYYY)	2. Effective date of action (MM/DD/YYYY)	3. Personnel telephone number	4. Name and address of the Tribal Employer
5. Authorizing official	6. Payroll office number 12400096	7. Service Provider Contact National Finance Center	8. Service Provider Telephone 855-632-4468

Figure 9: **Part I To be completed by Tribal Employer**

TIPS pre populates:

- Payroll Office Number (PON)

- Service Provider Contact

- Service Provider Telephone

Part I - To be completed by Tribal Employer			
REMARKS			
1. Date received (MM/DD/YYYY)	2. Effective date of action (MM/DD/YYYY)	3. Personnel telephone number	4. Name and address of the Tribal Employer
5. Authorizing official	6. Payroll office number 12400096	7. Service Provider Contact National Finance Center	8. Service Provider Telephone 855-632-4468

Figure 10: **SF 2809 Service Provider Information**

Part A – Enrollee Information Continued; Family Members
To add family members:

- First check Add/Edit Family Member Information.

- Complete the enrollee information fields.

- Specify the relationship type of the family member.

- Click Add Member.

  o All required fields must be completed to add a family member.

  o Family members' information will not be saved if it has not been attached via the "Add Member" button.

Figure 11: **Part A Add/Edit Family Member**

Sample Relationship Codes

To enter a paper SF 2809 in TIPS, one must be familiar with the following relationship codes:

Relationship Status Code	TIPS Relationship Status
01	Spouse
09	Adopted Child
10	Foster Child
17	Stepchild
19	Child under age 26
99	Disabled Child age 26 or older who is incapable of self-support because of physical or mental disability that began before his/her 26th birthday

Exercise 2.1 Paper SF 2809 vs. SF 2809 in TIPS

You should have received a handout containing a:

- Completed paper SF 2809
- Blank printout of the SF 2809 in TIPS

Use the completed paper SF 2809 to fill out the blank printout of a SF 2809 in TIPS.
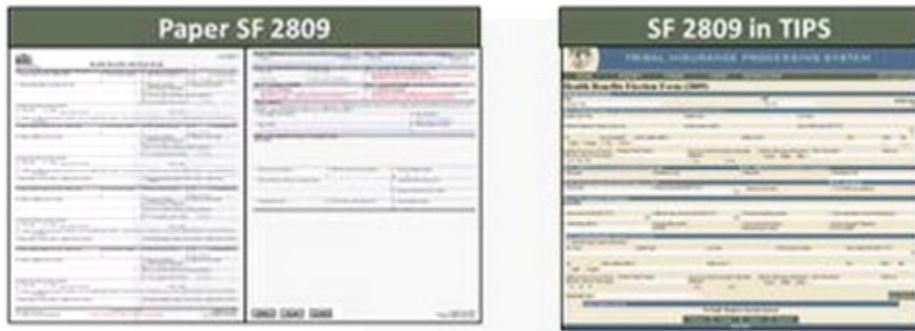
Figure 12: **SF 2809 & SF 2810**

Exercise 2.2 Identifying the Appropriate QLE Code

In order to review SF 2809s Tribal Employers must be familiar with the Qualifying Life Event (QLE) Codes and under what circumstances each is applicable.

Exercise 2.2 will cover a series of three scenarios. Use the QLE table below to determine, which code is applicable for each scenario. In the space provided, identify for each scenario:

- Event Code
- Event Date

Premium Conversion	Non-Premium Conversion	Description
1A	5A	Initial Opportunity to Enroll
1B	5B	Open Season
1C	5C	Change in family status that increases or decreases number of eligible family members
1D	5D	Reemployment after a break in service of more than three days

Scenario 1:

Sally, a Tribal Employee enrolled in FEHB, takes a three month leave of absence beginning May 5, 2012 during which she shifts from pay status to non-pay status and her FEHB coverage is terminated. Sally resumes working for the Tribal Employer on August 8, 2012 and submits a SF 2809 to receive coverage with an effective date of September 1, 2012. Sally participates in premium conversion.

Fill in the appropriate Event Code and Date of Event for Sally's SF 2809:

Part D - Event That Permits You To Enroll, Change, or Cancel	
1. Event code	2. Date of event (MM/DD/YYYY)

Scenario 2:

Mark, a new Tribal Employee hired on April 3, 2012, opts to enroll in the FEHB program. Mark completes a SF 2809 on April 10, 2012 and submits it to his Tribal Employer requesting an effective coverage date of May 1, 2012. Mark is enrolled in premium conversion.

Fill in the appropriate Event Code and Date of Event for Mark's SF 2809:

Part D - Event That Permits You To Enroll, Change, or Cancel	
1. Event code	2. Date of event (MM/DD/YYYY)

Scenario 3:

Zachary, a Tribal Employee, is enrolled in FEHB and has a *Self Only* plan from his Tribal Employer. Zachary marries a non-Tribal Employee, Danielle, on July 12, 2012. Zachary wishes to change to a *Self & Family* plan so he can add Danielle to his FEHB coverage. Zachary submits a SF 2809 on July 19, 2012 to his Tribal Employer with this change with an effective date of August 1, 2012. Zachary participates in premium conversion.

Fill in the appropriate Event Code and Date of Event for Zachary's SF 2809:

Part D - Event That Permits You To Enroll, Change, or Cancel	
1. Event code	2. Date of event (MM/DD/YYYY)

SF 2810 Overview

The SF 2810 has eight parts. Six of these parts are included on the SF 2810 in TIPS.

SF 2810 Paper Copy	SF 2810 in TIPS
A. Identifying Information B. Termination C. Transfer In D. Reinstatement E. Change In Name of Enrollee F. Change in Enrollment-Survivor Annuitant G. Remarks H. Date of Notice	A. Identifying Information B. Termination C. Reinstatement D. Change In Name of Enrollee E. Remarks F. Date of Notice

SF 2810 in TIPS

Notice of Change in Health Benefits Enrollment (2810)

Tribal HR SF2810 Information

Tribe	POI	Submit ID:	SF2810 Status:
TRAINING TRIBE	6XXX - TRAINING POI	Submit Date:	New

Part A - Identifying Information

Last Name	First name	Middle Initial	Date of Birth	Social Security Number
TRAINING	JOHN		2/1/1969	111999999

Home Address	Payroll office number:	Enrollment code number
409 TRAINING DRIVE	12400096	891

Address Line 2	Date this action becomes effective

City	State	Zip
NASHVILLE	TN	37235

Part B - Termination

☐ Your enrollment terminates on the date in Part A, item 8, above. However, your coverage is extended for 31 days after that date.
Important Notice: **You have the right to convert to an individual (nongroup) contract with the carrier of your plan. You also may have the right to temporarily continue your group coverage.** See **Part B - Termination** on the back of this form for information about 31-day extension of coverage, conversion, and temporary continuation of coverage.
If termination is due to death of enrollee enter date of death

Date of Death (mo, dy, yr)

Part D - Reinstatement

☐ Your enrollment has been reinstated effective on the date in Part A, item 8, above.

Part E - Change in Name of Enrollee

☐ The name under which this enrollment is carried has been changed to:

Changed Last Name	Changed First name	Changed Middle Name

Changed Address

Changed Address Line 2

Changed City	Changed State	Changed Zip

Part G - Remarks

Part H - Date of Notice

Name of Tribal Employer	Personnel Contact Last Name	Personnel Contact First name	Personnel Contact Middle Initial	Personnel Phone Number
TRAINING				

Agency Address	Agency Address Line 2	Service Provider Contact	Service Provider Telephone
123 HERE ROAD		National Finance Center	855-632-4468

City	State	Zip
ANY WHERE	LA	77777

Authorizing Official Last Name	Authorizing Official First name	Authorizing Official Middle Initial	Date

Cancel   Clear   Save   Submit

Figure 13: **SF 2810 in TIPS**

Tribal HR SF 2810 Information

When completing a SF 2810, TIPS will auto populate the employee's:

- Tribal Employer

- Billing Unit / POI

Tribal HR SF2810 Information

Tribe	POI	Submit ID:	SF2810 Status:
TRAINING TRIBE	6XXX - TRAINING POI	Submit Date:	New

Figure 14: **Tribal HR SF 2810 Information**

Part A – Identifying Information
TIPS will auto populate:

- Full Name
- Mailing Address
- Date of Birth
- Payroll Office Number (PON)
- Social Security Number
- Enrollment Code Number

Enter the Tribal employee's:

- Date this action becomes effective

Part A - Identifying Information				
Last Name	First name	Middle Initial	Date of Birth	Social Security Number
TRAINING	JOHN		2/1/1969	111999999
Home Address			Payroll office number:	Enrollment code number
409 TRAINING DRIVE			12400096	891
Address Line 2			Date this action becomes effective	
City	State	Zip		
NASHVILLE	TN	37235		

Figure 15: Date Action Becomes Effective

Part B – Termination
In order to submit a SF 2810 for termination check the box in part B.

- Only enter date of death if termination was due to the death of the employee.

Tribal Employees who separate from Tribal employment are eligible for:

- 31-day extension of coverage

- Temporary Continuation of Coverage (TCC)

  - The separated employee can stay on TCC for up to 18 months and their qualified dependents up to 36 months. The SF 2809 would need to be processed in a separate system called DPRW. Information on DPRW can be found on NFC's site under Training Resources: DPRW Participant Guide .

Terminations can only be effective retroactively or in the current month.

Part B - Termination
☐ Your enrollment terminates on the date in Part A, item 8, above. However, your coverage is extended for 31 days after that date.
Important Notice: **You have the right to convert to an individual (nongroup) contract with the carrier of your plan. You also may have the right to temporarily continue your group coverage.** See **Part B - Termination** on the back of this form for information about 31-day extension of coverage, conversion, and temporary continuation of coverage.
If termination is due to death of enrollee enter date of death

Date of Death (mo, dy, yr)

Figure 16: **Part B Termination**

Part D – Reinstatement

In order to reinstate a Tribal employee, check the box in part D.

- The effective date that is entered in Part A should be the day after the termination/cancellation date. The only exception is if the effective date is the same as the original effective date. Ex. John Smith enrolled in TIPS effective 1/1/15, then terminated effective 1/1/15, then he can be reinstated effective 1/1/15.

- Possible reasons for reinstatement include:
    - Employee returns from military service
    - Erroneous error

Part D - Reinstatement
☐ Your enrollment has been reinstated effective on the date in Part A, item 8, above.

Figure 17: **Part D Reinstatement**

Part E – Change in Name of Enrollee

In order to change the name and/or address of the enrollee check the Box in Part E.

- Enter the Tribal employee's full new name and address.

Part E - Change in Name of Enrollee
☐ The name under which this enrollment is carried has been changed to:

Changed Last Name	Changed First name	Changed Middle Name

Changed Address

Changed Address Line 2

Changed City	Changed State	Changed Zip

Figure 18: **Part E Change in Name of Enrollee**

Part G – Remarks

Add any relevant remarks here.

- Remarks may be used by the Tribal Employer to include notes.

- These notes are stored in TIPS, but will not be seen by anyone outside of the Tribal Employer.

Figure 19: Part G Remarks

Part H – Date of Notice

Enter Tribal Employer's information:

- Name of Tribal Employer

- Tribal Employer Address

- Personnel Contact Name

- Payroll Contact Name

- Payroll Contact Telephone Number

- Authorizing Official Name

- Today's Date

Figure 20: Part H Date of Notice

Exercise 2.3 Paper SF 2810 vs. SF 2810 in TIPS

You should have received a handout containing a:

- Completed paper SF 2810
- Blank printout of the SF 2810 in TIPS

Use the completed paper SF 2810 to fill out the blank printout of the SF 2810 in TIPS.

Figure 21: **Paper SF 2810 vs. SF 2810 in TIPS**

Transaction Glossary

Terminology	Definition
Initial Enrollment	Tribal Employee enrolls in FEHB for the first time
Enrollment Change	A Tribal Employee enrolled in FEHB changes his or her health plan enrollment
Change of Name	A Tribal Employee enrolled in FEHB changes his or her legal name
Enrollment Cancellation	A Tribal Employee enrolled in FEHB opts to dis-enroll and ends his or her coverage
Enrollment Termination	A Tribal Employer Billing Unit/POI involuntarily ends the FEHB enrollment of a Tribal Employee
Billing Unit/POI Cancellation	A Tribal Employer Billing Unit/POI opts to dis-enroll from FEHB and ends coverage for its employees
Billing Unit/POI Termination	A Tribal Employer Billing Unit/POI has the FEHB enrollment involuntarily ended for its employee
Change of Address	A Tribal Employee enrolled in FEHB changes his or her primary address

The Role of TIPS in FEHB Transactions

SF2809

- Tribal Employer completes a SF 2809 in TIPS.
- TIPS Processes SF 2809s and sends to FEHB Plan Carriers.
- Transactions
    o Initial Enrollment
    o Enrollment Change
    o Cancellation
    o Corrective Actions

SF 2810

- Tribal Employer completes a SF 2810 in TIPS.
- TIPS Processes SF 2810s and sends to FEHB Plan Carriers.
- Transactions

- o Change of Name
- o Change of Address
- o Termination
- o Reinstatement

OPM

- OPM cancels/terminates coverage for a Tribal Employer Billing Unit/POI.
- TIPS prepares SF 2809s for and send to FEHB Plan Carriers.
- TIPS stores SF 2810s.
- Transactions
  - o Tribal Employer Billing Unit/POI Cancellation
  - o Tribal Employer Billing Unit/POI Termination

Enrollment Reconciliation Process

NFC and FEHB Plan Carriers reconcile enrollment records quaterling using CLER.

CLER is a NFC web-based system that receives and processes enrollment data from government agencies and FEHB carriers.

FEHB Plan Carriers and NFC submit their enrollments to CLER.

After CLER processing, NFC communicates with Tribal Employers and Carriers to resolve discrepancies, as nedded (it's possible Tribal Employers may never receive any communication from the NFC CLER team).

Enrollment Reconciliation Process Continued
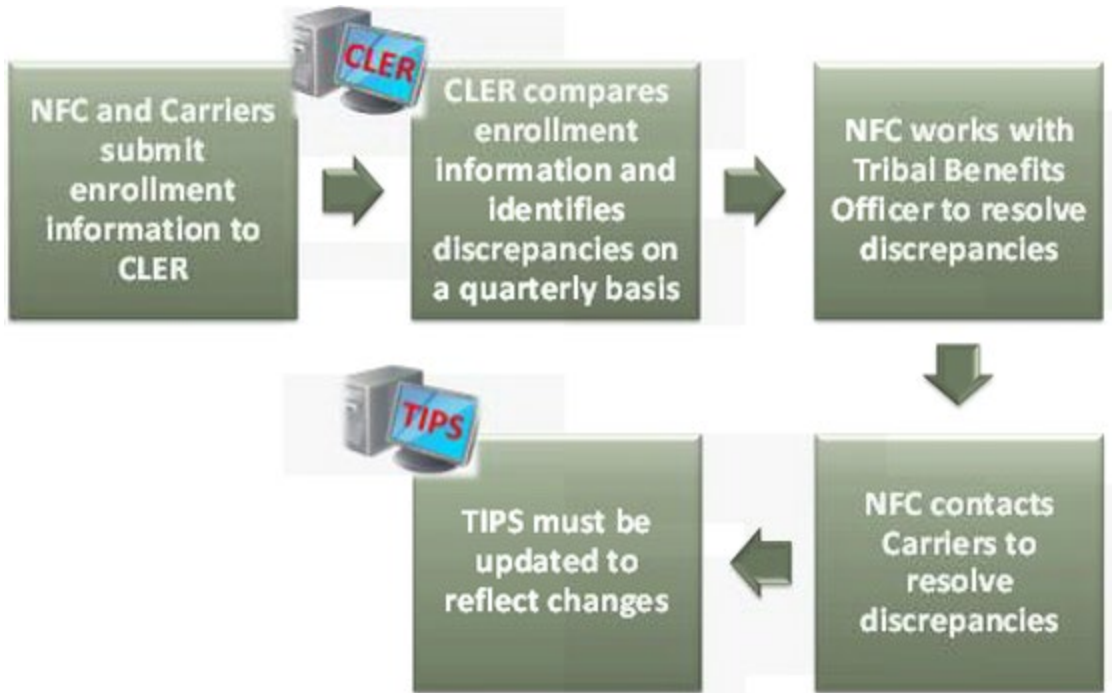
Lesson 2: Knowledge Check

1. What are the four main TIPS functions?

2. Tribal Employers complete what two forms in TIPS to perform FEHB transactions?

3. True or False: The premium Conversion box must be checked for an enrollment with a series 1 even code?

4. OPM uses TIPS to perform what two FEHB transactions?

Lesson 2 Summary: TIPS and Enrollments

Now that you have completed this lesson, you should be able to:

- Define TIPS.
- Identify how TIPS supports Tribal Employers.
- Identify the components of a SF 2809 and SF 2810 in TIPS.
- Explain the process for performing employee enrollment transactions in TIPS.
- Explain the enrollment reconciliation process.

