



2026

Employment Status

 *North Carolina*
State Health Plan
FOR TEACHERS AND STATE EMPLOYEES
A Division of the Department of State Treasurer



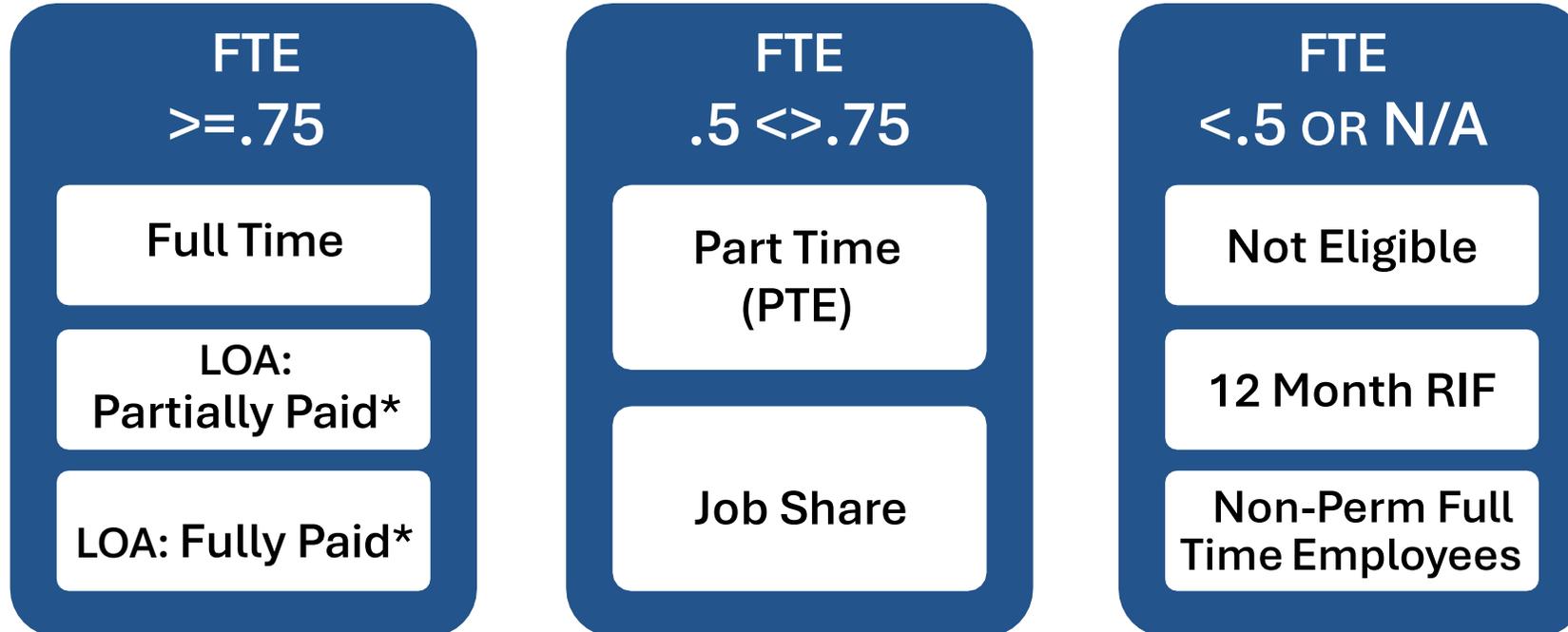
Employment Status Maintenance

Each group will need to ensure that employment statuses are updated in eBenefits in a timely manner for the correct enablement functionality and best member experience.

	STATUS DESCRIPTION	GROUP PAYS EMPLOYER AMOUNT	GROUP COLLECTS EMPLOYEE AMOUNT
PAYROLL DEDUCT	Full Time (Default)	Yes	Yes
	Part Time	No	Yes
	Job Share	50%	50% + EE Cost
DIRECT BILL	RIF	Yes	No
	Non-Perm Full Time		
	Non-Perm Full Time Retiree		
	Leave of Absence (Partially Paid)		
	Leave of Absence (Fully Paid)	No	No

Employee Categorization

Each group is responsible for determining the employment status of their members. This is typically how employees map to Employment Statuses:



*Does not refer to research/scholarly leave.

Updating Employment Statuses for Payroll

Payroll groups should send employment statuses on their demographic files to Benefitfocus per the group's specific requirements.

