



Tribal Insurance Processing System (TIPS) 101 Training

Welcome and Introductions

- Welcome
- Introductions
- Restrooms
- Parking Lot
- Review Learner Materials

Agenda



Lesson / Activity	Duration
Lesson 1: FEHB Overview	30 minutes
Lesson 2: TIPS and Enrollments	45 minutes
Break	10 minutes
Lesson 3: Billing and TIPS Reports	45 minutes
Morning Review	20 minutes
Lunch	60 minutes
Lesson 4: Special Transactions	30 minutes
Lesson 5: Performing Transactions in TIPS	90 minutes
Break	10 minutes
Lesson 6: Obtaining Additional Assistance	30 minutes
TIPS Transactions References	10 minutes
Final Review and Evaluation	35 minutes

Ground Rules

During class, please do:

- ☒ Ask questions
- ☒ Participate
- ☒ Take notes and mark pages in your participant guide
- ☒ Turn off or silence your cell phone

During class, please do not:

- ☒ Text during class
- ☒ Use email or the internet except during breaks
- ☒ Have side conversations

Icebreaker



We'd like each Tribal Employer team to:

- Introduce your organization
 - Name of organization
 - Members of team
 - Mission of organization
 - Number of employees
- Ask any questions you might have going into today

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 Remedy Requester Console

Lesson 1: FEHB Overview

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Lesson 1 Objectives

- 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



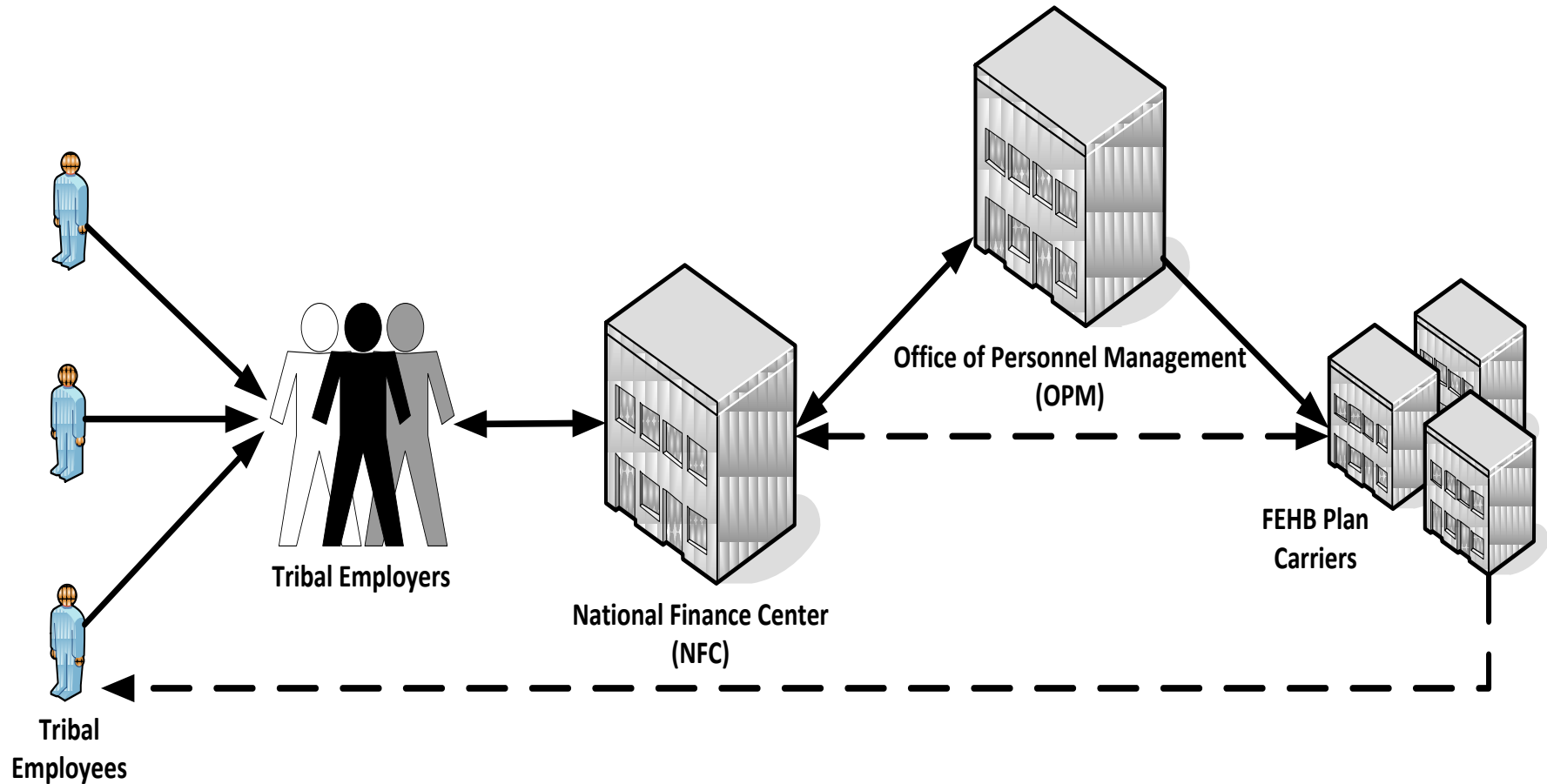
What is FEHB?

- Provides employer-sponsored health insurance to Federal employees
- Administered by the Office of Personnel Management (OPM)

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



FEHB Key Stakeholders: Tribal Employees



**Tribal
Employees**

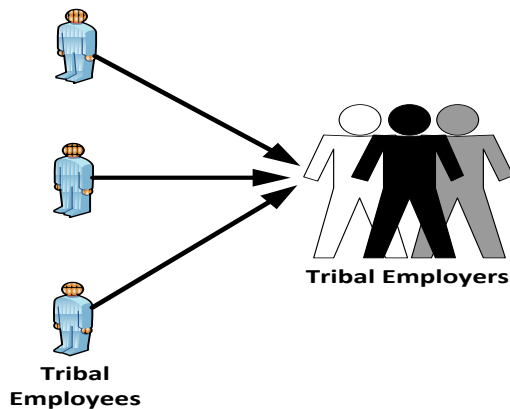
Tribal Employees

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

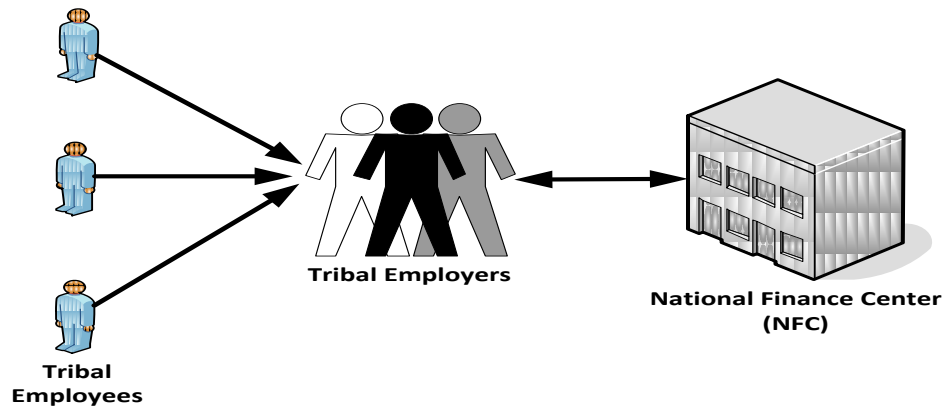
FEHB Key Stakeholders: Tribal Employers



Tribal Employers

- 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
- Work with NFC to facilitate enrollment reconciliations

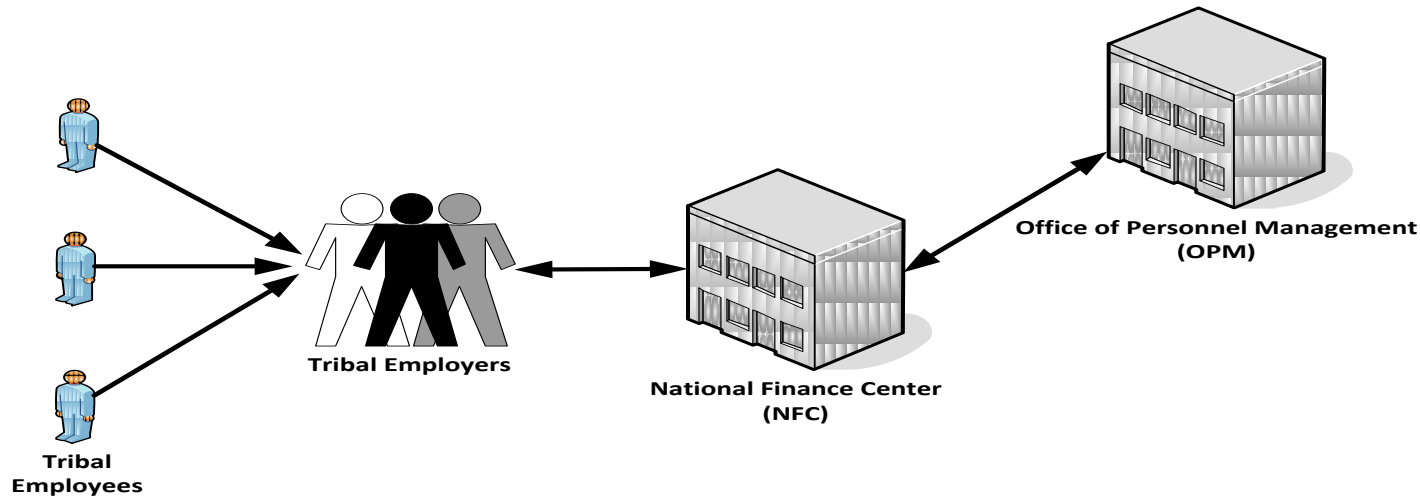
FEHB Key Stakeholders: National Finance Center



NFC

- Maintain TIPS and provide 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

FEHB Key Stakeholders: Office of Personnel Management

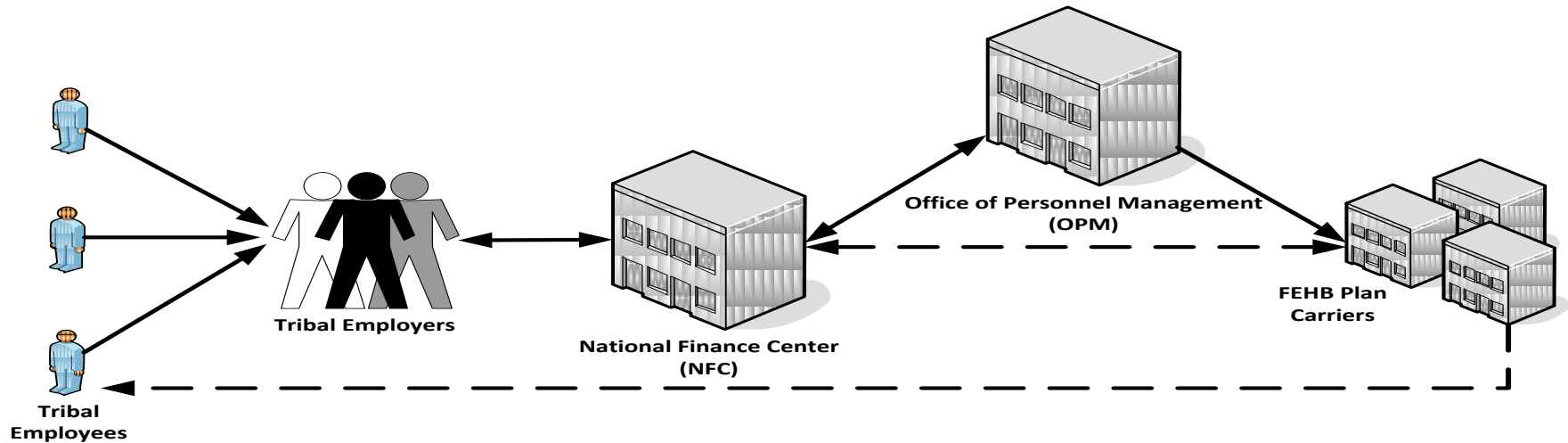


OPM

- 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 Unit/POIs

FEHB Key Stakeholders:

FEHB Plan Carriers

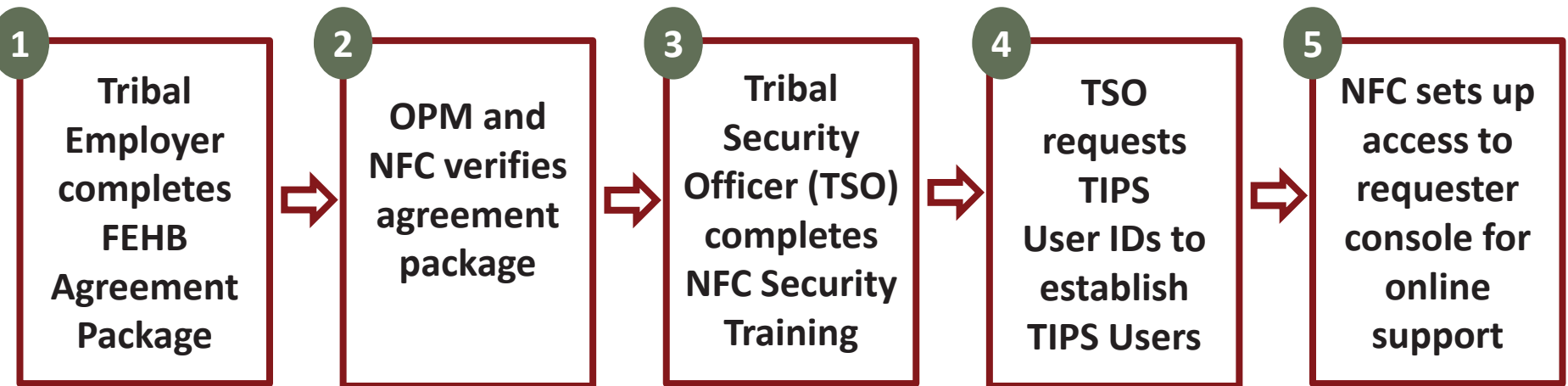


FEHB Plan Carrier(s)

- 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

- In order to join the FEHB program, the following five steps need to be completed in order to access TIPS and be enrolled into FEHB:



FEHB Agreement Package



- Tribal Employer must complete and return the documents OPM sent, including:
 - Agreement to Purchase FEHB
 - Tribal Employer Profile
 - DPRS Memorandum of Understanding (*MOU*)
 - Bank Account Information Form
 - Authorized Contact Designation Forms (*description of each listed below*)

This block contains images of the documents included in the FEHB Agreement Package. At the top right is a green box labeled "FY 2012" and "Memorandum of Understanding Direct Premium Remittance System". Below it is the "Tribal Federal Employees Health Benefits (FEHB) Handbook", which includes a "DRAFT Tribal FEHB Handbook" header and a "Note" about tribal participation. At the bottom is the "Federal Employees Health Benefits Program TRIBAL EMPLOYER PROFILE" form, which contains sections for Tribal Employer information, check boxes for various FEHB options (ISDEAA, ISDEAA Compact, IHCAA, IHCAA Title V), and contact information for the Tribal Benefits Officer.

Tribal Employer Leadership Contacts

- As a part of the OPM Agreement Package, Tribal Employers must inform OPM and NFC of these contacts:

Tribal Chief Executive Officer (CEO)

- 1 per Tribal Employer
- The highest-ranking Tribal officer (executive) or administrator in charge of total management of a Tribal Employer
- The person who signed the Agreement with OPM
- Can approve Tribal Benefits Officer (TBO) and TSO

Tribal Chief Financial Officer (CFO)

- 1 per Tribal Employer
- A Tribal officer primarily responsible for managing the financial transactions of the Tribal Employer
- Can approve TBO and TSO roles

Tribal Employer TIPS Contacts

- As a part of the OPM Agreement Package, Tribal Employers must designate three specific contacts:

Tribal Benefits Officer (TBO)	Tribal Security Officer (TSO)	Authorized Maintenance Contact
<ul style="list-style-type: none"> 1 per Tribal Employer Serves as the Authorized Contact for Tribal Employees, OPM, NFC, and FEHB Plan Carriers Is contacted in case of non-payment of premiums 	<ul style="list-style-type: none"> 1 primary and a minimum of 1 secondary Works with NFC to establish TIPS user identifications for the Tribal Employer Resets locked out Tribal Employer's TIPS user passwords 	<ul style="list-style-type: none"> 2 per Tribal Employer Adds and updates contact information in TIPS for a Tribal Employer's Authorized Contacts

**One individual can fill multiple roles*

OPM Agreement Package Verified

- NFC and OPM will work together to verify completion of your Tribal Employer's agreement package
- A NFC Customer Management Branch representative will contact your TBO with the required steps to establish your Tribal Employer's Authorized Maintenance Contact(s)

FY 2012

Memorandum of Understanding
Direct Premium Remittance

DRAFT Tribal FEHB Handbook Last Updated 2/2/12

Note: Not all Indian tribes, tribal organizations, and urban Indian organizations have chosen to participate in the FEHB Program. A tribal employee should contact his or her tribal employer to determine whether tribal employees are eligible to purchase coverage under the FEHB Program.

**Tribal
Federal Employees Health Benefits**

**Federal Employees Health Benefits Program
TRIBAL EMPLOYER PROFILE**

Tribal Employer: _____

Check one:

☐ tribe

☐ tribal organization (attach tribal resolution) _____

☐ urban Indian organization (attach letter from the Chairman of the Board of Directors, tribal officials, and whether the Board member resides within the urban program service area) _____

Check one:

☐ ISDEAA Contract No. _____ for (calendar/fiscal) year(s) _____ (attach copy)

☐ ISDEAA Funding agreement for (calendar/fiscal) year(s) _____ (attach copy)

☐ ISDEAA Compact _____ (attach copy)

☐ IHICIA Title V Contract No. _____ for (calendar/fiscal) year(s) _____ (attach copy)

☐ IHICIA Title V Grant No. _____ for project period _____ (attach copy)

☐ other ISDEAA or IHICIA Title V documents (specify and attach documentation): _____

Month/year in which FEHB coverage will be effective: _____

Number of tribal employees eligible for FEHB: _____

Do you have access to the Internet? ☐ Yes ☐ No

Do you have the ability to electronically process enrollment elections and changes? ☐ Yes ☐ No

Tribal Benefits Officer (OPA's sole point of contact with tribal employer):

Name: _____

Title: _____

Mailing address: _____

Telephone Number: _____ Fax number: _____

Email: _____

complete

United States Department of Agriculture
Finance Center

TIPS Security Officer Training

- An NFC security representative will contact the newly designated TSO(s) to arrange security training
- Security training is required for all TSO(s)
- TSO training covers:
 - NFC's Access Management Branch responsibilities
 - TIPS Security Officer responsibilities
 - Samples of security access requests
 - Opening a Remedy (inquiry) ticket

TIPS User ID Establishment

- After TSO(s) have received security training, they must submit User ID requests to NFC for individuals who will access TIPS
- TSO(s) may assign one of the following roles:

Role	Description	TIPS Access
Update/Tribe <i>(e.g. Human Resources Staff)</i>	Standard Tribal Employer user	<ul style="list-style-type: none"> • 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 <i>(e.g. Authorized Maintenance Contact)</i>	Same as Update/Tribe role with addition of Authorized Contact record update access	<ul style="list-style-type: none"> • 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 <i>(e.g. Finance Staff)</i>	Same as Update/Tribe role but with read-only access to records	<ul style="list-style-type: none"> • Can view enrollee, SF 2809s and SF 2810s • Can view/download TIPS Reports

Online Inquiry Submission Website (Requester Console) Setup



- At the conclusion of your Tribal Employer setup process your TBO will be given a user ID and password to use NFC's online inquiry resolution system: Requester Console
- Requester Console lets TBOs submit inquiries or help desk requests to the TIPS Contact Center via the internet
- A TIPS Contact Center representative will contact TBOs with the steps required to establish a Tribal Employer's account for Requester Console use, which may include adding users in addition to the TBO

Lesson 1 Knowledge Check

1. Who are the five key FEHB stakeholders?
 - Tribal Employees, Tribal Employers, NFC, OPM, and FEHB Plan Carriers
2. What is the name of the insurance system for Tribal Employers maintained by NFC?
 - Tribal Insurance Processing System (TIPS)
3. What contact is responsible for entering enrollment and plan changes into TIPS?
 - Tribal Employer
4. What contact works with NFC to establish TIPS user identifications for the Tribal Employer?
 - Tribal Security Officer (TSO)

Lesson 1 Summary

- 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 FEHB key stakeholders 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: TIPS and Enrollments

Lesson 1: FEHB Overview	30 minutes
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Break	10 minutes
Lesson 6: Obtaining Additional Assistance	30 minutes
TIPS Transactions Reference Section	10 minutes
Final Review and Evaluation	35 minutes

Lesson 2 Objectives

- 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

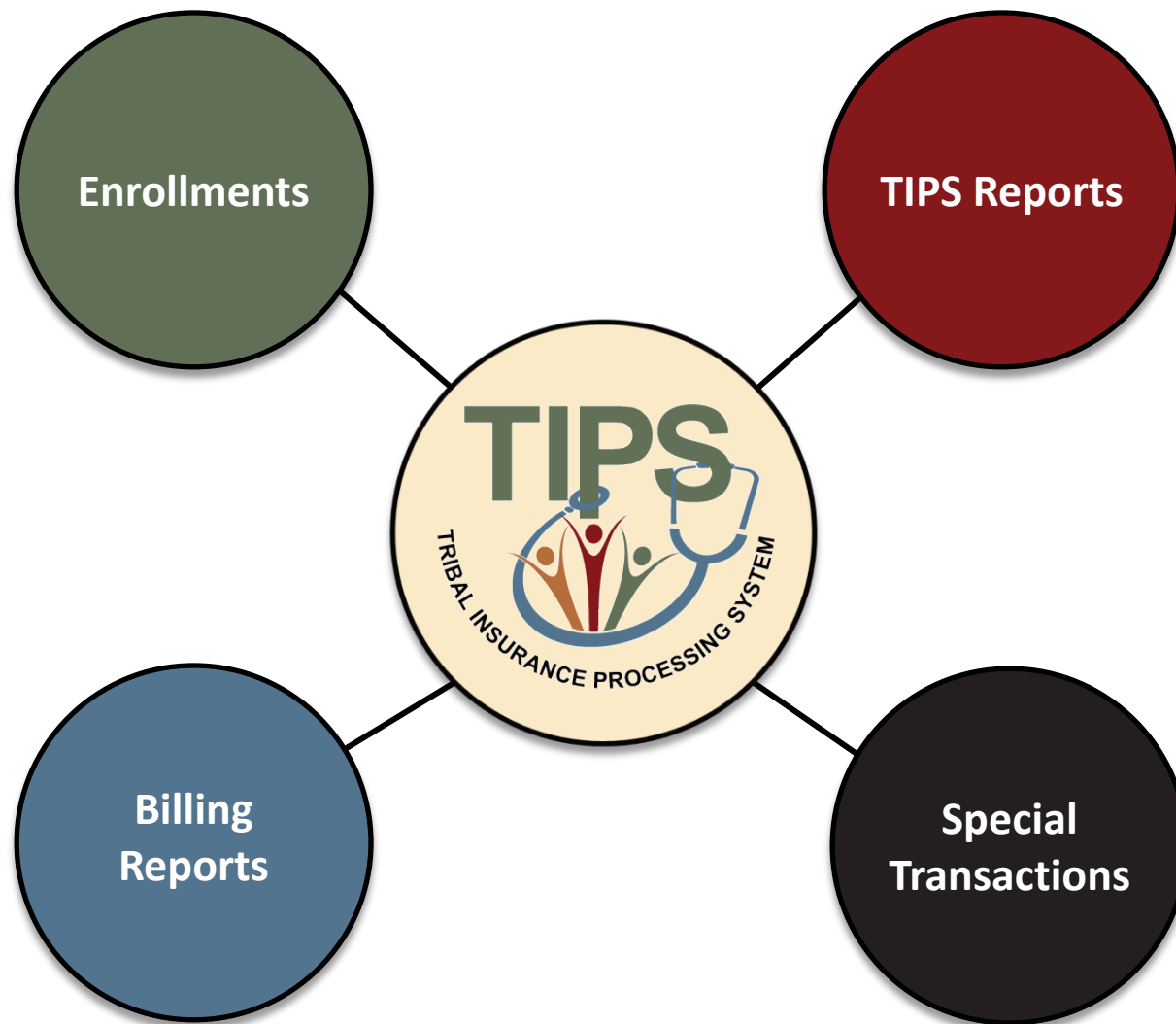
What is the Tribal Insurance Processing System (TIPS)?