Lesson 3 Objectives: Billing and TIPS Reports

By the end of this lesson, you should be able to:

- Explain the billing and payment processes.
- Identify the fields on a Billing Report.
- Calculate a Billing Report.
- Explain the Insufficient Funds Resolution Process.
- List available TIPS Reports.
- Identify the fields on a TIPS Report.

Billing Overview

Each Tribal Employer must establish one or more Billing Units / POIs to help organize Tribal Employee enrollments for different Tribal entities or businesses.

Tribal Employers must provide a bank account and routing number for each Billing Unit / POI.
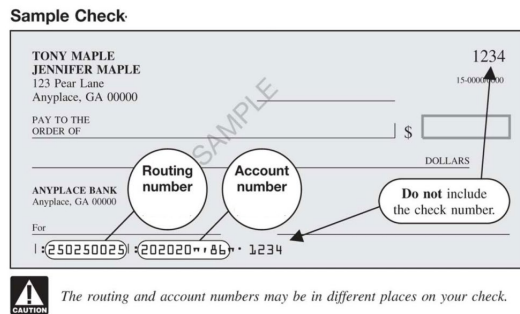
A **Preview Billing Report** can be generated in TIPS at any point during the month. This is a snapshot of the Final Billing Report.

- Please note that the Preview Billing Report is updated with enrollee actions twice a day at 12pm CST and 3am CST. Any actions on an enrollee's account that occur before those times will be reflected once the Preview Billing Report is updated.

A **Final Billing Report** can be generated in TIPS on the 1st calendar day of the following month. This amount reflects the amount that will be deducted from the Billing Unit/POI's account.

Electronic Billing Reports are prepared and linked to accounts at the Billing Unit/POI-level, not the Tribal Employer-level.

Billing Report

TIPS users can view their Billing Report at any time.

Each Billing Report contains:

- Tribal Employer Number
- Billing Unit/POI
- Enrollee Name
- Enrollee SSN
- Enrollment Code
- Premium Amount
- Administrative Fee
- Adjustments
- Enrollee Bill Amount
- Total Premium Amount
- Total Administrative Fee
- Total Adjustments
- Total Bill Amount

The screenshot below is a sample Billing Report in TIPS:

Figure 222: Sample Billing Report

Calculating a Billing Report

Billing Reports are composed of two components:

o Plan premium

▪ Refers to the monthly cost of the plan including both the Tribal Employer and Tribal Employee share

o Administrative fee

▪ Refers to the fee covering NFC's costs to administer TIPS

The formula to calculate each Billing Report is:

(Plan premium) + (Administrative fee) = Amount Due

TIPS adds up the premiums and administrative fees for Tribal employees in a Tribal Employer Billing Unit / POI to calculate a Billing Report.

For example, the cost for self-only Puerto Rico Triple-S Salud, Inc. FEHB Plan would be:

($335.57) + ($12.00) = $347.57

Prorated Billing

Premiums are prorated when coverage does not start on the first of the month.

The administrative fee is never prorated.

The formula to calculate a prorated bill is:

(Plan premium) X (Days covered / Days in month) + (Administrative fee) = Amount Due

The prorated cost for self-only Puerto Rico Triple-S Salud, Inc. from May 7th until the end of the month would be:

($335.57) X (25/31) + ($12.00) = $282.62

Billing Process

The diagram below describes the process for preparing and paying TIPS Billing Reports:
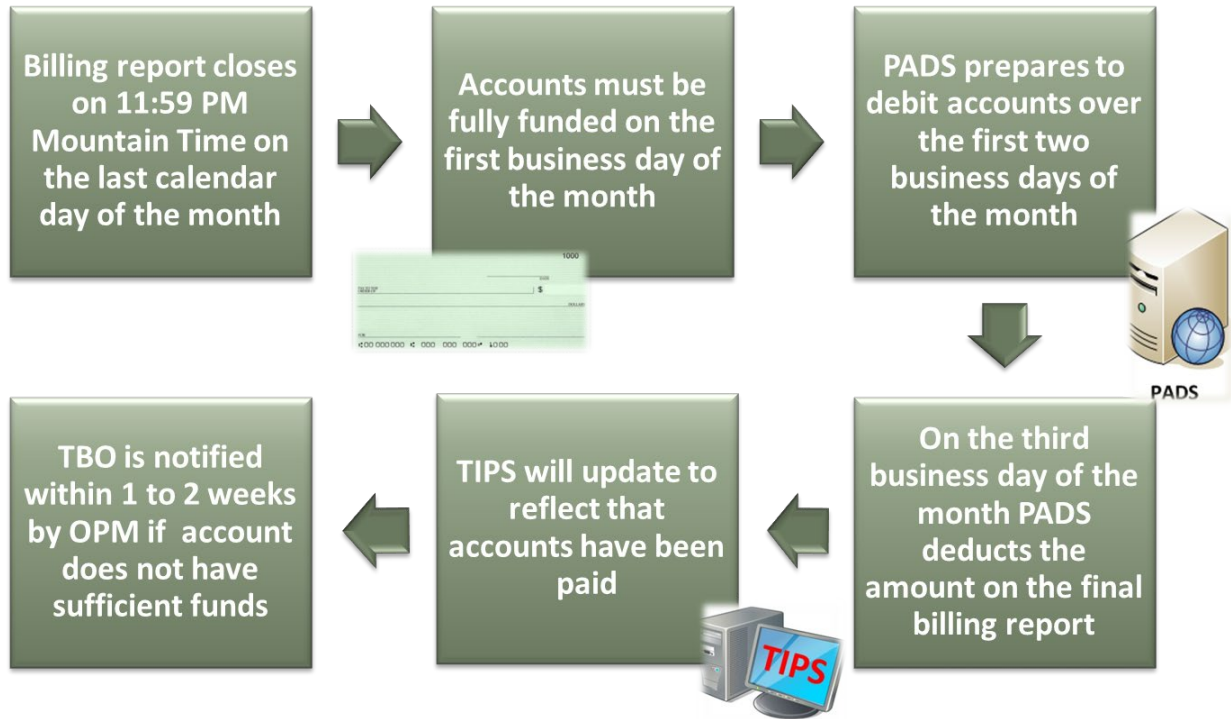
Billing Calendar

MAY						
Sunday	**Monday**	**Tuesday**	**Wednesday**	**Thursday**	**Friday**	**Saturday**
20	21	22	23	24	25 **PADS account information/ changes due**	26
27	Memorial Day 28	29	30	31 **Cutoff at 11:59pm MT for TIPS entries to be reflected on current bill and June 1 effective date**	1 **PADS Processing Period** →	2

JUNE						
Sunday	**Monday**	**Tuesday**	**Wednesday**	**Thursday**	**Friday**	**Saturday**
27	28	29	30	31 **Cutoff at 11:59pm MT for TIPS entries to be reflected on current bill and June 1 effective date**	1 **PADS Processing Period** →	2
3 **PADS Processing Period** →	4	5 **PADS debits bank account for bill amount**	6	7	8	9

View Billing Calendar

- The Billing Report closes for the month on the last calendar day of the month at 11:59 PM Mountain Time.
- Changes to a Tribal Employer Billing Unit/POI's TIPS bank account information must be submitted at least three business days before a Tribal Employer Billing Unit/POI's Billing Report closes.
- PADS prepares to debit the Tribal Employer Billing Unit/POI's bank account provided in TIPS over the first two business days of the month.
- PADS debits the Tribal Employer Billing Unit/POI's bank account on the third business day of the month.

FEHB Insufficient Funds Resolution Process

The diagram below describes the FEHB Insufficient Funds Resolution Process:
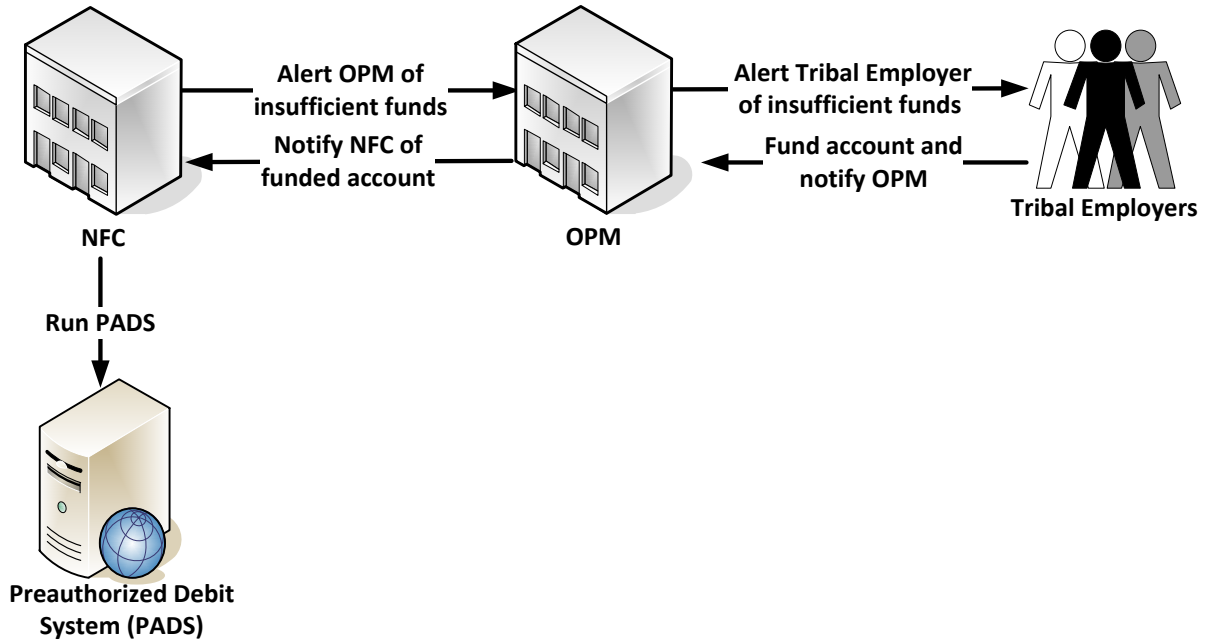
Insufficient Funds Resolution Process

–   If your account is billed and not enough funds are available, NFC will alert OPM.
–   OPM will contact the Tribal Benefits Officer and alert them that their account contains insufficient funds.
–   Tribal Benefits Officer must acknowledge that their account contains insufficient funds.
–   Tribal Benefits Officer then deposits sufficient funds in the account and notifies OPM.
–   OPM notifies NFC that the account has been funded.
–   NFC runs PADS on the Tribal Employer Billing Unit/POI account to collect deposited funds.

Reports

Enrollees by Tribe, State, Age Bands, and Plan Report
Contact Information Report
New Enrollees by Tribe Report
Disenrollments by Tribe Report
Total Enrollees Each Period By Tribe Report
Open Season Changes By Tribe Report
Reason for Plan Switch by Tribe Report
Effective Date of Coverage Report
Family Relationships by Tribe Report
Overall 2809/2810 Report
2809/2810 Status Report
Billing Report

Figure 23: Reports in TIPS

Available Reports

- There are 12 principle TIPS Reports.
- All are available from the left-hand side of the TIPS main page.
- TIPS Reports can be viewed in:
  - The TIPS Web Site (online)
  - Microsoft Excel
- All Tribal Employees' SF 2809 and SF 2810 data is available.
- TIPS Reports will be available on-demand.

Report Level of Detail

Report Name	Billing Unit/POI	Tribe
Enrollees by state, age, and plan		X
New enrollees	X	X
Dis-enrollments	X	X
Total number of enrollees	X	X
Contact Information	X	X
Open Season changes	X	X
Reason for plan switch	X	X
Effective coverage date	X	X
Family Relationship		X
Overall 2809/2810	X	X

Excel Format

TIPS Reports exported to Excel allow for easy customization by Tribal Employers.

The screenshot below is a sample TIPS Report:

	A	B	C	D	E	F	G	H	I
1	CONTROLLED UNCLASSIFIED INFORMATION								
2	Tribal Employer Number	Billing Unit/POI	Enrollee Name	Enrollee SSN	Enrollment Code	Premium Amount	Administrative Fee	Adjustments	Bill Amount
3	4A	6999	JOHN TRAINING	111999999	891	407.38	0	0	407.38
4	4A	6999	JOSHUA TRAINING	405328	891	407.38	0	0	407.38
5	4A	6999	SETH TRAINING	444554590	891	407.38	0	0	407.38
6						Total: $1,222.14	Total: $0.00	Total: $0.00	Total Bill Amount:

Lesson 3: Knowledge Check

1. Billing Reports will be divided up by what identifier?

2. True or False: TIPS users can view their Billing Report at any time?

3. When does a Billing Report close?

4. Billing Reports are composed of what 2 components?

5. TIPS reports can be viewed in what two ways?

Lesson 3 Summary: Billing and TIPS Reports

Now that you have completed this lesson, you should be able to:

- Explain the billing and payment processes.
- Identify the fields on a Billing Report.
- Calculate a Billing Report.
- Explain the Insufficient Funds Resolution Process.
- List available TIPS Reports.
- Identify the fields on a TIPS Report.

Lesson 4 Objectives: Special Transactions

By the end of this lesson, you should be able to:

- Add/remove a court ordered indicator to an employee's enrollment records.
- Process an information only 2809.
- Explain the Enrollee Billing Unit/POI Transfer process.
- List the TIPS transactions that may be processed retroactively.
- Utilize the Delete Function effectively.
- Explain the History/Archive Function.

Manage Court Orders

The Manage Court Orders function is used by Tribal Employers to:

- Add a court ordered indicator to an active enrollee record.
- Remove a court ordered indicator from an active enrollee record.
- View all active enrollee records that contain court ordered indicators.

Following the addition of a court ordered indicator, TIPS will prevent the active enrollee's records from:

- Voluntarily being cancelled via a new SF 2809
- Being switched from a *Self & Family* plan to a *Self Only* plan
- Being switched from a *Self Plus One* plan to a *Self Only* plan

Following the removal of a court ordered indicator, TIPS will allow the enrollee's records to:

- Voluntarily be cancelled via a new SF 2809
- Be switched from a *Self & Family* plan to a *Self Only* plan
- Be switched from a *Self Plus One* plan to a *Self Only* plan

Figure 24: **Manage Court Orders**

Information Only 2809

The Information Only SF 2809 will be used by Tribal Employers to:

- Edit enrollee information including name, social security number, address, date of birth, POI*, phone number and email address for corrective actions.

- Edit Other Insurance information.

- Add, edit, or remove a dependent. †

By selecting the Information Only option of the 2809, the corrections will be made but the status of the enrollment will not change.

* POI can only be corrected if the enrollment has never been billed. If billed, the POI field will be grayed out.

† When enrolling a dependent of an active enrollee, the user will receive an error message stating that the Social Security Number of the enrollee has been found on the dependent record of an active enrollee. To continue the enrollment, an Information Only 2809 must be processed on the active enrollee to remove the dependent, prior to the completion of the 2809 enrollment of the dependent.

Figure 25: **Information Only Check Box**

Figure 26: **Enrollee Information Info Only**

Figure 27: **Family Information Edit Fields**

Both the enrollee information and family information fields will open for editing. Make any necessary edits, save, and submit.

Enrollee Billing Unit/POI Transfer

The Enrollee Billing Unit / POI Transfer process will be used by Tribal Employers to transfer an employee enrolled in FEHB to a new Billing Unit / POI.

