

LETA	<i>Beth Country</i>	POLICY No. 16
		EFFECTIVE DATE: 05/06/04
Subject:	SUPPLEMENTAL BENEFITS SOLICITATION POLICY	REVIEW:
Source:	Executive Director	REVISION:
		REVISED:

## POLICY

It shall be the policy of the Louisiana Educational Television Authority to allow supplemental benefits solicitation only by companies (vendors) who have been approved for payroll deduction by the Office of State Uniform Payroll (OSUP) and have a current payroll deduction code.

## PURPOSE

The purpose of this policy is to assure consistency and uniformity throughout the department regarding supplemental benefits solicitation and affirm that supplemental benefits solicitation is a privilege, not a requirement. Supplemental vendor solicitation privileges may be rescinded for those who do not comply with the guidelines of this policy.

## DEFINITIONS

- A. **Supplemental Benefits Solicitation:** Benefits such as health, life, disability, dental and legal services offered to employees through payroll deduction that have been approved and assigned codes by OSUP. This does not include any products offered by the Office of Group Benefits (OGB). These products will be coordinated by OGB.

## VENDOR PROCEDURES

The Human Resources Director will be responsible for coordinating the supplemental vendors who request permission to solicit approved products.

- A. Vendor's Louisiana Sales Coordinator will determine which representatives will visit a proposed site.
- B. Supplemental benefits vendors wishing to solicit must have a payroll deduction code with OSUP. The service or product being offered must be the specific service or product that received approval for solicitation by OSUP.
- C. The Human Resources Director will determine the date, time, and location convenient for presentations to employees. The vendor must remain in the designated area as set forth by HR Director. The vendor is not allowed to visit in areas where employees work without prior approval.
- D. Each vendor will be allowed the number of solicitation visits determined by the HR Director of LETA, along with the format and length of the visit.
- E. The HR Director shall communicate to all employees concerning the date, time, and location of the vendor's visit; may post promotional materials provided by the vendor. Communication may be via e-mail, posters on bulletin boards, etc. The communication must inform employees of the following:

The name of the vendor that will be present and that offerings by the vendor are completely voluntary, but employees electing to participate must have their

premiums paid through payroll deduction, the date, hours and place that employees are allowed to visit the vendor. Although LETA allows authorized vendors to present their services and products to employees, it does not endorse any of the offerings.

- F. The HR Director may post promotional materials provided by the vendor along with LETA's announcement. The vendor may also provide materials to employees who elect to meet with the vendor during LETA's approved solicitation visit. Vendor promotional materials must not be distributed by any other means within the department without prior department approval.
- G. Upon request from a vendor for on-site solicitation, the HR Director will provide the Vendor's Louisiana Sales Coordinator a copy of this policy and obtain a signed acknowledgement from the vendor representative before allowing access to the site.
- H. According to OSUP policy, payroll deduction authorization forms (SED-4's) must be signed by a vendor representative AND the employee unless otherwise directed by OSUP. Any changes or corrections, due to SED-4 being completed incorrectly by the vendor representative, to an employee's supplemental policy or premiums must be handled between the vendor and the employee by all reasonable means (letter, phone, agency or home visit). LETA will not be responsible for any errors or omissions on the part of the vendor and the vendor's representative, but will assist, if necessary, in obtaining a signed SED-4 if the vendor has exhausted all other means. OSUP will also assist in this process if necessary.
  - 1. No entries, changes or corrections will be entered into LETA's payroll system without an SED-4 signed by the representative and the employee unless otherwise directed by OSUP.
  - 2. No cancellations requested by the vendor will be entered into LETA's payroll system without an SED-4 signed by the representative and the employee unless otherwise directed by OSUP.
  - 3. No cancellations of all products with a vendor requested by the employee will be entered into LETA's payroll system without a written dated statement from the employee in which LETA must instruct the employee to forward a copy of that letter to the vendor. If an employee that has more than one product with a vendor wishes to cancel only one product with that vendor, they must be directed to the vendor to cancel per an updated signed SED-4.
  - 4. For situations in which a correction to an SED-4 results in no change in **total** semi-monthly premium(no increase or decrease), the employee's signature is not required, however a copy of the SED-4 with a letter of explanation must be sent to the employee and LETA.

