



PeopleSoft 8.3 Human
Resources PeopleBook: Base
Benefits

PeopleSoft 8.3 Human Resources PeopleBook: Base Benefits

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About the HRMS PeopleBooks

The HRMS PeopleBooks provide you with the information you will need for implementing and using PeopleSoft Human Resources Management System (HRMS) products.

This section describes information you should know before you begin working with PeopleSoft products and documentation, including PeopleSoft-specific documentation conventions, information specific to the PeopleSoft HRMS product line, how to order additional copies of our documentation, and so on.

Before You Begin

To benefit fully from the information covered in these books, you need to have a basic understanding of how to use PeopleSoft applications. We recommend that you complete at least one PeopleSoft introductory training course.

You should be familiar with navigating around the system and adding, updating, and deleting information using PeopleSoft windows, menus, and pages. You should also be comfortable using the World Wide Web and the Microsoft® Windows or Windows NT graphical user interface.

Because we assume you already know how to navigate the PeopleSoft system, much of the information in these books is not procedural. That is, it does not typically provide step-by-step instructions on using tables, pages, and menus. Instead, we provide you with all the information you need to use the system most effectively and to implement your PeopleSoft application according to your organizational or departmental needs. These books expand on the material covered in PeopleSoft training classes.

PeopleSoft Application Fundamentals for HRMS PeopleBook

The individual HRMS PeopleBooks provide you with implementation and processing information for the individual HRMS products. However, there is additional, essential information describing the setup and design of each HRMS product contained in the companion volume of documentation called *PeopleSoft Application Fundamentals for HRMS PeopleBook*.

The *PeopleSoft Application Fundamentals for HRMS PeopleBook* consists of important topics that apply to many or all PeopleSoft applications across the HRMS product line. Whether you are implementing a single HRMS product, some combination of products within the product line, or the entire PeopleSoft HRMS system, you should be familiar with the contents of this central PeopleBook. It is the starting point for fundamentals such as setting up control tables and administering security.

In the *PeopleSoft Applications Fundamentals for HRMS PeopleBook*, we've included common information pertinent to all applications in the HRMS product line, such as defining general options. If you're upgrading from a previous PeopleSoft release, you may notice that we've

removed some topics or topic headings from the individual application PeopleBooks and consolidated them in this single reference book. You'll now find only application-specific information in your individual application PeopleBooks. This makes the documentation as a whole less redundant. Throughout each PeopleBook, we provide cross-references to *PeopleSoft Application Fundamentals for HRMS* and other PeopleBooks.

Related Documentation

To add to your knowledge of PeopleSoft applications and tools, you may want to refer to the documentation of other PeopleSoft applications. You can access additional documentation for this release from PeopleSoft Customer Connection (www4.peoplesoft.com/cc). We post updates, troubleshooting documentation, and other items on Customer Connection, as well. In addition, documentation for this release is available on CD-ROM and in hard copy.

Important! Before upgrading, it is *imperative* that you check PeopleSoft Customer Connection for updates to the upgrade instructions. We continually post updates as we refine the upgrade process.

Documentation on the Internet

You can order printed, bound versions of the complete PeopleSoft documentation delivered on your PeopleBooks CD-ROM. You can order additional copies of the PeopleBooks CDs through the Documentation section of the PeopleSoft Customer Connection Web site: <http://www4.peoplesoft.com/cc>

You'll also find updates to the documentation for this and previous releases on Customer Connection. Through the Documentation section of Customer Connection, you can download files to add to your PeopleBook library. You'll find a variety of useful and timely materials, including updates to the full PeopleSoft documentation delivered on your PeopleBooks CD.

Documentation on CD-ROM

Complete documentation for this release is provided on the CD-ROM *PeopleSoft 8.3 HRMS PeopleBooks*, SKU HR83PBR0, and *PeopleTools 8.14 PeopleBooks*, SKU PTB814R0.

Note. Your access to PeopleSoft PeopleBooks depends on which PeopleSoft applications you've licensed. You may not have access to some of the PeopleBooks listed here.

Hardcopy Documentation

To order printed, bound volumes of the complete PeopleSoft documentation delivered on your PeopleBooks CD-ROM, visit the PeopleSoft Press Web site from the Documentation section

of PeopleSoft Customer Connection. The PeopleSoft Press Web site is a joint venture between PeopleSoft and Consolidated Publications Incorporated (CPI), our book print vendor.

We make printed documentation for each major release available shortly after the software is first shipped. Customers and partners can order printed PeopleSoft documentation using any of the following methods:

| | |
|------------------|---|
| Internet | From the main PeopleSoft Internet site, go to the Documentation section of Customer Connection. You can find order information under the Ordering PeopleBooks topic. Use a Customer Connection ID, credit card, or purchase order to place your order. PeopleSoft Internet site: http://www.peoplesoft.com . |
| Telephone | Contact Consolidated Publishing Incorporated (CPI) at 800 888 3559 . |
| Email | Email CPI at callcenter@conpub.com . |

PeopleBooks Standard Page Element Definitions

Throughout our product documentation, you will encounter fields that are used on many application pages or panels. This section lists the most common fields and provides standard definitions.

| Field | Definition |
|--|---|
| Address 1, Address 2, Address 3 | Freeflow text entry fields that enable you to describe street, street number, apartment number, and other address information. |
| As of Date | The last date for which a report or process includes data. |
| Block (Bloque) | In Spanish addresses, a building or buildings that are close together may be called a Block (Bloque). Include the Block name in the address, if necessary. |
| Business Unit | An identification code that represents a high-level organization of business information. You can use a business unit to define regional or departmental units within a larger organization. |
| City | Name of city for address. |
| Comment(s) | Freeflow text entry that enables you to add comments. |
| Company | A business organization. For US companies using PeopleSoft Payroll for North America or PeopleSoft Pension Administration, a business unit that has a unique federal Employer Identification Number (EIN) for payroll reporting purposes. |

| Field | Definition |
|--|--|
| Country | Country for address. Other address fields will be adjusted to reflect Country choice. Select a country from the list of valid values and press TAB to move through the field. The system automatically displays the appropriate address fields using the standardized address formats previously set up in the Country Table. Enter the appropriate address data in the fields that appear. |
| County (also Prefecture and Parish) | Name of county (prefecture/parish) for address, if applicable. |
| Currency Code | The 3-letter code in which the currency is specified. |
| Description | Freeflow text up to 36 characters that describes what you are defining. |
| Department | An identification code that represents an organization in a company. |
| Door (Puerta) | In Spanish addresses, identifies the door name or number. |
| Effective Date | Date on which a table row becomes effective; the date that an action begins. For example, if you want to close out a ledger on June 30, the effective date for the ledger closing would be July 1. This date also determines when you can view and change the information. Pages or panels and batch processes that use the information use the current row. |
| Email | The email address for a person or organization. |
| EmplID (employee ID) | Unique identification code for an individual associated with your organization. |
| Empl Rcd# (Employee Record Number) | A system-assigned number that indicate an employee has more than one record in the system. |
| Fax (also Fax Number) | The fax number for a person or organization. |
| Floor (Piso) | In Spanish addresses, identifies the floor name or number. |
| House | Identifies the type of house. |
| Initials | Initials of individual. |
| Language | Language spoken by employee/applicant/non-employee. |
| Language or Language Code | The language in which you want the field labels and report headings of your reports to print. The field values appear as you enter them. Language also refers to the language spoken by an employee, applicant, or non-employee. |
| Last Run On | The date that a report or process was last run. |
| Locality | A tax location within an organization. |
| Name | Name of individual. |