Enrollees in FEHB will be able to transfer to a new Billing Unit / POI from:

- A Billing Unit / POI Unit managed by your Tribal Employer
- A Billing Unit / POI Unit managed by another Tribal Employer participating in FEHB

The gaining Tribal Employer will need to obtain the following information for each enrollee in order to transfer him/her to its Billing Unit / POI:

- First Name
- Last Name

- Social Security Number

The gaining Tribal Employer will need to determine the Effective Date of Coverage for each transferred enrollee.
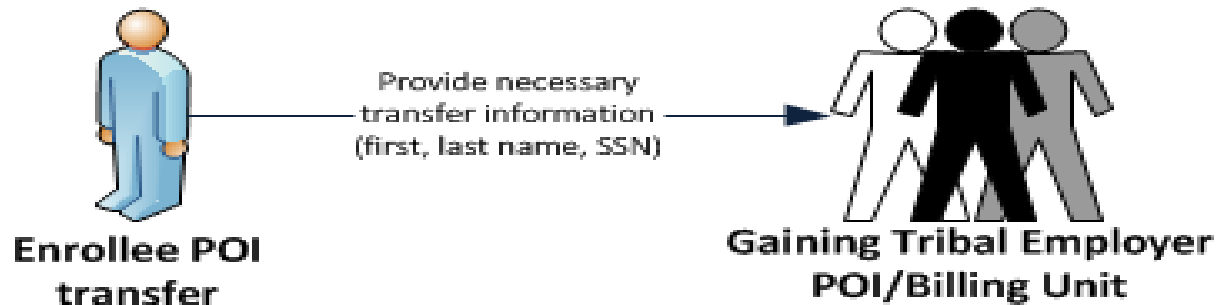
As conceptualized, the following considerations will need to be acknowledged by the gaining Tribal Employer before transferring an enrollee to its Billing Unit / POI:

- If the Effective Date of Transfer does not fall on the first of the month, the gaining Tribal Employer will be responsible for paying a prorated premium.
- Tribal Employers in the current POI must use the CREATE SF 2809 for the enrollee on the INQUIRY screen under the current POI to begin transfer. On the SF 2809 they must enter a Cancel date effective the last day of the pay period that the employee is in that POI.
- The gaining Tribal Employer will enter a new SF 2809 for enrollment into the new POI with an effective date one day greater than the cancellation effective date in the former POI.
- The enrollee can only be entered in a new POI once the cancel/termination for former POI has been billed.

Retroactive Adjustments

TIPS will allow Tribal Employers to create SF 2809s/SF 2810s with effective dates in the past.

Retroactive adjustments will be allowed for the following transactions:

- Initial enrollments (SF 2809)
- Enrollment code changes (SF 2809)
- Cancellations (SF 2809)
- Reinstatements (SF 2810)
- Terminations (SF 2810)

The following considerations will need to be acknowledged by a Tribal Employer before completing a retroactive adjustment:

- Retroactive adjustments resulting in either net credits or net debits will be displayed in the monthly Billing Report under the "Adjustments" column.
- Net credits will be applied to future bills until the adjustment's balance is reduced to $0.
- Net debits will be applied in total to monthly bill in which the retroactive adjustment is entered into TIPS.

Delete Function

TIPS will allow Tribal Employers to use to Delete Function for non-processed and non-billed records.

Forms eligible for deletion:

- Health Benefits Election Form (SF 2809)
- Notice of Change in Health Benefits Enrollment (SF 2810)

The Delete button is located at the bottom of any form eligible for deletion.

Figure 28: **Mark for Deletion**

Once deleted, it CANNOT be restored; it can be viewed under the "Deleted 2809/2810" option.
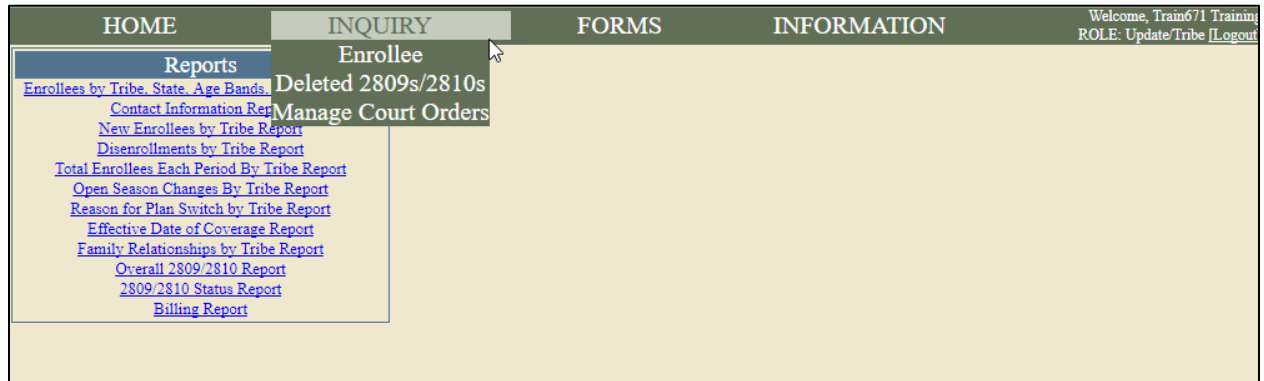
***Figure 29*: Deleted 2809s/2810s**

Once the form is deleted, the SSN will be released and a new form can be created under that SSN.

History/Archive

TIPS will allow you to "move to History" for enrollee's prior forms to an archived status.

Enrollee can be moved to History if previously cancelled/terminated and there is a lapse in coverage with new enrollment in the same POI.

When the Create New Enrollment button is selected, the user will be prompted to indicate if the enrollee's prior data should be moved to history. If selected, the data will no longer display under the Terminated Inquiry screen but will be viewed through the History Inquiry screen.

The New Enrollment form displayed from the Create New Enrollment will pre-populate with the enrollee's data.

Notes:

- The Create New Enrollment button can only be used after the enrollee has been billed for the cancellation/termination action.
- You cannot use the Create New Enrollment button to move from POI to POI or tribe to tribe. This must be done by selecting Forms then Create 2809 from the Homepage.

Lesson 4: Knowledge Check

1. What information must you have in order to transfer an enrollee to a Billing Unit/POI managed by your Tribal Employer?

2. What do Court ordered indicators prevent?

3. True or False: Retroactive adjustments resulting in a net credit will result in a refund to your Tribal Employer's bank account.

Lesson 4 Summary: Special Transactions

Now that you have completed this lesson, you should be able to:

- Add/remove a court ordered indicator to an employee's enrollment records.
- Process an information only 2809.
- Explain the Enrollee Billing Unit/POI Transfer process.
- List the TIPS transactions that may be processed retroactively.
- Utilize the Delete Function effectively.
- Explain the History/Archive Function.

Lesson 5 Objective: Performing Transactions in TIPS

By the end of this lesson, you should be able to:

- Access TIPS.
- Navigate TIPS.
- Perform enrollment transactions using individual forms and the electronic upload process.
- Prepare TIPS Reports.
- Review your billing report in TIPS.

How to Access TIPS

- Internet access is required to access TIPS.

- Only authorized users can access TIPS.

- The Tribal Employer's TSO is responsible for initiating and managing the creation of TIPS user accounts.

- After the TSO sets up the Tribal Employer's account, NFC will email users their username and their TSO will provide those individuals with a temporary password.

> **For the purposes of this training you will have access to a training account. This training account will expire after today's session**

Government Disclaimer

Every time you log in to TIPS, you must accept the standard USDA system disclaimer.

WARNING!

You are accessing a U.S. Government information system, which includes (1) this computer, (2) this computer network, (3) all computers connected to this network, and (4) all devices and storage media attached to this network or to a computer on this network. This information system is provided for U.S. Government-authorized use only.

Unauthorized or improper use of this system may result in disciplinary action, as well as civil and criminal penalties.

By using this information system, you understand and consent to the following:

You have no reasonable expectation of privacy regarding any communications or data transiting or stored on this information system. At any time, the government may for any lawful government purpose monitor, intercept, search and seize any communication or data transiting or stored on this information system.

Any communications or data transiting or stored on this information system may be disclosed or used for any lawful government purpose.

Your consent is final and irrevocable. You may not rely on any statements or informal policies purporting to provide you with any expectation of privacy regarding communications on this system, whether oral or written, by your supervisor or any other official, except USDA's Chief Information Officer.

Accept   Decline

Figure 30: USDA Disclaimer

How to Log in to TIPS

Follow these steps to log in to TIPS:

- Enter your username provided to you via email.

- Enter your password.

  - If you are logging in for the first time, your password will have been provided to you by your TSO.

Figure 31: **TIPS Log In**

Navigating TIPS: Main Page

TIPS is broken up into five main areas:

- Home

- Inquiry

- Forms

- Information

- Reports

Figure 32: TIPS Main Page

Navigating TIPS: Inquiry

The inquiry screen:

- Allows you to search for an employee enrolled in TIPS by name and/or Social Security Number / Unique Identifier.

- Allows you to see submitted SF 2809s and SF 2810s.

- Allows you to edit SF 2809s and SF 2810s that have been saved but not submitted.

- Allows you to create new SF2809s.

- Allows you to create SF 2810s.

- Allows you to Manage Court Orders.

Figure 33: TIPS Enrollee Search

Navigating TIPS: Forms

The Forms menu allows users to:

- Create a SF 2809.

- Perform an Electronic Upload.

  - Includes upload of SF 2809s
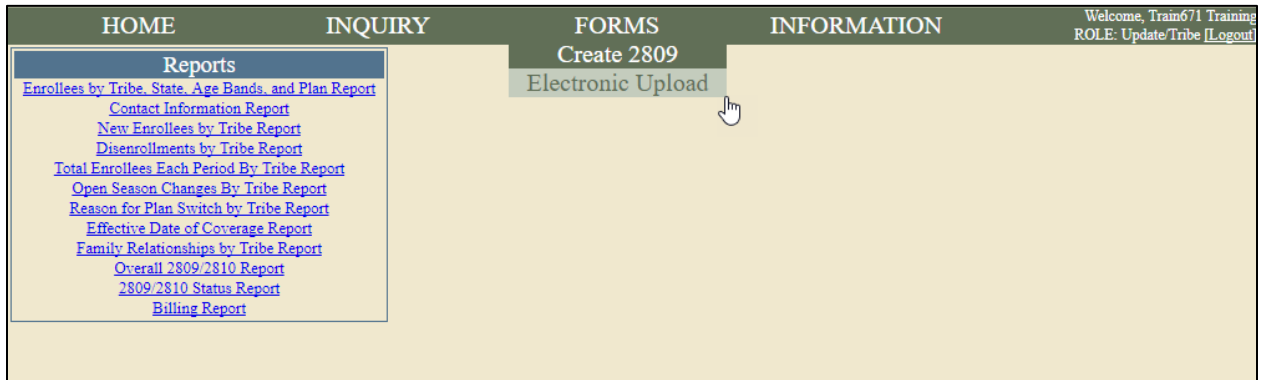
Figure 34: **Electronic Upload**

Navigating TIPS: Information

Using the information menu users can view:

- Contact info

  - OPM Helpdesk

  - NFC Helpdesk

- My info

  - Name

  - Role

  - Tribal Employer
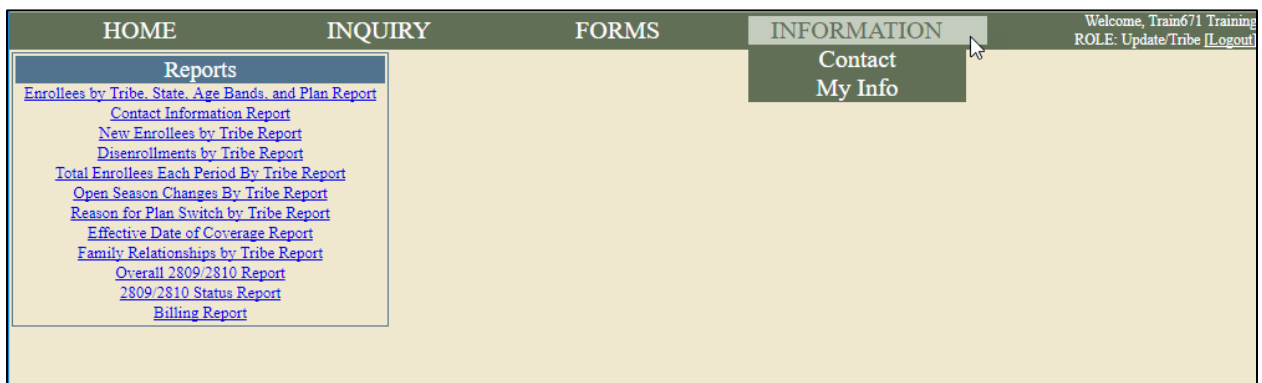
  - Billing Units / POI

Figure 35: **Information Tab**

Navigating TIPS: Reports

Using the Reports menu located on the left-side of the main page, users can run a TIPS Report of their choice for a selected Tribal Employer Billing Unit / POI and time period.

| HOME | INQUIRY | FORMS | INFORMATION | Welcome, Train671 Training ROLE: Update/Tribe [Logout] |

Reports
Enrollees by Tribe, State, Age Bands, and Plan Report
Contact Information Report
New Enrollees by Tribe Report
Disenrollments by Tribe Report
Total Enrollees Each Period By Tribe Report
Open Season Changes By Tribe Report
Reason for Plan Switch by Tribe Report
Effective Date of Coverage Report
Family Relationships by Tribe Report
Overall 2809/2810 Report
2809/2810 Status Report
Billing Report

Figure 36: **Reports Tab**

Navigating TIPS: User Information

User account name and your level of system access are displayed in the upper right hand corner of all TIPS pages.

| HOME | INQUIRY | FORMS | INFORMATION | Welcome, Train671 Training ROLE: Update/Tribe [Logout] |
| Reports | | | | |

Figure 37: **Account Name and System Access**

Please remember to always logout after you have finished using TIPS!

Types of Transactions in TIPS

Transactions may be initiated using the SF 2809, SF 2810, or an Electronic Upload.

Available Transactions Include:

- Initial enrollment

- Enrollment change

- Change of name

- Change of address

- Enrollment cancellation

- Enrollment termination

- Corrective Actions

- Enrollment reinstatement

- Billing Unit/POI Transfer process

- Info only 2809

- Court ordered indicator

- Retroactive adjustments

Individual Forms vs. Electronic Upload

Individual Forms

- Enter all enrollee information into TIPS, one record at a time.
- Simpler when performing a few transactions.
- Easier to identify and correct errors.
- Cons
  o Time consuming when performing more than a few transactions.
  o Increases the risk of manual error in TIPS.

Electronic Upload

- Upload multiple records at the same time.
- Saves time when performing multiple transactions.
- Decreases the risk of manual error in TIPS.

– Cons
  o Errors in Electronic Upload files must be resolved individually.
  o Must adhere to a strict Electronic Upload format.

Selecting a Billing Unit/POI

Before you enter data in a SF 2809 or SF 2810 remember to:

- Confirm that the correct Tribal Organization is selected.

- Select the appropriate Tribal Organization Billing Unit / POI for the Tribal Employee.

Figure 38: **Tribal Organization and Billing Unit/POI**

Entering Enrollment Data via Individual Forms

When entering data in SF 2809s and SF 2810s users:

- Can tab from field to field to quickly enter data.

- Must complete free response fields, select radio buttons, and mark check boxes.

- Must use the box for enrollee information located at the bottom of SF 2809s in order to add family members.

- Must have contact information for Tribal Employers representatives in order to complete these forms.

Finalizing a SF 2809 or SF 2810

For any new SF 2809 or SF 2810 you may select one of four options:

- **Cancel** – Deletes the draft form and returns you to the main page.

- **Clear** – Deletes all data in the draft form without leaving the form.
- **Submit** – Finalizes the form and send it to the appropriate FEHB Plan Carrier.
- **Save** – Saves the draft form and allows for additional edits at a later date before submission to a FEHB Plan Carrier.

Cancel	Clear	Save	Submit

Figure 39: **Finalizing SF 2809 or SF 2810**

Holding a SF 2809 or SF 2810

After you select Submit, your form will be submitted to the appropriate FEHB Plan Carrier.

If you notice an error or need to stop a form after you have submitted, you may hold the form, if it has not been processed on the Billing Report.

- By holding a form, the enrollment/enrollment changes on the held form will not be reflected on the Billing Report.

