#### OFFICE OF THE STATE COMPTROLLER

HEALTHCARE COST CONTAINMENT COMMITTEE



HEALTHCARE POLICY & BENEFIT SERVICES DIVISION 165 CAPITOL AVENUE HARTFORD, CT 06106-1775

PHONE: (860) 702-3480 • FAX: (860) 702-3556

## DIVISION MEMORANDUM 2022-05

#### September 12, 2022

## TO THE HEADS OF ALL STATE AGENCIES

ATTENTION: Personnel and Payroll Officers, Chief Administrative and Fiscal Officers and Business Managers

SUBJECT: Group Life Insurance Increases, October 1, 2022

## I. INTRODUCTION

All employees insured under the Group Life Insurance Plan pursuant to Section 5-257 of the General Statutes, whose yearly gross compensation rate is increased on or before October 1, 2022 will have an increase in their insurance in accordance with the attached schedules of insurance.

Note that Core-CT Benefits Administration automatically calculates premium deductions based on the amount of coverage in force; therefore, manual intervention is not required during this process for the purpose of increasing an employee's premium deduction.

#### II. BASIS FOR INCREASE

An employee's base salary as of October 1, 2022 as noted in the Compensation Plan issued by the Department of Administrative Services, shall be used to determine his or her eligibility for increased insurance coverage. Additional payments, such as longevity, overtime, shift differential or maintenance are not considered as base salary for the purpose of determining life insurance coverage.

Life insurance is not recalculated to the effective date of a retroactive compensation increase. For example, a wage increase effective September 23, 2022, but not entered until October 7th, will not be considered until the following April 1st.

# III. LIFE INSURANCE COVERAGE UPDATE PROGRAM

The life insurance coverage update program will run on **September 23, 2022**. The life insurance coverage update program uses an employee's compensation rate, current in the job data pages, to determine whether an update to life insurance coverage is applicable. This program compares the employee's compensation rate with the life insurance wage/coverage table to ensure that the

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Annual Benefits Base Rate (ABBR) is accurate. Be advised that if the compensation rate field is not maintained and updated on a regular basis, the amount of insurance will be incorrect.

## IV. EFFECTIVE DATE OF INCREASE

The effective date of the increase is October 2022. Premium deduction changes for those employees receiving increased coverage are reflected in the paychecks dated:

BI-WEEKLY:October 7, 2022SEMI-MONTHLY:October 14, 2022

## V. **PROJECTION/INCREASE CRITERIA** (Responsibility of employing agency)

In order for the insurance coverage projection and premium increase to be processed correctly by Benefits Administration the following criteria must be met:

- A. Employee must be properly enrolled in the life insurance plan
- B. <u>Employee status must be active or on paid leave</u> The coverage projection and premium increase is not applicable to inactive (unpaid leave) or terminated employees.
- C. <u>Compensation rate must be accurate</u> This information is required and must be entered at hire and maintained thereafter in order to determine the coverage projection for which the employee is eligible. (Refer to Section VI, Compensation Rate Requirement)
- D. <u>Bargaining Unit designation must be accurate</u> This establishes the eligibility for coverage in excess of \$38,000.00.

# VI. COMPENSATION RATE REQUIREMENT

In conjunction with the semi-annual increase, the Healthcare Policy & Benefit Services Division (Division) is auditing life insurance coverage amounts. In accordance with the provisions of Connecticut General Statutes Section 5-257, the Division will verify the coverage amount against the Compensation Rate in the Job Data record. The Compensation Rate is a required field for those employees enrolled in life insurance. Life insurance participants found to have coverage that cannot be reconciled against an appropriate Compensation Rate will have their coverage defaulted to the minimum amount of insurance, currently \$8,000.

# VII. REPORTING REQUIREMENTS

The Benefits Administration query entitled CT\_CORE\_BN\_LIFE\_AUDIT is located in the Core-CT EPM system. The query will be available shortly after October 1<sup>st</sup> and will remain available until such time as the next increase is processed. Information regarding the Core-CT EPM system can be obtained at the following Internet address: <u>https://www.core-ct.state.ct.us/epm/</u>.

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This query contains the following information: employees whose coverage has been updated, the amount of new coverage, and the amount of their old coverage. The query should be checked thoroughly for accuracy. Contact the Group Life Insurance Unit at (860) 702-3537 if it is determined that a correction is required.

## VIII. MAINTAINING GROUP LIFE INSURANCE COVERAGE AMOUNTS

Agencies must periodically audit life insurance coverage amounts. The Life Insurance Invalid Report has been created to accomplish this task. The Life Insurance Invalid Report is located in Core-CT at the following menu path: Benefits> Reports> Contributions and Deductions>Life Insurance Invalid Report. The report lists the employee's name, employee number, benefit plan, salary (derived from the employee's compensation rate on the job data pages of their primary job), current coverage and expected coverage. It compares the employee's compensation rate in job data with the life insurance wage/coverage table to ensure that the ABBR is accurate.

