

PEBB Insurance Accounting Manual

Institutions of Higher Education

Institutions of Higher Education	1
2025 Schedule for HE to download Billing File	3
Health Care Authority (HCA) Billing Cycle Example	3
Final Billing File Calculation Formula	4
Sample Higher Ed Process Dates	4
Sample for February 2025	4
2024 Carrier Codes	5
HCA Reports Format	6
Daily Reports	7
Using the Daily Eligibility Update Report and Daily Adjustment report	7
Daily Eligibility Update Report	8
Daily Adjustment Report	9
Daily Transfer Hold Forwarding Report	10
Monthly Reports	11
Using the Monthly Eligibility Update and Adjustment Reports	11
Monthly Eligibility update Report	11
Monthly Adjustment Report	11
Monthly Transfer Hold Forwarding Report	
Reminders	12
Submit a secure question	

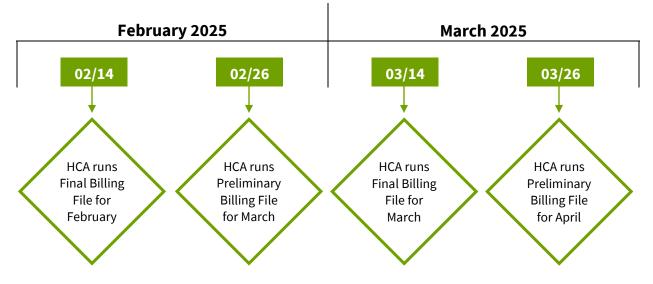
2025 Schedule for HE to download Billing File

Jobs M2371111 and M2471111 Updated 10/15/2024

Files are available around 10:00pm on the download date.

Coverage month	Preliminary billing file creation date (Cycle 2)	Final billing file creation date (Cycle 0)
January 2025	12/26/2024	01/15/2025
February 2025	01/27/2025	02/14/2025
March 2025	02/26/2025	03/14/2025
April 2025	03/26/2025	04/15/2025
May 2025	04/28/2025	05/15/2025
June 2025	05/27/2025	06/13/2025
July 2025	06/26/2025	07/15/2025
August 2025	07/28/2025	08/15/2025
September 2025	08/26/2025	09/15/2025
October 2025	09/26/2025	10/15/2025
November 2025	10/27/2025	11/14/2025
December 2025	11/25/2025	12/15/2025
January 2026	12/26/2026	

Health Care Authority (HCA) Billing Cycle Example



2025 PEBB Insurance Accounting Manual Institutions of Higher Education: October 2024

Final Billing File Calculation Formula

Final Billing File = Preliminary Invoicing File + Daily **Eligibility** Updates (since preliminary file process) + Daily **Adjustment** Updates (since preliminary file process)

Sample Higher Ed Process Dates

Note: If you are an employer that is using Benefits 24/7 for entering eligibility changes, due to the interface timing between Benefits 24/7 and PAY1, an extra processing day should be considered for understanding when you will see the eligibility change on your invoice. Using the February coverage month example below, eligibility changes tentered through midnight on 1/23/25 would appear on the February 2025 invoice. Eligibility changes entered on 1/24/25 would not appear on your invoice until the March 2025 invoice.

Sample for February 2025

Date	Process			
01/16/25	Online changes for February processing period begin. See daily eligibility reports. (HRISDB5044-R04)	Preliminary file will reflect eligibility changes for Feb. 10 payroll which are keyed from		
01/27/25	 Cycle 2 invoicing for February runs Create preliminary file which is sent to CTC 	01-16-25 to 01-27-25.		
02/17/25	CTC produces HCA billing premium file (REPORT # CR5605) from preliminary file	Final invoicing file will reflect eligibility changes for Feb. 10		
02/10/25	Optional LTD – 1st half of EC Health for 2/25	which are keyed from 1-10-25		
02/17/25	Create final invoicing file which is sent to CTC	to 2-17-25.		
02/17/25	Online changes for March processing period begin. See daily eligibility reports. (HRISDB5044-R04)	Preliminary file will reflect eligibility changes for Mar. 10		
02/25/25	CTC produces HCA billing premium file (REPORT # CR5605) from final invoicing file	which are keyed from 2-15-25 to 3-13-25.		
02/25/25	Optional LTD – 2nd half EC Health + ER for 2/25			