- Users will be able to make changes to a held form.

- Once users have finished revising the held form, select Submit again so that it can be processed and sent to the FEHB Plan Carrier.

Mark for Deletion	Hold

Figure 40: **Hold Button**

Form Status

The status of SF 2809s and SF 2810s is located in the top right corner of the form.

Health Benefits Election Form (2809)

Tribal HR SF2809 Information

Tribe	POI	SF2809 Status:
TEST TRIBE		New

SF 2809s and SF 2810s can have the following statuses:

- **New** – New form, not saved or submitted.
- **Saved** – Partially filled out form, not yet submitted.
- **Submitted and Released** – Form has been completed and sent to FEHB Plan Carriers.

- **Held for Edits** – Form has been taken out of the queue for Billing Report processing.
- **Processed** – Form has been sent to FEHB Plan Carriers and processed for billing and cannot be held or saved.

Resolving Errors

If you attempt to submit individual SF 2809 or SF 2810s with errors, TIPS will not accept the form:

- TIPS will list errors in red text underneath each field.

- Please correct any errors before submitting again.

The screenshot below is a SF 2809 in TIPS with errors:

Figure 41: **SF 2809 with Errors**

Resolving Electronic Upload Errors

If TIPS identifies an error(s) after submission of an Electronic Upload, you will receive an email notifying you of the records with the error(s) and what caused the error(s). All pending errors must be resolved in a new Electronic Upload file that needs to be renamed and resubmitted in TIPS.

> **Double-check your forms! Resolving an error before submission is always easier than afterwards!**

Generating a TIPS Report

When preparing a TIPS Report remember to select:

- Billing Unit/POI

- Start Date

- End Date

Billing Reports can be prepared from the TIPS main page. Depending on the user's role, access may be granted to view Billing Reports for one or more Tribal Employer Billing Unit/POIs. Billing Reports are automatically updated throughout the month and reflect all SF 2809s/SF 2810s that have been submitted and processed.

Walkthroughs and Exercises

We will now walkthrough and practice performing the following transactions in TIPS:

- Individual Enrollment

- Updating a Saved Enrollment

- Holding, Updating, and Submitting an Enrollment

- Updating a SF 2809 for Open Season

- Enrollment Termination

- Preparing a Billing Report

- Overall SF 2809/SF 2810 Report

How to Access TIPS Training Environment

Follow these steps to access the TIPS Training Environment:

- Open a web browser on your computer.

- Enter the URL provided to you on your user information handout.

- Refer to your user information handout for:

    - Temporary user ID

    - Temporary Password

    - Additional exercise information

Exercise 5.1: Individual Enrollment

Create a new enrollment in TIPS using the below information.

Instead of submitting the enrollment form when finished, select Save.

Individual Enrollment

In order to perform an individual enrollment, follow these steps:

1. Open the TIPS web portal and login with Username and Password.

2. Select Create 2809 under the Forms tab.

3. Select Tribal Organization and select Billing Unit/POI from the drop down menus.

4. Complete:
   a. Part A: Enrollee Information (Refer to the handout with your login information for the Social Security Number to use in this exercise)

Part A - Enrollee Information *(For additional family members, use the Part A (Continued) section below.)*

Enrollee First Name	Middle Name		Last Name		
YOUR FIRST NAME			YOUR LAST NAME		

Preferred Telephone Number (xxx)xxx-xxxx	Social Security Number	Date of Birth (MM/DD/YYYY)	
1234567890	___-__-____ ×	01/01/1970	🔲

Sex	Are you married?	Home mailing address	Address Line 2	City	State	Zip
○Male ○Female	○Yes ◉No	123 TRAINING DRIVE		NASHVILLE	TN ∨	37235

Medicare *(if you are covered by Medicare, check all that apply)* □A □B □D	Medicare Claim Number ___-__-____	Are you covered by insurance other than Medicare? ○Yes ◉No	Indicate other types of insurance □Tricare □FEHB □ Other	Name of insurance	Policy no.

Email Address
_____

b. Part C: FEHB Plan You Are Enrolling In or Changing To

Part B - FEHB Plan You Are Currently Enrolled In (If Applicable)		**Part C - FEHB Plan You Are Enrolling In or Changing To**	
1. Plan name	2. Enrollment code	1. Plan name TRIPLE S, SALUD	2. Enrollment code 891

c. Part D: Event That Permits You to Enroll, Change, or Cancel

Part D - Event That Permits You To Enroll, Change, or Cancel			**Part F - Cancellation of FEHB**
1. Event code 1A	2. Date of event (MM/DD/YYYY) 09/01/2017 🔲	☑Premium Conversion	□I CANCEL my enrollment.

d. Part I: To be completed by Tribal Employer

Part I - To be completed by Tribal Employer			
REMARKS			
1. Date received (MM/DD/YYYY) 09/15/2017 🔲	2. Effective date of action (MM/DD/YYYY) 09/30/2017 🔲	3. Personnel telephone number 9876543210	4. Name and address of the Tribal Employer EMPLOYER ADDRESS
5. Authorizing official MARK EMPLOYER	6. Payroll office number 12400096	7. Service Provider Contact National Finance Center	8. Service Provider Telephone 855-632-4468

5. Once you have completed the form click **Save** – NOT – **Submit.**

Part A - Enrollee Information *Continued; Family Members*					
□Add/Edit Family Member Information					
First Name	Middle Name	Last Name	Social Security Number	Date of Birth (MM/DD/YYYY)	
				🔲	

Sex	Home mailing address	Address Line 2	City	State	Zip
○Male ○Female				∨	

Email Address	Preferred Telephone Number (xxx)xxx-xxxx		

Medicare *(if you are covered by Medicare, check all that apply)* □A □B □D	Medicare Claim Number ___-__-____	Are you covered by insurance other than Medicare? ○Yes ◉No	Indicate other types of insurance □Tricare □FEHB □Other	Name of insurance	Policy no.

Relationship Type: _____ ∨   Add Member

Family Members Entered
No Family Members Currently Entered.

Cancel   Clear   Save   Submit

Exercise 5.2: Updating a Saved Enrollment

Perform an inquiry for the SF 2809 you created in Exercise 5.1.

Update the SF 2809 in TIPS adding in the spouse's information.

Submit the SF 2809.

Updating a Saved Enrollment

1. Select **Enrollee** under the **Inquiry** tab.
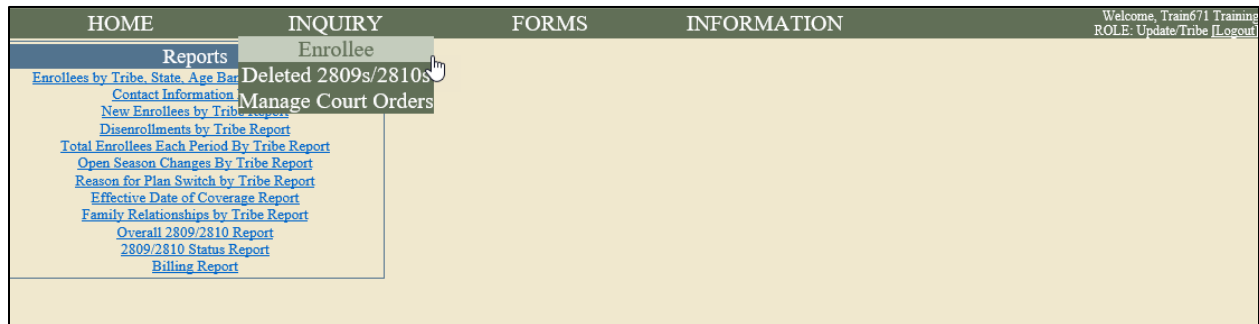
2. Enter one or more of the following, and then click **Search**:
   a. Social Security Number
   b. First, middle, and last name
   c. Select the appropriate Tribe and Billing Unit/POI
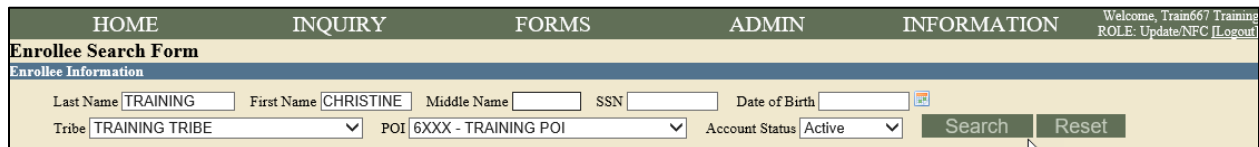
3. Select View **SF 2809**.
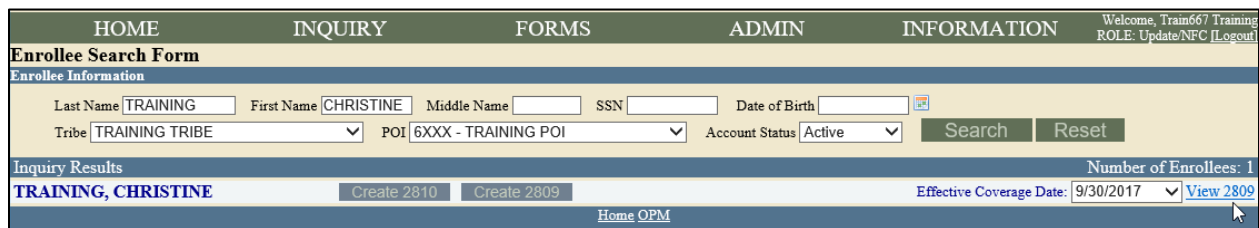
4. Change from Not Married to Married.
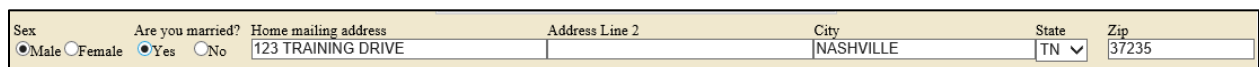
5. Change the Enrollment Code to reflect *Self and Family* instead of *Self*. Change the **891** to **892**.

Part B - FEHB Plan You Are Currently Enrolled In (If Applicable)		Part C - FEHB Plan You Are Enrolling In or Changing To	
1. Plan name	2. Enrollment code	1. Plan name	2. Enrollment code
		TRIPLE S, SALUD	892

6. Check the box that says **Add/Edit Family Member Information**. Fill in the spouse's information. Use the Social Security Number from your User Login information sheet. Then click on the **Add Member** button.

Part A - Enrollee Information *Continued; Family Members*

☑Add/Edit Family Member Information

First Name	Middle Name	Last Name	Social Security Number	Date of Birth (MM/DD/YYYY)
SPOUSE'S NAME		YOUR LAST NAME	987654321	01/01/1970 ✕

Sex   ◉Male ○Female

Home mailing address	Address Line 2	City	State	Zip
123 TRAINING DRIVE		NASHVILLE	TN ∨	37235

Email Address ___   Preferred Telephone Number (xxx)xxx-xxxx 6151111111

Medicare *(if you are covered by Medicare, check all that apply)* ☐A ☐B ☐D   Medicare Claim Number ___   Are you covered by insurance other than Medicare? ○Yes ◉No   Indicate other types of insurance ☐Tricare ☐FEHB ☐Other   Name of insurance ___   Policy no. ___

Relationship Type: Spouse ∨   Add Member

Family Members Entered

No Family Members Currently Entered.

7. The spouse's information should populate at the bottom of the page. Select **Submit.**

Part A - Enrollee Information *Continued; Family Members*

☐Add/Edit Family Member Information

First Name	Middle Name	Last Name	Social Security Number	Date of Birth (MM/DD/YYYY)

Sex   ○Male ○Female

Home mailing address	Address Line 2	City	State	Zip
			∨	

Email Address ___   Preferred Telephone Number (xxx)xxx-xxxx

Medicare *(if you are covered by Medicare, check all that apply)* ☐A ☐B ☐D   Medicare Claim Number ___   Are you covered by insurance other than Medicare? ○Yes ○No   Indicate other types of insurance ☐Tricare ☐FEHB ☐Other   Name of insurance ___   Policy no. ___

Relationship Type: ___ ∨   Add Member

Family Members Entered

SPOUSE'S NAME   YOUR LAST NAME

Gender: M
DOB: 1/1/1970
SSN: 987654321
Relationship:Spouse

123 TRAINING DRIVE

NASHVILLE , TN
37235
Phone #:6151111111

Medicare A: N
Medicare B: N
Medicare D: N
Medicare Claim Number:

Cover by insurance other than Medicare?: N
Tricare: N
FEHB: N
Other: N

Other Insurance Name:
Other Insurance Policy No.:

Edit
Delete

Exercise 5.3: Holding, Updating, and Submitting an Enrollment
Perform an inquiry for the SF 2809 you updated in Exercise 5.2.

Hold the SF 2809 you updated in Exercise 5.2.

The Enrollee's date of birth was entered incorrectly. Update the birthday to read 03/01/1970.

Submit the updated SF 2809.

<u>Holding, Updating, and Submitting an Enrollment</u>

1. Select **Enrollee** under the **Inquiry** tab
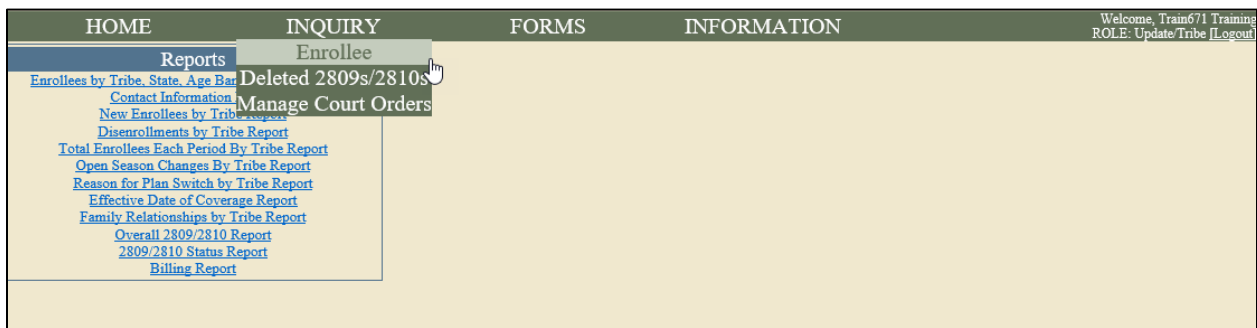
2. Enter one or more of the following, and click **Search**:
    a. Social Security Number
    b. First, middle, and last name
    c. Select the appropriate Tribe and Billing Unit/POI
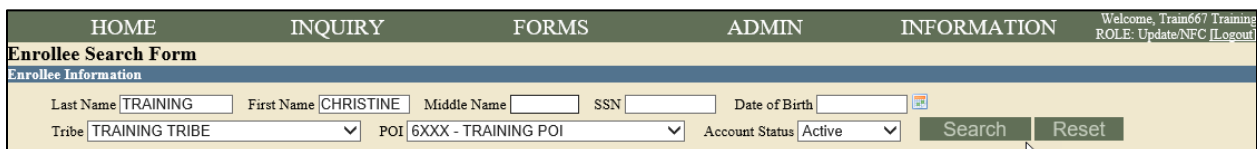
3. Select **View SF 2809.**

4. Select the **Hold** button at the bottom of the form.

5. Change the birthday for the employee to reflect **03/01/1970.**
6. Click **Submit.**

Exercise 5.4: Enrollment Termination

Terminate your assigned enrollee in TIPS using the information found on your User Login Information sheet.