## **EXCEPTIONS**

This policy does not apply to any of the products that are coordinated through the Office of Group Benefits. Any other exceptions to this policy must be approved by the Human Resources Director of the Louisiana Educational Television Authority.

## **Vendor Acknowledgment of Receipt of Benefits Solicitation Policy**

*This agreement and a copy of the agency policy must be sent to the Vendor's Louisiana Sales Coordinator. All signatures must be obtained before a solicitation date is confirmed and employees are notified. A facsimile copy is acceptable.*

**(Date)**

**SUBJECT: SUPPLEMENTAL BENEFITS SOLICITATION**

**AGREEMENT BETWEEN:**

LA Educational TV Authority  
7733 Perkins Rd  
Baton Rouge, LA 70810

**SOLICITATION DATE(S):**

This will acknowledge my receipt and understanding of the Supplemental Benefits Solicitation Policy of the Louisiana Educational Television Authority and other information set forth in this document.

According to OSUP Policy, payroll deduction authorization forms (SED-4) must be returned to Human Resources Office and will be processed in the pay period following receipt or the first pay period of the new plan year. Any changes or corrections, due to SED-4 being completed incorrectly by the vendor representative, to an employee's supplemental policy or premiums must be handled between the vendor and the employee by all reasonable means (letter, phone, agency or home visit). LETA will not be responsible for any errors or omissions on the part of the vendor or the vendor's representative, but will assist, if necessary, in obtaining a signed SED-4 if the vendor has exhausted all other means.

1. No entries, changes or corrections will be entered into LETA's payroll system without an SED-4 signed by the representative and the employee unless otherwise directed by OSUP.
2. No cancellations requested by the vendor will be entered into the LETA's payroll system without an SED-4 signed by the representative and the employee unless otherwise directed by OSUP.
3. No cancellations of all products with a vendor requested by the employee will be entered into the LETA's payroll system without a written dated statement from the employee in which the agency must instruct the employee to forward a copy of that letter to the vendor. If an employee that has more than one product with a vendor wishes to cancel only one product with that vendor, they must be directed to the vendor to cancel per an updated signed SED-4. **NOTE: Refer to additional documentation for processing the cancellation of a deduction in the Flexible Benefits Plan (FBP).**
4. For situations in which a correction to an SED-4 results in no change in **total** semi-monthly premium (no increase or decrease), the employee's signature is not required, but a copy of the SED-4 with a letter of explanation must be sent to the employee and the Department.

**Vendor Acknowledgment of Receipt of Benefits Solicitation Policy (continued)**

Vendor's Louisiana Sales Coordinator signature certifying the distribution of this policy to the below Vendor Representative.

\_\_\_\_\_  
Signature Date  
Vendor's Louisiana Sales Coordinator

I, \_\_\_\_\_ (Vendor Representative), certify that I have received  
PRINT NAME  
and read the policy listed above and will follow the established procedures and dates set forth by the LA Educational TV Authority, I understand that any violations by me may constitute cause for my solicitation privileges to be rescinded.

\_\_\_\_\_  
Signature Date  
Vendor Representative

### Notification of Supplemental Benefits Solicitation

**DATE:**

**MEMORANDUM**

**TO:** Employees

**FROM:** Dot Efferson, HR Director, LA Educational TV Authority

**SUBJECT:** Vendor and Rep listed here

The above referenced supplemental benefits vendor will have a representative (\_\_\_\_\_), in the auditorium on Date and Time.

Employees who are interested in obtaining information on (life insurance) may do so during period established. Employees who are unable to attend or, due to time constraints, unable to complete an enrollment transaction during the approved times must make arrangements with the benefits representative to conclude the business outside of working hours and location or during a special time period established and approved by the department.

Offerings by this supplemental benefits vendor are completely voluntary; however, employees electing to participate must have their premiums paid through payroll deductions.

Although LETA has a policy to allow authorized vendors to present their approved services or products to employees, LETA does not endorse any offerings.

Employees have full responsibility for knowledge of the products or services they are purchasing and must obtain a clear understanding of all the terms of their contracts from the vendor's representative. LETA's only responsibility is to assure that the payroll deductions are made in accordance with the signed payroll deduction authorization form (SED-4).

Your adherence to the above guidelines regarding supplemental benefits solicitation is required.