2024 Carrier Codes

		Medical Plan Code	es					
Plan code	Wellness code	Plan name						
С	CW	Kaiser WA Classic						
C1	C1W	C1W Kaiser WA Sound Choice						
CV	CVW	Kaiser WA Value						
CHSA	CHSW	Kaiser WA CDHP						
D	DW	Kaiser Permanente	Classic					
DHSA	DHSW	Kaiser Permanente	Consumer Directed Health Plan (CDHP)					
MB		United Health Care	PEBB Balance					
MC		United Health Care	PEBB Complete					
U	UW	Uniform Medical Plan	Classic					
U1	U1W	Uniform Medical Plan	UMP Plus UW Medicine ACN					
U2	U2W	Uniform Medical Plan	UMP Plus Puget Sound High Value Network (PSHVN)					
UHSA	UHSW	Uniform Medical Plan	Consumer Directed Health Plan (CDHP)					
US	USW	Uniform Medical Plan	UMP Select					
Z	No Plan Selected							
Dental Plan Codes								
Plan code	Plan name							
1	Uniform Dental Pla	n						
3	Willamette Dental Plan 2008							
4	DeltaCare							
9	No Plan Selected							
		Vision Plan Codes						
Plan code	Plan name							
Plan code T1P	Plan name Davis Vision							
T1P	Davis Vision							
T1P T2P	Davis Vision EyeMed							
T1P T2P T3P	Davis Vision EyeMed MetLife Vision	Other Plan Codes						
T1P T2P T3P	Davis Vision EyeMed MetLife Vision	Other Plan Codes						
T1P T2P T3P TZ	Davis Vision EyeMed MetLife Vision No Plan Selected Plan name	Other Plan Codes death and dismembermen						

2025 PEBB Insurance Accounting Manual Institutions of Higher Education: October 2024

HCA Reports Format

Your **AGY/AGY-SUB** is in the top left corner.

Employees are listed alphabetically by last name in the **NAME** column.

Next is the employee's **SSN**

BATCH NUMBER AND SEQUENCE# are assigned by the system and show the source of the adjustment

- **DLY** Daily eligibility updates (system generated)
- ADJ Adjustments made by Health Care Authority Accounts Auditors
- **INV** Invoicing (system generated)
- **XFE** Transfers (system generated)

The **TRAN DATE** is the date the transaction occurred and is the same as the run date for daily reports.

Daily Reports

Using the Daily Eligibility Update Report and Daily Adjustment report

These reports are produced nightly out of the daily invoicing process based on eligibility updates and manual adjustments that have been keyed throughout each day.

- In order to verify accurate accounting corrections, the following fields of the report should be checked when an account appears on the report:
 - Employee Name and SSN: Verify you have keyed or requested updates for all employees listed (this will only show if the eligibility changes resulted in accounting changes).
 If you keyed changes on additional employeesp[the changes did not affect the premium.
 Check with PEB Accounting if you think a change should have affected accounting.
 - Coverage Period: In YYMM format. Verify you have received accounting changes for each month.
 - Agency/Sub-Agency: Verify that only invoices/credits for your employees have been invoiced and/or credited and the correct sub-agency was keyed.
 - Amount: A negative sign ("-") after a dollar amount indicates a credit to your agency.
 - Carrier Premiums (Health and Dental): Verify the health and/or dental carrier codes are accurate.
 - Med EC: Verify that the appropriate carrier code and corresponding employee contribution has been properly credited and/or billed.
 Although this detail falls under "Carrier Premiums", it represents the amount your agency will be charged under "Employee Contributions".
 - Accts Rec ER: Verify that your agency is being credited and/or billed the appropriate employer amount. This amount listed is the combined total of the employer contribution plus the employee contribution.