Payroll Demographic Member Detail Record						
Position	Data Element Name	Required/Optional/Situationally Required	Maximum Length	Type	Description of Field	Custom Requirements
					<i>the ability to default to the system date when a change is identified by the Benefitfocus processor. User should not default all records on every file.</i>	If multiple category changes have occurred on different dates between file transmissions, the date of the Employment Status Category change s/b used as the Category Effective Date for all the changes on next applicable file
52 (AZ)	Custom Category Type 1	Required	50	Alphanumeric	Reference the CRD for these values. <i>Note: This value will be consistent for every record. It is case sensitive and must appear exactly as it is defined in the enrollment system.</i>	Send "Employment Status Category"
53 (BA)	Custom Category Value 1	Required	50	Alphanumeric	Reference the CRD for these values. <i>Note: This value will be a unique identifier for each record, defining the value for the previous field. It is case sensitive and must appear exactly as it is defined in the enrollment system.</i>	See Categories for values Will default to "Payroll Deduct: Full Time" if no value is sent

Employment Status Category
Direct Bill: LOA - Fully Paid
Direct Bill: LOA - Partially Paid
Direct Bill: Non-Perm Full Time
Direct Bill: Non-Perm Full Time (Retirees)
Direct Bill: Reduction in Force (RIF)
Not Eligible
Payroll Deduct: Full Time
Payroll Deduct: Job Share
Payroll Deduct: Part Time
Payroll Deduct: Part Time ER ACA

NOTE: Your group's data element name and specific position within the payroll file may vary.

Updating Employment Status

Any benefits not enabled under the new employment status will be canceled as of the day before the effective date, and the new benefits will then display.

Change Categories

Effective Date of Category Change 02/09/2024

New Categories

- Classification Full-Time
- Employment Status Category Direct Bill: Non-Perm Full Time (changed from: Payroll Deduct: Full Time)

Benefits to be Cancelled

2024 SHP Medical

Medical : Base PPO Plan (70/30)

02/29/2024

New Plans Available For

- 2024 SHP Medical

Cancel without Saving

Save

Now Eligible For

- 2024 NCFlex Flexible Spending Accounts
- 2024 NCFlex Accident Plan
- 2024 NCFlex Cancer
- 2024 NCFlex Critical Illness
- 2024 NCFlex Dental
- 2024 NCFlex Vision
- 2024 NCFlex Group Term Life
- 2024 NCFlex Accidental Death and Disme
- 2024 Voluntary Disability
- 2024 NCFlex Tricare Supplement

New Plans Available For

- 2024 SHP Medical

Updating Employment Status

Members will then be able to elect the coverage they want based on the benefits their status makes them eligible for.

2024 SHP Medical

Wait Period 01/11/2024 - 02/01/2024

Initial Enrollment 02/09/2024 - 02/10/2024

Start

[Decline this benefit](#)

[HBR View](#)

Important Messages for You



You have new benefits being offered to you:

You have 30 days to elect your Current Enrollment benefits.

[Get started >](#)

[Member View](#)

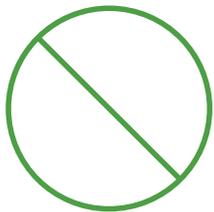
If no eligibility changes, this message will appear, and no further action is needed:

The Category Change did not affect the employee's benefit enrollment. Therefore, you do not need to re-enroll this employee in new benefits.

Movement Rules

Changes that **ARE NOT ALLOWED:**

- Temp Full Time to RIF
- Temp Full Time to LOA
- Not Eligible to RIF
- Not Eligible to LOA
- RIF to LOA
- Temp Full Time to Temp Full Time Retiree



Changes that **OPEN A NEW ELIGIBILITY WINDOW:**

- LOA to Full Time
- RIF to Full Time
- Temp to Full Time
- Not Eligible to Temp
- Not Eligible to Full Time

Changes that **USE THE FOLLOWING LIFE EVENTS WILL GENERATE A COBRA OFFER:**

- Reduction in Hours
- Leave of Absence*
- Did Not Meet Medical Eligibility Requirements

*if any coverage cancels



Movement Grid

		After							
		Full Time	Temp FT	Temp FT Retiree	RIF	LOA	Part Time	Job Share	Not Eligible
Before	Full Time				✓	*			
	Temp FT					✓			
	Temp FT Retiree					✓			
	RIF	✓	✓	✓			✓	✓	
	LOA				✓				
	Part Time					✓			
	Job Share					✓			
	Not Eligible								

- Not Allowed
 - COBRA Notice

✓ - Allowed but Manual
 - Opens Eligibility Window

*Any termination while in a LOA status will generate a COBRA offer.