| Field | Definition |
|------------------------------------|--|
| National ID | Identification code used by countries to track information on their residents for payroll, identification, benefits, and other purposes. For example, for US residents this would be their Social Security Number; for German residents it would be their Social Insurance Number, and for UK residents it would be their National Insurance Code. |
| Number | The number related to a street, avenue, or other address field in Spanish addresses. When an address has no number, enter s/n (sin numero) to indicate that there is no number. |
| Phone | The phone number for a person or organization. |
| Phone Extension | The phone extension number for a person or organization. |
| Phone Type | Identifies the type of phone number entered in the Telephone field. Valid values are Business, Campus, Cellular, Dormitory, FAX, Home, Other, Pager 1, Pager 2, or Telex. |
| Post Code (also Postal) | Postal code for address. |
| Prefix | Prefix for individual (such as Mr., Ms., Mrs., Dr., and so on) |
| Process Frequency group box | Designates the appropriate frequency in the Process Frequency group box: Once executes the request the next time the batch process runs. After the batch process runs, the process frequency is automatically set to Don't Run . Always executes the request every time the batch process runs. Don't Run ignores the request when the batch process runs. |
| Process Monitor | This button takes you to the Process List page, where you can view the status of submitted process requests. |
| Regulatory Region | A regulatory region can be any region where there are specific laws and regulations that are addressed by functionality in PeopleSoft Human Resources. Many country-specific transactions are driven by regulatory requirements where Regulatory Region is used for transaction processing. |
| Report ID | Identifies a report. |
| Report Manager | This button takes you to the Report List page, where you can view report content, check the status of a report, and see content detail messages (which show you a description of the report and the distribution list). |
| Request ID | A request identification that represents a set of selection criteria for a report or process. |
| Run | This button takes you to the Process Scheduler request page, where you can specify the location where a process or job runs and the process output format. |

| Field | Definition |
|------------------------------|---|
| Run Control ID | Identifies specific run control settings for a panel. |
| Run Date | The date that a process was run or a report was generated. |
| Run Time | The time that a process was run or a report was generated. |
| SetID | An identification code that represents a set of control table information. SetIDs enable the sharing of a set of control table information across two or more Business Units. |
| Short Description | Freeflow text up to 15 characters. |
| Stair (Escalera) | In Spanish addresses, identifies the stair name or number. |
| State (also Province) | State (Province) for address. |
| Status | Indicates whether a row in a table is <i>Active</i> or <i>Inactive</i> . |
| Street Type | Identifies whether an address is a place, street, avenue, road, or so on. Spanish law requires addresses in official documents to include the Street Type. |
| Telephone (Phone) | The telephone number for a person or organization. |
| User ID | The system identifier for the individual who generates a transaction. |

See Also

PeopleTools Development Tools: Application Designer PeopleBook, “Creating Field Definitions,” Understanding Effective Dates

PeopleSoft Process Scheduler

PeopleBook Standard Group Boxes

The following group boxes and field groupings appear throughout PeopleSoft HRMS. We have documented them once here.

Entering Name Information

The following fields appear wherever you enter or display naming information:

Format Using

Select the country with name format appropriate for this employee. The system will display the appropriate fields for this format in the Person Name group box.

Refresh the Name Field

Click to refresh the Name field after you’ve edited any of the name fields. The system will refresh the name field when you save.

Person Name or Current Name

The following fields appear in the Person Name group box. You will not see all of the fields listed below at any one time. The system displays the fields necessary for the country you select in the Format Using field.

| | |
|---------------------------------|---|
| Title | Select a title. If you are reporting employee information under the German Duevo Directive, this field is required and must be completed according to the Duevo rules. |
| Prefix and Name Prefix | Select a Prefix or Name Prefix, if applicable. |
| Royal Prefix | Select a Royal Prefix, if applicable. |
| First Name | Enter the employee's official first name. |
| Preferred First Name | For The Netherlands, enter the employee's preferred first name, if different from the First Name. The system will use the preferred name when you generate form letters or mailing labels for this employee. |
| Last Name Preference | For the Netherlands, choose this link to provide additional name information for married employees. The Last Name Preference page contains three fields: Last Name Partner, Prefix Partner and Last Name Preference. |
| Middle | Enter the employee's middle name, if applicable. |
| Last Name | Enter the employee's official last name. |
| Suffix | Select a suffix, if applicable. |
| Second Last Name | For Spanish employees, enter the second surname (mother's surname). |
| Alternate Character Name | Use this field to enter the employee's name using alternate characters (such as Japanese phonetic characters). Note. You can enter names using Japanese characters with or without a space between the surname and given name. Names using Roman alphanumeric characters require a comma delimiter. Warning! Be sure to select the correct character set on the Installation Table – Alternate Characters page. Using the wrong character set generates an error message. |
| Royal Suffix | Select the appropriate royal suffix. If you are reporting employee information under the German Duevo Directive, this field is required and must be completed according to the Duevo rules. |
| Name | The system displays the employee's name as it will appear in the system. |

Displaying Japanese Names on Pages

Pages that display personal name fields usually display them in First Name, Last Name order. When the country is Japan, however (JPN in the Format Using field), those fields appear in the Last Name, First Name order.

Another difference is that the Name field displays “Last Name[space]First Name,” not “Last Name,First Name”; that is, a space separates the last and first names, not a comma.

| Person Name | |
|---------------------------|--------|
| Last: | 津村 |
| First: | 友則 |
| Alternate Character Name: | ツムラトモノ |
| Name: | 津村 友則 |

Japanese name format on a page

See Also

PeopleSoft Applications Fundamentals for HRMS PeopleBook, “Setting Up PeopleSoft HRMS,” [Working With Double-Byte Characters](#)

Entering Address Information

The following fields appear in address group boxes throughout PeopleSoft HRMS. You may not see all of the fields listed below as the system displays only the fields necessary for the country in use. Determine which address fields are required for each country on the Country Table – Address Format page.

| | |
|---|---|
| Country | Select the country with address format appropriate for this address. The system will display the appropriate fields for this format in the address group box. |
| Address 1, Address 2, Address 3, and Address 4 | Freeflow text entry fields that enable you to describe street, street number, apartment number, and other address information. |
| City | Enter the city. |
| County | Enter the county, if applicable. |
| State (State, Province, or other) | Enter the state or province. |
| Postal | Enter the postal, such as zip or postal code. |
| Number 1, and Number 2 | Enter the number related to a street, avenue, or other address field in Spanish addresses. When an address has no number, enter s/n (sin numero) to indicate that there is no number. |

| | |
|----------------------|--|
| House Type | Enter the house type, if applicable. |
| Postal Search | Click Postal Search to use international address formats. |

Entering or Viewing Pay Components

Amounts Tab

Pay Components - Amounts

| | |
|---|---|
| Rate Code | Rate codes are IDs for pay components. The system inserts any compensation information associated with this rate code in the compensation grid. Note. If a seniority rate code is inserted as a default value on the Job Data - Compensation page, the values for these rate codes are unavailable for entry. |
| Seq (sequence) | The sequence number of the rate code if it is used more than once. |
| Details | Click the Details button to open the Comp Rate Code Secondary Panel page. |
| Comp Rate , (compensation rate) Currency , and Frequency | The compensation rate, its currency, and the frequency (for example, annually, weekly, or hourly) the comp rate will be paid. |
| Apply FTE | If selected, the system multiplies the rate code value by the FTE factor for annualization and deannualization. FTE is the percent of full time the employee should normally work in the corresponding job. This field isn't available for Percent rate codes. |
| Points | The salary points associated with this rate code, if any. |
| Percent | If the rate code rate type is Percent , the system displays the percent to be applied to the job compensation rate or to a rate code group if you are using rate code groups. |
| Rate Code Group | A rate code group enables you to be more specific when calculating percentages based components as part of your employee compensation package. |

Comp Rate Code Secondary Panel

Comp Rate Code: TSDFLT

Description: Salaried Default

Base Pay **Use Highest Rate**

Default Without Override

Rate Code Type: Flat Amount

Rate Code Class:

Comp Rate Code Secondary Panel

Access this page by clicking the Details link on the Amounts page. Displays additional information about the rate code.

See Also

PeopleSoft Application Fundamentals for HRMS PeopleBook, “Working With Multiple Components of Pay,” **Defining Rate Codes**

Changes Tab

| Pay Components | | | | | | | First | 1 of 1 | Last |
|----------------|-----|--------------------------|---------------|---------------|----------------|----------------------------------|----------------------------------|--------|------|
| Amounts | | Changes | | Conversion | | | | | |
| *Rate Code | Seq | Manually Updated | Change Amount | Change Points | Change Percent | | | | |
| 1 | 0 | <input type="checkbox"/> | 0.000000 | | 0.000 | <input type="button" value="+"/> | <input type="button" value="-"/> | | |

Pay Components – Changes page

This page displays the change in an employee’s salary.