Enrollment Termination

1. Select **Enrollee** under the **Inquiry** tab.
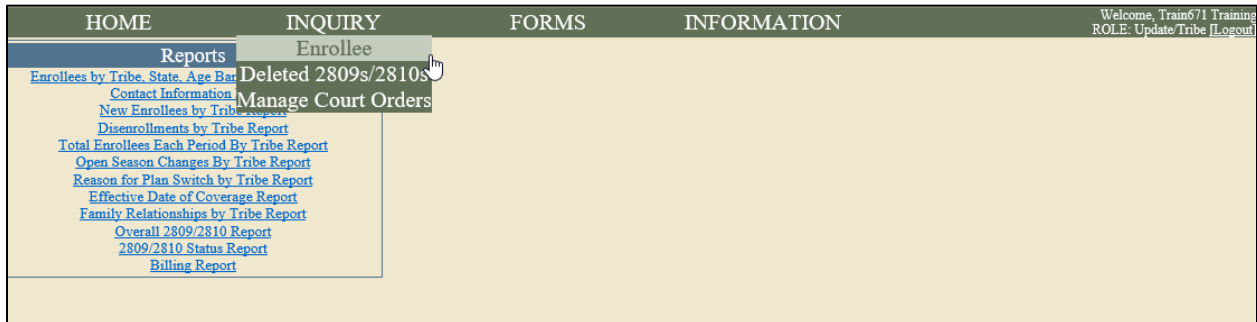
2. Enter one or more of the following, and click **Search**:
    a. Social Security Number
    b. First, middle, and last name
    c. Select the Appropriate Tribe and Billing Unit/POI
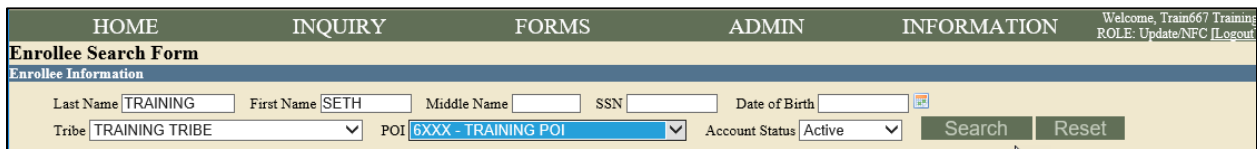
3. Click on **Create 2810.**
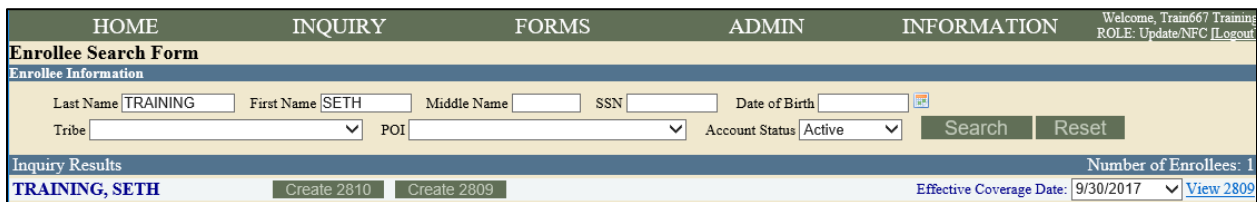
4. Complete:
    a. Part A: Date this action becomes effective
    b. Part B: Mark the Termination check box. Please note that if this is due to death, you would also need to fill in the Date of Death box.

Notice of Change in Health Benefits Enrollment (2810)

Tribal HR SF2810 Information				
Tribe	POI		Submit ID:	SF2810 Status:
TRAINING TRIBE	6XXX - TRAINING POI		Submit Date:	New

Part A - Identifying Information				
Last Name	First name	Middle Initial	Date of Birth	Social Security Number
TRAINING	SETH		2/1/1969	444554590
Home Address			Payroll office number:	Enrollment code number
409 TRAINING DRIVE			12400096	891
Address Line 2			Date this action becomes effective	
City	State	Zip		
NASHVILLE	TN	37235		

Part B - Termination

☐ Your enrollment terminates on the date in Part A, item 8, above. However, your coverage is extended for 31 days after that date. *Important Notice:* **You have the right to convert to an individual (nongroup) contract with the carrier of your plan. You also may have the right to temporarily continue your group coverage.** See **Part B - Termination** on the back of this form for information about 31-day extension of coverage, conversion, and temporary continuation of coverage. If termination is due to death of enrollee enter date of death

Date of Death (mo, dy, yr)

5. Complete Part H with all required fields including the Date of Notice.

Part G - Remarks

Part H - Date of Notice

Name of Tribal Employer	Personnel Contact Last Name	Personnel Contact First name	Personnel Contact Middle Initial	Personnel Phone Number
TRAINING	EMPLOYER	MARK		9876543210
Agency Address		Agency Address Line 2	Service Provider Contact	Service Provider Telephone
123 HERE ROAD			National Finance Center	855-632-4468
City	State	Zip		
ANY WHERE	LA	77777		
Authorizing Official Last Name	Authorizing Official First name	Authorizing Official Middle Initial	Date	
EMPLOYER	MARK		__/__/____ ✕	
			Input a date	

Cancel   Clear   Save   Submit

6. Click **Submit** in order to finalize the form and submit it for processing.

Exercise 5.5: Preparing a Billing Report

Run a Billing Report in TIPS on your Billing Unit/POI. Make sure you are using Training Tribe and POI 6XXX.

Do not export the report, view it in your TIPS portal.

Preparing a Billing Report

1. From the Home page select Billing Report from the menu on the left-hand side.
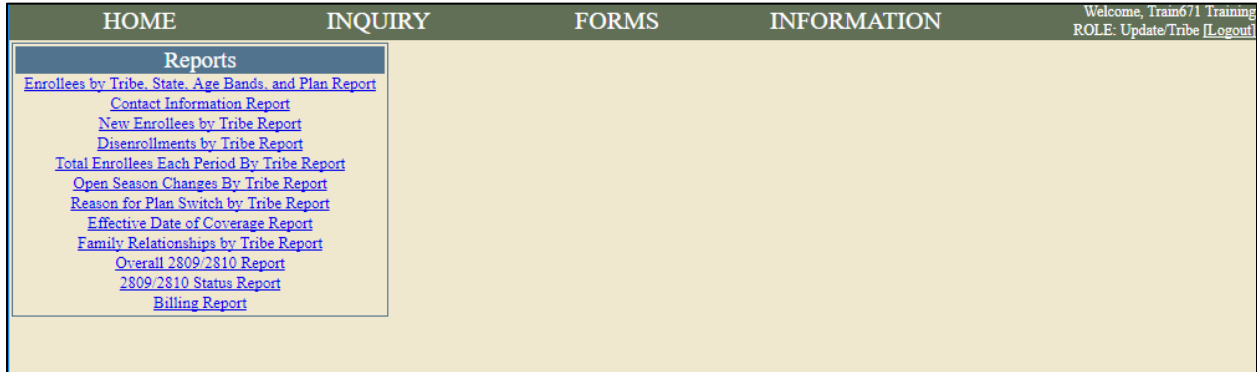
2. Select your report criteria, and then click **Generate Report**:
   a. Billing Period
   b. Billing Unit/POI
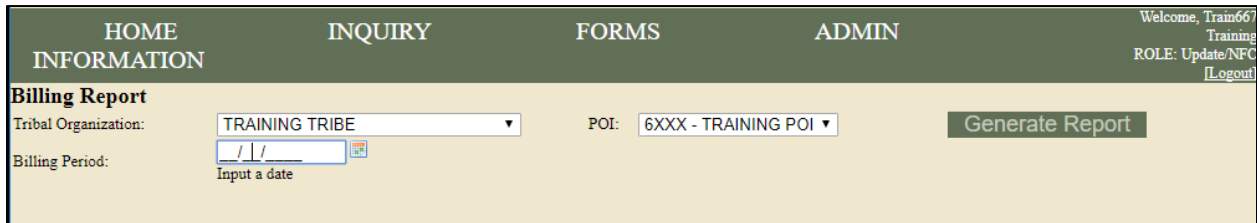
3. Review Sample Billing Report in TIPS portal; do not Export to Excel while in the Training Environment.
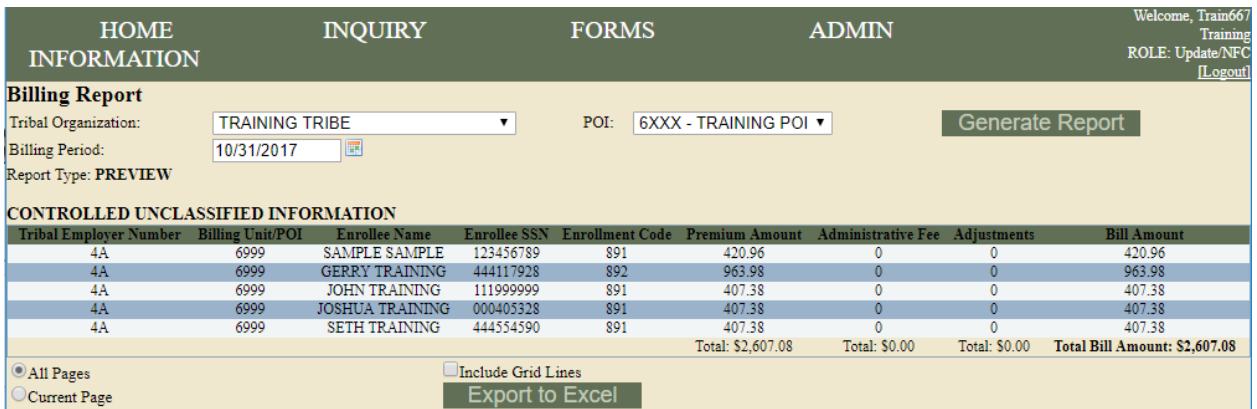
Exercise 5.6: Overall SF 2809/SF 2810 Report

Generate an Over SF 2809/ SF 2810 TIPS Report from your Tribal Employer Billing Unit/POI. Make sure you are using Training Tribe and POI 6XXX.

Do not Export the report to Excel, view it in the TIPS portal.

Overall SF 2809/SF 2810 Report

1. From the Home page, select **Overall 2809/2810 Report** from the menu on the left-hand side.
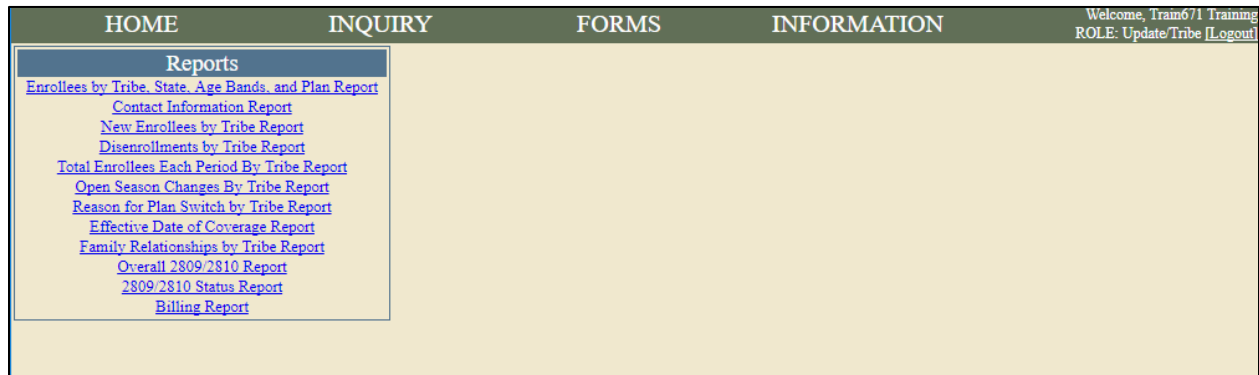
2. Select your report criteria and then click on Generate Report:
   a. Tribal Organization
   b. Billing Unit/POI
   c. Month and Year
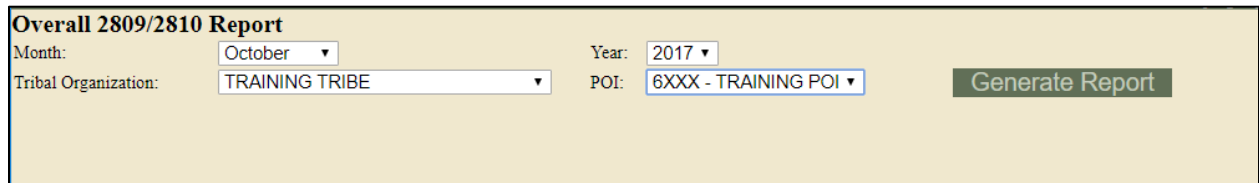
3. View report in the TIPS portal; do not Export to Excel.

Lesson 5 Summary: Performing Transactions in TIPS

Now that you have completed this lesson, you should be able to:

- Access TIPS.
- Navigate TIPS.
- Perform enrollment transactions using individual forms and the electronic upload process.
- Prepare TIPS Reports.
- Review your billing report in TIPS.

Lesson 6 Objectives: Obtaining Additional Assistance

By the end of this lesson, you should be able to:

- Describe the standard Tribal Employer inquiries.
- Demonstrate an understanding of types of inquiries handled by NFC and other external organizations.
- Demonstrate how to navigate the TIPS website.
- Submit an inquiry using the ServiceNow Customer Service Portal.

Standard Inquiries

Standard inquiries from Tribal Employers may include:

- How do I complete a SF 2809 or SF 2810?
- How do I generate a TIPS Report or Billing Report?
- I received an error message in TIPS, how do I correct this error?
- What prescriptions are covered under this FEHB plan?

Different stakeholders are involved with resolving these inquiries. We'll explore further in this section how to best resolve different types of inquiries.

Inquiries Handled by NFC Contact Center and Other Organizations

Contact Center

Types of Inquiries:

- General program inquiries
- Inquiries regarding completing a form
- Assistance with Electronic Upload errors
- Assistance with generating a TIPS Report
- Billing and technical inquiries
- Billing discrepancies
- System issues and outages
- Assistance with navigating the TIPS website

Other Organizations

OPM
Policy Inquiries

Tribal Employers
Employee-specific inquiries

FEHB Plan Carriers
Call Centers
Coverage Inquiries

Tribal Security Officer
TIPS Username Setup and Security Inquiries

The TIPS Contact Center can be reached at: 855-NFC-4GOV

OPM Tribal Desk can be reached at: 202-606-2530

TIPS Inquiry Guide

The guide below outlines the points of contact that will be responsible for resolving the different TIPS inquiries that may arise for Tribal Employers.

Inquiry Type	Example Inquiries	Who To Contact
Implementation Inquiries *Includes questions related to setting up Tribal Employers in TIPS.*	• Confirming receipt of Authorized Contact Designation Forms or other parts of the OPM Agreement Package	**NFC TIPS Operations** tipsoperations@usda.gov
Processing, Technical and Billing Inquiries *Includes questions associated with performing core system activities in TIPS.*	• Entering a 2809 or 2810 • Generating reports in TIPS • Locating a Tribal Employee in TIPS • Questions regarding account balance • Screen will not load in TIPS	**TIPS Contact Center** 1-855-NFC-4GOV (632-4468) tipsoperations@usda.gov
TIPS Access Inquiries *Includes questions related to the steps necessary for establishing TSOs or modifying User IDs (for TSOs).*	• Establishing or modifying TIPS TSOs and User IDs • Assigning User ID roles	**NFC Security Office -** To create or delete a User ID, or to add or remove access to/from an existing User ID, submit *Security Access Requests* to: 1-888-245-4060 (fax) or nfc.securityofc@usda.gov **NFC Operations Security Center -** Submit technical access inquiries to: 1-800-767-9641 (phone) or osc.etix@usda.gov Submit TSO general inquiries and training requests to: nfc.aso@usda.gov
TIPS Training Inquiries *Includes questions related to the coordination and delivery of regional training to Tribal Employers.*	• Confirming that NFC will be able to deliver TIPS system training in a specific location	**NFC Training and Communications Branch** nfc.training@usda.gov
Program and Policy Inquiries *Includes questions related to eligibility and general program information.*	• Determining if eligible to participate in FEHB • Requesting an FEHB Agreement Package or program training	**U.S. Office Personnel Management** 1-202-606-2530 or TribalPrograms@opm.gov
Carrier Specific Inquiries *Includes questions about the specific plans.*	• To change an enrolled employee's address or add a family member under an already existing family enrollment	**Contact the specific FEHB Plan for information.**

Exercise 6.1: Resolving Inquiries

This exercise will test your knowledge of who is the appropriate contact for different types of inquiries. The facilitator will read aloud ten inquirires. Indentify who you should call to resolve each inquiry, and write down your answer in your participant guide.

1. I logged into TIPS, but I'm confused on how to navigate the system. Specifically I cannot figure out how to use the electronic upload process.

   _____

2. Hi, I am the Tribal Security Officer for my Tribal Employer. The passwords provided are not working. Who can help me reset the passwords?