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

A screenshot of the TIPS web interface. At the top center is the TIPS logo. Below the logo is a thick red horizontal bar. Underneath the bar, there are two main sections. On the left is a "Log In" section with a red header. It contains two white input fields labeled "Username:" and "Password:", and a green "Submit" button at the bottom. On the right is a "Getting Started" section with a red header. It contains a single line of text: [Healthcare and Insurance for Tribes](#).

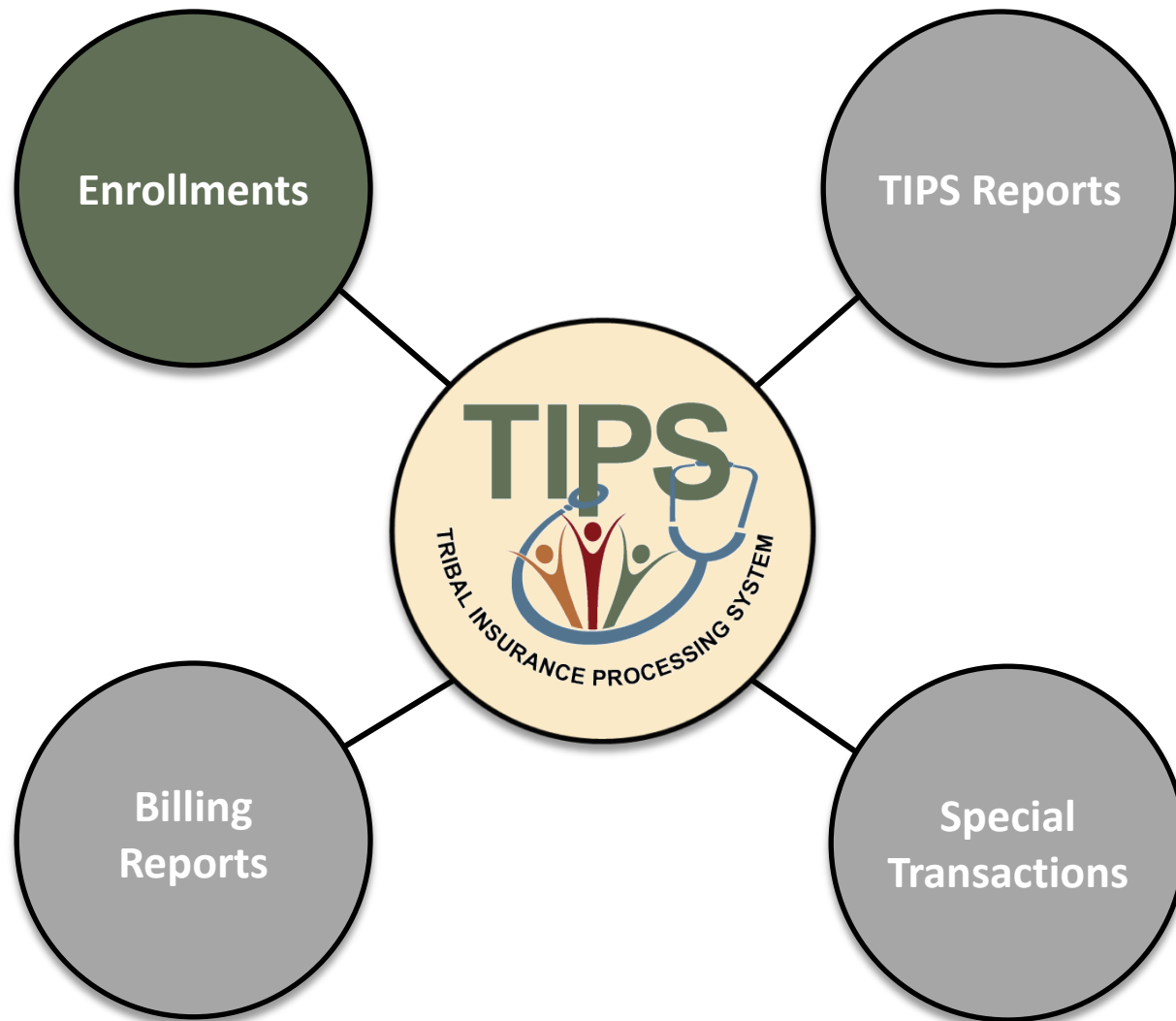
Functions of TIPS



TIPS Discussion



Functions of TIPS



What information do I need to submit enrollments in TIPS?



- Enrollments are based on the SF 2809 and SF 2810:

SF 2809: Health Benefits Election Form

Form Approved
OMB No. 3208-0160

FEHB
Federal Employees
Health Benefits Program

Health Benefits Election Form

Part A - Enrollee and Family Member Information (For additional family members use a separate sheet and attach.)

1. Enrollee name (last, first, middle initial) 2. Social Security number 3. Date of birth (mm/dd/yyyy) 4. Sex ☐ M ☐ F 5. Are you married? ☐ Yes ☐ No

6. Home mailing address (including ZIP Code) 7. If you are covered by Medicare, check all that apply: ☐ A ☐ B ☐ C ☐ D 8. Medicare Claim Number 9. Are you covered by insurance other than Medicare? ☐ Yes, indicate in item 20 below. ☐ No

10. Indicate the type(s) of other insurance: ☐ TRICARE ☐ Other. Name of other insurance: Policy number: ☐ FEHB. An FEHB self and family enrollment covers all eligible family members. No person may be covered under more than one FEHB enrollment. See instructions for item 10 on page 1.

11. Name of family member (last, first, middle initial) 12. Social Security number 13. Date of birth (mm/dd/yyyy) 14. Sex ☐ M ☐ F 15. Relationship code

16. Address (if different from enrollee) 17. If you are covered by Medicare, check all that apply: ☐ A ☐ B ☐ C ☐ D 18. Medicare Claim Number 19. Are you covered by insurance other than Medicare? ☐ Yes, indicate in item 20 below. ☐ No

20. Indicate the type(s) of other insurance: ☐ TRICARE ☐ Other. Name of other insurance: Policy number: ☐ FEHB. An FEHB self and family enrollment covers all eligible family members. No person may be covered under more than one FEHB enrollment. See instructions for item 10 on page 1.

21. Email address (if home address is different from enrollee's) 22. Preferred telephone number (if home address is different from enrollee's)

23. Name of family member (last, first, middle initial) 24. Social Security number 25. Date of birth (mm/dd/yyyy) 26. Sex ☐ M ☐ F 27. Relationship code

28. Address (if different from enrollee) 29. If you are covered by Medicare, check all that apply: ☐ A ☐ B ☐ C ☐ D 30. Medicare Claim Number 31. Are you covered by insurance other than Medicare? ☐ Yes, indicate in item 32 below. ☐ No

32. Indicate the type(s) of other insurance: ☐ TRICARE ☐ Other. Name of other insurance: Policy number: ☐ FEHB. An FEHB self and family enrollment covers all eligible family members. No person may be covered under more than one FEHB enrollment. See instructions for item 10 on page 1.

33. Email address (if home address is different from enrollee's) 34. Preferred telephone number (if home address is different from enrollee's)

35. Name of family member (last, first, middle initial) 36. Social Security number 37. Date of birth (mm/dd/yyyy) 38. Sex ☐ M ☐ F 39. Relationship code

40. Address (if different from enrollee) 41. If you are covered by Medicare, check all that apply: ☐ A ☐ B ☐ C ☐ D 42. Medicare Claim Number 43. Are you covered by insurance other than Medicare? ☐ Yes, indicate in item 44 below. ☐ No

44. Indicate the type(s) of other insurance: ☐ TRICARE ☐ Other. Name of other insurance: Policy number: ☐ FEHB. An FEHB self and family enrollment covers all eligible family members. No person may be covered under more than one FEHB enrollment. See instructions for item 10 on page 1.

45. Email address (if home address is different from enrollee's) 46. Preferred telephone number (if home address is different from enrollee's)

4809 (940-04-224-0227) (Revised on the reverse)
U.S. Office of Personnel Management For agency distribution of copies, see page 5 of the instructions. Replaces Form 2809, Revised August 2011. Previous edition is not usable.

Part B - FEHB Plan You Are Currently Enrolled In (if applicable)

1. Plan name 2. Enrollment code

Part D - Event That Permits You To Enroll, Change, or Cancel (see page 2)

1. Event code 2. Date of event

Part E - Cancellation of FEHB

☐ I CANCEL my enrollment. My signature in Part H certifies that I have read and understand the information on page 3 regarding cancellation of enrollment.

Part F - Suspension of FEHB (Annuitant-Forever Spouse Only)

☐ I SUSPEND my enrollment. My signature in Part H certifies that I have read and understand the information on page 4 regarding suspension of enrollment.

Part H - Signature

1. Your signature (do not print) 2. Date (mm/dd/yyyy)

3. Email address 4. Preferred telephone number

Part I - To be completed by agency or retirement system

REMARKS

1. Date received (mm/dd/yyyy) 2. Effective date of action (mm/dd/yyyy) 3. Personnel telephone number

4. Name and address of agency or retirement system 5. Authorizing official (please print)

6. Signature of authorized agency official

7. Payroll office number 8. Payroll office contact (please print) 9. Payroll telephone number

Standard Form 2809
Replaces Form 2809, Revised August 2011. Previous edition is not usable.

SF 2810: Notice of Change in Health Benefits Enrollment

RESET PRINT SAVE

FEHB
Federal Employees
Health Benefits Program

Notice of Change in Health Benefits Enrollment

Part A - Identifying Information

1. Name (last, first, middle initial) 2. Date of birth 3. Social security number 4. Home address (including ZIP Code) 5. Payroll office number 6. Enrollment code number 7. SF 2811 Report number 8. Date this action becomes effective

Only the item that is checked below affects your enrollment. Read that item carefully and follow any pertinent instructions. Keep this form for your records.

Part B - Termination

☐ Your enrollment termination 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 C - Transfer In

☐ The new Payroll Office (or Retirement System) shown in Part H below has accepted transfer of this enrollment and will continue it.

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: Name Date of Birth

Part F - Change in Enrollment-Survivor Annuitant

Your enrollment has been changed from family coverage to self only. Your plan will send you a new identification card. Your new enrollment code number is shown below. (Note: This item is completed by Retirement Systems only.)

Address (including ZIP Code) if different from Part A, item 4, above. New Enrollment Code Number

Part G - Remarks

Part H - Date of Notice

Note: Instructions for Employing Offices are on the back of Copy 4 of this form.

Name and address of agency including ZIP Code Personnel contact and telephone number Signature of authorized agency official Payroll contact and telephone number Date

U.S. Office of Personnel Management Copy 1 To Enrollee Previous edition is usable Standard Form 2810 Revised 10/01

SF 2809 Overview



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

SF 2809 Paper Copy

- 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

SF 2809 in TIPS

- A. Enrollee Information
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
- F. Cancellation
- I. To be completed by Tribal Employer

SF 2809 in TIPS



TIPS		TRIBAL INSURANCE PROCESSING SYSTEM			
HOME	INQUIRY	FORMS	ADMIN	INFORMATION	Welcome, Update For Updates ROLE: UpdateNFC [Logout]
Health Benefits Election Form (2809)					
Tribal HR SF2809 Information					
Tribe Sample Tribe		POI Test POI		SF2809 Status: New	
Part A - Enrollee Information (For additional family members, use the Part A (Continued) section below.)					
Enrollee First Name		Middle Name		Last Name	
Preferred Telephone Number (xxx)xxx-xxxx		Social Security Number		Date of birth (MM/DD/YYYY)	
Sex <input type="radio"/> Male <input type="radio"/> Female	Are you married? <input type="radio"/> Yes <input checked="" type="radio"/> No	Home mailing address		Address Line 2	City State Zip
Medicare (if you are covered by Medicare, check all that apply) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> D		Medicare Claim Number	Are you covered by insurance other than Medicare? <input type="radio"/> Yes <input checked="" type="radio"/> No	Indicate other types of insurance <input type="checkbox"/> Tncare <input type="checkbox"/> FEHB <input type="checkbox"/> Other	Name of insurance Policy no.
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		2. Enrollment code	
Part D - Event That Permits You To Enroll, Change, or Cancel			Part F - Cancellation		
1. Event code		2. Date of event (MM/DD/YYYY)		<input type="checkbox"/> Premium Conversion <input type="checkbox"/> 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 14050000	
7. Service Provider Contact National Finance Center		8. Service Provider Telephone 855-632-4468			
Part A - Enrollee Information Continued; Family Members					
<input type="checkbox"/> Add/Edit Family Member Information					
First Name		Middle Name		Last Name	
Social Security Number		Date of birth (MM/DD/YYYY)			
Sex <input type="radio"/> Male <input type="radio"/> Female	Home mailing address		Address Line 2		City State Zip
Medicare (if you are covered by Medicare, check all that apply) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> D		Medicare Claim Number	Are you covered by insurance other than Medicare? <input type="radio"/> Yes <input checked="" type="radio"/> No	Indicate other types of insurance <input type="checkbox"/> Tncare <input type="checkbox"/> FEHB <input type="checkbox"/> Other	Name of insurance Policy no.
Relationship Type:					Add Member
Family Members Entered					
No Family Members Currently Entered.					
Cancel		Clear		Save Submit	
Home OPM					

Tribal HR SF 2809 Information



- When completing a SF 2809 in TIPS begin by selecting a:
 - Billing Unit/POI
- Tribe name will be prepopulated by TIPS

A screenshot of the TIPS Health Benefits Election Form (2809). The form is titled "TIPS TRIBAL INSURANCE PROCESSING SYSTEM" and "Health Benefits Election Form (2809)". It contains various fields for personal information, including name, date of birth, and tribal affiliation. The form is divided into sections for different types of insurance coverage, such as Medical, Dental, and Vision. The "Tribal Insurance Processing System" logo is visible in the top left corner.

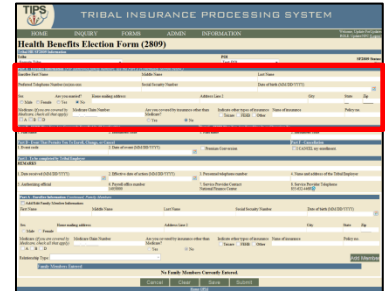
Tribal HR SF2809 Information		
Tribe	POI	SF2809 Status:
Sample Tribe ▼	Test POI ▼	New

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)



Part A - Enrollee Information (For additional family members, use the Part A (Continued) section below.)									
Enrollee First Name			Middle Name			Last Name			
Preferred Telephone Number (xxx)xxx-xxxx			Social Security Number			Date of birth (MM/DD/YYYY)			
Sex	Are you married?	Home mailing address		Address Line 2		City	State	Zip	
<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Yes <input checked="" type="radio"/> No									
Medicare (if you are covered by Medicare, check all that apply)		Medicare Claim Number		Are you covered by insurance other than Medicare?		Indicate other types of insurance		Name of insurance	
<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> D				<input type="radio"/> Yes <input checked="" type="radio"/> No		<input type="checkbox"/> Tricare <input type="checkbox"/> FEHB <input type="checkbox"/> Other			
								Policy no.	

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



- Enter Tribal Employee's:
 - 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

A screenshot of the Tribal Insurance Processing System (TIPS) Health Benefits Election Form (2809). The form is titled "TIPS TRIBAL INSURANCE PROCESSING SYSTEM" and "Health Benefits Election Form (2809)". It contains various fields for employee information, including name, address, and contact details. A red box highlights the "Enrollment Code" field, which is currently empty. The form also includes sections for "Current Enrollment" and "New Enrollment".

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

What Are Enrollment Codes?

- Enrollment codes are specific to:
 - *Self Only Plans*
 - *Self & Family Plans*
- Enrollment code is a three digit alphanumeric code:
 - Codes ending in 1 and 4 refer to *Self Only plans*
 - Codes ending in 2 and 5 refer to *Self & Family plans*

Sample Enrollment Codes	
Self	Self & Family
221	222
224	225
JN4	JN5
JN1	JN2
474	475
471	472
111	112
104	105
2G1	2G2
2G4	2G5
421	422

- A list of event codes is available on the paper SF 2809 at:
 - http://www.opm.gov/Forms/pdf_fill/SF2809.pdf

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



- Enter Tribal Employee's:

- Event Code

- Refers to a specific Qualifying Life Event (QLE)
 - A valid event code is required on all SF 2809s

A screenshot of the Tribal Insurance Processing System (TIPS) Health Benefits Election Form (2809). The form is titled "TIPS TRIBAL INSURANCE PROCESSING SYSTEM Health Benefits Election Form (2809)". It contains various fields for employee information, including name, address, and contact details. A red rectangular box highlights the "Event Code" field, which is currently empty.

- Select a Date of Event

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

- Check Premium Conversion if Tribal Employee participates

- The Premium Conversion box must be checked for Series 1 event codes
 - If the 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
1. Event code	2. Date of event (MM/DD/YYYY)	<input type="checkbox"/> Premium Conversion	<input type="checkbox"/> I CANCEL my enrollment.

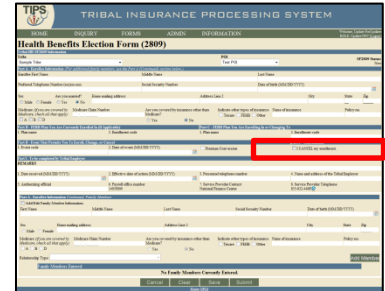
Sample Event Codes

Event Code		Description
Premium Conversion	Non-Premium Conversion	
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 is available on the paper SF 2809 at: http://www.opm.gov/Forms/pdf_fill/SF2809.pdf

Part F – Cancellation

- In order to submit a SF 2809 for a cancellation check the box in part F
 - Enrollees in premium conversion may only cancel following a valid QLE
 - 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 Tribal employee is not participating in premium conversion



Part D - Event That Permits You To Enroll, Change, or Cancel		Part F - Cancellation
1. Event code	2. Date of event (MM/DD/YYYY)	<input type="checkbox"/> I CANCER my enrollment.
	<input type="checkbox"/> Premium Conversion	

Part I – To be Completed by Tribal Employer



- Enter:
 - Date the employee's SF 2809 was received by Tribal Employer
 - The date that any enrollment, change in coverage, or cancellation takes effect
 - 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 the 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 14050000	7. Service Provider Contact National Finance Center	8. Service Provider Telephone 855-632-4468

Part I – To be Completed by Tribal Employer (cont.)



- TIPS prepopulates:
 - 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 14050000	7. Service Provider Contact National Finance Center	8. Service Provider Telephone 855-632-4468

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
 - All required fields must be completed to add a family member
 - Family members' information will not be saved if it has not been attached via the “Add Member” button

A screenshot of the 'TIPS TRIBAL INSURANCE PROCESSING SYSTEM' interface, specifically the 'Health Benefits Election Form (2809)'. The form is divided into several sections with tabs for 'PERSONAL INFORMATION', 'FAMILY INFORMATION', 'COVERAGE INFORMATION', and 'DEPENDENT INFORMATION'. The 'FAMILY INFORMATION' tab is selected, and a red rectangular box highlights the 'Add Member' button at the bottom right of the form.A screenshot of the 'Part A - Enrollee Information Continued: Family Members' form. The form is titled 'Part A - Enrollee Information Continued: Family Members' and has a tab labeled 'Add/Edit Family Member Information'. The form contains several fields for personal information, including 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, and Zip. There are also fields for Medicare information, including Medicare Claim Number, Medicare status (Yes/No), and other insurance types (Tricare, FEHB, Other). A 'Relationship Type' dropdown menu is located at the bottom left, and an 'Add Member' button is at the bottom right. A red rectangular box highlights the 'Add Member' button. At the bottom of the form, there is a status bar that says 'Family Members Entered' and 'No Family Members Currently Entered.'

Sample Relationship Codes

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

Relationship Status Code	TIPS Relationship Type
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 a 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 with fields highlighted to fill out the blank printout of a SF 2809 in TIPS

Paper SF 2809

This is a scan of a physical paper form titled "Health Benefits Election Form (SF 2809)". It is divided into several sections with headings like "Part A: General Information", "Part B: Insurance Information", and "Part C: Signature". The form contains numerous checkboxes, text boxes, and lines for handwritten information. Some fields are highlighted in yellow, indicating they are to be filled out. At the bottom, there are buttons for "PRINT", "SAVE", and "CLEAR".


SF 2809 in TIPS

This is a screenshot of the "Health Benefits Election Form (2809)" as it appears in the TIPS (Tribal Insurance Processing System) web application. The form is displayed in a browser window with a header bar showing "TIPS TRIBAL INSURANCE PROCESSING SYSTEM". The form layout is similar to the paper version but is designed for digital input, with fields for personal information, insurance details, and a signature section. It includes a "REMARKS" section and a "No Family Member Currently Enrolled" message at the bottom. Navigation buttons like "Cancel", "Clear", "Save", and "Submit" are visible at the bottom right.

You have 5 minutes to complete this exercise

Completed SF 2809 in TIPS – Part 1 of 2



 TRIBAL INSURANCE PROCESSING SYSTEM									
HOME				INQUIRY		FORMS		INFORMATION	
								Welcome, Update For Updates ROLE: UpdateNFC [Logout]	
Health Benefits Election Form (2809)									
Tribal HR SF2809 Information									
Tribe Sample Tribe				POI Test POI		SF2809 Status: New			
Part A - Enrollee Information (For additional family members, use the Part A (Continued) section below.)									
Enrollee First Name Sarah			Middle Name J			Last Name Smith			
Preferred Telephone Number (xxx)xxx-xxxx (615) 888-8888			Social Security Number 105-88-9999			Date of birth (MM/DD/YYYY) 02/01/1985			
Sex <input type="radio"/> Male <input checked="" type="radio"/> Female	Are you married? <input type="radio"/> Yes <input checked="" type="radio"/> No	Home mailing address 210 10th St.		Address Line 2		City Nashville	State TN	Zip 37235	
Medicare (if you are covered by Medicare, check all that apply) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> D		Medicare Claim Number -		Are you covered by insurance other than Medicare? <input checked="" type="radio"/> Yes <input type="radio"/> No		Indicate other types of insurance <input checked="" type="checkbox"/> Tricare <input type="checkbox"/> FEHB <input type="checkbox"/> Other		Name of insurance Policy no.	
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 892		
Part D - Event That Permits You To Enroll, Change, or Cancel					Part F - Cancellation				
1. Event code 5C		2. Date of event (MM/DD/YYYY) 03/27/2012			<input type="checkbox"/> Premium Conversion		<input type="checkbox"/> I CANCEL my enrollment.		