- Manually Updated** The system selects this if you have manually updated the pay components.
- Change Amount** The overall change amount to this pay component rate.
- Change Points** The overall change amount (in points) to this pay component, if applicable.
- Change Percent** The overall percentage change to this pay component, if applicable.

| Pay Components | | | | | | | First | 1 of 1 | Last |
|----------------|-----|---------|--------------------------|--------------------------|---------------------|--|--|--------|------|
| Amounts | | Changes | | Conversion | | | | | |
| *Rate Code | Seq | Source | Default Without Override | Apply FTE | Converted Comp Rate | | | | |
| 1 | | None | <input type="checkbox"/> | <input type="checkbox"/> | | <input style="background-color: yellow;" type="button" value="+"/> | <input style="background-color: yellow;" type="button" value="-"/> | | |

Pay Components – Conversion

This page displays the conversion rates in an employee's salary.

| | |
|---------------------------------|--|
| Source | The system displays the source of the rate code, such as <i>Absorbing Premium</i> , <i>Seniority Pay</i> , <i>Job Code</i> , or <i>Manual</i> . |
| Default Without Override | Selected if the worker's compensation package cannot be manually updated on the Job Data – Compensation page. |
| Apply FTE | Indicates if the converted rate code value will be multiplied by the FTE factor for annualization and deannualization. |
| Converted Comp Rate | Displays the converted compensation rate for this pay component. The system converts all base pay components to the Job currency and compensation frequency. |

Required Fields on Pages

When you see a field on a page with an asterisk (*) preceding the field name, it means the field is required. You can not save a page without entering data into all of the required fields on a page.

| | |
|----------------------|--------------------------|
| *Description: | This is a required field |
|----------------------|--------------------------|

Example of a required field label

In some unique instances a field may be required even though there is no asterisk preceding the field name. In such cases, you will be prompted to enter data in these fields before saving the page.

Typographical Conventions and Visual Cues

To help you locate and interpret information, we use a number of standard conventions in our online documentation.

Please take a moment to review the following typographical cues:

monospace font

Indicates PeopleCode.

Bold Indicates field names and other page elements, such as buttons and group box labels, when these elements are documented below the page on which they appear. When we refer to these elements elsewhere in the documentation, we set them in Normal style (not in bold).

We also use boldface when we refer to navigational paths, menu names, or process actions (such as **Save** and **Run**).

Italics Indicates a PeopleSoft or other book-length publication. We also use italics for *emphasis* and to indicate specific field values. When we cite a field value under the page on which it appears we use this style: *field value*.

We also use italics when we refer to words as words or letters as letters, as in the following: Enter the number *0*, not the letter *O*.

KEY+KEY Indicates a key combination action. For example, a plus sign (+) between keys means that you must hold down the first key while you press the second key. For ALT+W, hold down the ALT key while you press W.

See Also PeopleBooks provide cross-references under the heading “See Also.” Capitalized titles in italics indicate the title of a PeopleBook; titles in quotes indicate the title of a chapter; titles in normal font refer to sections within the PeopleBook. Here's an example:

See Also

About These HRMS PeopleBooks, PeopleSoft 8.3 HRMS PeopleBooks Preface

Note. Text in this bar indicates information that you should pay particular attention to as you work with your PeopleSoft system. If the note is preceded by **Important!**, the note is crucial and includes information that concerns what you need to do for the system to function properly.

Warning! Text within this bar indicates a crucial configuration consideration. Pay very close attention to these warning messages.

Process Introductory Table

In the documentation, each business process in the application is accompanied by an introductory table with pertinent information about the pages used in the process.

| <i>Page</i> | <i>System Name</i> | <i>Navigation</i> | <i>Usage</i> |
|-------------------|---|---|---------------------------------------|
| Name of the page. | Gives the system name of the page as specified in the PeopleTools Application Designer. For example, the system name of the Detail Calendar panel is DETAIL_CALENDAR1. | Provides the path for accessing the page. | Describes how you would use the page. |

USF U.S. Federal Government Functionality

Any functionality that is specific to the U.S. Federal Government sector will be designated by a USF marker. Most often this will appear at the beginning of a section heading (such as with this section), but the USF designation might also appear in a note or within text, if appropriate.

E&G Education and Government Functionality

Any functionality that is specific to the Education and Government sector will be designated by an E&G marker. Most often this will appear at the beginning of a section heading (such as with this section), but the E&G designation might also appear in a note or within text, if appropriate.

Local Country Functionality

Any functionality that is specific to an individual country will be designated by the three-character ISO code for that country. For example, functionality specific to Germany would be indicated by a DEU designation at the beginning of a section heading. Most often this will appear at the beginning of a section heading (such as with this section), but the country designation might also appear in a Note or within text, if appropriate.

Comments and Suggestions

Your comments are important to us. We encourage you to tell us what you like, or what you would like changed about our documentation, PeopleBooks, and other PeopleSoft reference and training materials. Please send your suggestions to:

PeopleSoft HRMS Product Documentation Manager
 PeopleSoft, Inc.
 4460 Hacienda Drive
 Pleasanton, CA 94588

Or send comments by email to the authors of the PeopleSoft documentation at:

DOC@PEOPLESOFT.COM

While we cannot guarantee to answer every email message, we will pay careful attention to your comments and suggestions. We are always improving our product communications for you.

CHAPTER 1

About the PeopleSoft 8.3 Human Resources PeopleBook: Base Benefits

This book provides you with the information you will need for implementing and using PeopleSoft Human Resources.

This chapter complements and extends the About the HRMS PeopleBooks section of HRMS documentation by providing specific information on how to use the documentation for Human Resources. Much of the general information you should know before you begin using PeopleSoft documentation is presented in About the HRMS PeopleBooks.

Note. We strongly recommend that you read About the HRMS PeopleBooks. In particular, the PeopleSoft Application Fundamentals section lists where you can find information about topics that apply to many PeopleSoft applications across the HRMS product line. For example, you can find information about setting up control tables, administering security, and setting language and currency preferences in the *PeopleSoft Application Fundamentals for HRMS PeopleBook*.

See Also

PeopleSoft HRMS PeopleBooks Preface, “About the HRMS PeopleBooks”

PeopleBooks Standard Page Element Definitions

Throughout our product documentation, you will encounter fields that are used on many application pages. This section lists the most common fields and provides standard definitions for Human Resources.

| Field | Definition |
|--------------------------|---|
| Benefit Plan | A specific benefit offering within a plan type. |
| Benefit Plan Type | Also known as Plan Type, it is a two-digit code that identifies a benefit category, such as health, life, or savings. |
| Benefit Program | A collection of benefit plans your company offers to a group of employees. |
| Deduction | Any amount taken from an employee’s pay check to offset all or part of the cost of the employee's benefits. |

| Field | Definition |
|----------------------------------|---|
| Deduction Code | The code assigned to a benefit deduction. |
| FSA Maximum Annual Pledge | This is the total maximum an employee can pledge to contribution to a health or dependent care flexible spending accounts during a benefit plan year. |
| FSA Minimum Check Amount | This is the minimum amount for which a check will be printed. |
| Plan Type | Also known as Benefit Plan Type, it is a two-digit code that identifies a benefit category, such as health, life, or savings. |

See Also

PeopleSoft HRMS PeopleBooks Preface, "About the HRMS PeopleBooks," PeopleBooks Standard Page Element Definitions

Understanding the Documentation

Documentation for PeopleSoft Human Resources is made up of 25 business processes, each with their own book:

- Administer Company Cars
- Administer Festive Advance
- Administer Salaries for the Netherlands
- Administer Salary Packaging
- Administer Training
- Administer Variable Compensation
- Administer Workforce
- Base Benefits
- Manage Commitment Accounting
- Manage Competencies
- Manage French Public Sector
- Manage Netherlands Salary Administration
- Manage Performance
- Manage Positions
- Manage Professional Compliance

- Meet Regulatory Requirements
- Monitor Absence
- Monitor Health & Safety
- Plan Careers and Successions
- Plan Salaries
- Recruit Workforce
- Report Total Compensation
- Track Faculty Events
- Track Flexible Service
- Track Global Assignments

Human Resources Reports

The documentation for the Human Resources reports is in the reports chapter in the *PeopleSoft Application Fundamentals for HRMS PeopleBook*. There you will find information about each report, listed by module.

See Also

PeopleSoft Application Fundamentals for HRMS PeopleBook, “Appendix: PeopleSoft Application Fundamentals for HRMS Reports”

CHAPTER 2

Introduction to Base Benefits

This chapter provides an overview of the Base Benefits business process in PeopleSoft Human Resources and discusses how to:

- Set up your Base Benefits system.
- Design your benefits program.
- Set up benefit plans and supporting tables.

Understanding the PeopleSoft Benefits Solution

Base Benefits enables you to manage all types of benefits, including health, life, and disability. If your organization requires more sophisticated processing—automated eligibility checking, enrollment management, and flexible credits—add PeopleSoft Benefits Administration; if your U.S. organization administers employee flexible spending account claims, add PeopleSoft FSA Administration.