   _____

3. Can I continue providing coverage to one of my employees even after they leave Tribal employment?

   _____

4. My employee has not received their insurance card. Do you know when they can expect to receive their card?

   _____

5. When will the Final Billing Report post each month?

   _____

6. My Tribal employee needs coverage for an upcoming operation. Will their FEHB Plan Carrier cover this procedure?

   _____

7. I'm unable to generate and download a TIPS Report, can you help me with this process?

   _____

8. I'm not sure if this is the right number or not but I got your number from a friend in another tribe. I'm interested in learning about the program and whether or not we would be eligible to offer Federal health benefits to our employees. Can you tell me more about the program?

_____

_____

9. I've been trying to log into the TIPS system all morning and it's not working. Are you able to log into the system and enter this SF 2809 for me?

_____

10. One of my employees just adopted a child and submitted a QLE request. I'm not sure if they can switch their plan at this time. Who can help verify their eligibility under the FEHB program?

_____

TIPS Website

Additional information can also be found on the TIPS website at
https://tips.nfc.usda.gov.

Submitting Inquiries Online

TBOs and other Authorized Contacts may submit inquiries online using the ServiceNow Customer Service Portal.

- To add Authorized Contacts please call the TIPS Contact Center.

Links to ServiceNow are available:

- On the TIPS website

- Inside TIPS on the **Help** page under the **Information** tab

In order to access ServiceNow you will receive a username and password from NFC.

Your TIPS login is independent from your ServiceNow login

About the ServiceNow Customer Service Portal
ServiceNow allows Tribal Employers to:

- Report Issues.

- Request Items/Services.

- Check the status of incidents or requests.

- View past incidents or requests.

Creating a Request in ServiceNow
In order to create a Request in ServiceNow, follow these steps:

1. Open the ServiceNow Customer Service Portal and login with your Username and Password.

2. Read the warning and Select **OK** to enter ServiceNow.

nfcerp.service-now.com says: ×

You are accessing a U.S. Government information system, which includes
(1) this computer, (2) this computer network, (3) all computers connected
to this network, and (4) all devices and storage media attached to this
network or to a computer on this network. This information system is
provided for U.S. Government-authorized use only. Unauthorized or
improper use of this system may result in disciplinary action, as well as civil
and criminal penalties.

By using this information system, you understand and consent to the
following: You have no reasonable expectation of privacy regarding any
communications or data transiting or stored on this information system. At
any time, the government may for any lawful government purpose
monitor, intercept, search and seize any communication or data transiting
or stored on this information system. Any communications or data
transiting or stored on this information system may be disclosed or used
for any lawful government purpose. Your consent is final and irrevocable.
You may not rely on any statements or informal policies purporting to
provide you with any expectation of privacy regarding communications on
this system, whether oral or written, by your supervisor or any other
official, except USDA's Chief Information Officer.

I certify that I am authorized to access this system.
I take full responsibility for any actions I take while using this system.

OK   Cancel

3. Select **Report Issue.**

4. Fill out the required fields and Select **Submit.**

Lesson 6: Knowledge Check

1. Who can resolve inquiries regarding coverage plans?

2. Who can resolve billing and technical inquiries?

3. Who can assist with inquiries regarding navigation of the TIPS system?

4. Who can resolve questions regarding policy inquiries?

5. Who can resolve inquiries regarding TIPS Username Setup and Security Inquiries?

Lesson 6 Summary: Obtaining Additional Assistance

Now that you have completed this lesson, you should be able to:

- Describe the standard Tribal Employer inquiries.
- Demonstrate an understanding of types of inquiries handled by NFC and other external organizations.
- Demonstrate how to navigate the TIPS website.
- Submit an inquiry using the ServiceNow Customer Service Portal.

TIPS Transactions References

The preceding pages provide steps for completing a number of core TIPS activities. References can be found for the following activities:

- o Creating new SF 2809s in TIPS
- o Creating SF 2810s in TIPS
- o Information Only SF 2809
- o Managing Contacts in TIPS
- o Billing Functionality
- o Electronic Upload Process

Creating New 2809s in TIPS

Tribal Employers may create a "New 2809" due to one of the following circumstances:

1. Active FEHB enrollee experiences a Qualifying Life Event (QLE) and wishes to change their coverage
2. Active FEHB enrollee wishes to cancel his/her FEHB enrollment

Steps

1. Login to the TIPS web portal with Username and Password.
2. Select the **Enrollee** button located under the **Inquiry** tab.
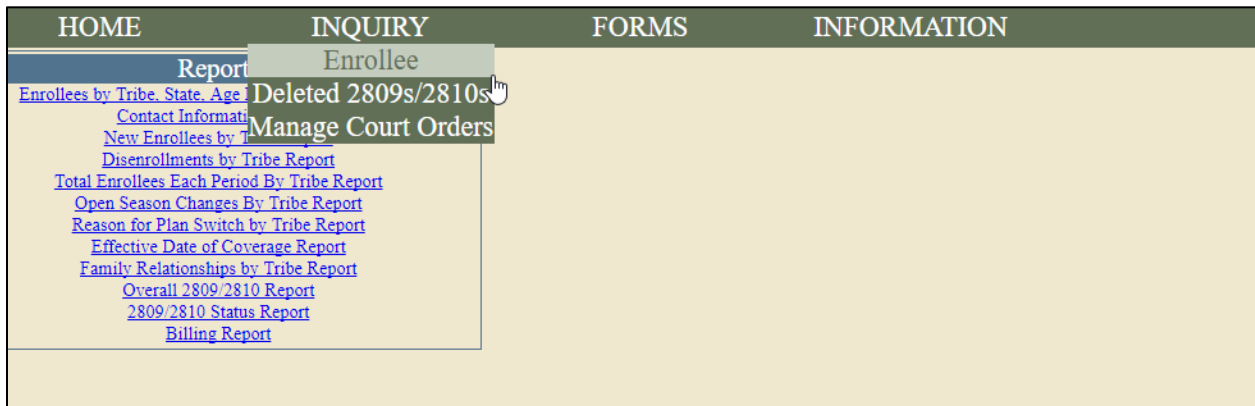
3. Enter the enrollee's information in all listed fields and click **Search.**

4. Locate the enrollee and click the **Create 2809** button.

5. When filling out a 2809 for a change of coverage or cancellation, please take the following into consideration:
    a. Enrollee and family member information will be pre-populated into the new 2809 and only the fields not greyed out will be editable.
    b. Informational changes such as changes in marital status, Medicare status, and other insurance statuses can only be made in conjunction with a change in FEHB coverage via a Qualifying Life Event (QLE).

c. Please ensure that all information on the 2809 is up to date prior to submitting (Reminder: Name changes must be made using a 2810).

Tribal HR SF2809 Information					
	Tribe		POI	Submit ID:	SF2809 Status:
Information Only ☐	TRAINING TRIBE ▼		6XXX - TRAINING POI ▼	Submit Date:	New

Part A - Enrollee Information *(For additional family members, use the Part A (Continued) section below.)*

Enrollee First Name	Middle Name	Last Name
SETH		TRAINING

Preferred Telephone Number (xxx)xxx-xxxx	Social Security Number	Date of Birth (MM/DD/YYYY)
6151111111	444554590	02/01/1969

Sex ○Male ○Female	Are you married? ○Yes ●No	Home mailing address 409 TRAINING DRIVE	Address Line 2	City NASHVILLE	State TN ▼	Zip 37235

Medicare (if you are covered by Medicare, check all that apply) ☐A ☐B ☐D	Medicare Claim Number __-__-____	Are you covered by insurance other than Medicare? ○Yes ●No	Indicate other types of insurance ☐Tricare ☐FEHB ☐Other	Name of insurance	Policy no.

Email Address

Part B - FEHB Plan You Are Currently Enrolled In (If Applicable)

1. Plan name TRIPLE S, SALUD	2. Enrollment code 891

Part C - FEHB Plan You Are Enrolling In or Changing To

1. Plan name	2. Enrollment code

Part D - Event That Permits You To Enroll, Change, or Cancel

1. Event code	2. Date of event (MM/DD/YYYY)	☑Premium Conversion

Part F - Cancellation of FEHB

☐I CANCEL my enrollment.

Part I - To be completed by Tribal Employer

REMARKS

1. Date received (MM/DD/YYYY)	2. Effective date of action (MM/DD/YYYY)	3. Personnel telephone number	4. Name and address of the Tribal Employer

5. Authorizing official	6. Payroll office number 12400096	7. Service Provider Contact National Finance Center	8. Service Provider Telephone 855-632-4468

Part A - Enrollee Information *Continued: Family Members*

☐Add/Edit Family Member Information

First Name	Middle Name	Last Name	Social Security Number	Date of Birth (MM/DD/YYYY)

Sex ○Male ○Female	Home mailing address	Address Line 2	City	State ▼	Zip

Email Address	Preferred Telephone Number (xxx)xxx-xxxx

Medicare (if you are covered by Medicare, check all that apply) ☐A ☐B ☐D	Medicare Claim Number __-__-____	Are you covered by insurance other than Medicare? ☐Yes ☐No	Indicate other types of insurance ☐Tricare ☐FEHB ☐Other	Name of insurance	Policy no.

Relationship Type: ▼		Add Member

Family Members Entered

No Family Members Currently Entered.

Cancel   Save   Submit

Home OPM

Creating 2810s in TIPS

Tribal Employers may create a 2810 to complete one of the following actions:

1. Terminate an employee's coverage.
2. Reinstate an employee's enrollment previously terminated.
3. Change the name or address stated on an employee's enrollment.

Steps
1. Login to the TIPS web portal with Username and Password.
2. Select the **Enrollee** button located under the **Inquiry** tab.

HOME	INQUIRY	FORMS	INFORMATION
	Enrollee		

Report
Enrollees by Tribe, State, Age
Contact Information
New Enrollees by T
Disenrollments by Tribe Report
Total Enrollees Each Period By Tribe Report
Open Season Changes By Tribe Report
Reason for Plan Switch by Tribe Report
Effective Date of Coverage Report
Family Relationships by Tribe Report
Overall 2809/2810 Report
2809/2810 Status Report
Billing Report

Deleted 2809s/2810s
Manage Court Orders

3. Enter the enrollee's information in all listed fields and click **Search.**
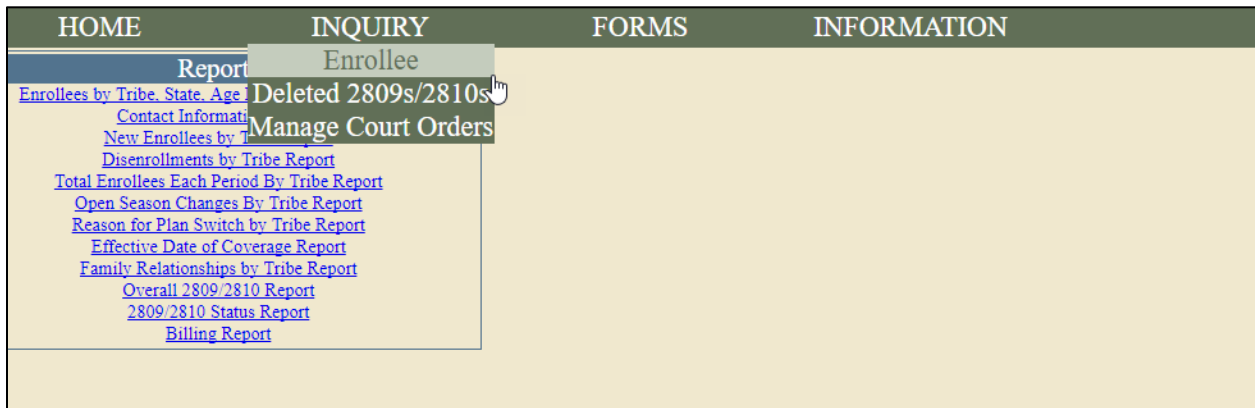
Enrollee Search Form
Enrollee Information
Last Name TRAINING   First Name SETH   Middle Name   SSN   Date of Birth
Tribe TRAINING TRIBE   POI 6XXX - TRAINING POI   Account Status Active   Search   Reset

4. Locate enrollee and click the **Create 2810** button.

Enrollee Search Form
Enrollee Information
Last Name TRAINING   First Name SETH   Middle Name   SSN   Date of Birth
Tribe TRAINING TRIBE   POI 6XXX - TRAINING POI   Account Status Active   Search   Reset
Inquiry Results   Number of Enrollees: 1
TRAINING, SETH   Create 2810   Create 2809   Effective Coverage Date: 9/30/2017   View 2809
Home OPM

5. When filling out a 2810 for termination, reinstatement, or change of name and/or address, please take the following into consideration:
   a. Enrollee information will be pre-populated into the 2810 and only the fields not greyed out will be editable.
   b. Only one change can be completed per 2810 (No combinations of Part B, Part D, and Part E can be on the same 2810).
   c. Please ensure that all information on the 2810 is up to date prior to submitting.

Notice of Change in Health Benefits Enrollment (2810)

Tribal HR SF2810 Information

Tribe	POI		Submit ID:	SF2810 Status:
TRAINING TRIBE	6XXX - TRAINING POI		Submit Date:	New

Part A - Identifying Information

Last Name	First name	Middle Initial	Date of Birth	Social Security Number
TRAINING	SETH		2/1/1969	444554590

Home Address	Payroll office number:	Enrollment code number
409 TRAINING DRIVE	12400096	891

Address Line 2	Date this action becomes effective

City	State	Zip
NASHVILLE	TN ▾	37235

Part B - Termination

☐ Your enrollment terminates on the date in Part A, item 8, above. However, your coverage is extended for 31 days after that date.

Important Notice: **You have the right to convert to an individual (nongroup) contract with the carrier of your plan. You also may have the right to temporarily continue your group coverage.** See **Part B - Termination** on the back of this form for information about 31-day extension of coverage, conversion, and temporary continuation of coverage.

If termination is due to death of enrollee enter date of death

Date of Death (mo, dy, yr)

Part D - Reinstatement

☐ Your enrollment has been reinstated effective on the date in Part A, item 8, above.

Part E - Change in Name of Enrollee

☐ The name under which this enrollment is carried has been changed to:

Changed Last Name	Changed First name	Changed Middle Name

Changed Address

Changed Address Line 2

Changed City	Changed State	Changed Zip
	▾	

Part G - Remarks

Part H - Date of Notice

Name of Tribal Employer	Personnel Contact Last Name	Personnel Contact First name	Personnel Contact Middle Initial	Personnel Phone Number
TRAINING				

Agency Address	Agency Address Line 2	Service Provider Contact	Service Provider Telephone
123 HERE ROAD		National Finance Center	855-632-4468

City	State	Zip
ANY WHERE	LA ▾	77777

Authorizing Official Last Name	Authorizing Official First name	Authorizing Official Middle Initial	Date

Cancel   Clear   Save   Submit

Home OPM

Information Only 2809

The Information Only 2809 function will be used by Tribal Employers to add, edit, remove a dependent, or make corrective actions by selecting the Information Only option on the 2809. The status of the enrollment will not change. When enrolling a dependent of an active enrollee, the user will receive an error message stating that the Social Security Number of the enrollee has been found on the dependent record of an active enrollee. To continue the enrollment, an Information Only 2809 must be processed on the active enrollee to remove the dependent, prior to the completion of the 2809 of the dependent. You would also use this form to make corrective actions such as editing the enrollee's name, SSN, address, DOB, POI, phone number, and/or email address.