Employment Status Maintenance

Members can pay online at www.mydirectbill.info

LOGIN: account number (without CG)

PASSWORD: last 4 digits of their SSN

If full payment is not received by the **GRACE PERIOD END DATE**, the member will be terminated for nonpayment back to the last day coverage was fully paid for. Any partial payments will be refunded.

Members should mail payments to:

North Carolina State Health Plan
Attention: Direct Bill Premium Payments
PO Box 505211
St. Louis, Missouri 63150

North Carolina State Health Plan
FOR TEACHERS AND STATE EMPLOYEES
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Visit our website at <http://www.mydirectbill.info>
Login: [REDACTED]
Password: < last 4 digits of SSN >
Need Help? Call our Direct Bill Member Hotline at (817) 679-6272

Direct Bill Continuation Coverage Invoice

Invoice Date: 03/12/2018
Account Number: CG [REDACTED]
Total Amount Due: \$85.00

Pay online

IMPORTANT: This is a monthly invoice for your continuation of healthcare coverage. The table below shows the coverage period(s) currently due with the premium amount(s) and due date(s). Premium payments must be postmarked on or before the corresponding grace period end date to be valid.

Payment Period	Premium Amount	Credit/Subsidy	Amount Due	Due Date	Grace Period End Date
04/01/2018 - 04/30/2018	\$85.00	\$0.00	\$85.00	04/01/2018	04/30/2018

\$85.00 is the total amount due.

Coverage will be cancelled if valid premium payments are not postmarked on or before the Grace Period End Date as shown above. If coverage is cancelled for non-payment of premium, reinstatement of coverage is not permitted until the next open enrollment period. No partial payments or late payments will be accepted. Acceptance of payments by ITEDIUM, as collection agent for State Health Plan, is without prejudice and with reservation of all rights. You may be eligible to convert your group health coverage. For more information on the Plan's Policy and Procedure on Arrears, visit www.shpnc.org.

Save Time, Postage & Ensure No Late Benefit Continuation Payments by Enrolling in Electronic Premium Payment Service!
visit www.mydirectbill.info to sign up today.

BENEFIT CONTINUATION PREMIUM PAYMENT REMITTANCE COUPON

Please Make Checks Payable To **North Carolina State Health Plan**

AMOUNT ENCLOSED
\$

IMPORTANT: (Box A) Check here if your name or address has changed, and complete Section A on the reverse side.

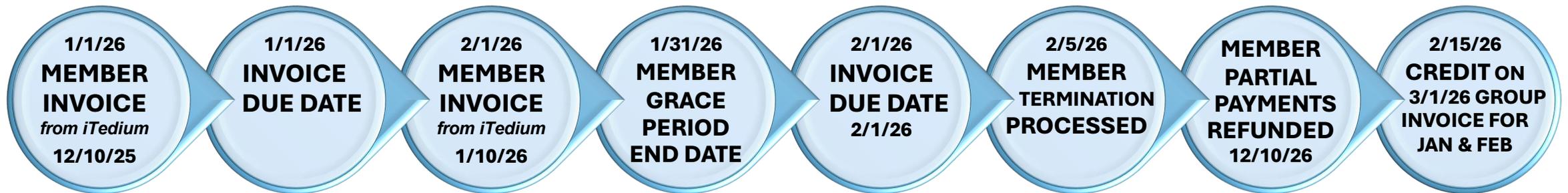
North Carolina State Health Plan
Attention: Direct Bill Premium Payments
PO Box 505211
St. Louis, Missouri 63150

Account Details
Account Number: CG [REDACTED]

ITEDIUM

Member Nonpayment Timeline

Members claims will continue to pay if the group is paying 100% of the invoice.
If the member does not pay and is retroactively terminated, they will be responsible for any claims paid during that time.



Group Invoice Changes Timeline





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Example Scenarios

Example #1.

I am an active employee that:

- Started a permanent position a week ago
- Works 40 hours a week

What could my employment status be?

- Payroll Deduct: **FULL TIME**



Example #2.

I am a retired employee that:

- Came back to work temporarily
- Works between 30 – 36 hours a week

What could my employment status be?

- Direct Bill: **NON-PERM FULL TIME (RETIREE)**



Example #3.

I am an employee that:

- Is currently on leave awaiting a disability determination
- Have exhausted paid leave

What could my employment status be?