Base Benefits provides a structure that enables you to:

- Define and manage benefit offerings.
- Enroll participants and dependents using online pages.
- Identify highly compensated employees and perform nondiscrimination testing.
- View benefit detail and summary data for participants.
- Produce management and operational reports.

See Also

PeopleSoft Benefits Administration PeopleBook

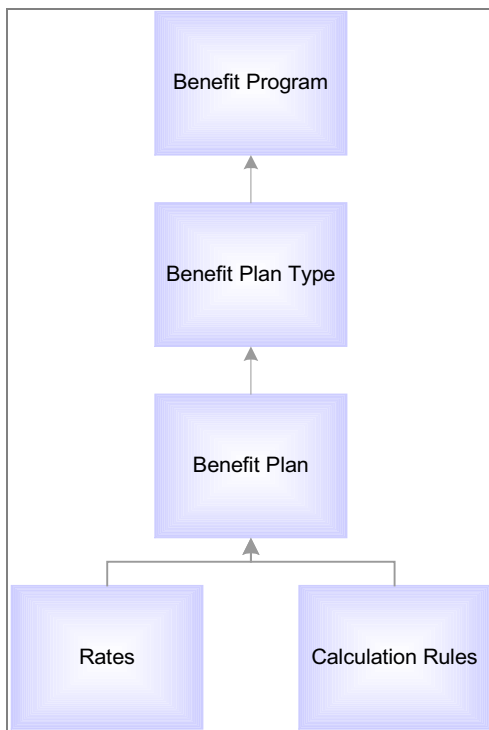
PeopleSoft FSA Administration PeopleBook

Designing Your Benefits Program

Base Benefits comprises four main phases of operation:

1. Set up benefit plans and supporting tables. Identify benefit plans and plan providers; define available coverages; and establish rate schedules, calculation rules, and payroll deductions.
2. Associate your benefit plans with one or more benefit programs.
3. Assign your employees to benefit programs and enroll them in plans for which their program enrollment makes them eligible.
4. Calculate rates and benefit deductions. If you use PeopleSoft Payroll for North America, you calculate deductions through the payroll process. If you use another payroll system, you use PeopleSoft Payroll Interface to link the PeopleSoft benefits information to that system.

The following diagram illustrates the structure upon which benefit programs are built.



Building Blocks for Benefit Programs

(USF) Designing Your Benefits Program

For Federal users, Base Benefits comprises three main phases of operation:

1. Set up benefit plans and supporting tables. Identify benefit plans and plan providers; define available coverages; and establish rate schedules, calculation rules, and payroll deductions.
2. Associate your benefit plans with one or more benefit programs.

- Assign your employees to benefit programs through the Human Resources PAR process and enroll them in plans for which their program enrollment makes them eligible.

Setting Up Benefit Plans and Supporting Tables

When you implement the Base Benefits business process, focus first on providers, benefit plans, rates, and calculation rules. You can combine and recombine them into your organization's benefit programs without having to reenter details.

| Term | Definition |
|-------------------|---|
| Benefit program | A collection of benefit plans your company offers to a group of employees—might be different for hourly, salaried, and executive employees. You can build as many programs as necessary to support your business rules and operational policies. |
| Benefit plan type | Any benefit category, such as health, life, or savings. |
| Benefit plan | <p>A benefit offering within a plan type. For example, a life plan type might include two benefit plans: one times salary and two times salary.</p> <p>To define a benefit plan, you identify the benefit plan type and name the benefit plan. You can link a benefit plan to many benefit programs; you don't need to reenter the same benefit plan information, no matter how many benefit programs include the plan.</p> |
| Rates | You can set up rates as age-graded, flat, percentage-of-salary, or service-related and associate each set of rates with any number of benefit program and benefit plan combinations. |
| Calculation rules | Include as-of dates for age, service, premium, and coverage calculations; rounding rules; and minimum/maximum coverage amounts. As with rates, you associate each set of calculation rules with all appropriate program and plan combinations. |

You use the reusable building blocks with Benefit Plan Tables to set up and maintain your benefit information.

For example, suppose your organization offers salaried employees two options for life insurance: one-times and two-times salary coverage. You set up each coverage as a separate life benefit plan. If the two benefit plans use the same set of rates, you define the rates once and link them with each plan.

Alternatively, two life plans might use the same rates in one benefit program but different ones in another. Once you define the two sets of rates, link the appropriate set with each benefit-program/benefit-plan combination.

Defining Tables That Support Base Benefits

Use the Provider Table to:

- Set up the information, including name and address, for each of your benefit providers.
- Optionally, define provider group, policy, and contact information.
- Next, define the rates and calculation rules for the benefits your organization offers. Associate the rates and calculation rules with benefit program and benefit plan combinations when you build your benefit programs.

To define rates and calculation rules, use of the following tables, according to your business needs:

| Name | Description |
|-------------------------|--|
| Age-Graded Rate Table | Defines age-graded rates, based on the age of employees, for the health, life and disability plan types that use them. You can differentiate rates based on sex and smoker status. |
| Salary Rate Table | Defines percentage of salary rates for health, life, and disability plan types that use them. |
| Service Rate Table | Defines service-related rates for health, life, and disability plan types that use employee service dates to determine rates. |
| Flat Rate Table | Defines flat rate information for health, life, and disability plan types. |
| Calculation Rules Table | Defines premium, coverage, age, service as-of dates, rounding rules, and coverage minimum/maximum amounts. |

Setting Up Payroll Information

Before you can define benefit programs and plans, establish payroll-related earnings categories, pay groups, deductions, and special accumulators.

Using Tables to Define Benefit Plans

Use the Benefit Plan Table to:

1. Define your organization's benefit plans, including the plan types and names.

For plan types, PeopleSoft delivers predefined codes that referee within the system, keeping information organized.

2. Identify the benefit plan provider you already set up in the Provider Table for a benefit plan.
3. Enter a deduction code you and your Payroll department previously defined.

The code has the rules for employee benefit deductions.

4. After naming a benefit plan, you define plan details in any of the following plan detail tables:
 - a. Life and AD/D Plan Table.
 - b. Disability Plan Table.
 - c. Savings Plan Table.
 - d. Leave Plan Table.
 - e. FSA Benefits Table.
 - f. Retirement Table.
 - g. Pension Plan Table.
 - h. Vacation Buy/Sell Table.

See Also

“Setting Up Benefit Plans”

“Establishing Rate Tables and Calculation Rules”

“Organizing Payroll Information for Base Benefits”

Building Benefit Programs

After you complete the blocks of information, you’re ready to assemble your benefit programs with the Benefit/Deduction Program Table, which enables you to:

- Associate appropriate benefit plans with a benefit program.
- Identify the rates and calculation rules you want the system to use for each benefit-program/benefit-plan combination.
- Assign any one benefit plan, such as a particular medical plan, to any number of benefit programs and identify unique rates and payroll processing rules for each such program/plan combination.
- Define flexible credits, if your organization implements PeopleSoft Benefits Administration and offers them.

- For each benefit program, define program-level, general, and plan-based credits.
- Set up information for automated enrollment processing, such as defining the order in which to print benefit plans on enrollment statements and linking a set of eligibility rules to a particular plan.

See Also

“Building Base Benefit Programs”

“Enrolling Participants”

CHAPTER 3

Setting Up Benefit Support Tables

This chapter discusses how to:

- Set up benefit providers.
- Set up group coverage codes.
- Link employer matching rates to employee length of service.
- Set up rates and premium limits.
- Set up calculation rules.
- Set up coverage codes.
- Set up limits for benefit savings plans.

Understanding Benefit Support Tables

When you implement PeopleSoft benefits, your first area of focus will be your benefit information. You'll start by defining the blocks of information that form benefit programs: providers, rates, and calculation rules. That way, you can combine and recombine them into your organization's various benefit programs without having to enter the details more than once.

Setting Up Benefit Providers

A benefit provider is a vendor. If your company offers a Blue Cross/Blue Shield health insurance plan, Blue Cross/Blue Shield is the provider.

If your organization has a self-funded medical plan but uses a third-party administrator (TPA) to handle administrative functions such as eligibility and claims, the TPA can be considered a vendor.

You use the Vendor Table to set up an ID for each vendor. Using an ID prevents identifying an inactive provider for a plan.