Completed SF 2809 in TIPS – Part 2 of 2



Part I - To be completed by Tribal Employer

REMARKS

1. Date received (MM/DD/YYYY) 04/03/2012	2. Effective date of action (MM/DD/YYYY) 05/01/2012	3. Personnel telephone number 615-222-2222	4. Name and address of the Tribal Employer Tribal Employer 1 2626 Wilson Dr. Nashville...
5. Authorizing official Mark Howard	6. Payroll office number 14050000	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 Sasha	Middle Name M	Last Name Smith	Social Security Number 305-55-9999	Date of birth (MM/DD/YYYY) 03/27/2012
---------------------	------------------	--------------------	---------------------------------------	--

Sex <input type="radio"/> Male <input checked="" type="radio"/> Female	Home mailing address 210 10th St.	Address Line 2	City Nashville	State TN	Zip 37235
---	--------------------------------------	----------------	-------------------	-------------	--------------

Medicare (if you are covered by Medicare, check all that apply) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> D	Medicare Claim Number --	Are you covered by insurance other than Medicare? <input checked="" type="radio"/> Yes <input type="radio"/> No	Indicate other types of insurance <input checked="" type="checkbox"/> Tricare <input type="checkbox"/> FEHB <input type="checkbox"/> Other	Name of insurance	Policy no.
---	-----------------------------	--	---	-------------------	------------

Relationship Type: Child under age 26

Add Member

Family Members Entered

No Family Members Currently Entered.


Cancel Clear Save Submit

[Home](#) [OPM](#)

Exercise 2.2: Identifying the Appropriate QLE Code



- You should have received a:
 - List of QLE codes
 - QLE handout
- Use the list of QLE codes to complete the QLE handout

QLE Worksheet													
<div> Exercise 2.2: Identifying the Appropriate Event</div> <p>In order to review SF2809s Tribal Employers must be familiar with the Qualifying LIFE Event Codes and under what circumstances each is applicable.</p> <p>Exercise 2.2 will cover a series of eight scenarios. In each scenario, identify:</p> <ul style="list-style-type: none">• Event Code• Event Date <p>Scenario 1:</p> <p>Sarah, a Tribal Employee who has been an employee of the Tribal Employer for two years, opts to join FEHB for the first time during open season. Open season lasts from November 12, 2012 to December 10, 2012. Sarah submits a SF2809 to her Tribal Employer on November 29, 2012 with an effective date of January 1, 2013. Sarah does not participate in premium conversion.</p> <table border="1"><thead><tr><th colspan="2">Part D - Event That Permits You To Enroll, Change, or Cancel</th></tr></thead><tbody><tr><td>1. Event code</td><td>2. Date of event (MM/DD/YYYY)</td></tr></tbody></table>	Part D - Event That Permits You To Enroll, Change, or Cancel		1. Event code	2. Date of event (MM/DD/YYYY)	<p>Scenario 2:</p> <p>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 nonpay status and she her FEHB coverage is terminated. Sally resumes working for the Tribal Employer on August 8, 2012 and submits a SF2809 to receive coverage with an effective date of September 1, 2012. Sally participates in premium conversion.</p> <table border="1"><thead><tr><th colspan="2">Part D - Event That Permits You To Enroll, Change, or Cancel</th></tr></thead><tbody><tr><td>1. Event code</td><td>2. Date of event (MM/DD/YYYY)</td></tr></tbody></table> <p>Scenario 3:</p> <p>Mark, a new Tribal Employee hired on April 3, 2012, opts to enroll in the FEHB program. Mark completes a SF2809 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.</p> <table border="1"><thead><tr><th colspan="2">Part D - Event That Permits You To Enroll, Change, or Cancel</th></tr></thead><tbody><tr><td>1. Event code</td><td>2. Date of event (MM/DD/YYYY)</td></tr></tbody></table>	Part D - Event That Permits You To Enroll, Change, or Cancel		1. Event code	2. Date of event (MM/DD/YYYY)	Part D - Event That Permits You To Enroll, Change, or Cancel		1. Event code	2. Date of event (MM/DD/YYYY)
Part D - Event That Permits You To Enroll, Change, or Cancel													
1. Event code	2. Date of event (MM/DD/YYYY)												
Part D - Event That Permits You To Enroll, Change, or Cancel													
1. Event code	2. Date of event (MM/DD/YYYY)												
Part D - Event That Permits You To Enroll, Change, or Cancel													
1. Event code	2. Date of event (MM/DD/YYYY)												

You have 5 minutes to complete this exercise

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

- 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

SF 2810 in TIPS

- A. Identifying Information
- B. Termination
- D. Reinstatement
- E. Change In Name of Enrollee
- G. Remarks
- H. Date of Notice

SF 2810 in TIPS



TIPS TRIBAL INSURANCE PROCESSING SYSTEM					
HOME	INQUIRY	FORMS	ADMIN	INFORMATION	Welcome, John Knight ROLE: Update NFC [Logout]
Notice of Change in Health Benefits Enrollment (2810)					
Tribal HR SF2810 Information					
Tribe American Native Tribe		POI TEST POI 2A-1		SF2810 Status: New	
Part A - Identifying Information					
Last Name Fletcher	First name Alex	Middle Initial	Date of birth 2/12/1900	Social security number 231121231	
Home Address Home Address Address Line 2			Payroll office number: 14050000	Enrollment code number	
			Date this action becomes effective		
City City	State FL	Zip 21321			
Part B - Termination					
<input type="checkbox"/> 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					
<input type="checkbox"/> Your enrollment has been reinstated effective on the date in Part A, item 8, above.					
Part E - Change in Name of Enrollee					
<input type="checkbox"/> The name under which this enrollment is carried has been changed to:					
Changed Last Name	Changed First name		Changed Middle Name		
Date of birth					
Changed Address					
Changed Address Line 2					
Changed City	Changed State		Changed Zip		
Part G - Remarks					
Part H - Date of Notice					
Name of Agency		Personnel Contact Last Name	Personnel Contact First name	Personnel Contact Middle Initial	
Agency Address		Payroll Contact Last Name	Payroll Contact First name	Payroll Contact Middle Initial	
Agency Address Line 2		Payroll Telephone Number			
City	State	Zip	Authorizing Official Last Name	Authorizing Official First name	Authorizing Official Middle Initial
					Date
<div> <div>Cancel</div> <div>Clear</div> <div>Save</div> <div>Submit</div> </div>					
Home OPM					

Tribal HR SF 2810 Information



- When completing a SF 2810, TIPS will prepopulate the employee's:
 - Tribal Employer
 - Billing Unit/POI

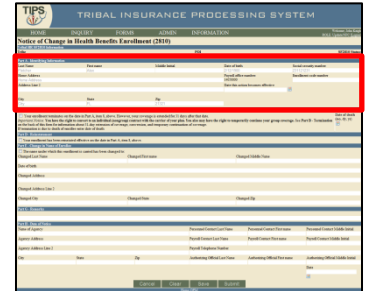
A screenshot of the TIPS Tribal Insurance Processing System web application. The interface shows a form with various fields for entering employee information. A red rectangular box highlights the top section of the form, which includes fields for "Tribal Employer" and "Billing Unit/POI", demonstrating the prepopulation feature mentioned in the text.

Tribal HR SF2810 Information

Tribal HR SF2810 Information		
Tribal Employer 1	POI TEST POI 2A-1	SF2810 Status: New

Part A – Identifying Information

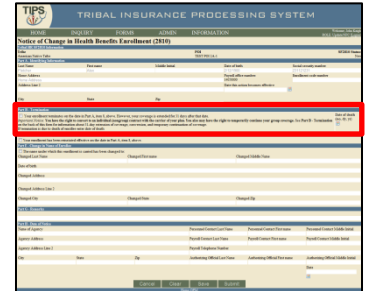
- TIPS will prepopulate:
 - Full Name
 - Date of Birth
 - Social Security Number
 - Mailing Address
 - Payroll Office Number (PON)
 - Enrollment code number
- Enter the employee's:
 - Date this action becomes effective



Part A - Identifying Information				
Last Name	First name	Middle Initial	Date of birth	Social security number
Manning	Peyton		5/1/1980	123398777
Home Address			Payroll office number:	Enrollment code number
123 test			12400096	222
Address Line 2			Date this action becomes effective	
City	State	Zip		
test	CT	35981		

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)



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

- In order to reinstate an employee, check the box in part D
 - The reinstatement will take effect on the effective date specified in Part A
 - 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.

Part E – Change in Name of Enrollee

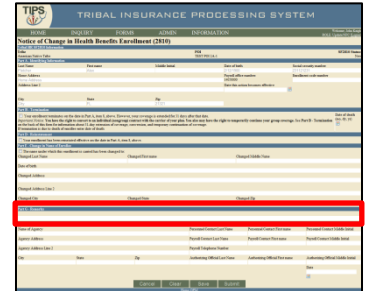
- In order to change the name of the enrollee, check the Box in Part E
- Enter the employee's full new name and address

[illegible]

Part E - Change in Name of Enrollee		
<input type="checkbox"/> 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
	<input type="text"/>	

Part G – Remarks

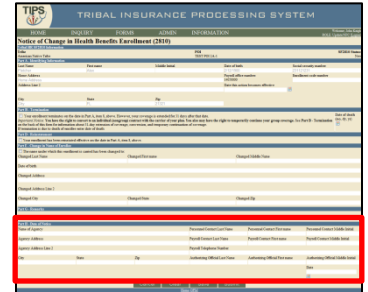
- Add any relevant remarks here
 - Remarks may be used by the Tribal Employer to include notes
 - These notes are stored in TIPS, but will not be seen by anyone outside of the Tribal Employer



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



Part H - Date of Notice				
Name of Tribal Employer	Personnel Contact Last Name	Personnel Contact First name	Personnel Contact Middle Initial	Personnel Phone Number
Agency Address		Agency Address Line 2	Service Provider Contact National Finance Center	Service Provider Telephone 855-632-4468
City	State	Zip		
Authorizing Official Last Name	Authorizing Official First name	Authorizing Official Middle Initial	Date	

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 with fields highlighted to fill out the blank printout of a SF 2810 in TIPS

The image shows a paper form titled "Paper SF 2810" with the FCHB logo. It is a "Notice of Change in Health Benefits Enrollment". The form is divided into several sections: Part A - Identifying Information, Part B - Termination, Part C - Transfer In, Part D - Reinstatement, Part E - Change in Name of Enrollee, Part F - Change in Enrollment Service Agent, Part G - Remarks, and Part H - Date of Notice. Each section contains specific fields for data entry, such as names, addresses, dates, and codes. The form is designed to be filled out by hand.The image shows a digital form titled "SF 2810 in TIPS" within the Tribal Insurance Processing System (TIPS) interface. It is a "Notice of Change in Health Benefits Enrollment (2810)". The form is divided into several sections: Part A - Identifying Information, Part B - Termination, Part C - Transfer In, Part D - Reinstatement, Part E - Change in Name of Enrollee, Part F - Change in Enrollment Service Agent, Part G - Remarks, and Part H - Date of Notice. Each section contains specific fields for data entry, such as names, addresses, dates, and codes. The form is designed to be filled out electronically within the TIPS system.

You have 5 minutes to complete this exercise

Completed SF 2810 in TIPS – Part 1 of 2



 TRIBAL INSURANCE PROCESSING SYSTEM							
HOME		INQUIRY		FORMS		INFORMATION	
						Welcome, John Knight ROLE: Update/NFC Logout	
Notice of Change in Health Benefits Enrollment (2810)							
Tribal HR SF2810 Information							
Tribal Employer 1				POI Test POI		SF2810 Status: New	
Part A - Identifying Information							
Last Name		First name		Middle Initial		Date of birth	
Smith		Sarah		J		02/01/1985	
Home Address				Payroll office number:		Enrollment code number	
210 10th St.				14050000		892	
Address Line 2				Date this action becomes effective			
				10/01/2012			
City		State		Zip			
Nashville		TN		37235			
Part B - Termination							
<input checked="" type="checkbox"/> Your enrollment terminates on the date in Part A, item 8, above. However, your coverage is extended for 31 days after that date.							Date of death (mo, dy, yr)
<i>Important Notice:</i> 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							
Part D - Reinstatement							
<input type="checkbox"/> Your enrollment has been reinstated effective on the date in Part A, item 8, above.							

Completed SF 2810 in TIPS – Part 2 of 2



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

Date of birth

Changed Address

Changed Address Line 2

Changed City

Changed State

Changed Zip

Part G - Remarks

Part H - Date of Notice

Name of Agency

Tribal Employer 1

Agency Address

2626 Wilson Dr.

Agency Address Line 2

City

Nashville

State

TN

Zip

37235

Personnel Contact Last Name

Lovelace

Personnel Contact First name

Addison

Personnel Contact Middle Initial

Payroll Contact Last Name

National Finance Center

Payroll Contact First name

Payroll Contact Middle Initial

Payroll Telephone Number

(855) 632-4468

Authorizing Official Last Name

Howard

Authorizing Official First name

Mark

Authorizing Official Middle Initial

Date

09/25/2012



Cancel

Clear

Save

Submit

[Home OPM](#)

Transaction Glossary



Initial Enrollment

A Tribal Employee enrolls in FEHB for the first time

Enrollment Termination

A Tribal Employer Billing Unit/POI involuntarily ends the FEHB enrollment of a Tribal Employee

Enrollment Change

A Tribal Employee enrolled in FEHB changes his or her health plan enrollment

Billing Unit/POI Cancellation

A Tribal Employer Billing Unit/POI opts to dis-enroll from FEHB and ends coverage for its employees

Change of Name

A Tribal Employee enrolled in FEHB changes his or her legal name

Billing Unit/POI Termination

A Tribal Employer Billing Unit/POI has the FEHB enrollment involuntarily ended for its employees

Enrollment Cancellation

A Tribal Employee enrolled in FEHB opts to dis-enroll and ends his or her coverage

Change of Address

A Tribal Employee enrolled in FEHB changes his or her primary address

The Role of TIPS in FEHB Transactions



SF 2809

A screenshot of the SF 2809 Health Benefits Election Form within the TIPS system. The form is titled "Health Benefits Election Form (2809)" and includes fields for employee information, election choices, and employer details. It is a standard web-based form with various input fields and checkboxes.

- Tribal Employer completes a SF 2809 in TIPS
- TIPS Processes SF 2809s and sends to FEHB Plan Carriers
- **Transactions:**
 - Initial Enrollment
 - Enrollment Change
 - Cancellation

SF 2810

A screenshot of the SF 2810 Notice of Change in Health Benefits Election form within the TIPS system. The form is titled "Notice of Change in Health Benefits Election (2810)" and includes fields for employee information, current and desired benefit selections, and employer details. It is a standard web-based form with various input fields and checkboxes.

- Tribal Employer completes a SF 2810 in TIPS
- TIPS Processes SF 2810s and sends to FEHB Plan Carriers
- **Transactions:**
 - Change of Name
 - Termination
 - Reinstatement

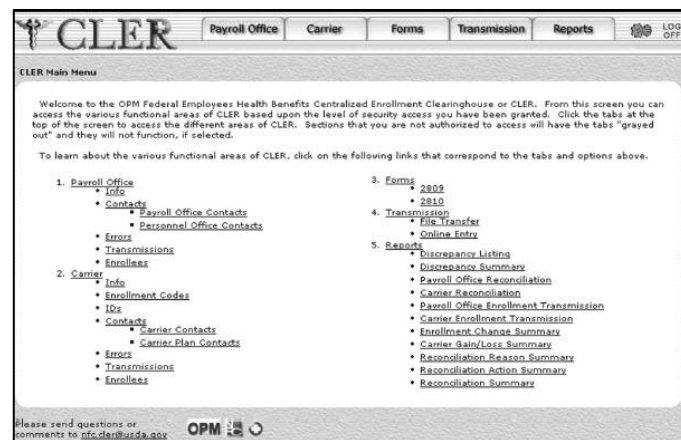
OPM



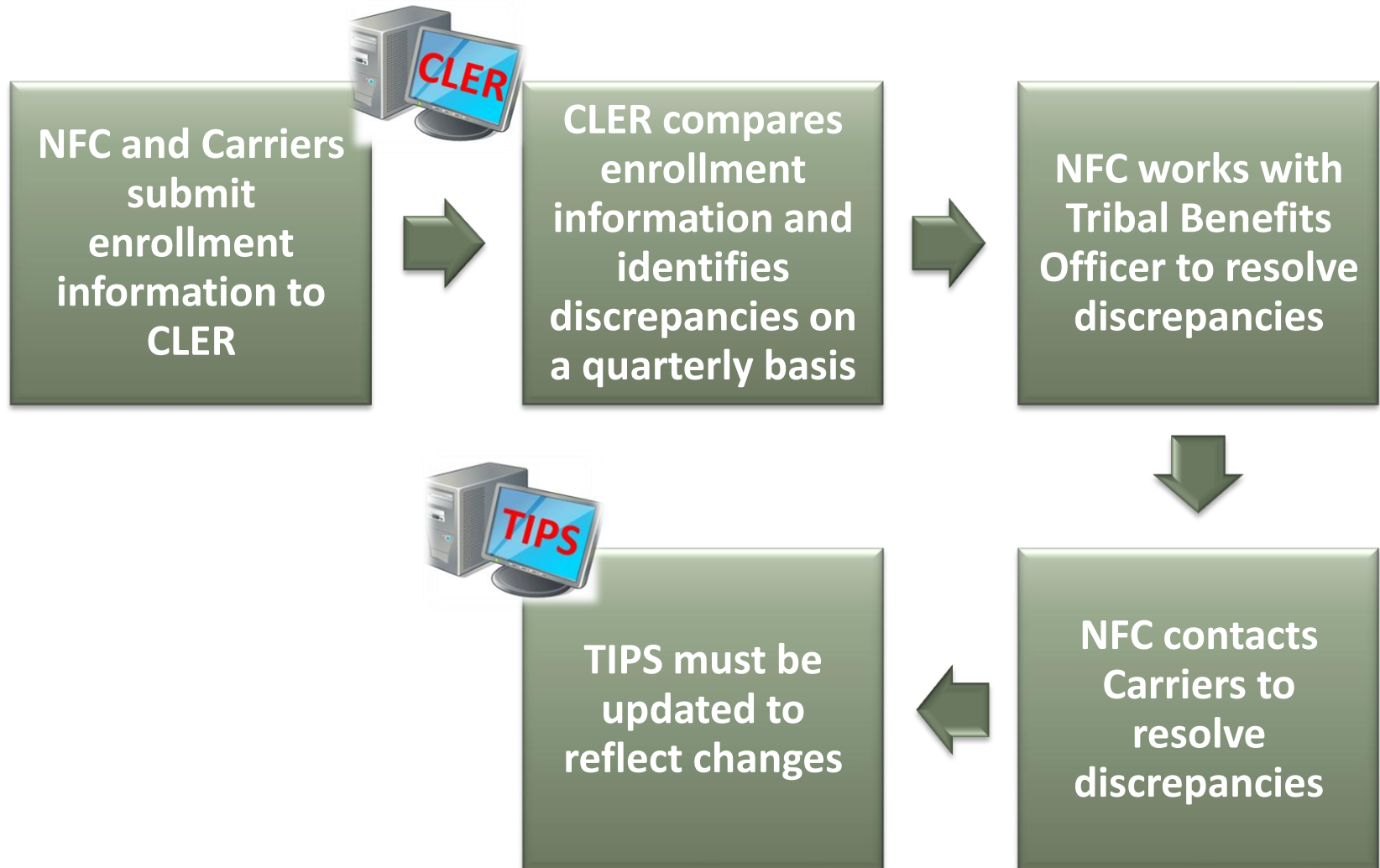
- OPM cancels / terminates coverage for a Tribal Employer Billing Unit/POI
- TIPS prepares SF 2809s for and sends to FEHB Plan Carriers
- TIPS stores SF 2810s
- **Transactions:**
 - Tribal Employer Billing Unit/POI
 - Cancellation
 - Termination

Enrollment Reconciliation Process

- NFC and FEHB Plan Carriers reconcile enrollment records quarterly using CLER
- CLER is a NFC web-based system that receives and processes enrollment data from government agencies and FEHB Plan 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 needed (it's possible you may never receive any communication from the NFC CLER team)



Enrollment Reconciliation Process



Lesson 2 Knowledge Check

1. What are the four main TIPS functions?
 - Enrollments, Billing, TIPS Reports, and Special Transactions
2. Tribal Employers complete what two forms in TIPS to perform FEHB transactions?
 - A SF 2809 or SF 2810 would be completed in TIPS
3. True or False: The premium Conversion Box must be checked for an employee using an event code 1A
 - True
4. OPM uses TIPS to perform what two FEHB transactions?
 - Tribal Employer Billing Unit/POI Cancellation
 - Tribal Employer Billing Unit/POI Termination

Lesson 2 Summary

- 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



Break – 10 Minutes

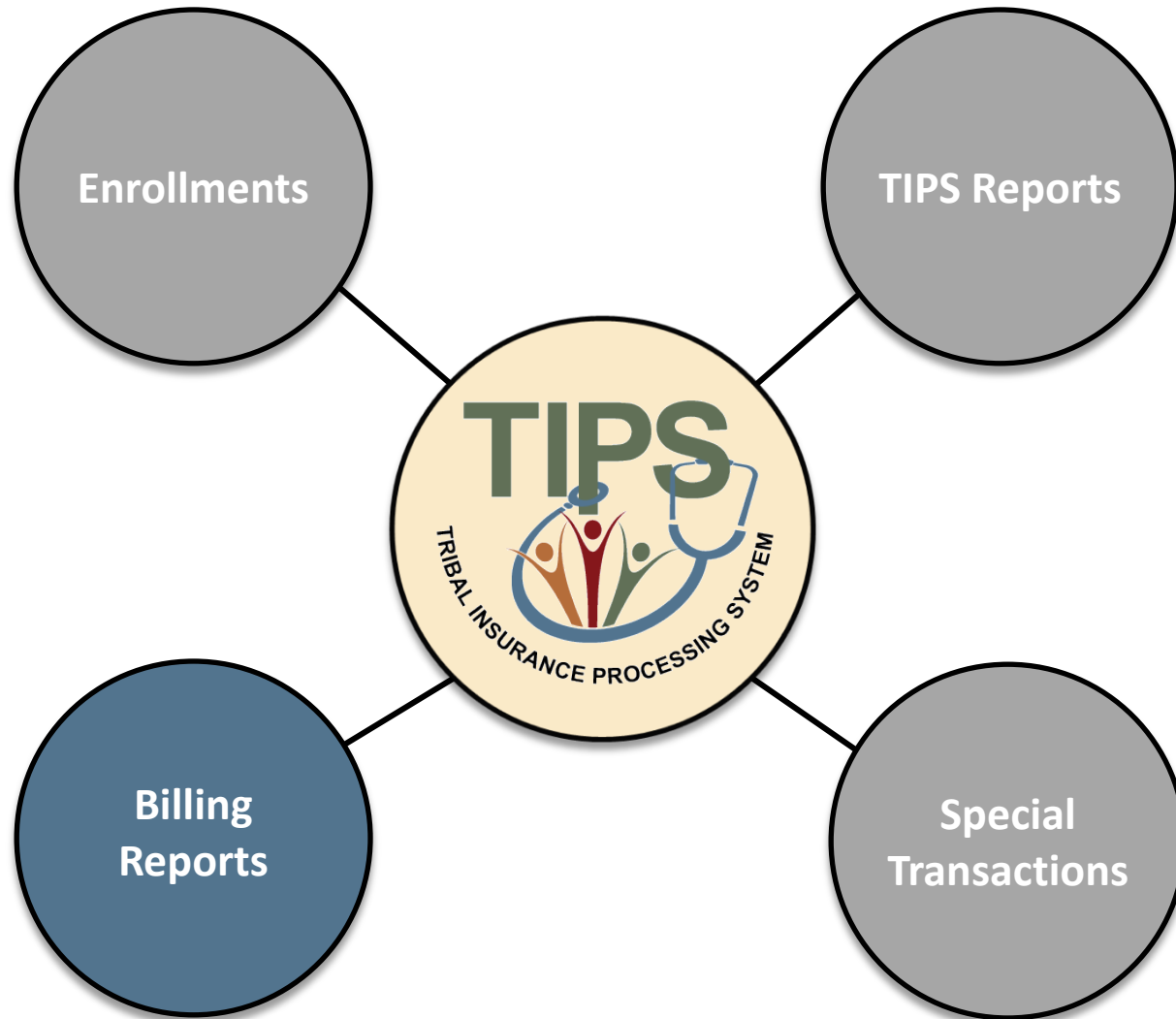
Lesson 3: Billing and TIPS Reports

Lesson 1: FEHB Overview	30 minutes
Lesson 2: TIPS and Enrollments	45 minutes
Break	10 minutes
Lesson 3: Billing and TIPS Reports	45 minutes
Morning Review	20 minutes
Lunch	60 minutes
Lesson 4: Special Transactions	30 minutes
Lesson 5: Performing Transactions in TIPS	90 minutes
Break	10 minutes
Lesson 6: Obtaining Additional Assistance	30 minutes
TIPS Transactions References	10 minutes
Final Review and Evaluation	35 minutes

Lesson 3 Objectives

- 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 the available TIPS Reports
 - Identify the fields on a TIPS Report

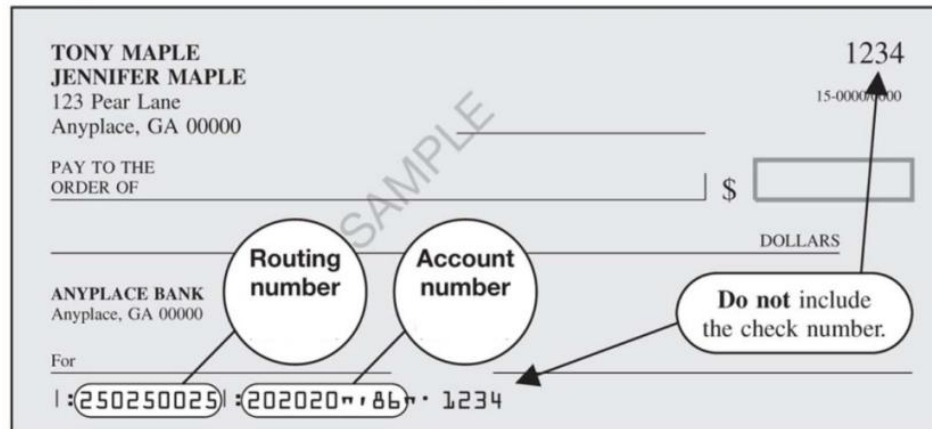
Functions of TIPS



Billing Overview

- Each Tribal Employer must establish one or more Billing Unit/POIs to help organize Tribal Employee enrollments for different Tribal entities/businesses
- Tribal Employers must provide a bank account and routing number for each Billing Unit/POI

Sample Check:



TONY MAPLE
JENNIFER MAPLE
123 Pear Lane
Anyplace, GA 00000

PAY TO THE ORDER OF _____ \$

ANYPLACE BANK
Anyplace, GA 00000

For _____

1:250250025 202020 86 1234

1234
15-00000000

Routing number

Account number

Do not include the check number.