Steps

1. Login to the TIPS web portal with Username and Password.
2. Select the **Enrollee** option under the **Inquiry** tab.

HOME	INQUIRY	FORMS	INFORMATION
Report	Enrollee		

Enrollees by Tribe, State, Age
Contact Informati
New Enrollees by
Disenrollments by Tribe Report
Total Enrollees Each Period By Tribe Report
Open Season Changes By Tribe Report
Reason for Plan Switch by Tribe Report
Effective Date of Coverage Report
Family Relationships by Tribe Report
Overall 2809/2810 Report
2809/2810 Status Report
Billing Report

Deleted 2809s/2810s
Manage Court Orders

3. Input the enrollee's information in all of the listed fields and click **Search.**

Enrollee Search Form
Enrollee Information

Last Name	TRAINING	First Name	SETH	Middle Name		SSN		Date of Birth			
Tribe	TRAINING TRIBE		POI	6XXX - TRAINING POI		Account Status	Active		Search	Reset	

4. In the Inquiry results displayed, click the **Create 2809** button for the enrollee.

Enrollee Search Form
Enrollee Information

Last Name	TRAINING	First Name	SETH	Middle Name		SSN		Date of Birth			
Tribe	TRAINING TRIBE		POI	6XXX - TRAINING POI		Account Status	Active		Search	Reset	

Inquiry Results   **Number of Enrollees: 1**

TRAINING, SETH   Create 2810   Create 2809   Effective Coverage Date: 9/30/2017 ▼ | View 2809

Home OPM

5. Check the **Information Only** checkbox.

Tribal HR SF2809 Information

	Tribe	POI	
Information Only ☑	TRAINING TRIBE ⌄	6XXX - TRAINING POI ⌄	Submit ID: TD667 Submit Date: 9/21/2017

6. Click the **Add Member, Edit** or **Delete** button to edit or delete the Dependent information from the Family member section. Make the desired changes.

Part A - Enrollee Information *Continued; Family Members*

☐ Add/Edit Family Member Information

First Name	Middle Name	Last Name	Social Security Number	Date of Birth (MM/DD/YYYY)

Sex ◯ Male ◯ Female	Home mailing address	Address Line 2	City	State	Zip

Email Address	Preferred Telephone Number (xxx)xxx-xxxx

Medicare *(if you are covered by Medicare, check all that apply)*
☐ A ☐ B ☐ D

Medicare Claim Number: _ - _ _____

Are you covered by insurance other than Medicare? ◯ Yes ◯ No

Indicate other types of insurance ☐ Tricare ☐ FEHB ☐ Other

Name of insurance

Policy no.

Relationship Type: ⌄   [Add Member]

Family Members Entered

ELISE   TRAINING

Gender: F	409 TRAINING DRIVE	Medicare A: N	Cover by insurance other than Medicare?: N	Other Insurance Name:
DOB: 3/1/1970	NASHVILLE , TN	Medicare B: N	Tricare: N	Other Insurance Policy No.:
SSN: 654321987	37235	Medicare D: N	FEHB: N	[Edit
Relationship:Spouse	Phone #:6151111111	Medicare Claim Number:	Other: N	Delete]

7. Select the **Submit** button.

Managing Contacts in TIPS

The Tribal Employer Maintenance Contact is responsible for updating contact information for all authorized contacts in TIPS. Each Tribal Employer will have two maintenance contacts. Please see the steps below for adding and editing contact information.

Steps

1. Login to the TIPS web portal with Username and Password.
2. Select the **Manage Contacts** Button.
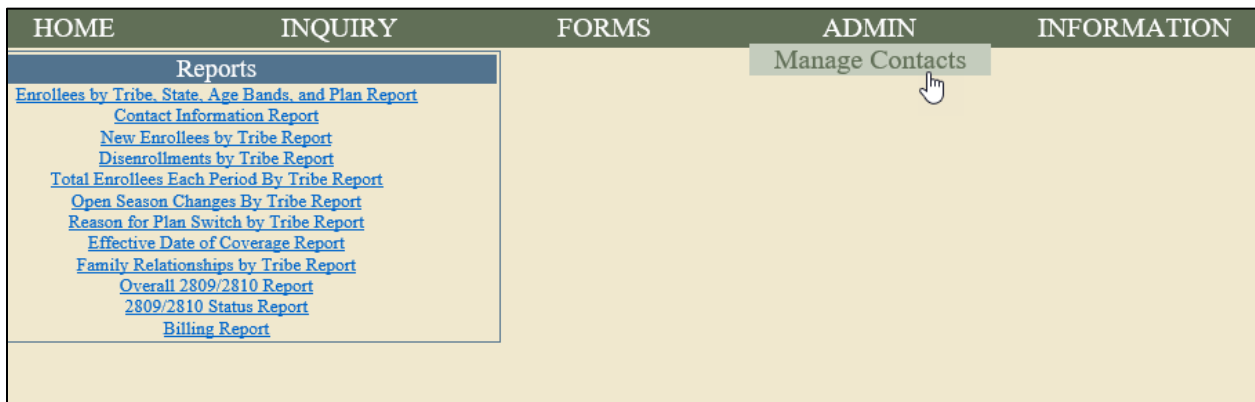
3. If you are adding a new contact, input contact's information in all listed fields and click **Add Contact.**

4. If you need to edit details on existing contact, select Tribe and POI. Then click on **View Contact.**

5. Click beside contact's name on the **Edit Details** button to make any necessary changes.

Billing Functionality

Tribal Employers may create a billing report for an individual Personnel Office Identifier (POI)/Billing Unit. Two billing report types can be generated: "PREVIEW" and "FINAL." The report type can be found in the upper left hand corner of the generated billing report. A preview billing report will reflect the amount due for the specified date. The final billing report can only be generated on the 1st calendar day of the following month and reflects the amount of money that will be debited from a POI bank account. The below action steps demonstrate how to access the billing report selection in TIPS.

Steps
1. Login to the TIPS web portal with Username and Password.
2. Select the **Billing Report** button located under the Report Section.

HOME	INQUIRY	FORMS	INFORMATION	Welcome, Train671 Training ROLE: Update/Tribe [Logout]

Reports
Enrollees by Tribe, State, Age Bands, and Plan Report
Contact Information Report
New Enrollees by Tribe Report
Disenrollments by Tribe Report
Total Enrollees Each Period By Tribe Report
Open Season Changes By Tribe Report
Reason for Plan Switch by Tribe Report
Effective Date of Coverage Report
Family Relationships by Tribe Report
Overall 2809/2810 Report
2809/2810 Status Report
Billing Report

3. Select the POI and Billing Period.

HOME	INQUIRY	FORMS	ADMIN	INFORMATION	Welcome, Train667 Training ROLE: Update/NFC [Logout]

Billing Report
Tribal Organization: TRAINING TRIBE   POI: 6XXX - TRAINING POI   Generate Report
Billing Period: [   ]
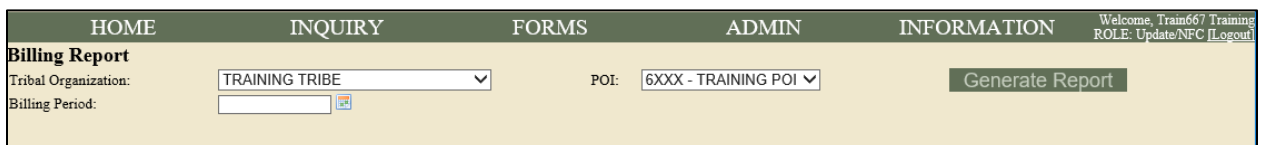
4. Click **Generate** to create Billing Report with specific information.

HOME	INQUIRY	FORMS	ADMIN	INFORMATION	Welcome, Train667 Training ROLE: Update/NFC [Logout]

Billing Report
Tribal Organization: TRAINING TRIBE   POI: 6XXX - TRAINING POI   Generate Report
Billing Period: 10/31/2017
Report Type: **PREVIEW**

CONTROLLED UNCLASSIFIED INFORMATION

Tribal Employer Number	Billing Unit/POI	Enrollee Name	Enrollee SSN	Enrollment Code	Premium Amount	Administrative Fee	Adjustments	Bill Amount
4A	6999	SAMPLE SAMPLE	123456789	891	420.96	0	0	420.96
4A	6999	GERRY TRAINING	444117928	892	963.98	0	0	963.98
4A	6999	JOHN TRAINING	111999999	891	407.38	0	0	407.38
4A	6999	JOSHUA TRAINING	000405328	891	407.38	0	0	407.38
4A	6999	SETH TRAINING	444554590	891	407.38	0	0	407.38
					Total: $2,607.08	Total: $0.00	Total: $0.00	**Total Bill Amount: $2,607.08**

☉ All Pages   ☐ Include Grid Lines
○ Current Page   Export to Excel

Electronic Upload Process

Steps

1. Login to the TIPS web portal with Username and Password.
2. Select **Electronic Upload** from the **Forms** tab.
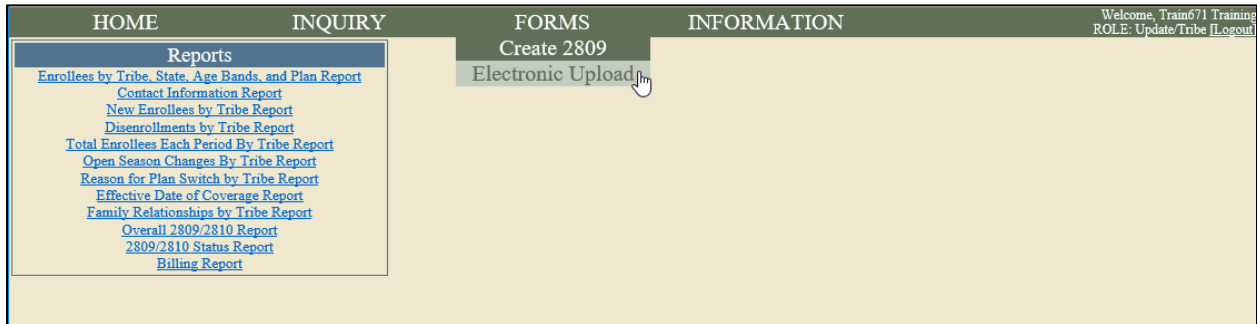
3. Enter Email Address, Records Sent, Tribe, and Billing Unit/POI. Then click on **Browse** to find the .TXT file containing any SF 2809 information that you wish to upload.
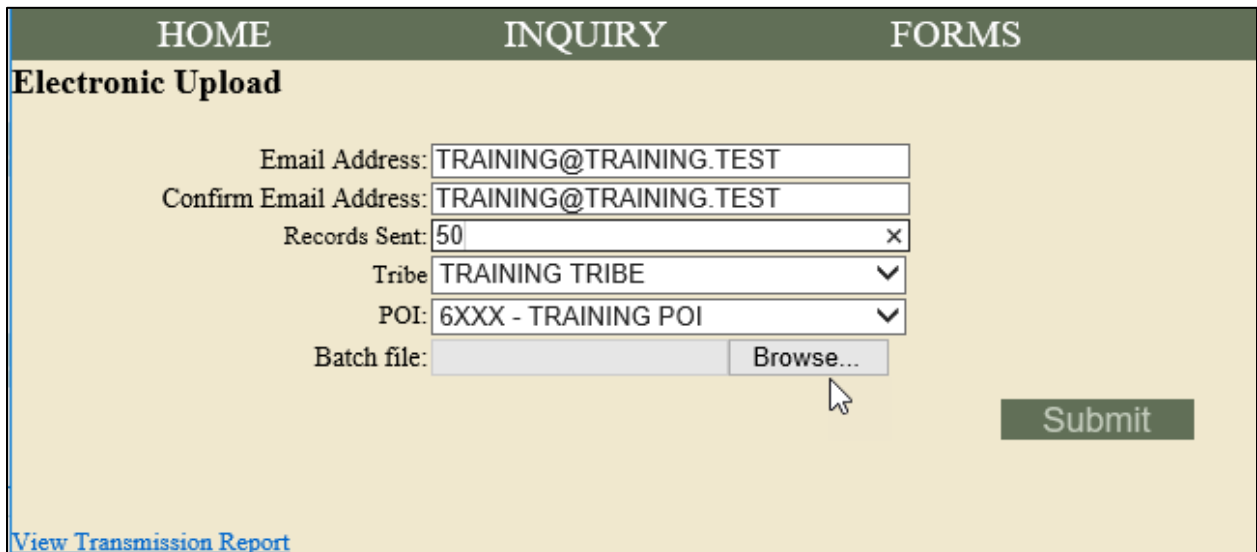
Overview of Fields:

    a. Email Address: Enter the email address of the individual who is responsible for resolving any errors, which may be found after the .TXT file is submitted.

    b. Records Sent: Note the total number of SF 2809s that were included in the electronic upload file.

    c. Billing Unit/POI: Indicate the Billing Unit/POI associated with the electronic upload file.

.TXT File Information

- In the upload template there are a series of rows that each correspond to a field on the SF2809 enrollment form in TIPS. The number "1" of each row in the template contains the data fields for the enrollee. You will notice at the beginning of each row which begins with the number "1", indicates the start of a new 2809. When submitting an upload file with multiple 2809s, each 2809 must be separated by number "1".

- The second grouping of rows is for any of the enrollee's family members who want to enroll. You will notice at the beginning of each row the number "2" which indicates the start of a new family member being added to the enrollee's 2809. When adding family members to a 2809, each family member must be separated by number "2".

  Example:

```
1|ENROLLEE_FIRST_NM|ENROLLEE_MIDDLE_NM|ENROLLEE_LAST_NM|DAY_PHONE_NBR|SSNO|BIRTH_DT|SEX_CD|MARITAL_STATUS|
HOME_ADDRESS_LINE1|HOME_ADDRESS_LINE2|HOME_ADDRESS_CITY|HOME_ADDRESS_STATE|HOME_ADDRESS_ZIP5|MEDICARE_A_EMPL_IND|
MEDICARE_B_EMPL_IND|MEDICARE_D_IND|MEDICARE_NBR|OTHER_THAN_MEDICARE_IND|TRICARE_IND|FEHB_TRANSACTION_CD|
OTHER_INSURANCE_IND|OTHER_INSURANCE_NM|OTHER_INSURANCE_POLICY_NBR|PRESENT_ENROLLMENT_CD|NEW_ENROLLMENT_CD|
EVENT_CHANGE_IND|EVENT_CHANGE_DT|PREMIUM_CONVERSION_IND|PARTF_CANCEL_IND|REMARKS|PERSONNEL_RECEIVED_DT|
ELECTION_EFFECTIVE_DT|AGENCY_PHONE_NBR|HR_OFFICE_NM|HR_OFFICE_ADDRESS1|HR_OFFICE_ADDRESS2|HR_OFFICE_ADDRESS3|
HR_OFFICE_CITY|HR_OFFICE_ST|HR_OFFICE_ZIP_CD|HR_OFFICE_COUNTRY_CD|AUTHORIZING_OFFICIAL_FIRST_NM|
2|MEMBER_FIRST_NM|MEMBER_MIDDLE_NM|MEMBER_LAST_NM|SSNO|BIRTH_DT|SEX_CD|HOME_ADDRESS_LINE1|HOME_ADDRESS_LINE2|
HOME_ADDRESS_CITY|HOME_ADDRESS_ST|HOME_ADDRESS_ZIP5|MEDICARE_A_IND|MEDICARE_B_IND|MEDICARE_D_IND|MEDICARE_NBR|
OTHER_THAN_MEDICARE_IND|TRICARE_IND|FEHB_TRANSACTION_CD|OTHER_INSURANCE_IND|OTHER_INSURANCE_NM|
OTHER_INSURANCE_POLICY_NBR|RELATIONSHIP_CD|SSN_LINK
```

Complete the .TXT file with these guidelines

- The rows in the upload template correspond to the fields in the 2809 form in TIPS. For example, the row that begins with the number "1" must contain all the enrollee's required information indicated on Table 1. You will notice the horizontal pipe character (|) within each row. Throughout the upload template the information to the right of the horizontal pipe character (|) indicates what data should be entered in that row. Do not remove any pipe characters (|) or the horizontal bar itself.
- If there is a row that is not required and you do not have any data to enter in that field then leave the space to the right of the horizontal bar blank. Do not delete any pipe characters (|) in the 2809. However, when populating the upload template for an enrollee with no family members then you should delete all of the rows for a family member (including the number "2" at the beginning of each row). See the example upload file to see how completed rows should be populated.

- The blank upload template contains the rows for one 2809 and one family member. To enter multiple 2809s simply copy the group of rows for an enrollee's 2809 (including the number "1" which indicates the start of a new 2809) and paste it below the first group of 2809 rows and repeat until you have enough 2809 row groupings (separated by the number "1" which indicates the start of a new 2809 header) for the number of enrollees you want to enter. Perform the same process for adding multiple family members to a 2809 (separated by the number "2" which indicates the start of a new family member header.)