If you identify any discrepancies or expected different charges, please contact PEB Accounting for a review of the transactions.

Daily Eligibility Update Report

REPORT NAME: Daily Eligibility Update Report by Agency

REPORT NUMBER: HRISDB5044-R04

DESCRIPTION: Shows daily eligibility updates made by the agency payroll offices, and/or HCA's eligibility department that resulted in

daily premium adjustments. The daily eligibility update report shows invoices and credits for each affected coverage period for each employee. Agencies should receive this report the day after changes affecting premiums have been

keyed for that agency/sub-agency.

1REPORT NO: HRISDB5044-R04 STATE OF WASHINGTON RUN DATE: 05/23/25

HEALTH CARE AUTHORITY PAGE 1

DAILY ELIGIBILITY UPDATE REPORT BY AGENCY

AGY/AGY-SUB: 107-

		BATCH		COV	TRAN	AGY-			
NAME	SSN	NBR	SEQ#	PER	DATE	SUB	AMC	OUNT TYPE	
ED, MISTER	XXX-XX-XXXX	DLY1017	184	2505	05/23/25	360		1,170.00	EMPLOYER BASIC
								110.00	EMPLOYEE MEDICAL CONTRIBUTION
								25.00	EMPLOYEE TOBACCO SURCHARGE
							TOTAL	1,305.00	
KIRK, JAMES T	XXX-XX-XXXX	DLY1017	162	2504	05/23/25	360		1,170.00-	EMPLOYER BASIC
							TOTAL	1,170.00-	
JETSON, GEORGE	XXX-XX-XXXX	DLY1017	215	2504	05/23/25	360		1,170.00-	EMPLOYER BASIC
								313.00-	EMPLOYEE MEDICAL CONTRIBUTION
							TOTAL .	50.00-	EMPLOYEE SPOUSAL SURCHARGE
							TOTAL	1,533.00-	
		YYMM	MM/	DD/YY					

2025 PEBB Insurance Accounting Manual Institutions of Higher Education: October 2024

Daily Adjustment Report

REPORT NAME: Daily Adjustment Report by Agency

REPORT NUMBER: HRISDB5044-R02

DESCRIPTION: Shows all manual adjustments made by PEB Accounting staff on a specific date. These adjustments could not be

made on-line and may have been requested through payroll offices or to correct erroneous invoicing. You will only

receive this report for days on which manual adjustments have been keyed by HCA for your agency.

USE: This report should be used to confirm that changes or adjustments have been processed by HCA.

1REPORT NO: HRISDB5044-R02 STATE OF WASHINGTON RUN DATE: 05/23/25

HEALTH CARE AUTHORITY PAGE 1

DAILY ADJUSTMENT REPORT BY AGENCY

AGY/AGY-SUB: 107-

		BATCH		COV	TRAN	AGY-			
NAME	SSN	NBR	SEQ#	PER	DATE	SUB	AMO	UNT TYPE	
SMITH, MARY	111-11-1111	ADJ05/25	463	2504	05/21/25	107		1,170.00-	EMPLOYER BASIC
								193.00-	EMPLOYEE MEDICAL CONTRIBUTION
							TOTAL	1,363.00-	
SMITH, JOHN	111-11-1111	ADJ05/25	464	2505	05/21/25	107		1,170.00	EMPLOYER BASIC
								193.00	EMPLOYEE MEDICAL CONTRIBUTION
								25.00	EMPLOYEE TOBACCO SURCHARGE
							TOTAL	1,388.00	
			AG	ENCY 107			TOTAL	25.00	
0							EMPLOYER TOTAL	25.00	
				EMPL	OYEE (OPTIO	NAL LIF	E AND LTD) TOTAL	.00	

Daily Transfer Hold Forwarding Report

REPORT NAME: Daily Transfer Hold Forwarding Report by Agency

REPORT NUMBER: HRISDB5044-R06

DESCRIPTION: Shows employee accounts which were in transfer-out status, and which had not been appointed by the new agency

by the next monthly invoicing cycle run date.