To enter the vendor information, you need to know:

- The vendor's bank account and how the vendor wants to receive payments.

- Your organization's bank account that holds the funds sent to the vendor.

Note. If your organization uses PeopleSoft North American Payroll to PeopleSoft Payables to pay a benefit vendor, add the vendor using the Payables Vendor Table, not the Base Benefits Vendor Table.

See Also

PeopleSoft Application Fundamentals for HRMS PeopleBook, "Setting Up Vendors"

Setting Up Coverage Group Codes

Life insurance and accidental death and dismemberment plans use coverage group codes to establish the maximum lifetime coverage allowed.

For example, let's say you define a Coverage Group Code with a \$500,000 maximum, then enter that Coverage Group Code for a supplemental life plan and a group life plan, and associate both benefit plans with a benefit program. If you were to enroll an employee in both of those plans, the system would ensure that the employee's total coverage by both plans does not exceed \$500,000.

What happens if the total coverage for a participant exceeds the Coverage Maximum? The system will *reduce* the total coverage to meet the Coverage Maximum. As the system processes deduction, it accumulates the coverage amounts and will begin reducing coverage when the coverage group maximum is reached. The system processes plans in order of deduction priority, and if more than one plan has the same priority, it processes in increasing plan type order.

Note. Payroll uses the effective date to determine which coverage maximum to use for a particular processing cycle, according to the pay period end date.

Pages Used to Set Up Coverage Group Codes

| Page Name | Object Name | Navigation | Usage |
|--|--------------------|---|---|
| Coverage Group Tbl (coverage group table) | COVERAGE_GROUP_TBL | <ul style="list-style-type: none"> Define Business Rules, Define Base Benefits, Setup, Coverage Group Table, Coverage Group Table Define Business Rules, Define General Data (NLD), Setup, Coverage Group Table, Coverage Group Table | Define a coverage group code that sets the maximum total life and AD/D coverage for a group of life and AD/D benefit plans. |

Defining Coverage Group Codes

Access the Coverage Group Tbl page.

Coverage Group Tbl

Coverage Group Code: KUE1

Coverage Groups

Find | View All First 1 of 1 Last

*Effective Date: 01/01/1980

*Status: Active

Coverage Maximum: 1,000,000

Coverage Group Tbl page

Effective Date

Payroll uses the effective date to determine which coverage maximum to use for a particular processing cycle, according to the pay period end date.

Coverage Maximum

Applies to all the life and AD/D benefit plans that you associate with the coverage group code and that you associate with one benefit program.

You connect a life or AD/D plan with a coverage group code using the Life and AD/D Plan Table.

Linking Employer Matching Rates to Length of Service

If your organization matches employee contributions to savings plans, you can use the Service Step Table to create different intervals of matching rates based on months of service.

You can also define deduction classifications based on either a percentage of the employee’s gross salary or a percentage of the employee’s contribution amount.

Page Used to Link Employer Matching Rates to Length of Service

| Page Name | Object Name | Navigation | Usage |
|--------------------|--------------------|--|--|
| Service Step Table | SERVICE_STEP_TABLE | Define Business Rules, Define Base Benefits, Setup, Service Step Table, Service Step Table Listing | Link the rate of employer matching contributions to an employee’s length of service. |

Defining Employer Matching Rates

Access the Service Step Table page.

Service Step Table

Service Step Table ID: KUSVC1

Service Step Table Find | View All First 1 of 1 Last

*Effective Date: 01/01/1980

*Description: KUSVC1 Short Description:

Service Find | View All First 1-4 of 5 Last

After Months of Service: 0

| Match Rates Find View All First 1 of 1 Last | | |
|---|------------------------------|--------------------------|
| *Deduction Class | Up to % of Employee Earnings | % of Employee Investment |
| Before-Tax | | |

After Months of Service: 24

| Match Rates Find View All First 1 of 1 Last | | |
|---|------------------------------|--------------------------|
| *Deduction Class | Up to % of Employee Earnings | % of Employee Investment |
| Before-Tax | 10.000 | 25.000 |

Service Step Table page

Example of Before- and After-Tax Matching

For example, let's say you have a 401(k) plan that's set up to match:

- 50% on the first 3% of the employee's salary for before-tax contributions.
- 100% to 6% of the employee's salary for before-tax contributions.
- 25% on the first 2%, 50% to 4%, and 100% to 6% on the employee's after-tax contributions.

Here's how you set this up:

| Deduction Class | Up to % of Employee Gross | % of Employee Investment |
|------------------------|----------------------------------|---------------------------------|
| Before | 3 | 50 |
| Before | 6 | 100 |
| After | 2 | 25 |
| After | 4 | 50 |
| After | 6 | 100 |

Example of After Months of Service Rewards

This example shows how to use the After Months of Service field to create multiple service steps to reward employees for staying with the company.

| After Months of Service | Deduction Class | Up to % of Employee Gross | % of Employee Investment |
|--------------------------------|------------------------|----------------------------------|---------------------------------|
| 0 | Before | 3 | 50 |
| 0 | Before | 6 | 100 |
| 0 | After | 2 | 25 |
| 0 | After | 4 | 50 |
| 0 | After | 6 | 100 |
| 24 | Before | 10 | 100 |
| 24 | After | 2 | 50 |
| 24 | After | 4 | 75 |
| 24 | After | 6 | 100 |

Setting Up Rates and Premium Limits

Your benefit system relies on rates to calculate the cost of benefits. This section describes how to:

- Specify employee premium limits.
- Set up rates based on:
 - Age.
 - Percent of salary.
 - Years of service.
 - A flat amount.

Specifying Employee Premium Limits

You can define limits on the employee's portion of a benefit premium by specifying a percent of gross limit on the Calculation Rules Table.

For example, current legislation in Hawaii requires that employers charge no more than 1.5% of an employee's gross wages for medical coverage. Only the employee's personal coverage is subject to this limit.

If the rate table indicates the employer pays part of the premium, then any premium in excess of this final employee deduction amount (in this case, 1.5% of gross wages) is redirected (added) to the employer-paid portion of the premium. If the employer does not pay part of the premium, then no redirection takes place.

If the calculation rule associated with the benefit plan specifies a percent of gross limit, then the system calculates the premium as follows:

Lesser of: [EE Premium Amount Subject to Limit or (Gross Pay * Limit%)],
plus (Total EE Premium Amount - EE Premium Amount Subject to Limit)

Suppose that a monthly-paid employee is enrolled in family medical coverage, which has a flat rate of \$300/month. The amount of the employee's portion is \$125. The following code shows how to apply a 1.0% of gross pay limit to the employee-only coverage:

Total EE Premium Amount = \$300
EE Premium Amount Subject to Limit = \$125
Limit = 1.0% of Gross Pay
Gross Pay = \$10,000

The deduction is calculated as:

[Lesser of (\$125 or (\$10,000*.01))] + (\$300 - \$125)
= [Lesser of (\$125 or \$100)] + (\$175)
= (\$100) + (\$175)
= **\$275**

The amount of the employee premium in excess of the limited deduction is \$25 (\$300 - \$275). This excess amount is added to the employer-paid premium.

Here's another example. Instead of the employee's single-coverage portion of the premium being a flat amount of \$125, let's define this as 30% of the premium amount:

Total EE Premium Amount = \$300
EE Premium Amount Subject to Limit = 30%
Limit = 1.0% of Gross Pay
Gross Pay = \$10,000

The deduction is calculated as:

[Lesser of (\$300 * 30%) or (\$10,000*.01))] + (\$300 - \$125)
= [Lesser of (\$90 or \$100)] + (\$175)
= (\$90) + (\$175)

= \$265

In this case, \$35 (\$300 - \$265) is added to the employer-paid premium.

Warning. PeopleSoft delivers a set of rates with an ID of IRS. PeopleSoft Payroll for North America uses these IRS rates to calculate imputed income. This table should not be changed.

Common Elements Used to Define Rates and Premium Limits

- Premium Pay Frequency** Define how you quote the cost of benefit rates.
- If the employee's pay frequency differs from the premium frequency, the system annualizes the coverage rates and divides by employee pay frequency to determine the pay period rate.
- Rate per Unit**
- For a flat rate, select None.
 - For a rate that applies to each \$100 of coverage, select Per Hundred.
 - For a rate that applies to each \$1000 of coverage, select Per Thousand.
- Specify Limit** Click Specify Limit to display the Amount To Limit page and set employee premium limits.