4. When you are ready to submit your file after completing the upload template, you must assign a unique filename to the upload file. The filename convention is as follows: **TIPS99_9999_YYYY.MM.DD.TXT.**

   Naming Convention Explanation:
   99 = Two-digit number that is user selectable representing the number of uploads for that day
   9999 = Four-digit Billing Unit/POI of the enrollees populated in the upload file
   YYYY = Year of submission
   MM = Month of submission
   DD = Day of submission

   Example: A Tribal Employer submitting their third electronic upload file into TIPS in the same day on July 1, 2012 for enrollees in Billing Unit/POI 6500 would assign that upload file the following filename: TIPS03_6500_2012.07.01.TXT.
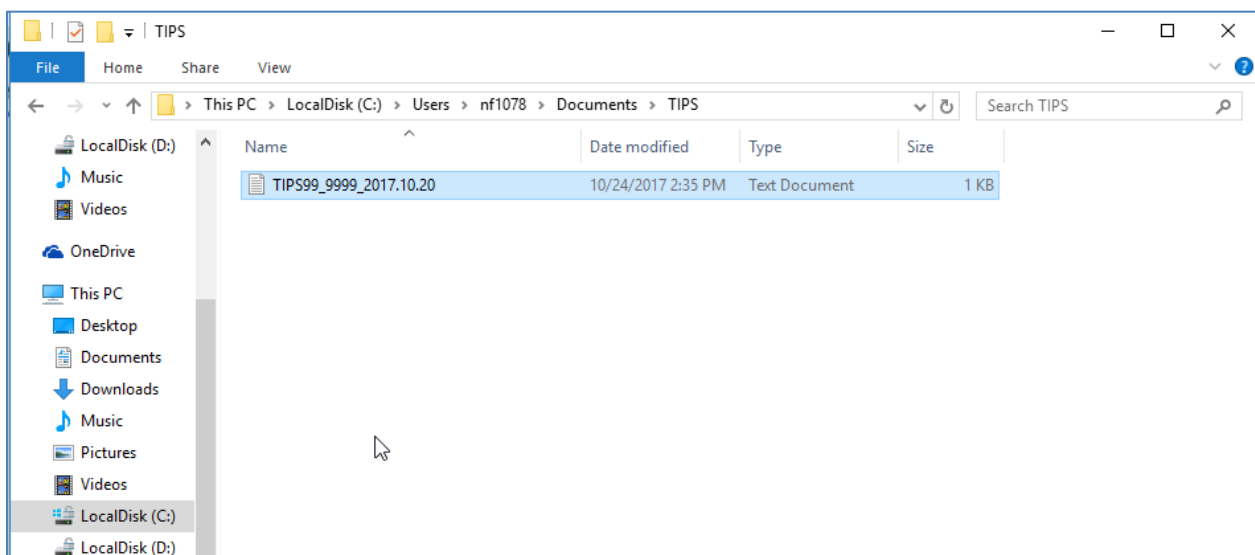
5. Click **Submit.**

After you have submitted your upload file in TIPS, you will notice an indication that the file was uploaded successfully. The system will then process your file. Once the system completes the processing of the information, you will receive a confirmation email indicating whether your upload file was successfully processed or if there were errors in your upload file that require your attention. Once the error(s) are corrected, the text file can be uploaded again to TIPS.

TABLE 1 – Upload Template Row Descriptions

Each new 2809 record must start with the following header: BulkUpload.TIPS_SF2809

Data Field Label (the term "value" in each label below indicates where you would input your data for that row in the template)	Required/ Not Required	Description	Comments
ENROLLEE_FIRST_NM|value	Required	Enrollee's First Name	17 character max
ENROLLEE_MIDDLE_NM|value	Not Required	Enrollee's Middle Name	17 character max
ENROLLEE_LAST_NM|value	Required	Enrollee's Last Name	25 character max
DAY_PHONE_NBR|value	Required	Enrollee's daytime phone number	Example: 555-555-5555 Dashes are optional
SSNO|value	Required	Enrollee's Social Security Number	Example: 012345678 No dashes allowed Include any leading zeros as illustrated in the example above
BIRTH_DT|value	Required	Enrollee's Date of Birth	Must be in format: "MM/DD/YYYY"
SEX_CD|value	Required	**Enter M or F** M=Male F=Female	

Data Field Label (the term "value" in each label below indicates where you would input your data for that row in the template)	Required/ Not Required	Description	Comments
MARITAL_STATUS|value	Required	**Enter Y or N** Y=Married N=Single/Divorced/ Widowed	
HOME_ADDRESS_LINE1|value	Required	Enrollee's address street and suite/apartment/ etc. number. Standard address abbreviations are acceptable in all address fields in the upload template (e.g., "st" for street, "ave" for avenue, etc)	35 character max
HOME_ADDRESS_LINE2|value	Not Required	Further address information	35 character max
HOME_ADDRESS_CITY|value	Required	Enrollee's home city	23 character max
HOME_ADDRESS_STATE|value	Required	Enrollee's home state	2 character max
HOME_ADDRESS_ZIP5|value	Required	Enrollee's 5-digit zip code	5 character max

Data Field Label (the term "value" in each label below indicates where you would input your data for that row in the template)	Required/ Not Required	Description	Comments
MEDICARE_A_EMPL_IND|value	Required	**Enter Y or N** Y=Employee currently has Medicare A N=Employee does not currently have Medicare A	This field is required to be "Y" if the field for Medicare B is "Y"
MEDICARE_B_EMPL_IND|value	Required	**Enter Y or N** Y=Employee currently has Medicare B N=Employee does not currently have Medicare B	
MEDICARE_D_IND|value	Required	**Enter Y or N** Y=Employee currently has Medicare D N=Employee does not currently have Medicare D	
MEDICARE_NBR|value	Required if any Medicare indicator is "Y"	Alphanumeric field for the enrollee's Medicare Number	Must be in format: "NNNNNNNNNXX" N=Numeric X=Alpha

Data Field Label (the term "value" in each label below indicates where you would input your data for that row in the template)	Required/ Not Required	Description	Comments
OTHER_THAN_MEDICARE_IND|value	Required	**Enter Y or N** Y=Enrollee has other insurance besides Medicare N= Enrollee does not have other insurance besides Medicare	For "Y": TRICARE_IND, Other_INSURANCE_IND, or FEHB_TRANSACTION _CD must be Y For "N": TRICARE_IND, Other_INSURANCE_IND, and FEHB_TRANSACTION _CD must all be N
TRICARE_IND|value	Required	**Enter Y or N** Y=Employee currently has Tricare N=Employee does not currently have Tricare	
FEHB_TRANSACTION_CD|value	Required	**Enter Y or N** Y= Enrollee currently has FEHB coverage N= Enrollee currently does not have FEHB coverage	If Y, 2809 will be rejected

Data Field Label (the term "value" in each label below indicates where you would input your data for that row in the template)	Required/ Not Required	Description	Comments
OTHER_INSURANCE_IND|value	Required	**Enter Y or N** Y=Employee currently has other insurance N=Employee does not currently have other insurance	
OTHER_INSURANCE_NM|value	Required if OTHER_INSURANCE_IND is "Y"	The **policy name** for employee's other insurance	35 character max
OTHER_INSURANCE_POLICY_NBR|value	Required if OTHER_INSURANCE_IND is "Y"	The **policy number** for employee's other insurance	30 character max
PRESENT_ENROLLMENT_CD|value	Not Required	Enrollment Code of the enrollee's current plan	Only used for Qualifying Life Event that changes an Enrollment Code
NEW_ENROLLMENT_CD|value	Required for 1A and 5A Qualifying Life Events	Enrollee's new Enrollment Code	Verify the Qualifying Life Event permits change of Enrollment Code
EVENT_CHANGE_IND|value	Required	Qualifying Life Event Code for the 2809	
EVENT_CHANGE_DT|value	Required	Date the Qualifying Life Event occurred	Must be in format: "MM/DD/YYYY"

Data Field Label (the term "value" in each label below indicates where you would input your data for that row in the template)	Required/ Not Required	Description	Comments
PREMIUM_CONVERSION_IND|value	Required	**Enter Y or N** Y=Enrollee wishes to have Premium Conversion N=Enrollee does not wish to have Premium Conversion	If Y, "EVENT_CHANGE_IND" must be a series 1 code (i.e.,1A, 1B, etc.) If N, "EVENT_CHANGE_IND" must be a series 5 code (i.e.,5A, 5B, etc.) Premium Conversion Definition
PARTF_CANCEL_IND|value	Not Required	**Enter Y or N** Y=2809 is for a cancellation N=2809 is not for a cancellation	
REMARKS|value	Required	This field is required if the transaction submitted date is greater than 60 days from the QLE. This field is optional for transactions processed within the 60 day window.	400 character max

| Data Field Label

(the term "value" in each label below indicates where you would input your data for that row in the template) | Required/

Not Required | Description | Comments |
|---|---|---|---|
| **PERSONNEL_RECEIVED_DT\|value** | Required | The date the document was received by Tribal HR | Must be in format: "MM/DD/YYYY" |
| **ELECTION_EFFECTIVE_DT\|value** | Required | Effective date of Enrollment | Must be in format: "MM/DD/YYYY" |
| **AGENCY_PHONE_NBR\|value** | Required | The phone number of the Tribal Employer's HR Office | |
| **HR_OFFICE_NM\|value** | Required | Name of Tribal Employer's HR Office | 35 character max |
| **HR_OFFICE_ADDRESS1\|value** | Required | Address of Tribal Employer's HR Office | 35 character max |
| **HR_OFFICE_ADDRESS2\|value** | | Further Address Information | 35 character max |
| **HR_OFFICE_ADDRESS3\|value** | | | 35 character max |
| **HR_OFFICE_CITY\|value** | Required | City of Tribal Employer's HR Office | 23 character max |
| **HR_OFFICE_ST\|value** | Required | State of Tribal Employer's HR Office | 2 character max |

Data Field Label (the term "value" in each label below indicates where you would input your data for that row in the template)	Required/ Not Required	Description	Comments
HR_OFFICE_ZIP_CD|value	Required	Zip code of Tribal Employer's HR Office	11 character max
HR_OFFICE_COUNTRY_CD|value	Required	Country of Tribal Employer's HR Office	3 character max Example: USA
AUTHORIZING_OFFICIAL_FIRST_NM| value	Required	Full name of Authorizing Official for your Tribal Employer	17 character max Example: John Doe

The following section corresponds to a family member.
Each new family member record must start with the following header:
BulkUpload.TIPS_SF2809_FAMILY

Data Field Label	Required/ Not Required	Description	Comments
MEMBER_FIRST_NM|value	Required	Family Member's First Name	17 character max
MEMBER_MIDDLE_NM|value	Required	Family Member's Middle Name	17 character max
MEMBER_LAST_NM|value	Required	Family Member's Last Name	25 character max

Data Field Label	Required/ Not Required	Description	Comments
SSNO|value	Required	Family Member's Social Security Number	Example: 012345678 No dashes allowed Include any leading zeros as illustrated in the example above
BIRTH_DT|value	Required	Family Member's Date of Birth	Must be in format: "MM/DD/YYYY"
SEX_CD|value	Required	**Enter M or F** M=Male F=Female	
HOME_ADDRESS_LINE1|value	Required	Family Member's home address street and suite/apartment/etc. number	35 character max
HOME_ADDRESS_LINE2|value	Required	Additional Address Information for Family Member	35 character max
HOME_ADDRESS_CITY|value	Required	Family Member's Home City	23 character max
HOME_ADDRESS_ST|value	Required	Family Member's Home State	2 character max
HOME_ADDRESS_ZIP5|value	Required	Family Member's 5-digit zip code	5 character max
MEDICARE_A_IND|value	Required	**Enter Y or N** Y=Family Member currently has Medicare A N=Family Member does not currently have Medicare A	This field is required to be "Y" if the field for Medicare B is "Y"

Data Field Label	Required/ Not Required	Description	Comments
MEDICARE_B_IND|value	Required	**Enter Y or N** Y=Family Member currently has Medicare B N=Family Member does not currently have Medicare B	
MEDICARE_D_IND|value	Required	**Enter Y or N** Y=Family Member currently has Medicare D N=Family Member does not currently have Medicare D	
MEDICARE_NBR|value	Required if any Medicare indicator is "Y"	Alphanumeric field for the Family Member's Medicare Number	Must be in format: "NNNNNNNNNXX" N=Numeric X=Alpha
OTHER_THAN_MEDICARE_IND|value	Required	**Enter Y or N** Y=Family Member has insurance other than Medicare N=Family Member does not have insurance other than Medicare	For "Y": TRICARE_IND, Other_INSURANCE_IND, or FEHB_TRANSACTION_CD should be Y For "N": so TRICARE_IND, Other_INSURANCE_IND, and FEHB_TRANSACTION_CD should all be N

Data Field Label	Required/ Not Required	Description	Comments
TRICARE_IND|value	Required	**Enter Y or N** Y=Family Member currently has Tricare N=Family Member does not currently have Tricare	
FEHB_TRANSACTION_CD|value	Required	**Enter Y or N** Y=Family Member has FEHB N=Family Member does not have FEHB	
OTHER_INSURANCE_IND|value	Required	**Enter Y or N** Y=Family Member currently has other insurance N=Family Member does not currently have other insurance	
OTHER_INSURANCE_NM|value	Required if OTHER_INSURANCE_IND is "Y"	The **policy name** for Family Member's other insurance	35 character max

Data Field Label	Required/ Not Required	Description	Comments
OTHER_INSURANCE_POLICY_NBR|value	Required if OTHER_INSURANCE_IND is "Y"	The **policy number** for Family Member's other insurance	30 character max
RELATIONSHIP_CD|value	Required	Family Member's relationship to the Enrollee	01=Spouse 19=Child under age of 26 09=Adopted Child 17=Stepchild 10=Foster Child 99=Disabled child age 26 or older who is incapable of self-support
SSN_LINK|value	Required	Enrollee's SSN that the Family Member is enrolled under	Example: 012345678 No dashes allowed Include any leading zeros as illustrated in the example above

Appendix A: Glossary

Acronym	Description
CLER	Centralized Enrollment Reconciliation Clearinghouse
CMB	Customer Management Branch
FEHB	Federal Employees Health Benefits
ISDEAA	Indian Self-Determination and Education Assistance Act
NFC	National Finance Center
OPM	Office of Performance Management
PADS	Preauthorized Debt System
POI	Personnel Office Identifier
PPACA	Patient Protection and Affordable Care Act
QLE	Qualifying Life Event
SF 2809	Standard Form 2809
SF 2810	Standard Form 2810
SME	Subject Matter Expert
TBO	Tribal Benefits Officer
TIPS	Tribal Insurance Processing System
TSO	Tribal Security Officer
USDA	U.S. Department of Agriculture

TIPS Final Review

1. In addition to the CEO and CFO, what three contacts must Tribal employers designate when joining FEHB?

2. What process enables you to upload multiple enrollment records or at the same time?

3. What are the four primary functions of TIPS?

4. Each _____ will receive a separate Billing Report in TIPS.

5. The Final Billing Report closes at this time each month?

6. Who will contact Tribal Employers if they are billed and insufficient funds are available in their account?

7. TIPS Reports can be viewed in what two ways?

8. Who is responsible for initiating and managing the creation of a Tribal Employer's TIPS user accounts?

9. In TIPS, which tab would you select in order to create an initial SF 2809?

10. In TIPS, which tab would you select in order to create a SF 2810?

11. What is the status of a SF 2809 that has been completed and sent to the FEHB Plan Carriers, but not processed for billing?

12. What button would a TIPS user select to edit an incorrect SF 2809 that has already been Submitted and Released but not Processed?

13. What field(s) can you search by when performing and Inquiry in TIPS?

14. What TIPS Report allows you to see source data from all Tribal Employee forms?

15. What information must you have in order to transfer an enrollee to a POI managed by your Tribal Employer?

Course Summary

Now that you have completed this course, you should be able to:

- Describe the FEHB key stakeholders relative to TIPS.
- Identify how TIPS supports Tribal Employers.
- Explain the employee enrollment process.
- Explain the billing and payment processes.
- Enroll employees in TIPS using individual forms and Electronic Uploads.
- Run and review TIPs Reports and Billing Reports in TIPS.
- Describe special transactions including: Billing Unit/POI Transfers, Retroactive Adjustments, and Court Orders.
- Demonstrate how to navigate the TIPS website.
- Submit an Inquiry using the ServiceNow Customer Service Portal.