The routing and account numbers may be in different places on your check.


Billing Overview (cont.)

- A **Preview Billing Report** can be generated in TIPS at any point during the month. This is a snapshot of the final bill
- A **Final Billing Report** can be generated in TIPS on the last calendar day of the 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



TIPS Billing Report

- TIPS users can view their preview Billing Report at any time
- Each Billing Report contains:
 - Tribal Employer Number
 - Enrollment Code
 - Total Premium Amount
 - Billing Unit/POI
 - Premium Amount
 - Total Administrative Fee
 - Enrollee Name
 - Administrative Fee
 - Total Adjustments
 - Enrollee SSN
 - Adjustments
 - Total Bill Amount
 - Enrollee Bill Amount



TRIBAL INSURANCE PROCESSING SYSTEM

[HOME](#)
[INQUIRY](#)
[FORMS](#)
[ADMIN](#)
[INFORMATION](#)

Welcome, Cindy UAT TRIBAL
ROLE: Update/NFC [Logout]

Billing Report

Tribal Organization:
POI:

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

3A	6026	Jane Doe	111223333	105	1328.7	15.15	0	1343.
3A	6026	John Doe	222334444	JK1	587.88	15.15	0	603.03
3A	6026	Sarah Doe	333445555	104	322.39	15.15	0	337.54
3A	6026	Frank Doe	444556666	JK2	1338.36	15.15	0	1353.51
<input type="button" value="Export to Excel"/>					Total: \$3577.33	Total: \$60.60	Total: \$0.00	Total: \$3637.93

Home OPM

Calculating a Billing Report

- Billing Reports are composed of two components:
 - Plan premium
 - Administrative fee
- The formula to calculate each Billing Reports is:

$$(\text{Plan premium}) + (\text{Administrative fee}) = \text{Amount Due}$$

- TIPS adds up the premiums and administrative fees for Tribal Employees in your 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:

$$(\$335.57) + (\$15.15) = \$350.72$$

Prorated Billing

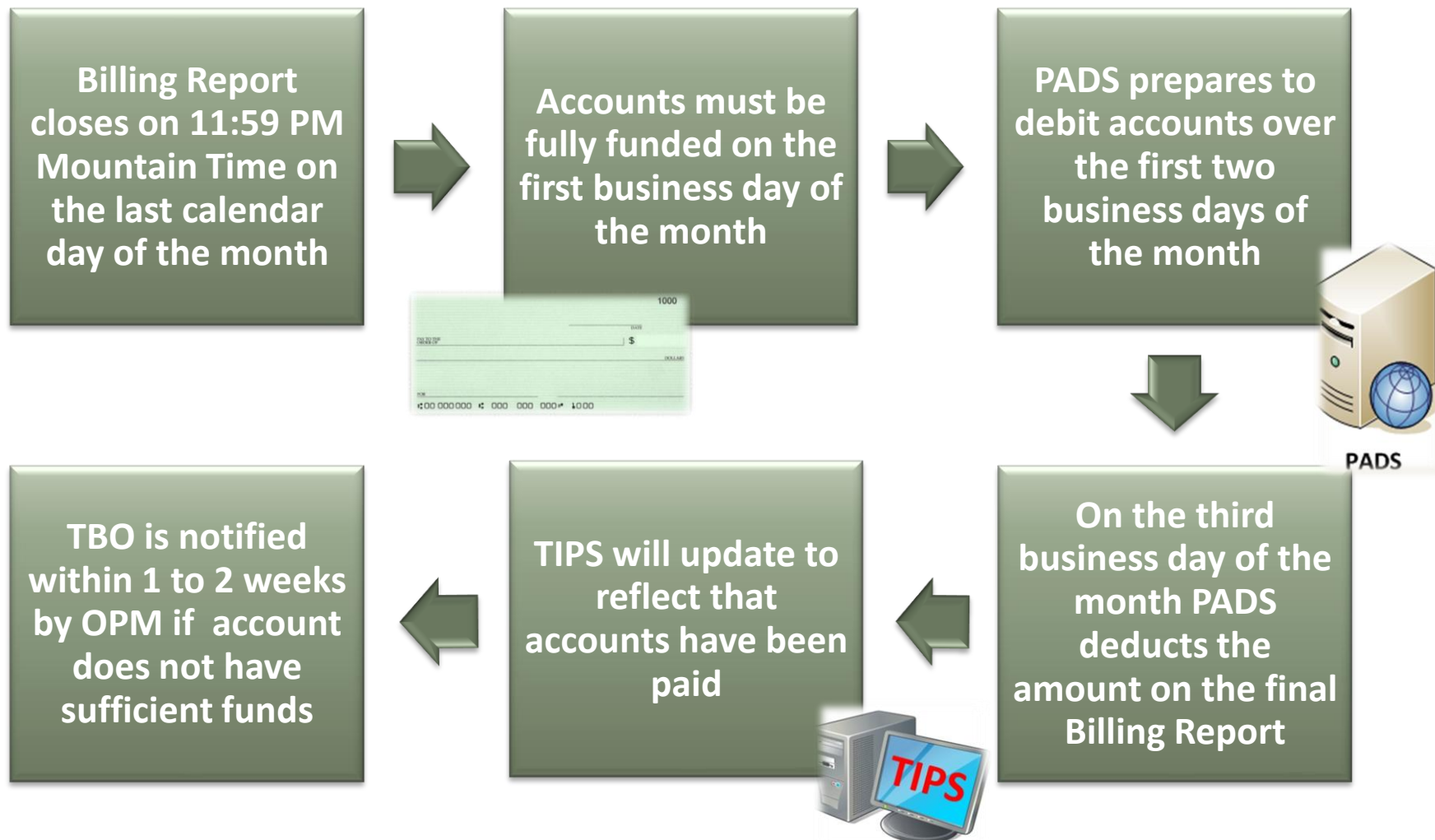
- Premiums are prorated when coverage does not start on the first of the month
- The administrative fee is never prorated
- The formula to calculate a prorated bill is:

$$(\text{Plan premium}) \times (\text{Days covered} / \text{Days in month}) + (\text{Administrative fee}) = \text{Amount Due}$$

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

$$(\$335.57) \times (25/31) + (\$15.15) = \$285.77$$

Billing Process



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

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 TIPS bank account information must be submitted at least three business days before a Tribal Employer Billing Unit/POI Billing Report closes

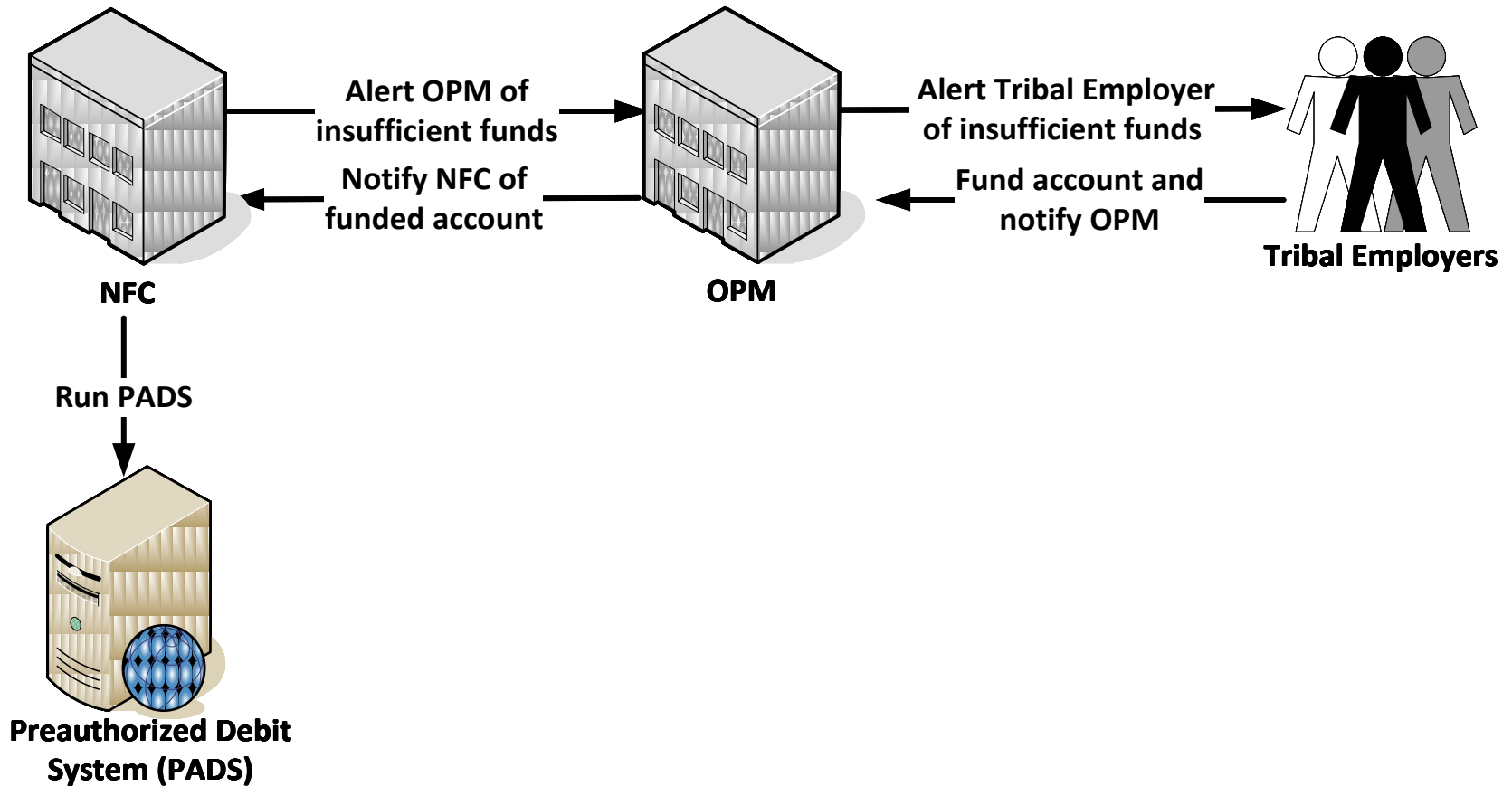
Billing Calendar (cont.)

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

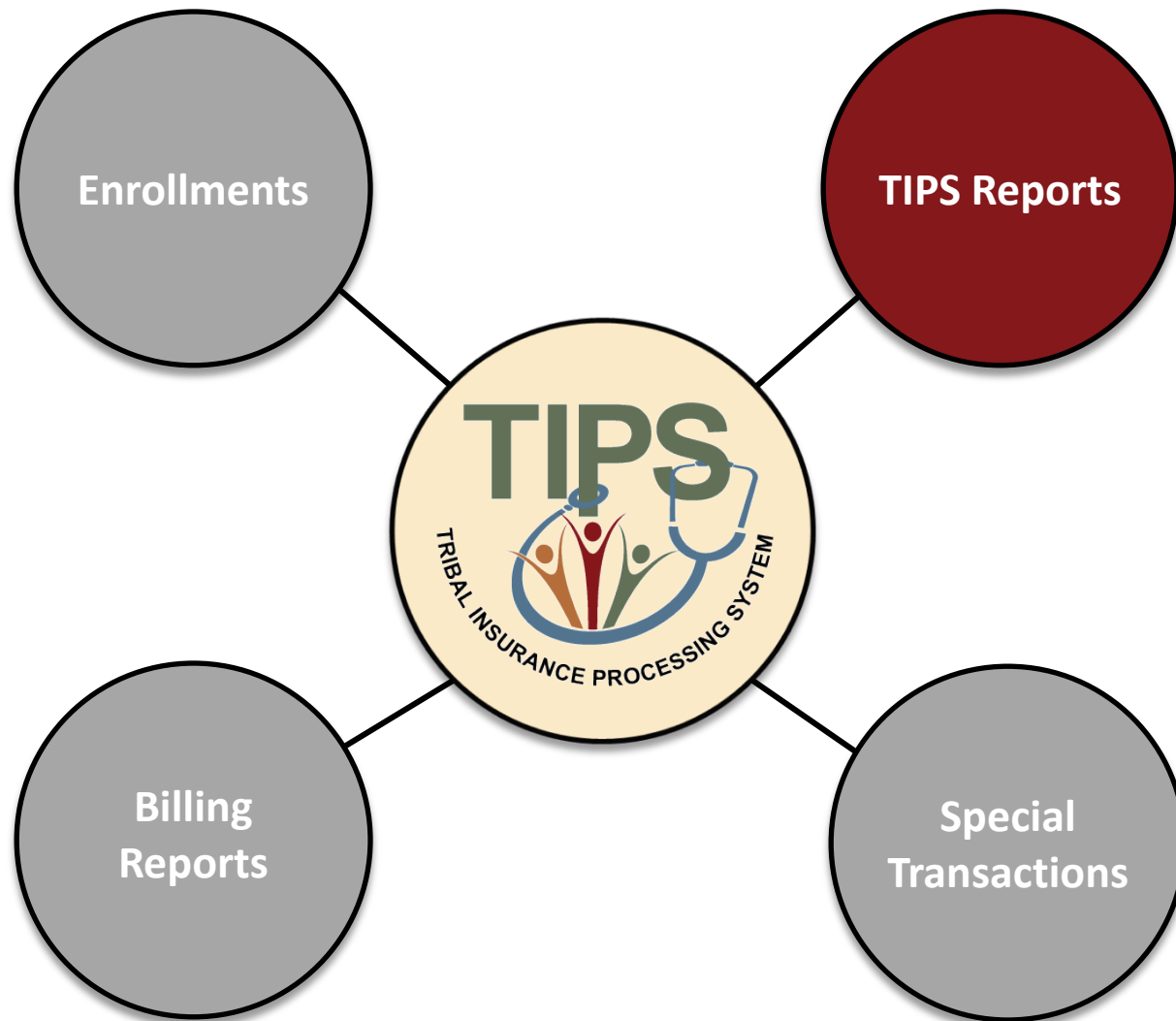
View Billing Calendar

- PADS prepares to debit the Tribal Employer Billing Unit/POI bank account provided in TIPS over the first two business days of the month
- PADS debits the Tribal Employer Billing Unit/POI bank account on the third business day of the month

FEHB Insufficient Funds Resolution Process



Functions of TIPS



Available TIPS Reports

- There are 12 principal TIPS Reports available from the left-hand side of the TIPS main page
- Required Report Criteria (for non-Billing Reports): Billing Unit/POI, Start Date, and End Date
- TIPS Reports can be viewed in:
 - The TIPS web portal
 - Microsoft Excel

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

Available TIPS Reports

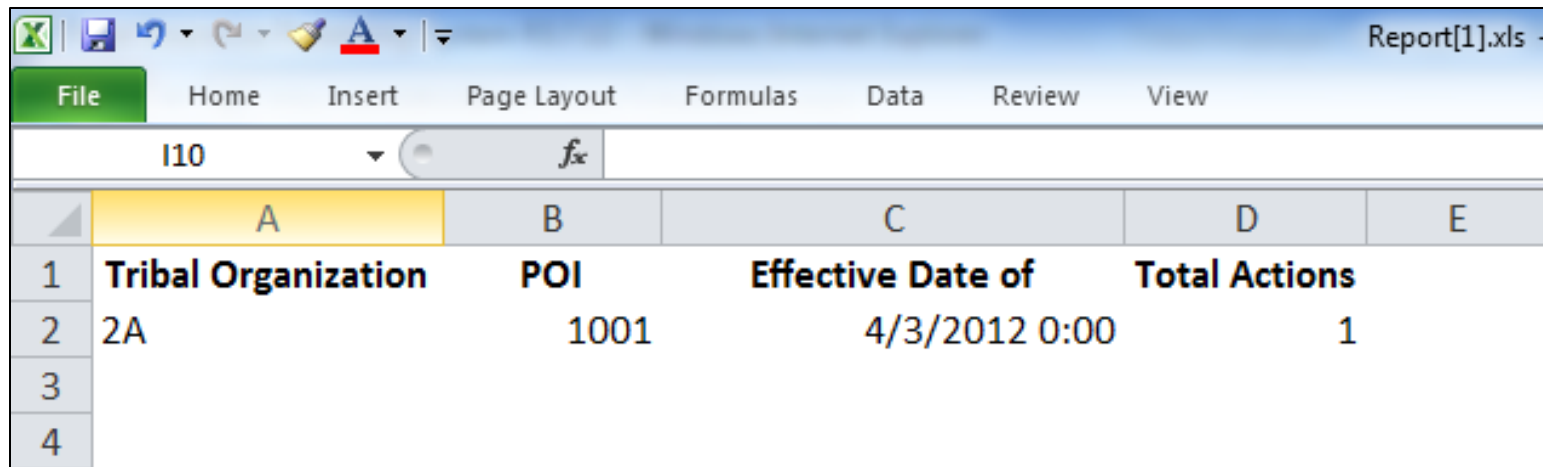


- The following TIPS Reports will be available on-demand:

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

Excel Format

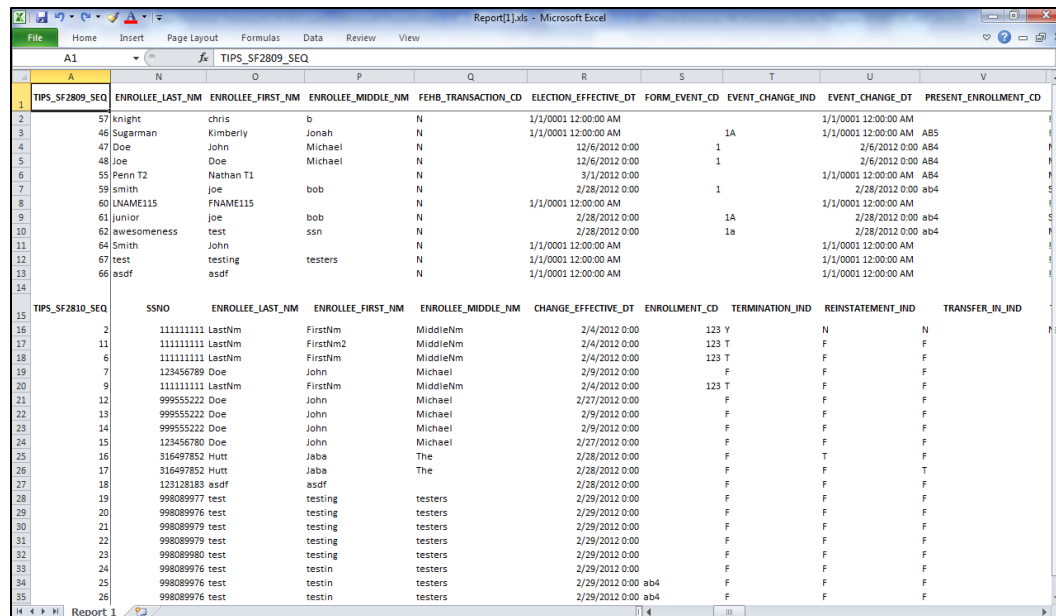
- TIPS Reports exported to Excel allow for easy customization by Tribal Employers



	A	B	C	D	E
1	Tribal Organization	POI	Effective Date of	Total Actions	
2	2A	1001	4/3/2012 0:00	1	
3					
4					

Preparing a SF 2809/SF 2810 Report

- The Overall SF 2809/SF 2810 Report contains source data for all Tribal Employees in your Tribal Employer Billing Unit/POI or Tribal Employer
- This TIPS report must be exported and cannot be viewed in its full form in the TIPS web portal



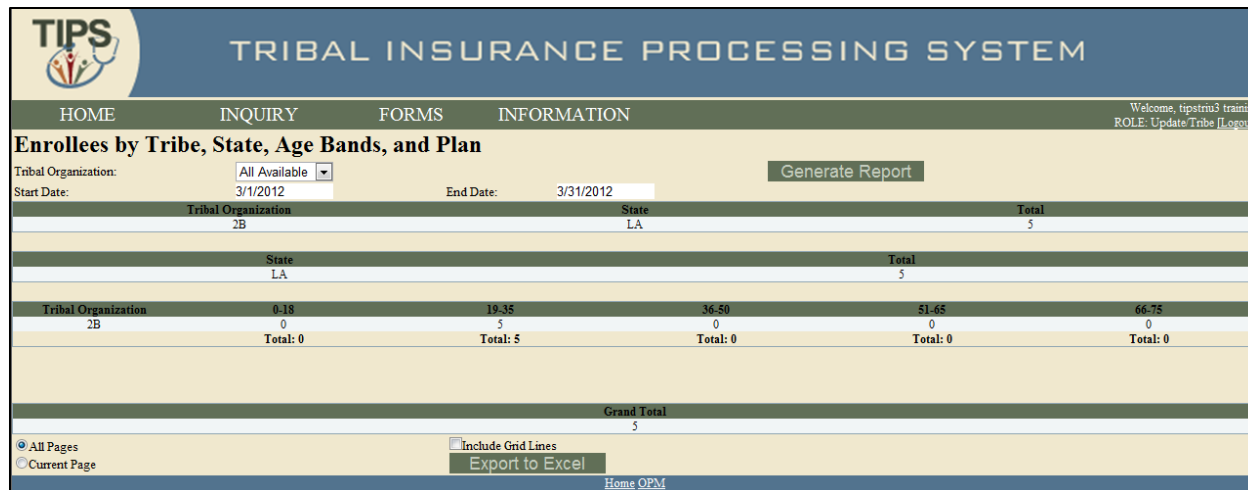
The screenshot shows a Microsoft Excel spreadsheet with two reports. The first report, 'TIPS_SF2809_SEQ', is displayed in the upper portion of the sheet, and the second report, 'TIPS_SF2810_SEQ', is displayed in the lower portion. Both reports contain employee data with various identifiers and dates.