Pages Used to Define Rates and Premium Limits

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|------------------|--------------------|---|---|
| Age-Graded Rate | AGE_RATE_TABLE | <ul style="list-style-type: none"> • Define Business Rules, Define Base Benefits, Setup, Age-Graded Rate Table, Age-Graded Rate Table • Define Business Rules, Define General Data (NLD), Setup, Age-Graded Rate Table, Age-Graded Rate Table | Create rates based on age, sex, and smoking habits. |

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|--------------------|--------------------|--|---|
| Salary Rate Table | BAS_SALARY_RATE | Define Business Rules, Define Base Benefits, Setup, Salary Rate Table, Salary Rate Table | Define rates based upon a percentage of salary. |
| Service Rate Table | SERVICE_RATE_TABLE | Define Business Rules, Define Base Benefits, Setup, Service Rate Table, Service Rate Table Listing | Add rates that are based on length of service. |
| Flat Rate Table | BAS_FLAT_RATE_TBL | Define Business Rules, Define Base Benefits, Setup, Flat Rate Table, Flat Rate Table | Create rates that are based on a specific dollar amount. |
| Amount to Limit | AGE_RATE_LMT | Click the Specify Limit link from the Age-Graded Rate Table page. | Define the portion of the employee rate that is subject to the percent of gross pay limit defined on the Calculation Rule page. |
| Amount to Limit | BAS_SAL_RATE_LMT | Click the Specify Limit link from the Salary Rate Table page. | Set limits for base salary rates. . |
| Amount to Limit | SERVICE_RATE_LMT | Click the Specify Limit link from the Service Rate Table page. | Set limits for length of service rates. |
| Amount to Limit | BAS_FLAT_RATE_LMT | Click the Specify Limit link from the Flat Rate Table page. | Set limits for flat-amount rates. |

Defining Age-Graded Rates

Access the Age-Graded Rate page.

Age-Graded Rate

Age-Graded Rate Table ID: KA00

Age Graded Rate Table Find | View All First 1 of 1 Last

*Effective Date: 01/01/1980 + -

*Description: KA00 Short Description:

*Premium Pay Frequency: M Monthly *Rate per Unit: Per Thousd [Specify Limit](#)

Coverage/Price Find | View All First 1-5 of 22 Last

General **Employer Portion** Employee Portion

| *Gender | Age Range Low | Age Range High | Total Rate - Smoker | Total Rate - Nonsmoker | | |
|---------|---------------|----------------|---------------------|------------------------|---|---|
| Female | 1 | 24 | 0.040 | 0.040 | + | - |
| Female | 25 | 29 | 0.050 | 0.050 | + | - |
| Female | 30 | 34 | 0.070 | 0.070 | + | - |
| Female | 35 | 39 | 0.080 | 0.080 | + | - |
| Female | 40 | 44 | 0.090 | 0.090 | + | - |

Age-Graded Rate page (1 of 3)

Age-Graded Rate

Age-Graded Rate Table ID: KA00

Age Graded Rate Table Find | View All First 1 of 1 Last

*Effective Date: 01/01/1980 + -

*Description: KA00 Short Description:

*Premium Pay Frequency: M Monthly *Rate per Unit: Per Thousd [Specify Limit](#)

Coverage/Price Find | View All First 1-5 of 22 Last

General **Employer Portion** Employee Portion

| *Gender | Age Range Low | Age Range High | Smoker | Nonsmoker | | |
|---------|---------------|----------------|--------|-----------|---|---|
| Female | 1 | 24 | 0.040 | 0.040 | + | - |
| Female | 25 | 29 | 0.050 | 0.050 | + | - |
| Female | 30 | 34 | 0.070 | 0.070 | + | - |
| Female | 35 | 39 | 0.080 | 0.080 | + | - |
| Female | 40 | 44 | 0.090 | 0.090 | + | - |

Age-Graded Rate page (2 of 3)

Age-Graded Rate

Age-Graded Rate Table ID: KA00

Age Graded Rate Table Find | View All First 1 of 1 Last

*Effective Date: 01/01/1980 + -

*Description: KA00 Short Description:

*Premium Pay Frequency: M Monthly *Rate per Unit: Per Thousd Specify Limit

Coverage/Price Find | View All First 1-5 of 22 Last

General Employer Portion Employee Portion

| *Gender | Age Range Low | Age Range High | Smoker | Nonsmoker |
|---------|---------------|----------------|--------|-----------|
| Female | 1 | 24 | | |
| Female | 25 | 29 | | |
| Female | 30 | 34 | | |
| Female | 35 | 39 | | |
| Female | 40 | 44 | | |

Age-Graded Rate page (3 of 3)

Coverage/Price

Define rates for a specified gender, age range, and smoking habit.

The system calculates the employee portion of the premium based on the total rate and employer portion.

Note. We deliver a set of rates with an ID of IRS. PeopleSoft Payroll for North America uses these IRS rates to calculate imputed income. *This table should not be changed.*

Defining Salary Rates

Access the Salary Rate Table page.

Salary Rate Table

Percent of Salary ID: KS01

Salary Rate Table View All First 1 of 1 Last

*Effective Date: 01/01/1980 + -

*Description: KS01 Short Description:

*Percent of Salary: 1.000 Specify Limit

Employer Portion: 0.000

Employee Portion: 1.000

Salary Rate Table page

Employee Portion

Automatically calculated based on the total rate and employer portion

Defining Service Rates

Service Rate Table

Service Rate Table ID: TSTD

Service Rate Table Find | View All First 1 of 1 Last

*Effective Date: 01/01/1980 + -

*Description: TSTD Short Description:

*Premium Frequency: M Monthly *Rate per Unit: Per Hundrd [Specify Limit](#)

| After Months of Service | Total Rate | Employer Portion | Employee Portion |
|-------------------------|------------|------------------|--|
| 1 | 5.000 | 0.000 | 5.000 + - |
| 4 | 5.000 | 1.000 | 4.000 + - |
| 24 | 5.000 | 2.500 | 2.500 + - |
| 60 | 5.000 | 0.000 | 5.000 + - |

Service Rate Table page

Employee Portion

Automatically calculated based on the total rate and employer portion.

Defining Flat Rate Tables

Access the Flat Rate Table page.

| Coverage Rates | |
|----------------|--------|
| Total: | 0.3200 |
| Employer: | 0.3200 |
| Employee: | 0.0000 |
| Provider: | 0.3200 |

Flat Rate Table page

- Total** Include any administrative fee that you may charge.
- Employee** Automatically calculated from the total and employer amounts.
- Provider** The system automatically assigns the **Total** amount to the provider.
If you include an administrative fee in the total, override the provider amount with what you actually pay the provider.
The Provider amount is only informational; you can use it for reports of provider payments.

Defining Employee Premium Limits

Access the Amount to Limit page.

Amount to Limit page

- Rate Limit Code** Defines the portion of the employee rate that is subject to the percent of gross pay limit defined on the Calculation Rule page. You can select:

All. The entire employee rate is subject to the limit.

Flat Amount. Enter the amount that is subject to the limit.

Not Applicable. Select this option and the entire employee rate is subject to the limit.

Percent of Rate. Enter the percentage amount of the employee rate that is subject to the limit. This percentage amount cannot be greater than 100.

Setting Up Calculation Rules

You use calculation rules to define how deductions are calculated for each benefit plan. Calculation rules apply to the premium and the amount of coverage. When determining calculation rules, you need to understand:

- Compensation base and annual benefits base rate.
- (USF) Compensation base.
- Salary as-of dates.
- Employee compensation base.
- Age or service as-of dates.
- Coverage minimums and maximums.
- Calculation options.
- Rounding options.

Compensation Base versus Annual Benefits Base Rate

Some benefits, such as life and disability insurance, can be based upon the employee's actual compensation rate or an arbitrary annual benefits base rate (ABBR) that you define for the employee.

Calculation rules use an employee's earnings as part of the definitions. If you are going to base the employee's earnings on an amount other than the employee's regular compensation rate, you need to enter an amount in the Annual Benefit Base Rate field on the Compensation page of the Job Data components.

Note. If a calculation rule specifies that the Annual Benefits Base Rate should be used, but the employee has not been assigned an Annual Benefits Base Rate, the system will use the employee's regular compensation rate instead.

See Also

PeopleSoft Human Resources PeopleBook: Administer Workforce, “Hiring Your Workforce,” Hiring an Employee

(USF) Compensation Base

The compensation base is set through the PAR process. You can:

- Use the adjusted regular compensation amount provided in the Expected Pay page accessed from the Compensation Data page of the PAR component. The regular compensation amount will be the Base Pay for the employee's compensation frequency *With Locality/LEO Adjustment*.
- Override the FEGLI Base rate.