USE: If you have transferred an employee "out" to another college or state agency and the gaining agency hasn't

transferred them "in" yet, contact the agency to remind them to complete the transfer. All invoicing is suspended

until the transfer is completed by the gaining agency.

1REPORT NO: HRISDB5044-R06 STATE OF WASHINGTON RUN DATE: 02/16/25

HEALTH CARE AUTHORITY PAGE 1

DAILY TRANSFER HOLD FORWARDING RPT BY AGENCY

AGY/AGY-SUB: 107-

		BATCH		COV	TRAN	AGY-			
NAME	SSN	NBR	SEQ#	PER	DATE	SUB	AMO	JNT TYPE	
SMITH, JOE	222-22-2222	XFE0212	000	0919	02/16/25	107	TOTAL	1,170.00 110.00	EMPLOYER BASIC EMPLOYEE MEDICAL CONTRIBUTION
THOMAS, CARL	222-22-2222	XFE0212	000	0919	02/16/25	107	TOTAL	1,280.00 1,170.00 319.00	EMPLOYER BASIC EMPLOYEE MEDICAL CONTRIBUTION
							TOTAL	1,489.00	
			AG	ENCY 107			TOTAL	2,769.00	
0							EMPLOYER TOTAL	2,769.00	
				EMPL	OYEE (OPTIO	NAL LIF	E AND LTD) TOTAL	.00	

Monthly Reports

Using the Monthly Eligibility Update and Adjustment Reports

- Monthly Eligibility Update Report: This report is a compilation of all the Daily Eligibility Updates that have
 occurred since the last monthly report, and it can be used in conjunction with your Monthly Adjustment Report to
 audit your monthly invoicing for accuracy.
- Monthly Adjustment Report: This report is a compilation of the manual accounting adjustments that have
 occurred since the last monthly report, and it can be used in conjunction with your Monthly Eligibility Update
 Report to audit your monthly invoicing for accuracy.

Monthly Eligibility update Report

REPORT NAME: Monthly Eligibility Update Report by Agency

REPORT NUMBER: HRISDB5044-R14

DESCRIPTION: This report is an accumulation of all daily eligibility updates keyed on-line throughout the period.

TIMING: Produced around the 22nd of each month (not produced if no changes keyed).

Monthly Adjustment Report

REPORT NAME: Monthly Adjustment Report by Agency

REPORT NUMBER: HRISDB5044-R12

DESCRIPTION: This report is an accumulation of all daily adjustments keyed on-line throughout the period.

TIMING: Produced around the 22nd of each month (not produced if no changes keyed).

Monthly Transfer Hold Forwarding Report

REPORT NAME: Monthly Transfer Hold Forwarding Report by Agency

REPORT NUMBER: HRISDB5044-R16

DESCRIPTION: This report includes all information reported on the Daily Transfer Hold Forwarding Reports by

Agency for the period.

Reminders

- **Please read your reports carefully**. What appears to be a double invoice may be invoicing for prior month(s) and current month. The coverage period field will indicate the month(s) which are invoiced for each employee.
- Eligibility problems should be addressed to PEBB Outreach and Training using HCA Support
 PEB Accounting cannot assist you with eligibility problems.
- If the employee's eligibility is correct but the billing is incorrect, you should contact PEB Accounting using HCA Support.

Submit a secure question

To submit a secure question to PEB Accounting or the Outreach and Training unit, go to the PEBB benefits administrators website and click on HCA Support (submit a question).