TIPS_SF2809_SEQ	ENROLLEE_LAST_NM	ENROLLEE_FIRST_NM	ENROLLEE_MIDDLE_NM	FEHB_TRANSACTION_CD	ELECTION_EFFECTIVE_DT	FORM_EVENT_CD	EVENT_CHANGE_IND	EVENT_CHANGE_DT	PRESENT_ENROLLMENT_CD
57	knight	chris	b	N	1/1/0001 12:00:00 AM			1/1/0001 12:00:00 AM	
46	Sugarman	Kimberly	Jonah	N	1/1/0001 12:00:00 AM		1A	1/1/0001 12:00:00 AM	AB5
47	Doe	John	Michael	N	12/6/2012 0:00	1		2/6/2012 0:00	AB4
48	Joe	Doe	Michael	N	12/6/2012 0:00	1		2/6/2012 0:00	AB4
55	Perin T2	Nathan T1		N	3/1/2012 0:00			1/1/0001 12:00:00 AM	AB4
59	smith	joe	bob	N	2/28/2012 0:00	1		2/28/2012 0:00	ab4
60	UNAME115	FNAME115		N	1/1/0001 12:00:00 AM			1/1/0001 12:00:00 AM	
61	junior	joe	bob	N	2/28/2012 0:00		1A	2/28/2012 0:00	ab4
62	awesomeness	test	ssn	N	2/28/2012 0:00		1e	2/28/2012 0:00	ab4
64	Smith	John		N	1/1/0001 12:00:00 AM			1/1/0001 12:00:00 AM	
67	test	testing	testers	N	1/1/0001 12:00:00 AM			1/1/0001 12:00:00 AM	
66	asdf	asdf		N	1/1/0001 12:00:00 AM			1/1/0001 12:00:00 AM	

TIPS_SF2810_SEQ	SSNO	ENROLLEE_LAST_NM	ENROLLEE_FIRST_NM	ENROLLEE_MIDDLE_NM	CHANGE_EFFECTIVE_DT	ENROLLMENT_CD	TERMINATION_IND	REINSTATEMENT_IND	TRANSFER_IN_IND
2	111111111	LastNm	FirstNm	MiddleNm	2/4/2012 0:00	123 Y		N	N
11	111111111	LastNm	FirstNm2	MiddleNm	2/4/2012 0:00	123 T		F	F
6	111111111	LastNm	FirstNm	MiddleNm	2/4/2012 0:00	123 T		F	F
7	123456789	Doe	John	Michael	2/9/2012 0:00		F	F	F
9	111111111	LastNm	FirstNm	MiddleNm	2/4/2012 0:00	123 T		F	F
12	999555222	Doe	John	Michael	2/27/2012 0:00		F	F	F
13	999555222	Doe	John	Michael	2/9/2012 0:00		F	F	F
14	999555222	Doe	John	Michael	2/9/2012 0:00		F	F	F
15	123456780	Doe	John	Michael	2/27/2012 0:00		F	F	F
16	316497852	Hutt	Jaba	The	2/28/2012 0:00		F	F	F
17	316497852	Hutt	Jaba	The	2/28/2012 0:00		F	F	T
18	123128183	asdf	asdf		2/28/2012 0:00		F	F	F
19	998089977	test	testing	testers	2/29/2012 0:00		F	F	F
20	998089976	test	testing	testers	2/29/2012 0:00		F	F	F
21	998089979	test	testing	testers	2/29/2012 0:00		F	F	F
22	998089979	test	testing	testers	2/29/2012 0:00		F	F	F
23	998089980	test	testing	testers	2/29/2012 0:00		F	F	F
24	998089976	test	testin	testers	2/29/2012 0:00		F	F	F
25	998089976	test	testin	testers	2/29/2012 0:00	ab4	F	F	F
26	998089976	test	testin	testers	2/29/2012 0:00	ab4	F	F	F

Exercise 3.1: Review a TIPS Report

- Read the Enrollees by Tribe, State, Age Bands, and Plan
- Please identify:
 - Tribal Organization code
 - The state of residence of the enrollees
 - The age band for the enrollees



TIPS TRIBAL INSURANCE PROCESSING SYSTEM

HOME INQUIRY FORMS INFORMATION Welcome, tipatriu3 training
ROLE: Update Tribe [Logout]

Enrollees by Tribe, State, Age Bands, and Plan

Tribal Organization: End Date:

Start Date:

Tribal Organization	State	Total		
2B	LA	5		
State				
LA	Total	5		
Tribal Organization				
0-18	19-35	36-50	51-65	66-75
2B	0	5	0	0
Total: 0	Total: 5	Total: 0	Total: 0	Total: 0
Grand Total				
5				

☒ All Pages
☐ Current Page

☐ Include Grid Lines

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Lesson 3 Knowledge Check

1. Billing Reports will be divided up by what identifier?
 - The Billing Unit/POI
2. True or False: TIPS users can view their Billing Report at any time?
 - True
3. When does a Billing Report close?
 - At 11:59 PM Mountain Time on the last calendar day of the month
4. Billing Reports are composed of what 2 components?
 - The plan premium and administrative fee
5. TIPS reports can be viewed in what two ways?
 - TIPS web portal or Microsoft Excel

Lesson 3 Summary

- 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 the available TIPS Reports
 - Identify the fields on a TIPS Report

Morning Review



Lesson 1: FEHB Overview	30 minutes
Lesson 2: TIPS and Enrollments	45 minutes
Break	10 minutes
Lesson 3: Billing and TIPS Reports	45 minutes
Morning Review	20 minutes
Lunch	60 minutes
Lesson 4: Special Transactions	30 minutes
Lesson 5: Performing Transactions in TIPS	90 minutes
Break	10 minutes
Lesson 6: Obtaining Additional Assistance	30 minutes
TIPS Transactions References	10 minutes
Final Review and Evaluation	35 minutes

Review



Please break into teams

Review Jeopardy!



Good
Luck!

Key Stakeholders	Enrollments	Billing and Payments	TIPS Reports
<u>10</u>	<u>10</u>	<u>10</u>	<u>10</u>
<u>20</u>	<u>20</u>	<u>20</u>	<u>20</u>
<u>30</u>	<u>30</u>	<u>30</u>	<u>30</u>
<u>40</u>	<u>40</u>	<u>40</u>	<u>40</u>
<u>50</u>	<u>50</u>	<u>50</u>	<u>50</u>



Key Stakeholders - 10 pts

This stakeholder is responsible for providing health insurance coverage to Tribal Employees.

Who are FEHB Plan Carriers?



Key Stakeholders - 20 pts

This stakeholder is responsible for selecting plans and submitting enrollment requests to Tribal Employers.

Who are Tribal Employees?



Key Stakeholders - 30 pts

This stakeholder is responsible for answering all FEHB policy questions.

Who is OPM?



Key Stakeholders - 40 pts

This stakeholder maintains TIPS and provide TIPS training.

Who is NFC?



Key Stakeholders - 50 pts

This stakeholder validates employee enrollment requests and plan change requests.

Who are Tribal Employers?



These two forms are used to perform enrollment transactions in TIPS.

What are the SF 2809 and SF 2810?



Who is responsible for entering SF 2809s and SF 2810s into TIPS.

Who are Tribal Employers?



If a Tribal Employer Billing Unit/POI cancels coverage, this system is responsible for preparing updated SF 2809s and submitting them.

What is TIPS?



Employees would select this series of event codes (1 Series, 2 Series, 3 Series, etc...) if they are participating in Premium Conversion.

What are 1 Series Codes?



Tribal Employers would submit what SF if they needed to terminate an Employee's coverage?

What is SF 2810?



Billing and Payments - 10 pts



This system is responsible for monthly premium collection.

What is PADS, the Pre-Authorized Debit System?



Billing and Payments - 20 pts



The Final Billing Report closes for the month on what day and at what time?

What is the last calendar day of the month at 11:59 PM Mountain Time?



If a Tribal Employer has an insufficient payment this organization will notify them.

Who is OPM?



What day of the month does PADS debit the Tribal Employer's bank account?

What is the third business day of the month?



Billing and Payments - 50 pts



A Tribal Employer adds five employees to its insurance coverage with an effective date of May 28th. The employees will be included for the first time on the Tribal Employer Billing Reports for this month's coverage.

What is May?



TIPS Reports - 10 pts



TIPS reports are available with what frequency.

What is all the time or on-demand?



TIPS Reports can be viewed in TIPS or exported to what program.

What is Microsoft Excel?



TIPS Reports are available at these two levels of detail.

What are the Billing Unit/POI-level and the Tribal Employer-level?



What three criteria must a user specify when preparing a TIPS Report.

What are the Billing Unit/POI, Start Date, and End Date?



A TIPS user would prepare this report if they wanted to see the source data for their Tribal Employees' SF 2809s and SF 2810s.

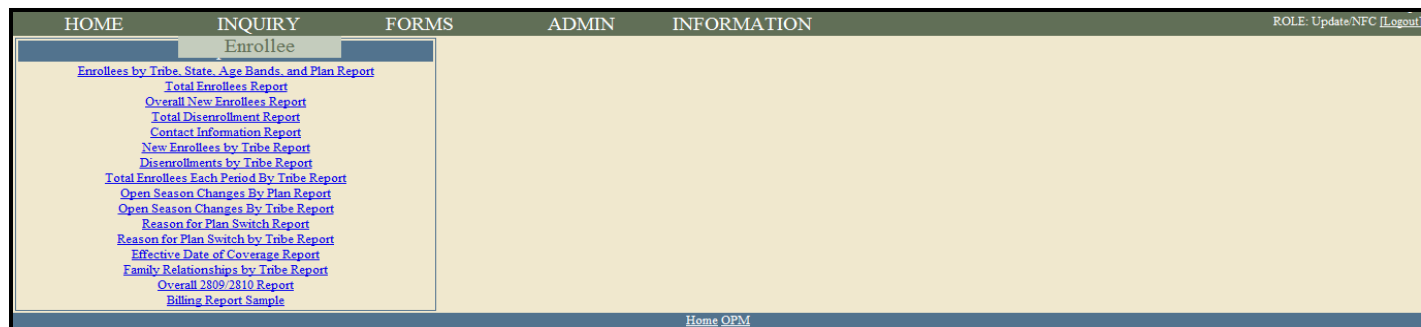
What is the Overall 2809/2810 Report?



What to Expect From Lessons 4 and 5 & 6

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

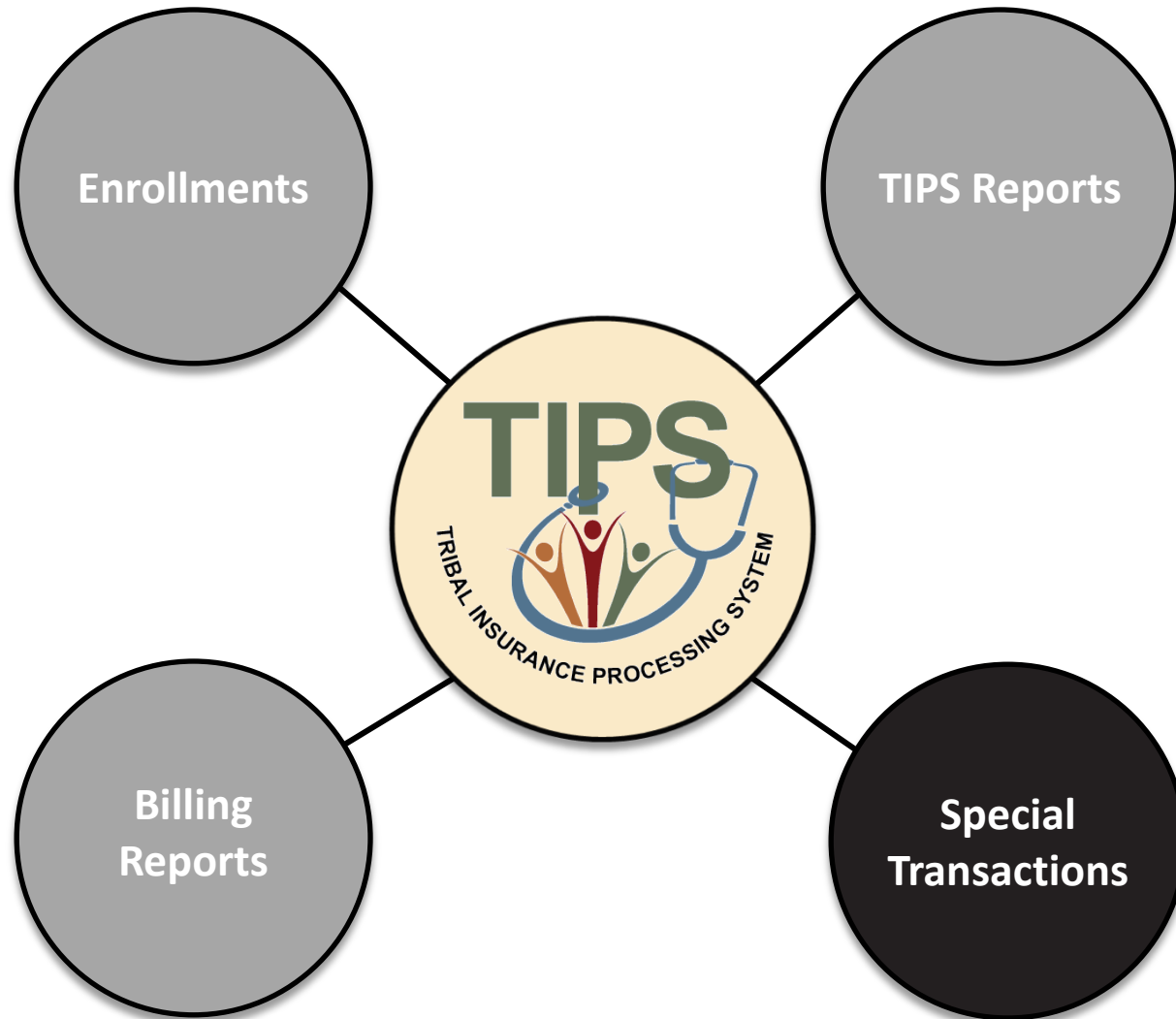
- Understand the Special Transactions in TIPS
- Access TIPS
- Perform enrollment transactions using TIPS
- Prepare TIPS Reports
- Review your Billing Report in TIPS
- Explain who to contact for additional assistance





Lunch Break – 60 minutes

Functions of TIPS



Lesson 4: Special Transactions

Lesson 1: FEHB Overview	30 minutes
Lesson 2: TIPS and Enrollments	45 minutes
Break	10 minutes
Lesson 3: Billing and TIPS Reports	45 minutes
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Break	10 minutes
Lesson 6: Obtaining Additional Assistance	30 minutes
TIPS Transactions References	10 minutes
Final Review and Evaluation	35 minutes

Lesson 4 Objectives

- By the end of this lesson, you should be able to:
 - Explain the Enrollee Billing Unit/POI Transfer process
 - Describe the implications of adding a court ordered indicator to an employee's enrollment records
 - List the TIPS transactions that may be processed retroactively

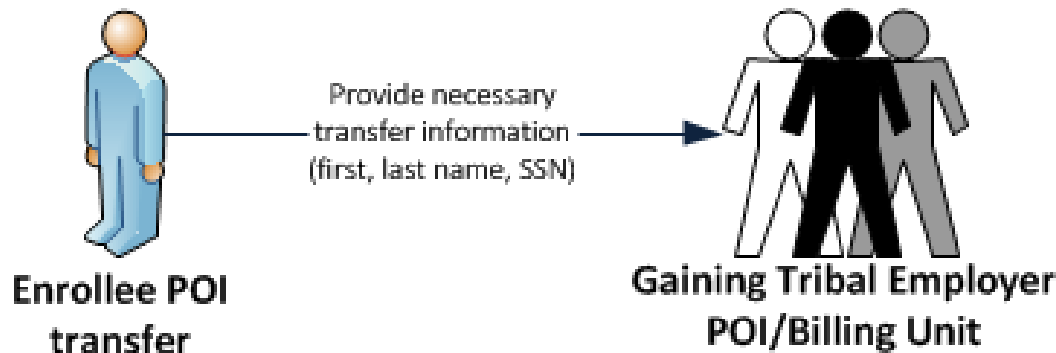
FUTURE FUNCTIONALITY

Enrollee Billing Unit/POI Transfer

- In the future, the Enrollee Billing Unit / POI Transfer function 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:
 1. A Billing Unit / POI managed by your Tribal Employer
 2. A Billing Unit / POI managed by another Tribal Employer participating in FEHB

Enrollee Billing Unit/POI Transfer (contd.)

- The gaining Tribal Employer will need to determine 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



Enrollee Billing Unit/POI Transfer (Contd.)

- As conceptualized, the following considerations must 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
 - The gaining Tribal Employer will not be able to change the enrollment code, address, etc. of the active employee enrolled in FEHB when completing a transfer. Such adjustments to FEHB coverage must be made through creating new SF 2809s/SF 2810s following the transfer

PLEASE NOTE: Current Transfer In requests should be submitted to the TIPS Contact Center: 1-855-NFC-4GOV; a customer notification will be released when the functionality is available

Manage Court Orders

- In the future, the Manage Court Orders function will be 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**

Manage Court Orders (contd.)

- 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*
- 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*

PLEASE NOTE: This functionality is not currently available; a customer notification will be released when the functionality is released. Please forward any related inquiries to the TIPS Contact Center: 1-855-NFC-4GOV

Retroactive Adjustments

- In the future, 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)
 - Billing Unit/POI transfers

Retroactive Adjustments (contd.)

- The following considerations will need to be acknowledged by the 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

How your Tribal Employer’s Billing Report will be affected by Retroactive Adjustments	
Adjustment resulting in net credit (+)	Net credits will be applied to future bills until the adjustment’s balance is reduced to \$0
Adjustment resulting in net debit (-)	Net debits will be applied in total to monthly bill in which the retroactive adjustment is entered into TIPS

PLEASE NOTE: This functionality is not currently available; a customer notification will be released when the functionality is released. Please forward any relevant requests to the TIPS Contact Center: 1-855-NFC-4GOV

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
 - First Name
 - Last Name
 - Social Security Number
2. Court ordered indicators will prevent enrollment records from:
 - Voluntarily being cancelled via a new SF 2809
 - Being Switched from a *Self & Family Plan* to a *Self Only Plan*
3. True or False: Retroactive adjustments resulting in a net credit will result in a refund to your Tribal Employer's bank account
 - False

Lesson 4 Summary

- Now that you have completed this lesson, you should be able to:
 - Explain the Enrollee Billing Unit/POI Transfer processes
 - Understand the implications of adding a court ordered indicator to an employee's enrollment records
 - List the TIPS transactions that may be processed retroactively

Lesson 5: Performing Transactions in TIPS

Lesson 1: FEHB Overview	30 minutes
Lesson 2: TIPS and Enrollments	45 minutes
Break	10 minutes
Lesson 3: Billing and TIPS Reports	45 minutes
Morning Review	20 minutes
Lunch	60 minutes
Lesson 4: Special Transactions	30 minutes
Lesson 5: Performing Transactions in TIPS	90 minutes
Break	10 minutes
Lesson 6: Obtaining Additional Assistance	30 minutes
TIPS Transactions References	10 minutes
Final Review and Evaluation	35 minutes

Lesson 5 Objectives

- By the end of this lesson, you should be able to:
 - Access TIPS
 - Navigate TIPS
 - Perform enrollment transactions
 - 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
- A 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**

How to Log in to TIPS

- Enter username and password in the Log In section

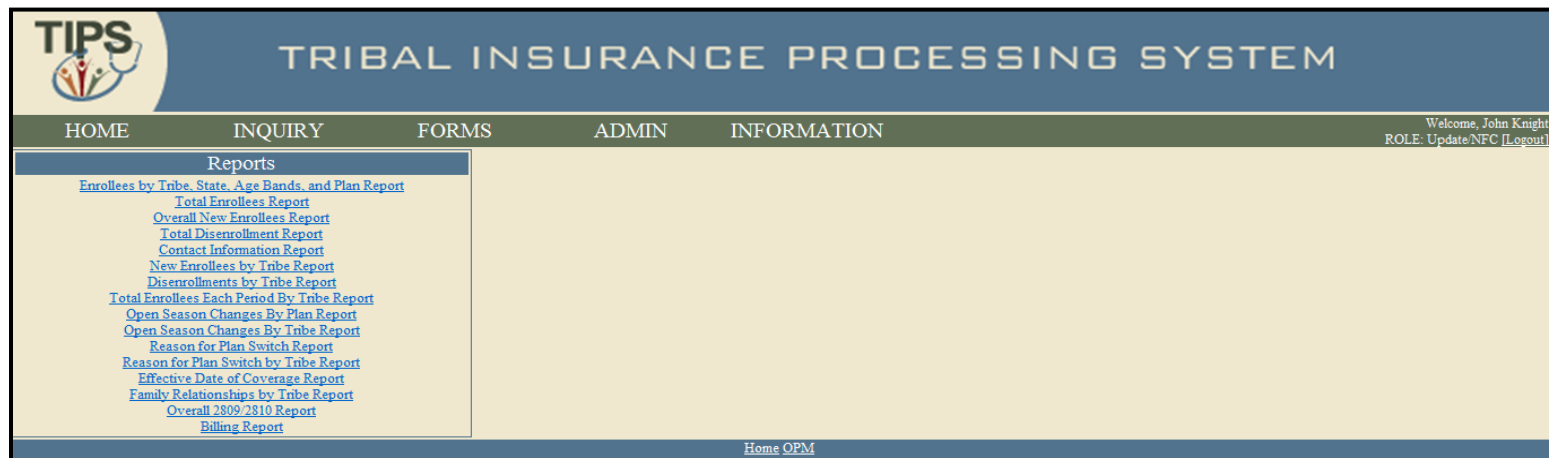


The screenshot shows the TIPS (Tribal Insurance Processing System) login interface. At the top center is the TIPS logo, which features the text "TIPS" in large green letters, with "TRIBAL INSURANCE PROCESSING SYSTEM" written in a circular path around a stylized graphic of three people. Below the logo is a thick red horizontal bar. Underneath this bar, there are two main sections. On the left is the "Log In" section, which has a red header. It contains two input fields: "Username:" and "Password:", each followed by a white text box. Below these fields is a green "Submit" button. On the right is the "Getting Started" section, which also has a red header. It contains a single link: [Healthcare and Insurance for Tribes](#).