The system uses the regular adjusted compensation amount for benefit processing. The exception to this rule is FEGLI plans: you can have the system use a different base rate when processing FEGLI plans by overriding the FEGLI Base. The FEGLI Base mirrors the quoted Total Pay until it is overridden.

See Also

PeopleSoft Human Resources PeopleBook: Administer Workforce, “USF - Hiring Employees”

Salary As-Of Dates

If the premium or coverage is based on employee salary, you can specify the salary *as of*:

- A specific day and month for the current year.
- A specific day and month for the previous year.
- The current pay period.
- The next pay period.

When Multiple Jobs is selected, you must also tell the system which jobs to use when calculating the employee's earnings.

The calculation possibilities with as-of rates are:

| Premium | Coverage | Calculation |
|----------------|-----------------|--------------------|
| Current | Current | As now |
| As/of | Current | See First Example |
| As/of | As/of | See Second Example |
| Current | As/of | Invalid |

Example #1: Employer Pays Increased Premium

An employee belongs to a life insurance plan that uses the premium as of January 1, current year and coverage as of the current date. The system uses the benefit base for the calculation.

| Employee | Effective Date | Salary | Benefit Base |
|-----------------|-----------------------|---------------|---------------------|
| Ann Jeffrey | 01/01/91 | 10,000 | 12,000 |
| | 04/01/91 | 15,000 | 15,000 |
| | 01/01/92 | 17,500 | 18,000 |
| Table | Effective Date | Rate | Per |
| Life (employee) | 01/01/91 | 1.00 | Thousand |
| Life (employer) | 01/01/91 | 2.00 | Thousand |

The employee gets a raise, so coverage increases during the year; however, until the next January 1, the system calculates the employee premium as if the coverage did not increase. The employer pays the difference between the employee deduction and the actual cost. This affects imputed income.

| Pay End Date | Coverage | Employee Amount | Employer Amount |
|---------------------|-----------------|------------------------|------------------------|
| 01/31/91 | 12,000 | 12.00 | 24.00 |
| 02/28/91 | 12,000 | 12.00 | 24.00 |
| 03/31/91 | 12,000 | 12.00 | 33.00 |
| 04/30/91 | 15,000 | 12.00 | 33.00 |
| 05/31/91 | 15,000 | 12.00 | 33.00 |

Example #2: Coverage and Premium Remain the Same

Another employee belongs to a life insurance plan that uses the premium as of January 1, current year and coverage as of January 1, current year.

| Employee | Effective Date | Salary | Benefit Base |
|-----------------|-----------------------|---------------|---------------------|
| Jim Henry | 01/01/91 | 10,000 | 12,000 |
| | 04/01/91 | 15,000 | 15,000 |
| | 01/01/92 | 17,500 | 18,000 |
| Table | Effective Date | Rate | Per |
| Life (employee) | 01/01/91 | 1.00 | Thousand |
| Life (employer) | 01/01/91 | 2.00 | Thousand |

There is no change in Jim Henry's coverage or premium until the new year.

| Pay End Date | Coverage | Employee Amount | Employer Amount |
|---------------------|-----------------|------------------------|------------------------|
| 01/31/91 | 12,000 | 12.00 | 24.00 |
| 02/28/91 | 12,000 | 12.00 | 24.00 |
| 03/31/91 | 12,000 | 12.00 | 24.00 |
| 04/30/91 | 15,000 | 12.00 | 24.00 |
| 05/31/91 | 15,000 | 12.00 | 24.00 |

Page Used to Set Up Calculation Rules

| Page Name | Object Name | Navigation | Usage |
|-------------------|--------------------|--|---|
| Calculation Rules | CALC_RULES_TABLE | Define Business Rules, Define Base Benefits, Setup, Calculation Rules Table, Calculation Rules Table | Use the Calculation Rules Table - Calculation Rules page to define the “as of” dates. |

Defining Calculation Rules

Access the Calculation Rules page.

Calculation Rules

Calculation Rules Table ID: B001

Calculation Rules Table Find | View All First 1 of 1 Last

*Effective Date: + -

*Description: **Short Description:**

Salary As Of

Combine Salary for Multi Jobs **Consider Active Jobs Only**

*Group Method: ▼

*Premium Calculation: ▼

*Coverage Calculation: ▼

Calculation Rules page (1 of 2)

| Age/Service As Of | |
|-------------------|------------|
| *Age As Of: | Check Dt ▾ |
| *Service As Of: | Check Dt ▾ |
| *Age Source: | Employee ▾ |

| Coverage Options | Calculation Options |
|-----------------------|---------------------------------------|
| Coverage Minimum: | *Add Flat Amount Option: After Fctr ▾ |
| Coverage Maximum: | Max Deduction % of Gross Pay: 1.000 |
| Maximum Benefit Base: | *Benefits Base: Annual Rt ▾ |

| Rounding Options | |
|--|--|
| <input checked="" type="checkbox"/> Use Rounding Rules | <input checked="" type="checkbox"/> Round Benefits Base |
| *Round Up On: 500.00 | <input type="checkbox"/> Round Factored Benefits Base Before Adding Flat Amount |
| *Round to Multiple of: 1000 | <input checked="" type="checkbox"/> Round Final Calculated Covrg |

Calculation Rules page (2 of 2)

| | |
|--------------------------------------|--|
| Effective Date | Must be the same as or prior to the effective dates of the one or more benefit program and benefit plan combinations that you associate the calculation rules with. |
| Combine Salary for Multi Jobs | Select to activate the grouping method for multiple jobs |
| Consider Active Jobs Only | If you selected Combine Salary for Multi Jobs, select this option to have the system only look at jobs with a status of <i>Active</i> in the Job Data components. |
| Group Method | If you selected Combine Salary for Multi Jobs, select the grouping method to use when calculating premium and coverage amounts. Choose from: <i>AllFlagged:</i> All flagged jobs, regardless of benefit record number, are included in the calculation. <i>Flagged BR:</i> All flagged jobs within the current benefit record number are included in the calculation. <i>Primary:</i> Only the primary job within the current benefit record number is included in the calculation. |
| Premium Calculation | Select the employee salary that will be used for the premium calculation. Choose from: <i>Cur/Chk Dt</i> (current/check date): Indicates that PeopleSoft Payroll uses the pay end date to calculate premiums. |

Last Yr On (last year on): Indicates a specific date last year. You must enter the month and day.

This Yr On (this year on): Indicates a specific date this year. You must enter the month and day.

Coverage Calculation

Select the employee salary that will be used for the coverage calculation.

Age As Of

Used to calculate rates for life plans that you associate with age-graded rates. If you don't use the Age-Graded Rate Table, leave this field blank.

Service As Of

Used to calculate rates for plans that you base on years of service. If you don't use the Service Rate Table, leave this field blank.

Service As Of

Used to calculate rates for plans that you base on years of service. If you don't use the Service Rate Table, leave this field blank.

Age Source

Designate whose personal information that you want to use. Choose from **Dependent**, **Employee**, or **Spouse**.

The system only uses dependent age and demographic information for Dependent Life plans that are designated as Sum of Dependent Coverage. A Flat Amount or Factor Plus Base Dependent Life plan typically has a premium that is based not on the number or demographics of the dependents covered, but on the coverage amount. Flat Amount and Factor Plus Base Dependent Life plans should therefore only use employee or spouse demographics.

If the system cannot locate a birth date for a dependent or spouse, it generates a warning that a birth date was not located, and uses the employee's age instead, while still retaining the dependent's sex and smoker status.

Coverage Minimum

Enter the minimum amount of coverage an employee can receive for individual plans with this set of calculation rules. The system does not round over or under these amounts.

Coverage Maximum

Enter the maximum amount of coverage an employee can receive for individual plans with this set of calculation rules. The system does not round this amount.