- Direct Bill: **LOA - FULLY PAID**



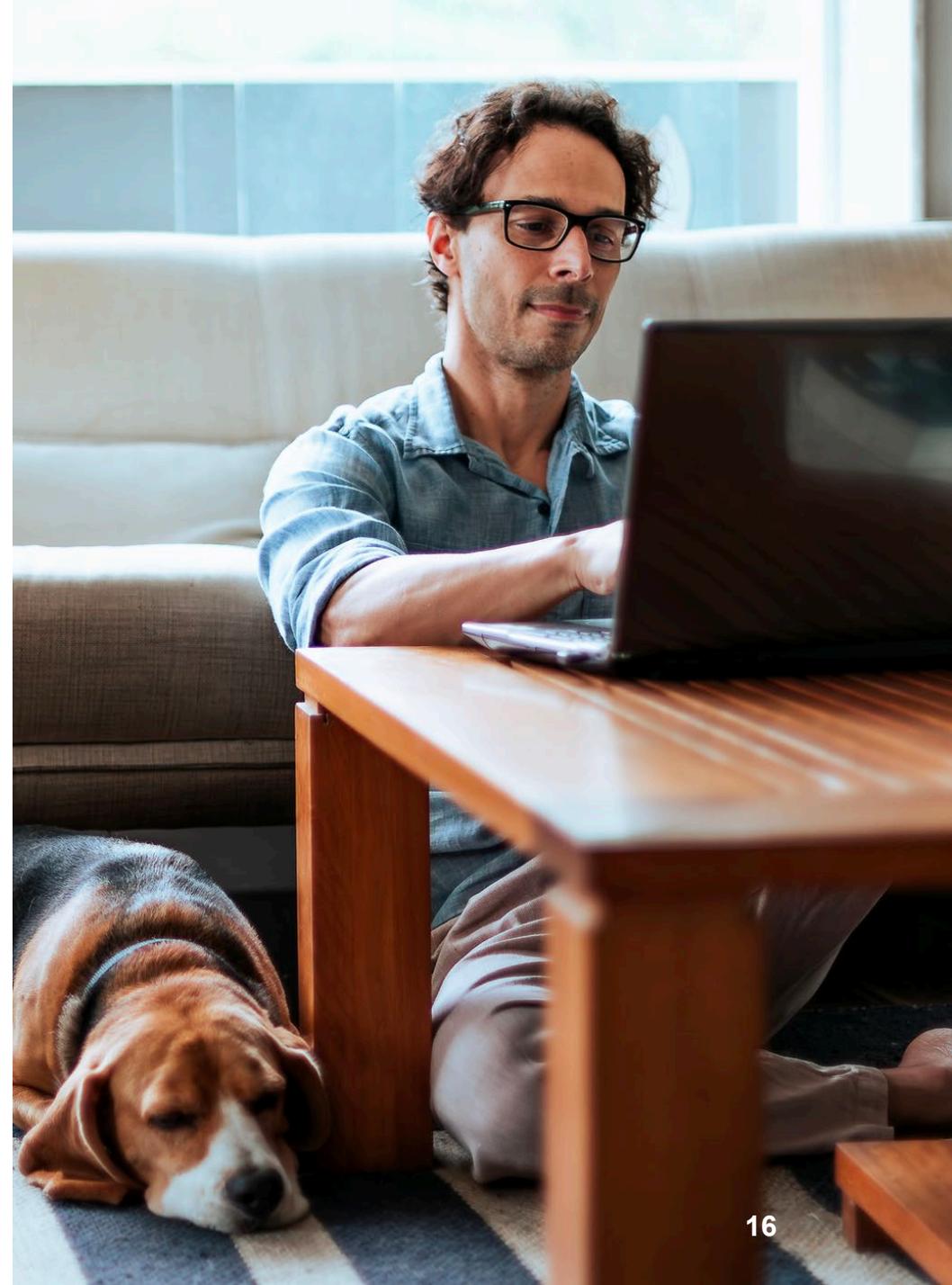
Example #4.

I am a permanent employee that:

- Voluntarily reduced my hours; and now work 25 hours a week

What could my employment status be?

- Payroll Deduct: **PART TIME**



Example #5.

I am an employee that:

- Is currently on extended maternity leave with pay

What could my employment status be?

- Direct Bill: **LOA – PARTIALLY PAID**



Example #6.

I am an employee that:

- Lost my permanent job due to lack of funding
- Previously worked 40 hours a week
- Accepted a full-time temporary job at the same employing unit until funding is received

What could my employment status be?

- Direct Bill: **REDUCTION IN FORCE (RIF)**
- Direct Bill: **NON-PERM FULL TIME**



Example #7.

I am an employee that:

- Lost my permanent job due to lack of funding
- Previously worked 40 hours a week

What could my employment status be?

- Direct Bill: **REDUCTION IN FORCE (RIF)**



Example #8.

I am an employee that:

- Is temporary and working one day a month

What could my employment status be?

- **NOT ELIGIBLE**