Navigating TIPS: Main Page



- TIPS is broken up into six main areas:
 - Home
 - Inquiry
 - Forms
 - Admin
 - Information
 - Reports



Navigating TIPS: Inquiry



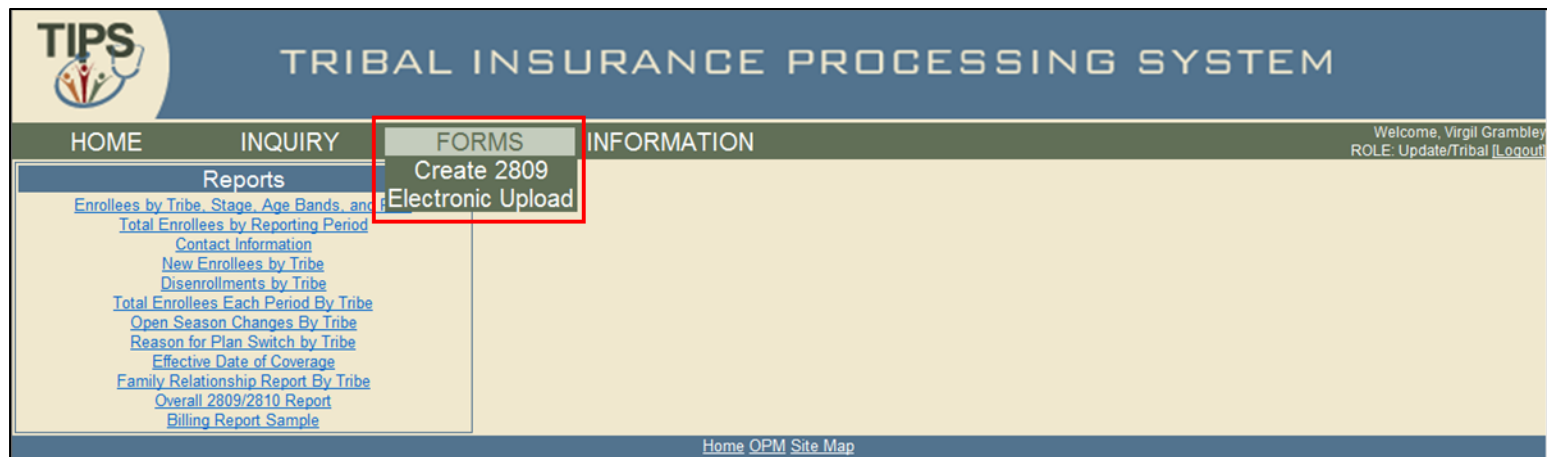
- The Inquiry tab allows users to:
 - Search for an employee enrolled in TIPS by name and/or Social Security Number / Unique Identifier
 - Search for active, inactive, terminated and cancelled enrollees
 - See submitted SF 2809s and SF 2810s
 - Edit SF 2809s and SF 2810s that have been saved but not submitted
 - Create SF 2810s

A screenshot of the TIPS web application's "Enrollee Search Form". The interface has a dark green header bar with navigation tabs: "HOME", "INQUIRY", "FORMS", "ADMIN", and "INFORMATION". The "INQUIRY" tab is selected. In the top right corner of the header, it says "Welcome, John Knight" and "ROLE: Update/NFC [Logout]". Below the header, the main content area has a title "Enrollee Search Form" and a sub-header "Enrollee Information". The form contains several input fields: "Last Name" with the value "Christman", "First Name" with "Lloyd", "Middle Name" (empty), "Social Security Number" with "555555555", and "Date of Birth" with "08/17/1988". There are also two dropdown menus: "Tribe" set to "Dire Wolf Tribe" and "POI" set to "Wolfman". A green "Search" button is located at the bottom right of the form.

Navigating TIPS: Forms



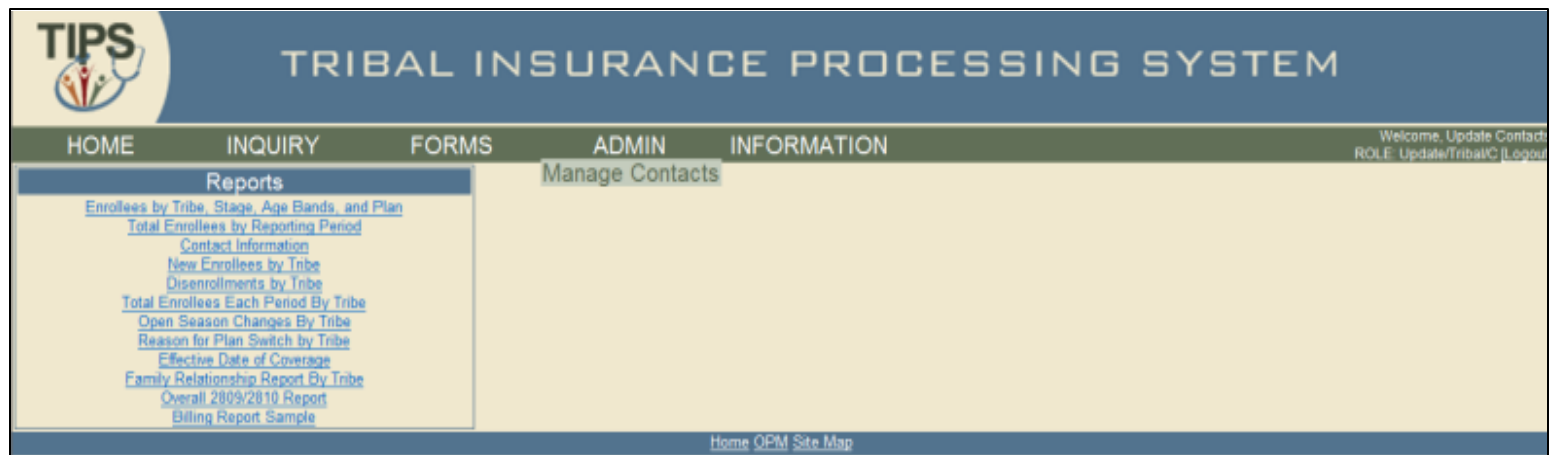
- The Forms tab allows users to:
 - Create a new SF 2809
 - Perform an Electronic Upload
 - Includes SF 2809s and SF 2810s



Navigating TIPS: Admin



- The Admin tab allows users to:
 - Manage Contacts
 - Chief Executive Officer, Chief Financial Officer, Tribal Benefits Officer(s) (TBO), and Maintenance Contact(s)
 - Unable to update Tribal Security Officer (TSO) information



Navigating TIPS: Information



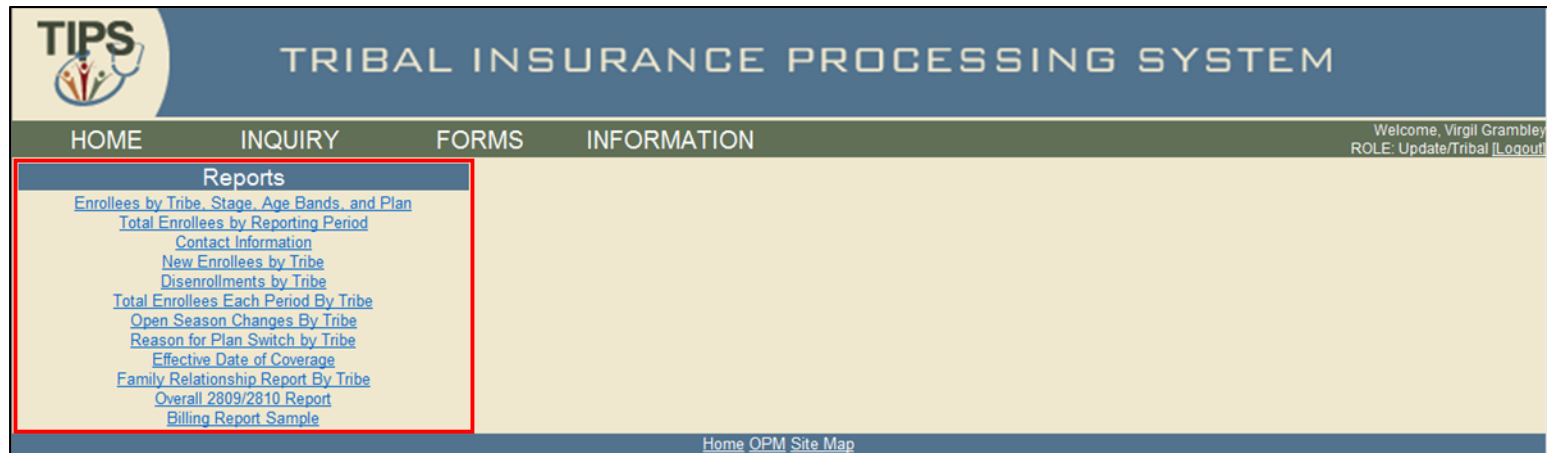
- The Information tab allows users to:
 - Manage contact information
 - Manage account information



Navigating TIPS: Reports



- The Reports menu allows users to:
 - Nine different TIPS Reports
 - Preview and Final Billing Report



Navigating TIPS: User Information



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



**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
 - Enrollment reinstatement
 - Billing Unit/POI transfer process
 - Info only 2809
 - Court ordered indicator
 - Retroactive adjustments

Individual Forms vs. Electronic Upload

	Individual Forms	Electronic Upload
Definition	<ul style="list-style-type: none"> Enter all enrollee information into TIPS, one record at a time 	<ul style="list-style-type: none"> Upload multiple records at the same time
Pros	<ul style="list-style-type: none"> Simpler when performing a few transactions Easier to identify and correct errors 	<ul style="list-style-type: none"> Saves time when performing multiple transactions Decreases the risk of manual error in TIPS
Cons	<ul style="list-style-type: none"> Time consuming when performing more than a few transactions Increases risk of manual error in TIPS 	<ul style="list-style-type: none"> Errors in Electronic Uploads must be resolved individually Must adhere to a strict Electronic Upload format

Selecting a Tribal Employer and Billing Unit/POI



- Before entering data in a SF 2809 or SF 2810 remember to:
 - Confirm that the correct Tribal Employer is selected
 - Select the appropriate Tribal Employer Billing Unit/POI for the Tribal Employee

The screenshot displays the TIPS Tribal Insurance Processing System interface. At the top, the TIPS logo and the text "TRIBAL INSURANCE PROCESSING SYSTEM" are visible. Below this is a navigation bar with links: HOME, INQUIRY, FORMS, and INFORMATION. On the right side of the navigation bar, it says "Welcome, Virgil Grambley" and "ROLE: Update/Tribal [Logout]". The main heading is "Health Benefits Election Form (2809)". Below this, there is a section titled "Tribal HR SF2809 Information". This section contains two dropdown menus: "Tribe" (currently showing "A Test Tribe") and "POI". To the right of these dropdowns, it says "SF2809 Status: New". Below the "Tribal HR SF2809 Information" section, there is a section titled "Part A - Enrollee Information (For additional family members, use the Part A (Continued) section below.)". This section contains three input fields: "Enrollee First Name", "Middle Name", and "Last Name".

Entering Enrollment Data

- 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 users may select one of four options:

Option	Description
Cancel	Deletes the draft form and returns user to the main page
Clear	Deletes all data in the draft form without leaving the form
Save	Saves the draft form and allows for additional edits at a later date before submission to a FEHB Plan Carrier
Submit	Finalizes the form and sends it to the appropriate FEHB Plan Carrier

Cancel	Clear	Save	Submit
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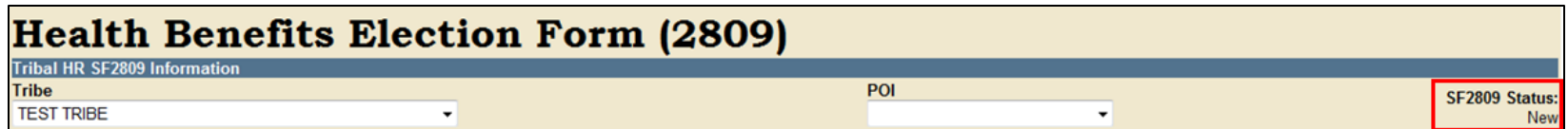
Holding a SF 2809 or SF 2810

- After users select Submit, the form will be submitted to the appropriate FEHB Plan Carrier
- If users notice an error or need to stop a form after submitting, the form can be held, 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 to send it to the FEHB Plan Carrier



Form Status

- The top right corner of the form displays the status of the SF 2809 and SF 2810



Health Benefits Election Form (2809)

Tribal HR SF2809 Information


Tribe: TEST TRIBE POI: SF2809 Status: New

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

Status	Description
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	Form has been taken out of the queue for and will not be sent to the FEHB Plan Carrier or reflected on the Billing Report
Processed	Form has been sent to FEHB Plan Carriers and processed for billing and cannot be held

Resolving Errors

- If users attempt to submit a SF 2809 or SF 2810 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


TRIBAL INSURANCE PROCESSING SYSTEM

[HOME](#)
[INQUIRY](#)
[FORMS](#)
[INFORMATION](#)

Welcome, Virgil Grambley
ROLE: Update/Tribal [Logout]

Health Benefits Election Form (2809)

Tribal HR SF2809 Information

Tribe

POI

SF2809 Status:
New

Value must not be blank.
A POI is required.

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

Enrollee First Name	Middle Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Value must not be blank.		Value must not be blank.
Home/Work Phone Number	Social Security Number	Date of birth
<input type="text"/>	<input type="text"/>	<input type="text"/>
Phone number is not valid.	Value must not be blank.	Value must not be blank.

Resolving Electronic Upload Errors

- If TIPS identifies an error(s) after submission of an Electronic Upload, users will receive an email notifying them to log in to TIPS to retrieve and resolve any errors
- All pending errors must be resolved individually in TIPS even if they were originally submitted as part of an Electronic Upload file

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

Generating a TIPS Report

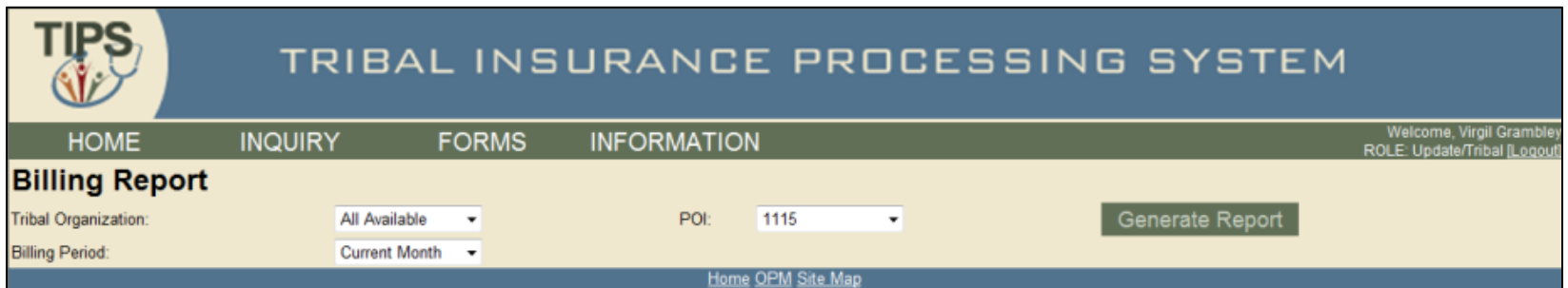
- When preparing a TIPS Report, remember to select:
 - Billing Unit/POI
 - Start Date
 - End Date
- Tribal Organization will be prepopulated



The screenshot displays the TIPS web application interface. At the top, the header includes the TIPS logo and the text 'TRIBAL INSURANCE PROCESSING SYSTEM'. Below the header is a navigation bar with links: HOME, INQUIRY, FORMS, and INFORMATION. On the right side of the navigation bar, a user greeting reads 'Welcome, Virgil Grambley' and 'ROLE: Update Tribe [Logout]'. The main content area is titled 'Disenrollment Report'. It contains a form with the following fields: 'Tribal Organization:' with a dropdown menu set to 'All Available'; 'POI:' with a dropdown menu set to 'All Available'; 'Start Date:' with a text input field containing '3/25/2012'; and 'End Date:' with a text input field containing '3/25/2012'. A 'Generate Report' button is positioned to the right of the date fields. At the bottom of the form, there are links for 'Home' and 'OPM'.

Viewing a Billing Report

- Billing Reports can be prepared from the TIPS main page
- Depending on the user's role, access to 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

The screenshot shows the TIPS Tribal Insurance Processing System interface. At the top, there is a blue header bar with the TIPS logo on the left and the text "TRIBAL INSURANCE PROCESSING SYSTEM" in white. Below the header is a green navigation bar with links: "HOME", "INQUIRY", "FORMS", and "INFORMATION". On the right side of the navigation bar, it says "Welcome, Virgil Grambley" and "ROLE: Update/Tribal [Logout]". The main content area has a yellow background. It starts with the title "Billing Report" in bold. Below this, there are two rows of input fields. The first row has "Tribal Organization:" with a dropdown menu showing "All Available", and "POI:" with a dropdown menu showing "1115". The second row has "Billing Period:" with a dropdown menu showing "Current Month". To the right of these fields is a green button labeled "Generate Report". At the bottom of the page, there is a blue footer bar with the text "Home QPM Site Map" in white.

Walkthroughs and Exercises

- This section of the training will focus on practicing and 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

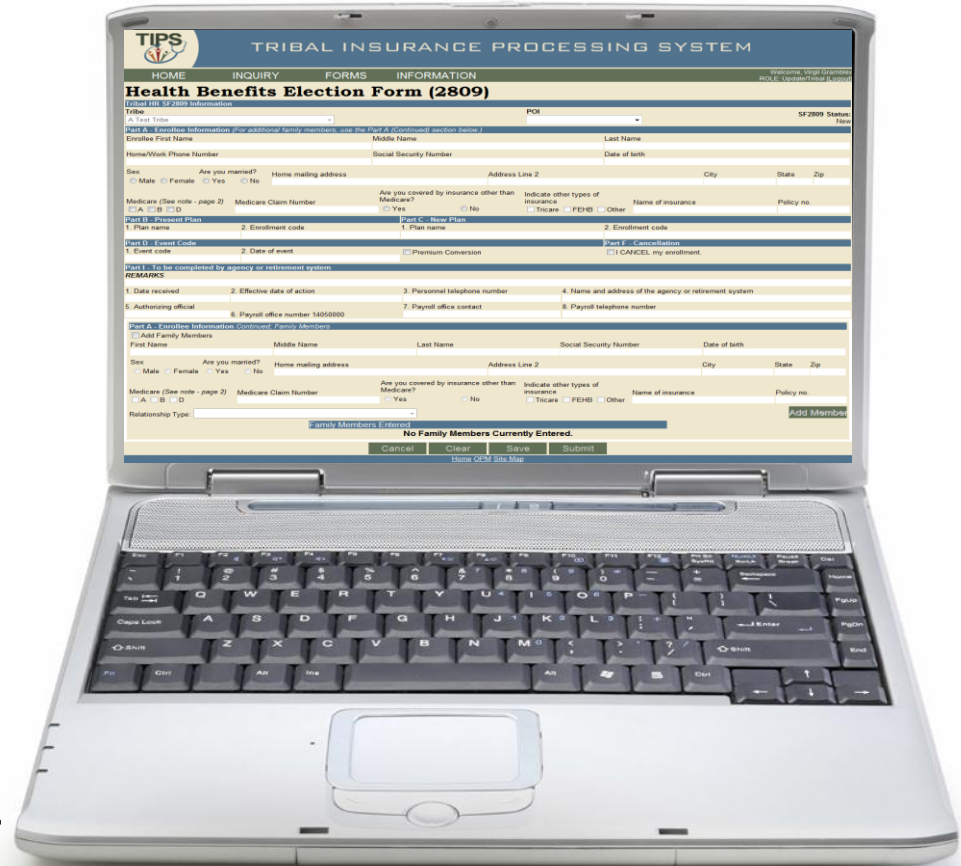
How to Access TIPS Training Environment

- 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

At a later date, users will receive a permanent TIPS username from NFC and a temporary password from their Tribal Employer's TSO

Exercise 5.1: Individual Enrollment

- Create a new enrollment in TIPS using the information found in the Exercise 5.1 materials
- Instead of submitting the enrollment form when finished, select **Save -NOT- Submit**
- Refer to the handout with your login information for your Social Security Number

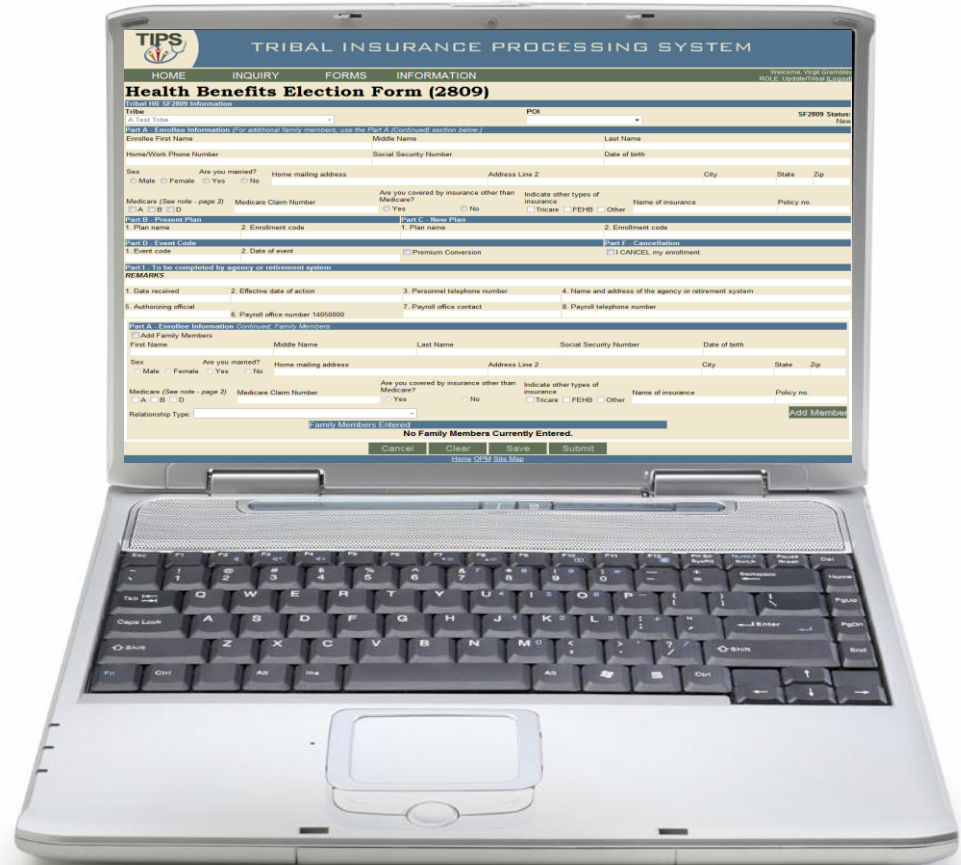


The image shows a laptop screen displaying the TIPS Tribal Insurance Processing System. The main heading is 'TIPS TRIBAL INSURANCE PROCESSING SYSTEM'. Below this is a navigation bar with links: HOME, INQUIRY, FORMS, INFORMATION. The current page is the 'Health Benefits Election Form (2809)'. The form is titled 'Health Benefits Election Form (2809)' and contains various fields for personal information, including name, address, date of birth, and Social Security Number. There are also sections for selecting insurance plans and indicating coverage. The form is divided into sections for the individual and family members. The bottom of the form has buttons for 'Cancel', 'Clear', 'Save', and 'Submit'.