After reviewing the report, make the appropriate changes to the employee's record to correct the errors. In the event agency information disagrees with the information contained in the report, contact the Group Life Unit for assistance. The Life Insurance Invalid Report will be monitored centrally to ensure compliance. Be advised that an invalid coverage amount could cause beneficiaries to be severely disadvantaged.

The ABBR is not to be changed when an employee is promoted or receives an increase in salary. If an ABBR is found to be incorrect, agencies must contact the Group Life Insurance Unit.

Further information regarding the ABBR can be found in the Core-CT Daily Mail dated February 5, 2004. <u>https://www.core-ct.state.ct.us/hr-daily/results.asp</u>

#### IX. SCHEDULES OF INSURANCE

Attached are two Schedules of Insurance. Schedule No. 1 is for collective bargaining employees with a \$38,000.00 limit on basic life insurance. Schedule No. 2 is for employees who are (1) not in a collective bargaining unit or (2) whose bargaining unit has a stipulated maximum amount of insurance greater than \$38,000.00.

#### X. CONCLUSION

To ensure delivery of the appropriate benefits to each employee with group life insurance coverage, the information maintained in Core-CT must be current and accurate.

Questions concerning the administration of group life insurance benefits may be directed to the Healthcare Policy & Benefit Services Division, Group Life Insurance Unit at (860) 702-3537.

Very truly yours,

Joshua Wojeik

Healthcare Policy & Benefit Services Division Director

JJ/LP Attachments \$19,500

\$20,500

\$21,500

\$22,500

\$23,500

\$24,500

\$25,500

\$26,500

\$27,500

\$28,500

\$29,500

\$30,500

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\$32,500

\$33,500

and over

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\$4,500

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(785.44)

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(1,015.33)

(1,053.64)

(1,091.95)

(1, 130.27)

(1, 168.58)

(1,206.90)

(1, 245.21)

(1,283.52)

#### **SCHEDULE OF INSURANCE (NO. 1)**

#### (With Bi-Weekly Equivalent) Bi-weekly Amount of Semi-monthly Deduction At Least But Less Than Insurance Deduction \$1.74 \$4,500 (172.41)\$8,000 \$1.60 (172.41)\$5,500 (210.73)\$9,000 \$1.80 \$1.95 \$6,500 \$10,000 \$2.00 \$2.17 (210.73)(249.04)(249.04)\$7,500 \$11,000 \$2.20 \$2.39 (287.36)(287.36)\$8,500 (325.67)\$12,000 \$2.40 \$2.60 \$13,000 \$2.82 (325.67)\$9,500 (363.98)\$2.60 \$14,000 (363.98)\$10,500 (402.30)\$2.80 \$3.04 \$15,000 (402.30)\$11,500 (440.61)\$3.00 \$3.25 \$12,500 \$16,000 \$3.20 \$3.47 (440.61)(478.93)\$17,000 (478.93)\$13,500 (517.24)\$3.40 \$3.69 (517.24)\$14,500 (555.56)\$18,000 \$3.60 \$3.90 (555.56)\$15,500 (593.87)\$19,000 \$3.80 \$4.12 \$16,500 \$20,000 (593.87)(632.18)\$4.00 \$4.34 \$4.20 \$4.55 (632.18)\$17,500 (670.50)\$21,000 (670.50)\$18,500 (708.81)\$22,000 \$4.40 \$4.77

(747.13)

(785.44)

(823.75)

(862.07)

(900.38)

(938.70)

(977.01)

(1,015.33)

(1,053.64)

(1,091.95)

(1, 130.27)

(1, 168.58)

(1,206.90)

(1,245.21)

(1,283.52)

\$23,000

\$24,000

\$25,000

\$26,000

\$27,000

\$28,000

\$29,000

\$30,000

\$31,000

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\$37,000

\$38,000

\$4.60

\$4.80

\$5.00

\$5.20

\$5.40

\$5.60

\$5.80

\$6.00

\$6.20

\$6.40

\$6.60

\$6.80

\$7.00

\$7.20

\$7.40

\$7.60

\$4.99

\$5.20

\$5.42

\$5.64

\$5.85

\$6.07

\$6.29

\$6.50

\$6.72

\$6.94

\$7.15

\$7.37

\$7.59

\$7.80

\$8.02

\$8.24

Annual Gross Compensation

## SCHEDULE OF INSURANCE (NO.2)

Yearly Gross Compensation (With Bi-Weekly Equivalent)