You have 10 minutes to complete this exercise

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 using the information found in your Exercise 5.2 materials
- **Submit** the SF 2809
- Refer to the handout with your login information for you and your spouse's Social Security Number



You have 10 minutes to complete this exercise

Exercise 5.3: Holding, Updating, and Submitting an Enrollment



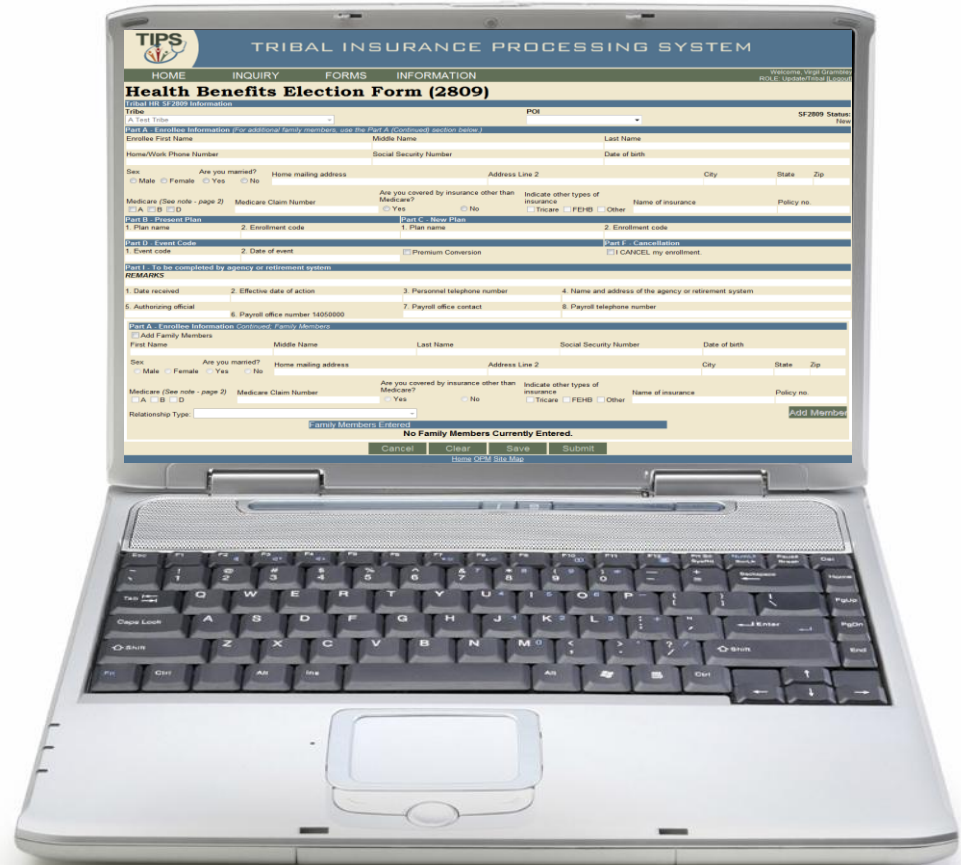
- Perform an inquiry for the SF 2809 you updated in Exercise 5.2
- **Hold** the SF 2809 you updated in Exercise 5.2
- The Enrollee's date of birth was entered incorrectly. Update the birthday to read 03/01/1970
- **Submit** the updated SF 2809



You have 10 minutes to complete this exercise

Exercise 5.4: Updating a SF 2809 for Open Season

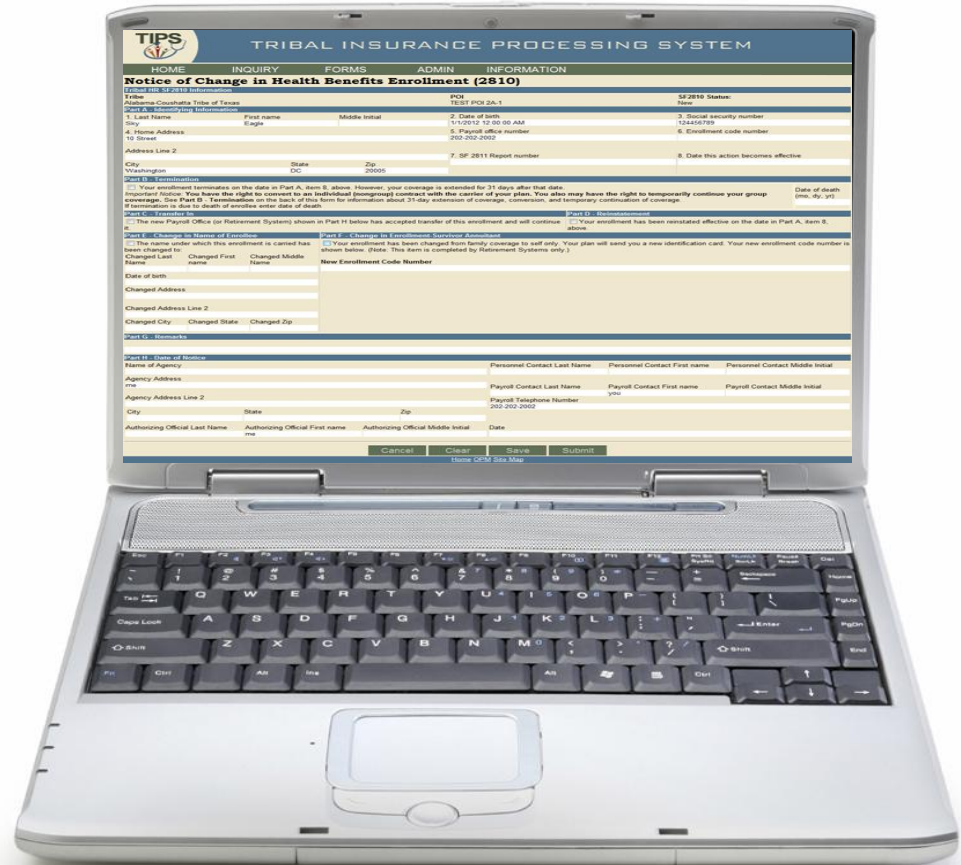
- Search for your assigned enrollee in TIPS using the information found in your Exercise 5.4 materials
- Update SF 2809 based on Exercise 5.4 materials
- **Submit** the updated SF 2809



You have 10 minutes to complete this exercise

Exercise 5.5: Enrollment Termination

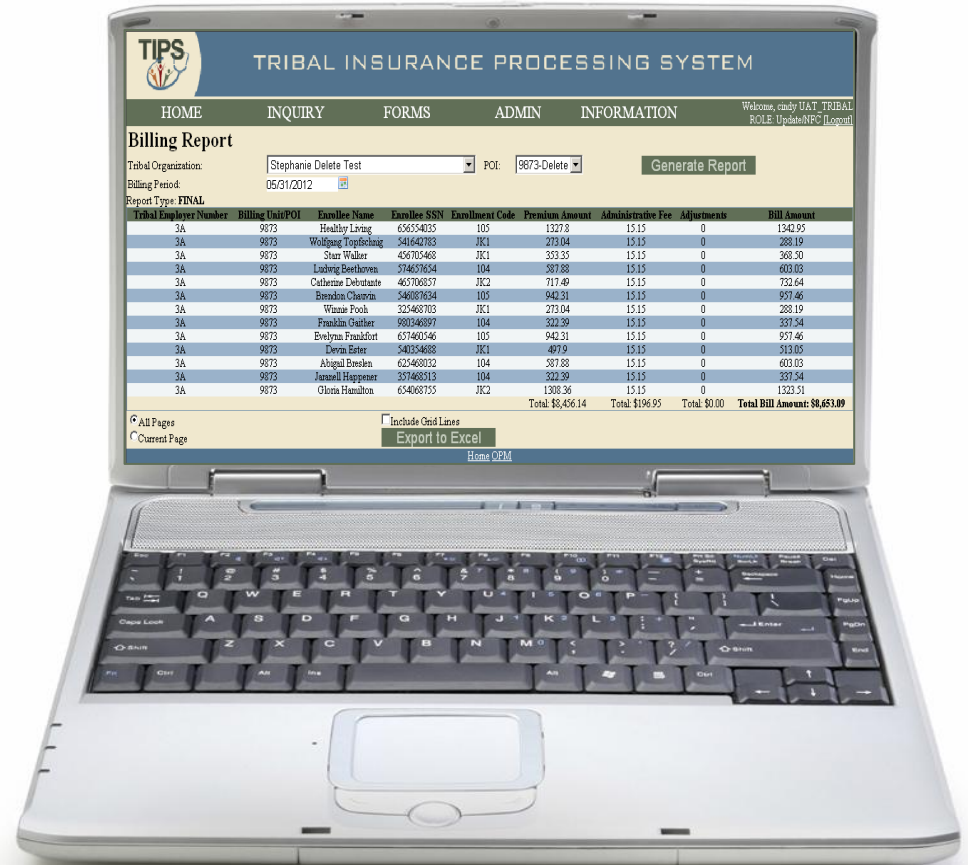
- Terminate your assigned enrollee in TIPS using the information found in your Exercise 5.5 materials
- Refer to the handout with your login information for your enrollee's Social Security Number



You have 10 minutes to complete this exercise

Exercise 5.6: Preparing a Billing Report

- Run a Billing Report in TIPS on your Billing Unit / POI for 6/1/2012
- **Export** the report to Excel and save to your desktop
- Open the report and review



You have 10 minutes to complete this exercise

Exercise 5.7: Overall SF 2809/SF 2810 Report



- **Generate** an Overall SF 2809/SF 2810 TIPS Report for your Tribal Employer Billing Unit/POI
- Export the report to Excel and save to your desktop
- Open the report and review



You have 5 minutes to complete this exercise

Lesson 5 Summary

- Now that you have completed this lesson, you should be able to:
 - Access TIPS
 - Navigate TIPS
 - Perform enrollment transactions
 - Prepare TIPS Reports
 - Review your Billing Report in TIPS



Break – 10 Minutes

Lesson 6: Obtaining Additional Assistance

Lesson 1: FEHB Overview	30 minutes
Lesson 2: TIPS and Enrollments	45 minutes
Break	10 minutes
Lesson 3: Billing and TIPS Reports	45 minutes
Morning Review	20 minutes
Lunch	60 minutes
Lesson 4: Special Transactions	30 minutes
Lesson 5: Performing Transactions in TIPS	90 minutes
Break	10 minutes
Lesson 6: Obtaining Additional Assistance	30 minutes
TIPS Transactions References	10 minutes
Final Review and Evaluation	35 minutes

Lesson 6 Objectives

- By the end of this lesson, you should be able to:
 - Describe the standard Tribal Employer inquiries
 - Demonstrate an understanding of the types of inquiries handled by NFC and other external organizations
 - Demonstrate how to navigate the TIPS website
 - Submit an inquiry using the Remedy Requester Console

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?



Inquiries Handled by NFC Contact Center and Other Organizations



NFC Contact Center

Types of Inquiries:

- General program inquiries
- Inquiries regarding completing a SF 2809/ SF 2810
- Assistance with Electronic Upload errors
- Assistance with generating a TIPS Report
- Billing and technical inquiries
- Billing discrepancies
- 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

Tribal Insurance Processing System (TIPS)

Detailed Inquiry Guide



- The detailed guide outlines the points of contact that will be responsible for resolving the Tribal Employers' TIPS inquiries

Inquiry Type	Example Inquiries	Who To Contact
Implementation Inquiries <i>Includes questions related to setting up Tribal Employers in TIPS.</i>	<ul style="list-style-type: none"> Confirming receipt of Authorized Contact Designation Forms or other parts of the OPM Agreement Package 	NFC Client Management Branch tips@nfc.usda.gov
Processing, Technical and Billing Inquiries <i>Includes questions associated with performing core system activities in TIPS.</i>	<ul style="list-style-type: none"> 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) http://tips.nfc.usda.gov
TIPS Access Inquiries <i>Includes questions related to the steps necessary for establishing TSOs or modifying User IDs (for TSOs).</i>	<ul style="list-style-type: none"> 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 <i>Security Access Requests</i> to: 1-888-245-4060 (fax) or nfc.securityofc@nfc.usda.gov NFC Operations Security Center - Submit <i>technical</i> access inquiries to: 1-800-767-9641 (phone) or osc.etix@nfc.usda.gov Submit TSO general inquiries and training requests to: nfc.aso@nfc.usda.gov
TIPS Training Inquiries <i>Includes questions related to the coordination and delivery of regional training to Tribal Employers.</i>	<ul style="list-style-type: none"> 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 <i>Includes questions related to eligibility and general program information.</i>	<ul style="list-style-type: none"> 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 <i>Includes questions about the specific plans.</i>	<ul style="list-style-type: none"> 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 inquiries
 - Identify who you should call to resolve each inquiry
 - Write your answer in your participant guide



Submitting Inquiries Online

- TBOs and other Authorized Contacts may submit inquiries online using the Remedy Requester Console
 - To add Authorized Contacts please call the TIPS Contact Center
- Links to the Remedy Requester Console are available:
 - On the TIPS website
 - Inside TIPS on the Help page under the Information tab
- In order to access the Remedy Requester Console you will receive a username and password from NFC

Your TIPS login is independent from your Remedy Requester Console login

TIPS Website

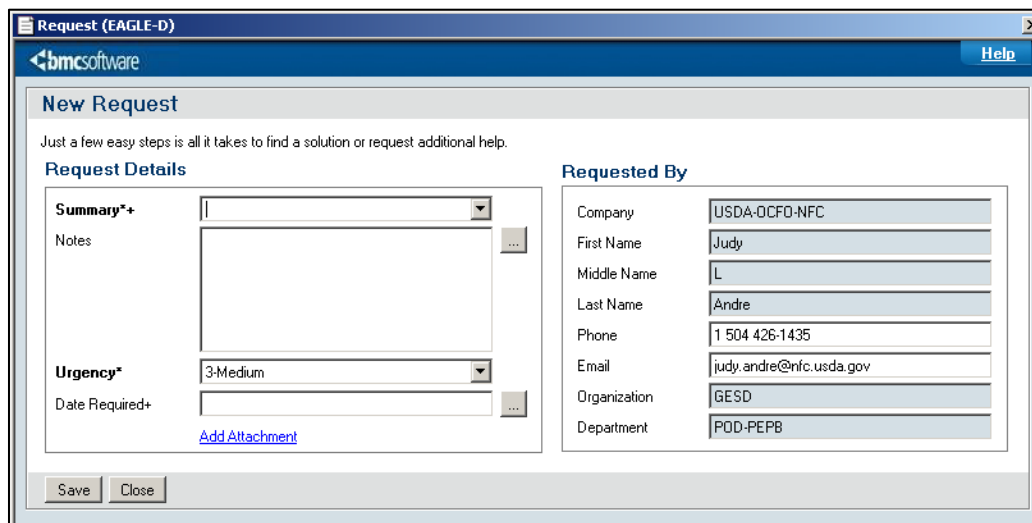


- Additional information can also be found on the TIPS website at <https://tips.nfc.usda.gov>

A screenshot of the TIPS (Tribal Insurance Processing System) website. The header includes the TIPS logo and the text "TRIBAL INSURANCE PROCESSING SYSTEM". Navigation links for "Home", "About TIPS", and "About NFC" are present. A "Sign up for email notifications" link is also visible. The main content area features a "Process Enrollments" link, a "Review Billings" link, a "Generate Reports" link, and a "TIPS Login" button. A "Click here for full Calendar View" link is also present. A "TIPS Calendar of Events" for March 2012 is displayed, showing dates from 26 to 31. A "System Status" box indicates that the TIPS application is now live and ready for use. A "Training" section includes links for "Curriculum", "Materials", "eLearning", and "Schedule". A "Contact Center" section provides contact information for the TIPS Contact Center, including a phone number (855-NFC-4GOV) and hours of operation (8:00 a.m. - 4:00 p.m. Monday-Friday). A "Security" section includes a link for "Requesting Access and Password Assistance". A "Resources" section includes links for "SF-2809 Employee Health Benefits Election Form", "SF-2810 Notice of Change in Health Benefits Enrollment", "OPM Program Materials", and "OPM Training Materials". A "Tips Users" section includes a link for "Requesting Access and Password Assistance". A "Tribal Security Officers (TSOs) Resources" section is also present. A "Requester Console" box includes a "Login" button. The footer contains links for "Home", "OPM", "Site Map", "COOP", "Accessibility Statement", "Privacy Policy", "Non-Discrimination Statement", "FOIA", and "Information Quality".

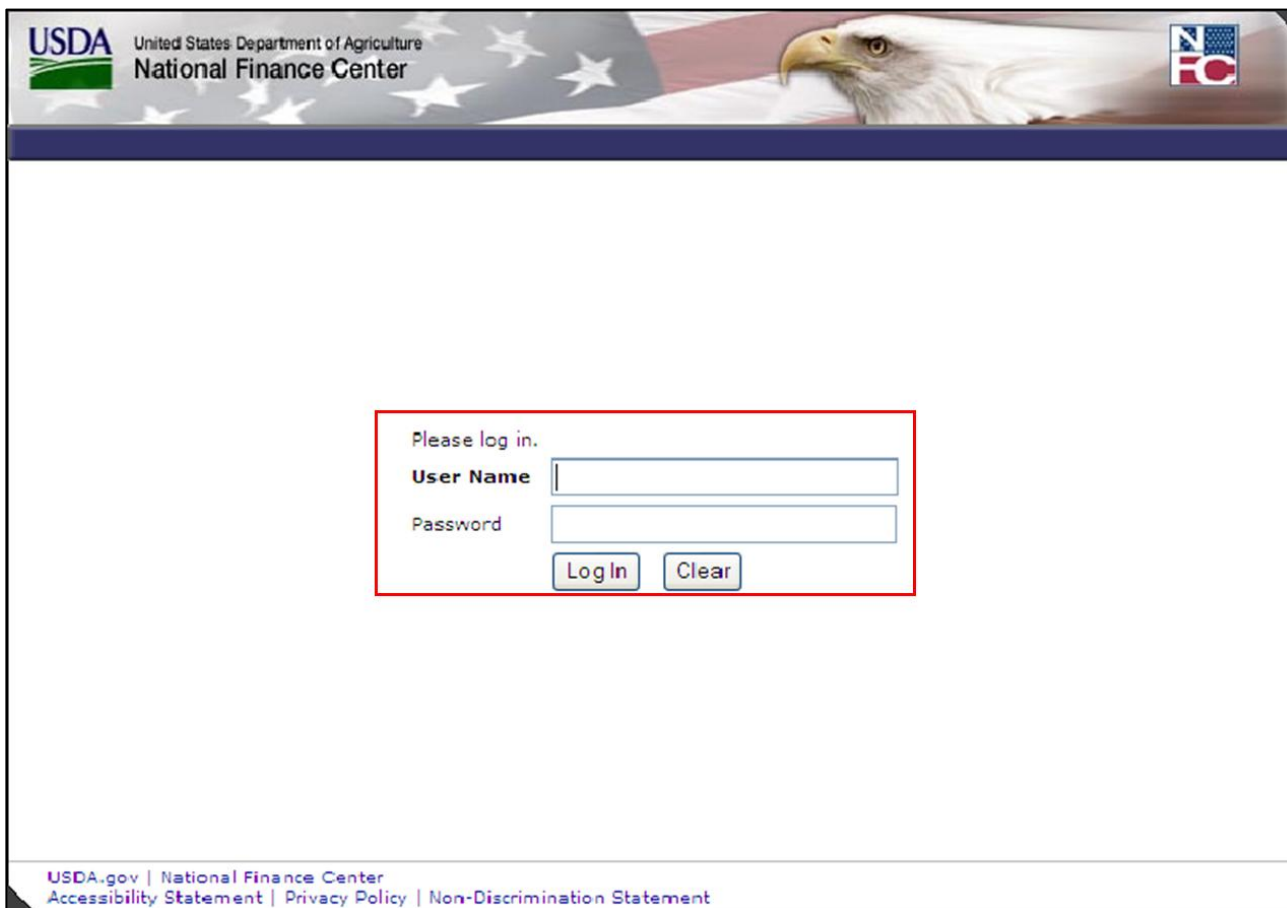
About the Remedy Requester Console

- Remedy Requester Console allows Tribal Employers to:
 - Submit new requests
 - Specify urgency and the date by which a solution is needed
 - Specify the nature of their requests for quicker resolution
 - Attach files related to their requests
 - View the status of their requests

The screenshot shows a web application window titled "Request (EAGLE-D)". The window has a blue header bar with the "bmcsoftware" logo on the left and a "Help" button on the right. The main content area is titled "New Request" and includes a sub-header "Request Details". Below this, there are several input fields: "Summary*+" with a dropdown menu, "Notes" with a text area, "Urgency*" with a dropdown menu set to "3-Medium", and "Date Required+" with a text area. There is also a link labeled "Add Attachment". To the right of these fields is a section titled "Requested By" which contains a form with fields for "Company" (USDA-DCFO-NFC), "First Name" (Judy), "Middle Name" (L), "Last Name" (Andre), "Phone" (1 504 426-1435), "Email" (judy.andre@nfc.usda.gov), "Organization" (GESD), and "Department" (POD-PEPB). At the bottom of the window are "Save" and "Close" buttons.

Creating a Request in Remedy

1. Open the Remedy web portal and log in with username



The screenshot shows the login page of the USDA National Finance Center. The header features the USDA logo, the text "United States Department of Agriculture National Finance Center", and a bald eagle. A red box highlights the login form, which includes the text "Please log in.", "User Name" with a text input field, "Password" with a text input field, and "Log In" and "Clear" buttons. The footer contains links to "USDA.gov", "National Finance Center", "Accessibility Statement", "Privacy Policy", and "Non-Discrimination Statement".

USDA United States Department of Agriculture National Finance Center

Please log in.

User Name

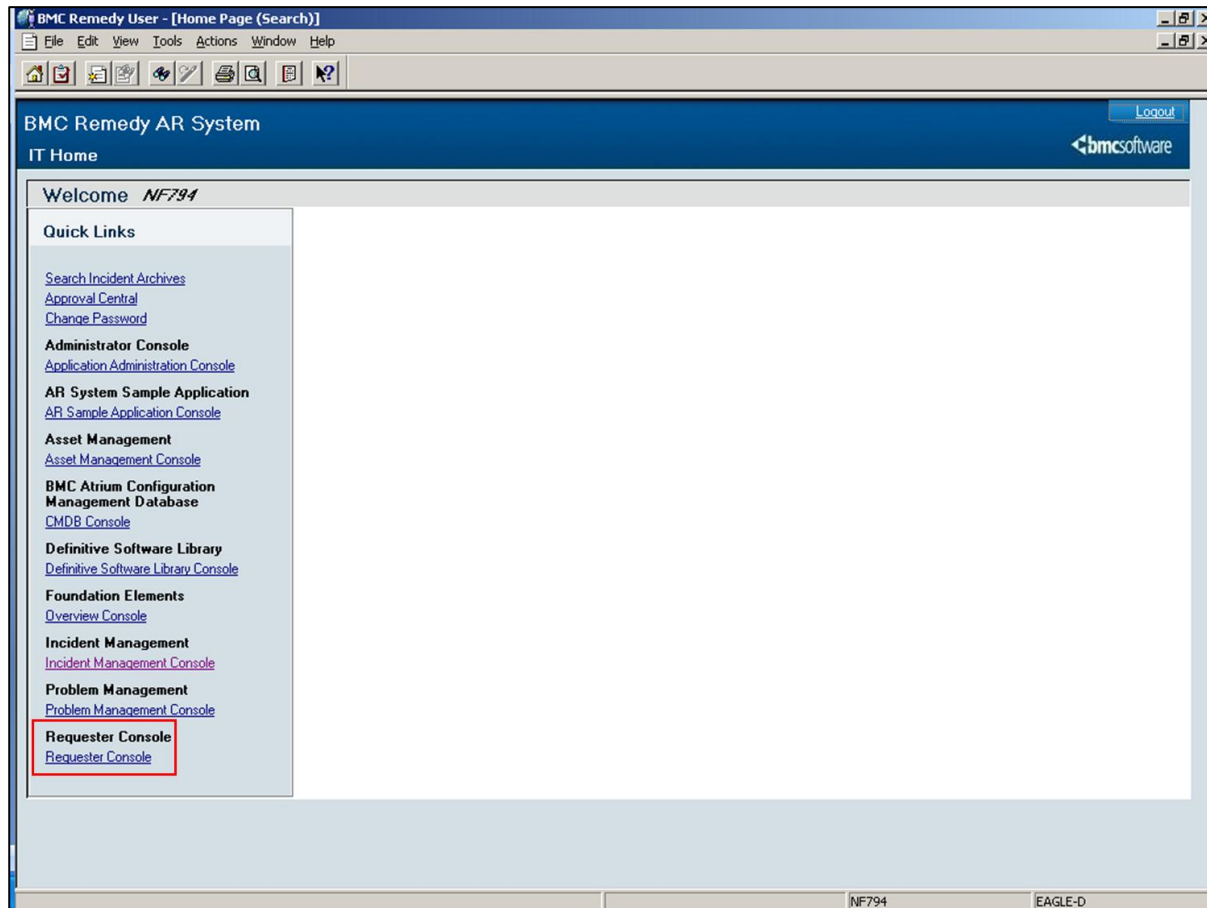
Password

Log In Clear

USDA.gov | National Finance Center
Accessibility Statement | Privacy Policy | Non-Discrimination Statement

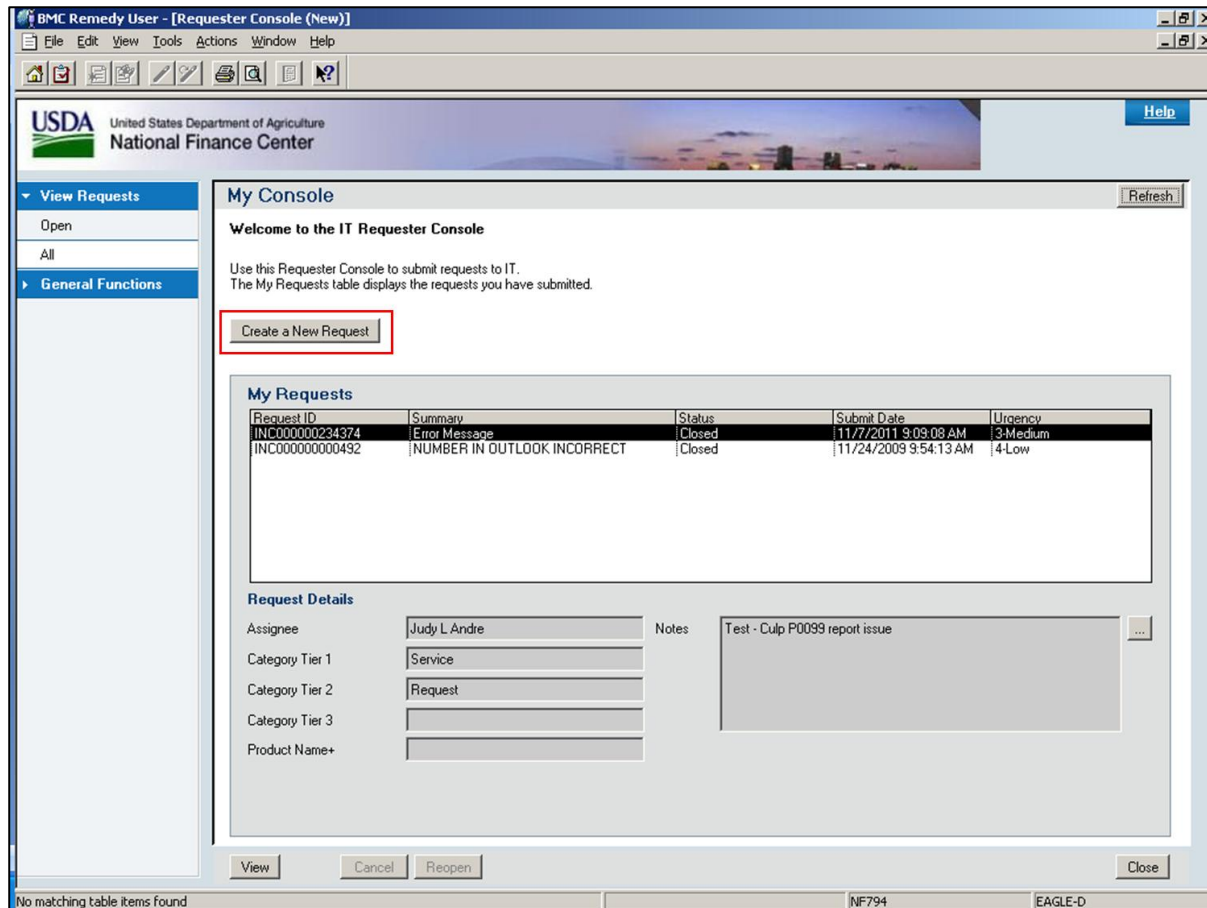
Creating a Request in Remedy (cont.)

2. Select Requester Console from the bottom of the menu on the left-hand side of the homepage



Creating a Request in Remedy (cont.)

- Once in the Requester Console select the Create a New Request button located at the top of the page



BMC Remedy User - [Requester Console (New)]

File Edit View Tools Actions Window Help

USDA United States Department of Agriculture
National Finance Center

Help

View Requests

- Open
- All
- General Functions**

My Console Refresh

Welcome to the IT Requester Console

Use this Requester Console to submit requests to IT.
The My Requests table displays the requests you have submitted.

Create a New Request

My Requests

Request ID	Summary	Status	Submit Date	Urgency
INC0000000234374	Error Message	Closed	11/7/2011 9:09:08 AM	3-Medium
INC000000000492	NUMBER IN OUTLOOK INCORRECT	Closed	11/24/2009 9:54:13 AM	4-Low

Request Details

Assignee: Judy L Andre

Category Tier 1: Service

Category Tier 2: Request

Category Tier 3:

Product Name+:

Notes: Test - Culp P0099 report issue

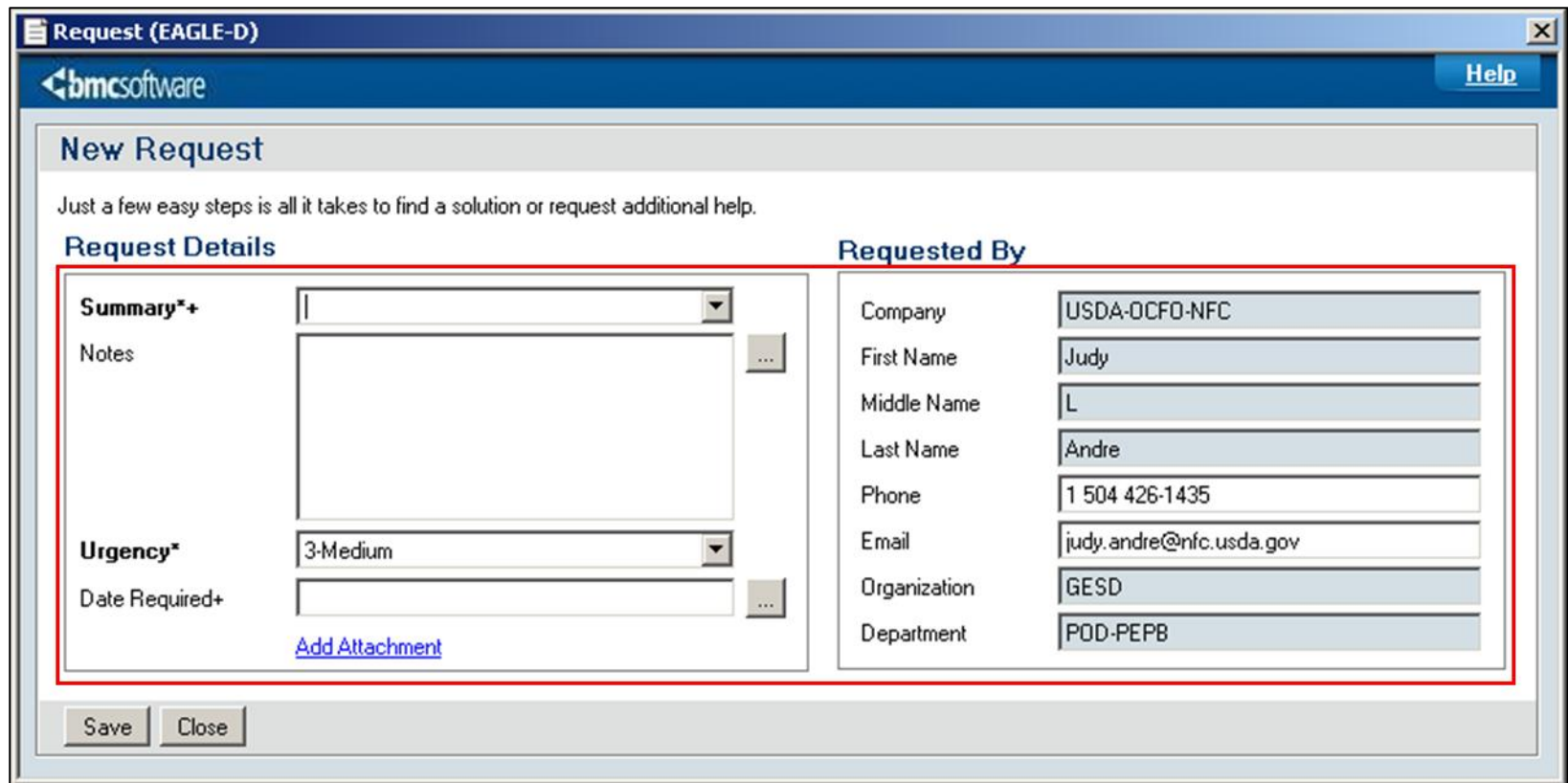
View Cancel Reopen Close

No matching table items found

NF794 EAGLE-D

Creating a Request in Remedy (cont.)

- Describe the type of inquiry, additional information about the inquiry, its urgency, the required date of resolution, and your contact information



Request (EAGLE-D)

New Request

Just a few easy steps is all it takes to find a solution or request additional help.

Request Details

Summary*+ [Dropdown]

Notes [Text Area]

Urgency* [3-Medium]

Date Required+ [Text Field]

[Add Attachment](#)

Requested By

Company [USDA-OCFO-NFC]

First Name [Judy]

Middle Name [L]

Last Name [Andre]

Phone [1 504 426-1435]

Email [judy.andre@nfc.usda.gov]

Organization [GESD]

Department [POD-PEPB]

Save **Close**

Creating a Request in Remedy (cont.)

5. Click Save

Request (EAGLE-D)

bmcsoftware [Help](#)

New Request

Just a few easy steps is all it takes to find a solution or request additional help.

Request Details

Summary*+

Notes

Urgency* 3-Medium

Date Required+

[Add Attachment](#)

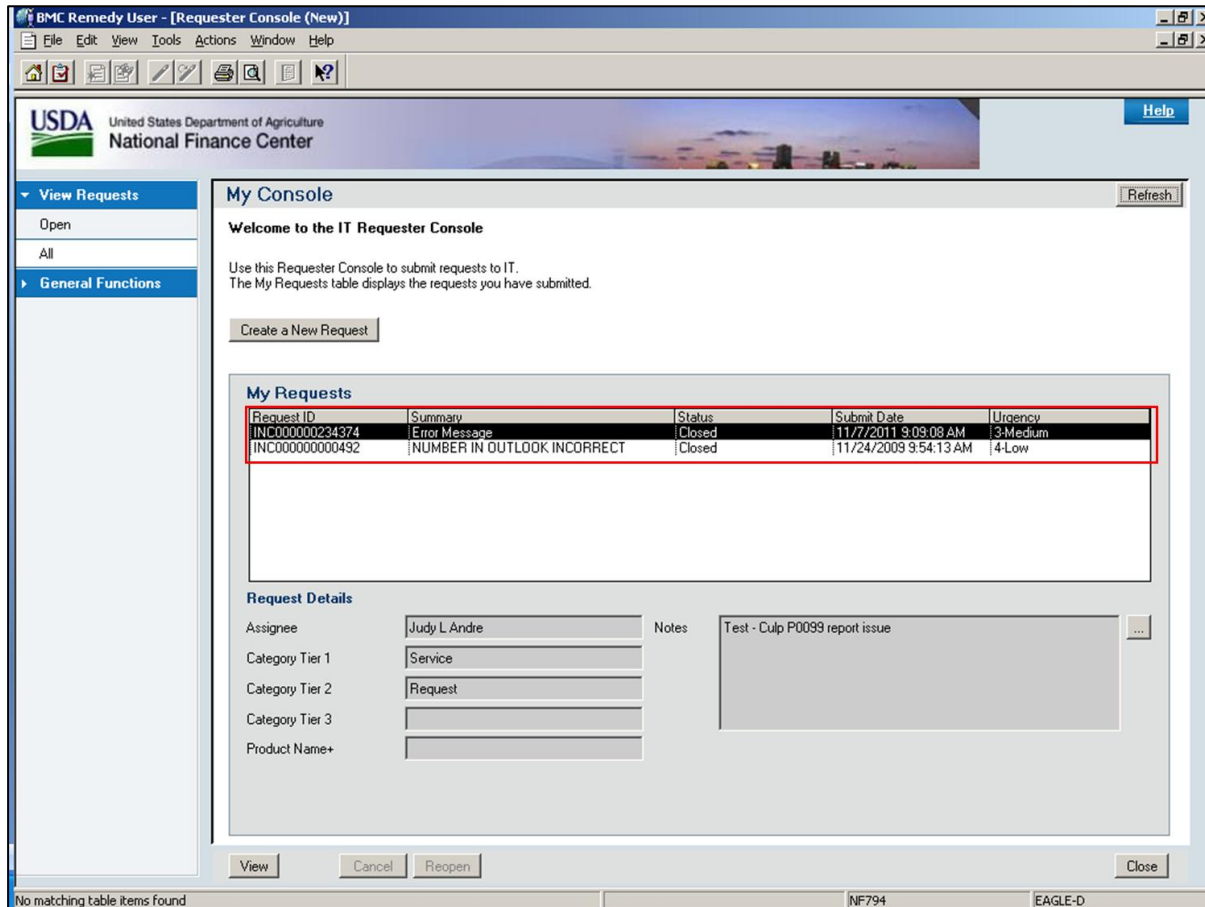
Requested By

Company	USDA-OCFO-NFC
First Name	Judy
Middle Name	L
Last Name	Andre
Phone	1 504 426-1435
Email	judy.andre@nfc.usda.gov
Organization	GESD
Department	POD-PEPB

Save **Close**

Creating a Request in Remedy (cont.)

6. Check to make sure your request is now listed in the Requester Console



BMC Remedy User - [Requester Console (New)]

File Edit View Tools Actions Window Help

USDA United States Department of Agriculture
National Finance Center

View Requests

- Open
- All
- General Functions**

My Console [Refresh](#)

Welcome to the IT Requester Console

Use this Requester Console to submit requests to IT.
The My Requests table displays the requests you have submitted.

[Create a New Request](#)

My Requests

Request ID	Summary	Status	Submit Date	Urgency
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Request Details

Assignee: Judy L Andre

Category Tier 1: Service

Category Tier 2: Request

Category Tier 3:

Product Name+:

Notes: Test - Culp P0099 report issue

[View](#) [Cancel](#) [Reopen](#) [Close](#)

No matching table items found

NF794 EAGLE-D

Incident Statuses

- Once a request is submitted in Remedy, it becomes an Incident and is assigned on these statuses:

Incident Status	Description
New	Requested but not yet been assigned
Pending	Required info/hardware/software/documentation is necessary
Assigned	Assigned to a group for resolution
In Progress	Assigned to an individual and is being worked on
Resolved	Completed
Canceled	Canceled by the Requester
Closed	Closed and is no longer active

Lesson 6 Knowledge Check

1. Who can resolve inquiries regarding coverage plans?
 - FEHB Plan Carrier Call Centers
2. Who can resolve billing and technical inquiries?
 - NFC Contact Center
3. Who can assist with inquiries regarding navigation of the TIPS system?
 - NFC Contact Center
4. Who can resolve questions regarding policy inquiries?
 - OPM
5. Who can resolve inquiries regarding TIPS Username Setup and Security Inquiries
 - Your Tribal Security Officer

Lesson 6 Summary

- Now that you have completed this lesson, you should be able to:
 - Describe the standard Tribal Employer inquiries
 - Demonstrate an understanding of the types of inquiries handled by NFC and other external organizations
 - Demonstrate how to navigate the TIPS website
 - Submit an inquiry using the Remedy Requester Console

TIPS Transactions References



Lesson 1: FEHB Overview	30 minutes
Lesson 2: TIPS and Enrollments	45 minutes
Break	10 minutes
Lesson 3: Billing and TIPS Reports	45 minutes
Morning Review	20 minutes
Lunch	60 minutes
Lesson 4: Special Transactions	30 minutes
Lesson 5: Performing Transactions in TIPS	90 minutes
Break	10 minutes
Lesson 6: Obtaining Additional Assistance	30 minutes
TIPS Transactions References	10 minutes
Final Review and Evaluation	35 minutes

TIPS Transactions References

- Instructions on completing the TIPS activities listed below can be found in the Participant Guide:
 - Creating new SF 2809s in TIPS
 - Creating SF 2810s in TIPS
 - Electronic Upload Process
 - Managing Contacts in TIPS
 - Billing Functionality Guide

Final Review and Evaluation



Lesson 1: FEHB Overview	30 minutes
Lesson 2: TIPS and Enrollments	45 minutes
Break	10 minutes
Lesson 3: Billing and TIPS Reports	45 minutes
Morning Review	20 minutes
Lunch	60 minutes
Lesson 4: Special Transactions	30 minutes
Lesson 5: Performing Transactions in TIPS	90 minutes
Break	10 minutes
Lesson 6: Obtaining Additional Assistance	30 minutes
TIPS Transactions References	10 minutes
Final Review and Evaluation	35 minutes

Final Review

- The class will be asked a series of 15 questions that cover all material reviewed today
- Once the facilitator has finished reading each statement
 - Raise your hand if you know the correct answer



Final Review – Question 1



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

Tribal Benefits Officer, Tribal Security Officer, and Authorized Maintenance Contact

Final Review – Question 2



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

Electronic Upload process

What are the four primary functions of TIPS?

1. Enrollments
2. Billing Reports
3. TIPS Reports
4. Special Transactions

Final Review – Question 4



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

Tribal Employer Billing Unit/POI

Final Review – Question 5



The Final Billing Report closes at this time each month.

11:59 PM MST on the last calendar day of the month

Final Review – Question 6



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

OPM

Final Review – Question 7



**TIPS Reports can be viewed in either
_____ or _____.**

The TIPS Web Portal (Online) or in
Microsoft Excel

Final Review – Question 8



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

Tribal Security Officer (TSO)

Final Review – Question 9



In TIPS, which tab would you select in order to Create an initial 2809?



Forms

Final Review – Question 10



In TIPS, which tab would you select in order to Create a 2810?



Inquiry

Final Review – Question 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?

Submitted and Released

Final Review – Question 12



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

The “Hold” button

Final Review – Question 13



What fields can you search by when performing an Inquiry in TIPS?

Name (first, middle, and last) and
Social Security Number

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

Overall 2809/2810 Report

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

First Name, Last Name, Social Security Number

Final Review – Question 16



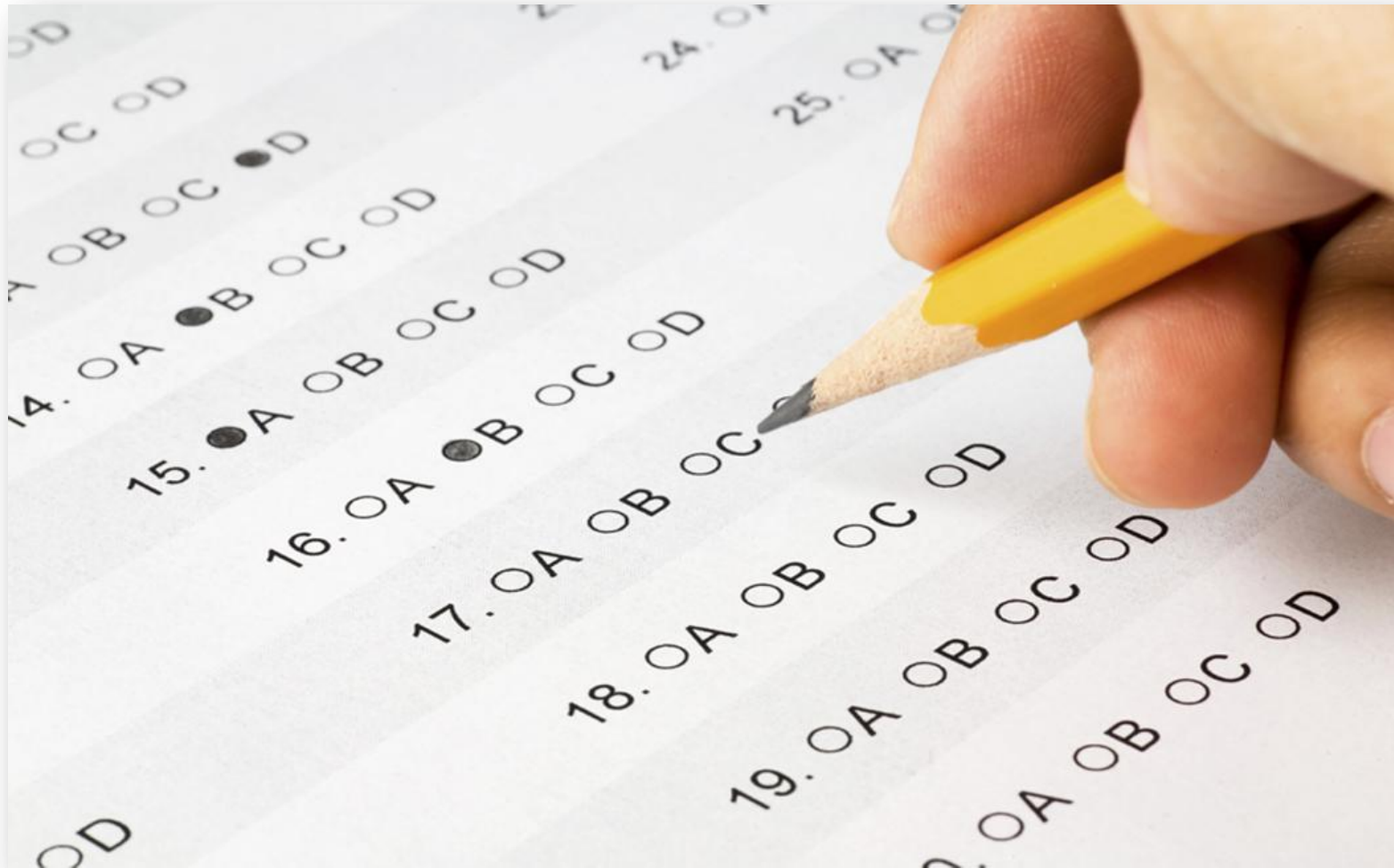
What is the TIPS NFC website URL?

<https://tips.nfc.usda.gov>

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 Remedy Requester Console

Evaluation





Thank you!