		( this b	i weeniy Equ	Amount of	Bi-Weekly	Semi-Monthly
At least		But Less Than		Insurance	Deduction	Deduction
\$33,500	(1,283.52)	\$34,500	(1,321.84)	\$38,000	\$7.60	\$8.24
\$34,500	(1,321.84)	\$35,500	(1,360.15)	\$39,000	\$7.80	\$8.45
\$35,500	(1,360.15)	\$36,500	(1,398.47)	\$40,000	\$8.00	\$8.67
\$36,500	(1,398.47)	\$37,500	(1,436.78)	\$41,000	\$8.20	\$8.89
\$37,500	(1,436.78)	\$38,500	(1,475.10)	\$42,000	\$8.40	\$9.10
\$38,500	(1,475.10)	\$39,500	(1,513.40)	\$43,000	\$8.60	\$9.32
\$39,500	(1,513.41)	\$40,500	(1,551.72)	\$44,000	\$8.80	\$9.54
\$40,500	(1,551.72)	\$41,500	(1,590.04)	\$45,000	\$9.00	\$9.75
\$41,500	(1,590.04)	\$42,500	(1,628.35)	\$46,000	\$9.20	\$9.97
\$42,500	(1,628.35)	\$43,500	(1,666.67)	\$47,000	\$9.40	\$10.19
\$43,500	(1,666.67)	\$44,500	(1,704.98)	\$48,000	\$9.60	\$10.40
\$44,500	(1,704.98)	\$45,500	(1,743.30)	\$49,000	\$9.80	\$10.62
\$45,500	(1,743.30)	\$46,500	(1,781.61)	\$50,000	\$10.00	\$10.84
\$46,500	(1,781.61)	\$47,500	(1,819.93)	\$51,000	\$10.20	\$11.05
\$47,500	(1,819.93)	\$48,500	(1,858.24)	\$52,000	\$10.40	\$11.27
\$48,500	(1,858.24)	\$49,500	(1,896.56)	\$53,000	\$10.60	\$11.49
\$49,500	(1,896.56)	\$50,500	(1,934.87)	\$54,000	\$10.80	\$11.70
\$50,500	(1,934.87)	\$51,500	(1,973.19)	\$55,000	\$11.00	\$11.92
\$51,500	(1,973.19)	\$52,500	(2,011.50)	\$56,000	\$11.20	\$12.14
\$52,500	(2,011.50)	\$53,500	(2,049.81)	\$57,000	\$11.40	\$12.35
\$53,500	(2,049.81)	\$54,500	(2,088.13)	\$58,000	\$11.60	\$12.57
\$54,500	(2,088.13)	\$55,500	(2,126.44)	\$59,000	\$11.80	\$12.79
\$55,500	(2,126.44)	\$56,500	(2,164.76)	\$60,000	\$12.00	\$13.00
\$56,500	(2,164.76)	\$57,500	(2,203.07)	\$61,000	\$12.20	\$13.22
\$57,500	(2,203.07)	\$58,500	(2,241.38)	\$62,000	\$12.40	\$13.44
\$58,500	(2,241.38)	\$59,500	(2,279.70)	\$63,000	\$12.60	\$13.65
\$59,500	(2,279.70)	\$60,500	(2,318.01)	\$64,000	\$12.80	\$13.87
\$60,500	(2,318.01)	\$61,500	(2,356.33)	\$65,000	\$13.00	\$14.09
\$61,500	(2,356.33)	\$62,500	(2,394.64)	\$66,000	\$13.20	\$14.30
\$62,500	(2,394.64)	\$63,500	(2,432.96)	\$67,000	\$13.40	\$14.52
\$63,500	(2,432.96)	\$64,500	(2,471.27)	\$68,000	\$13.60	\$14.74
\$64,500	(2,471.27)	\$65,500	(2,509.58)	\$69,000	\$13.80	\$14.95
\$65,500	(2,509.58)	\$66,500	(2,547.90)	\$70,000	\$14.00	\$15.17
\$66,500	(2,547.90)	\$67,500	(2,586.21)	\$71,000	\$14.20	\$15.39
\$67,500	(2,586.21)	\$68,500	(2,624.53)	\$72,000	\$14.40	\$15.60
\$68,500	(2,624.53)	\$69,500	(2,662.84)	\$73,000	\$14.60	\$15.82
\$69,500	(2,662.84)	\$70,500	(2,701.15)	\$74,000	\$14.80	\$16.04
\$70,500	(2,701.15)	\$71,500	(2,739.47)	\$75,000	\$15.00	\$16.25
\$71,500	(2,739.47)	\$72,500	(2,777.78)	\$76,000	\$15.20	\$16.47
\$72,500	(2,777.78)	\$73,500	(2,816.10)	\$77,000	\$15.40	\$16.69
\$73,500	(2,816.10)	\$74,500	(2,854.41)	\$78,000	\$15.60	\$16.90
\$74,500	(2,854.41)	\$75,500	(2,892.73)	\$79,000	\$15.80	\$17.12
\$75,500	(2,892.73)	\$76,500	(2,931.04)	\$80,000	\$16.00	\$17.34
\$76,500	(2,931.04)	\$77,500	(2,969.35)	\$81,000	\$16.20	\$17.55
\$77,500	(2,969.35)	\$78,500	(3,007.67)	\$82,000	\$16.40	\$17.77
\$78,500	(3,007.67)	\$79,500	(3,045.98)	\$83,000	\$16.60	\$17.99
\$79,500	(3,045.98)	\$80,500	(3,084.30)	\$84,000	\$16.80	\$18.20
\$80,500	(3,084.30)	and over		\$85,000	\$17.00	\$18.42