If you use the Coverage Group Table to define a coverage group maximum for one or more life and AD/D plans that you link with this set of calculation rules, the system may force a lower minimum for the employee than the one that you enter here. That's because the system calculates the coverage group maximum last.

| | |
|--|--|
| | <p>If you are using calculation rules for general credits and if you enter a coverage maximum, PeopleSoft Benefits Administration will limit employee salary to that coverage maximum before calculating credits. If you do not want to limit the salary, leave Coverage Maximum blank.</p> |
| <p>Maximum Benefit Base</p> | <p>Enter an amount to limit the portion of an employee's salary that is used to calculate the premium and coverage amounts.</p> <p>This field is no longer used for the 401(a)(17) limit, which is now defined on the Limit table.</p> |
| <p>Add Flat Amount Option</p> | <p>If you have set up a benefit plan where coverage is based upon a Factor x Benefit Base + Flat Amount, select how you want the flat amount applied. You can choose from:</p> <p><i>After Fctr</i> (after factor): Arranges the equation as (Factor x Salary) + Flat Amount.</p> <p><i>Before Fctr</i> (before factor): Arranges the equation as Factor x (Salary + Flat Amount).</p> |
| <p>Max Deduction % of Gross Pay (maximum deduction percentage of gross pay)</p> | <p>If you have employees in Hawaii, state laws mandate that employers charge no more than 1.5% of gross wages for employee-only coverage.</p> <p>Use this field to establish a calculation rule with Max Deduction % of Gross Pay set to a value of 1.5 or lower. This rule will be attached to the Cost row of the benefit plan coverage code associated with employee-only coverage.</p> <p>This deduction calculation is performed when:</p> <ul style="list-style-type: none"> • The Pay Calculation process is being run. • The plan type is <i>Health</i>. • The coverage code is Employee Only. • The calc rule ID is defined. • The values for Max Percent of Gross Pay, Deductions, and Gross Pay are all greater than zero. <p>The Max Deduction % of Gross Pay calculation looks like this:</p> $\text{Deduction} = \text{Max Percent of Gross Pay} * \text{Federal Taxable Gross Pay} / 100.$ <p>The smaller deduction appears on the paycheck.</p> |
| <p>Benefits Base</p> | <p>Designate the rate of pay used to make calculations. Select either</p> |

Annual Rate to use the regular compensation base entered on the Job Data - Compensation page.

Annual Benefits Base Rate to use the amount entered in the annual benefits base rate entered on the Job Data - Compensation page.

Note. For federal users, Annual Benefits Base Rate corresponds to the Total Pay field on the Expected Pay page of the PAR Compensation Data component.

Round Up On

Enter the amount to round up on.

Round to Multiple of

Enter the multiple that you want to round to.

For example, if the benefits base rate for an employee is \$46,746 and you enter \$1,000 in Round to Multiple of and \$500 in Round Up On, the system calculates and rounds coverage for the employee as follows:

$$46746/1000 = 46, \text{ with a remainder of } 746$$

$$746 \text{ is greater than } 500, \text{ so } 46 + 1 = 47$$

$$47 \times 1000 = 47,000 \text{ Coverage Amount}$$

Round Benefits Base

Rounds the benefit base according to the rules set up in the Round Up On and Round to Multiple of fields before performing any other calculation.

Use this option when pay is equal to the benefits base with no flat amount added.

Round Factored Benefits Base Before Adding Flat Amount

Rounds the factored benefits base according to the rules set up in the Round Up On and Round to Multiple of fields before adding a flat amount.

Displayed only if you select **After Factor** in the Add Flat Amount Option field.

Round Final Calculated Covrg (round final calculated coverage)

Select to round the final coverage amount according to the rules set up in the Round Up On and Round to Multiple of fields.

Setting Up Coverage Codes

This section provides an overview of coverage codes and describes how to:

- Define coverage codes.
- (USF) Define FEGLI coverage codes.

Understanding Coverage Codes

You define and manage coverage codes for your benefit programs with the Coverage Code Table. You attach these coverage codes to your benefit plan options (usually life and AD/D plans) through the Plan Type and Option page of the Benefit Program Table.

PeopleSoft delivers seven basic coverage codes, described in the table below.

| Coverage Code | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|------------------------------|--|--|-----------------------|---|---|------------------------|--------------------------------|
| Description | Employee Only (USF) Self Only – Low | Employee + Spouse (USF) Self + Family – Low | Employee + Dependents | Family (USF) Self Only – High -- | Non-qualified Adult (USF) Self + Family – High - | Non-qualified Children | Non-qualified Adult + Children |
| Minimum Number of Dependents | 0 | 1 | 1 | 2 (USF) 1 - - | 1 | 1 | 2 |
| Maximum Number of Dependents | 0 | 1 (USF) 99 | 99 | 99 | 1 | 99 | 99 |
| Spouse Coverage | Not Allowed | Required | Not Allowed | Required | Not Allowed | Not Allowed | Not Allowed |
| Nonqualified Coverage | Not Allowed | Not Allowed (USF) Allowed | Not Allowed | Not Allowed | Required (USF) Allowed | Required | Required |

Pages Used to Set Up Coverage Codes

| Page Name | Object Name | Navigation | Usage |
|--|---------------|---|------------------------|
| Coverage Code Tbl (coverage code table) | COVRG_CD_TBL | <ul style="list-style-type: none"> Define Business Rules, Define Base Benefits, Setup, Coverage Codes, Coverage Code Table Define Business Rules, Define General Data (NLD), Setup, Coverage Codes, Coverage Code Table | Define coverage codes. |
| FEGLI Code Table | GVT_FEGLI_TBL | Define Business Rules, Define Base Benefits, Setup, FEGLI Code Table | Define coverage codes. |

Defining Coverage Codes

Access the Coverage Code Tbl page.

Coverage Code Tbl

Coverage Code: 4

Coverage Codes
Find | View All First 1 of 1 Last

*Effective Date: 01/01/1900

*Status: Active

*Description: Family

Short Description: Family

Min No of Dependents Allowed: 2 *Dependent Coverage: Spouse Required

Max No of Dependents Allowed: 99 *Non Qualified Dep Coverage: Not Allowed

COBRA Coverage Set:

Coverage Code Tbl page

Min No of Dependents Allowed (minimum number of dependents allowed) and **Max No of Dependents Allowed** (maximum number of dependents allowed) If there is no limit, enter **99**.

| | |
|---|--|
| Spouse Coverage | The coverage codes PeopleSoft delivers either do not allow the participant to have a spouse or require the participant to have a spouse. Note. You would only use Allowed when you do not want the coverage code to require that one of the dependents <i>must</i> be a spouse. |
| Non Qualified Dep Coverage (nonqualified dependent coverage) | This governs whether or not domestic partners, their children, and other dependents deemed "nonqualified" by IRS Section 152 are not allowed or required by this coverage code. PeopleSoft delivers three coverage codes for nonqualified dependents. All of them require nonqualified dependent coverage but do not allow spouse coverage. |
| Cobra Coverage Set | Enter a two digit code if you want this coverage code to be used by COBRA. |

Setting Up Limits for Benefit Savings Plans

Certain qualified benefit savings plans may be subject to government regulations. This section provides an overview of limits and describes how to set up:

- 401(a) limits.
- 402(g) limits.
- 403(b) limits.
- 415 limits.
- 457 limits.

Understanding Limits

Limits are tied to deduction codes. When your payroll department runs the pay calculation process, the system checks to see whether a deduction has any limits associated with it. If it does, the system runs the testing calculations and makes the limit adjustments to every affected employee's records. If a deduction cannot be taken, it is reported with the appropriate Reason-Not-Taken Code.

401 Limit

The 401 limit is designed to eliminate the tax advantage highly compensated employees have by participating in qualified plans. This limit sets up a maximum cap on the employee's annual earnings during the calculation of the employee's contribution. When calculating the employee annual earnings, the 401 limit is applied against the Special Accumulator field defined on the Savings Plan tables, not on the Special Accumulator field on the Limit Table.

402 Limit

The 402 limit imposes a flat dollar annual limit on the amount an employee can contribute as an elective deferral.

403 Limit

The 403 limit determines the maximum amount an employee can contribute to 403(b) savings plans. In addition to the 403 limits, 403(b) savings plans are also subject to 402 and 415 limits. The 403 limit is also known as the Maximum Exclusion Allowance (MEA).

To calculate this amount:

1. Multiply the employee's eligible earnings by 20%.
2. Multiply the figure by the employee's total years of service.
3. Subtract the prior year's pretax contributions.

415 Limit

The 415 limit restricts the total amount an employee can contribute to defined savings plans. 401(k) plans are the most common type of defined savings plans to fall under Section 415, but other types include profit-sharing, money purchase pensions, stock bonuses, thrift savings, and target benefit plans.

Employee year-to-date contributions cannot exceed either:

- A specific percentage amount of the employee's eligible earnings.
- A specific flat annual amount.

If, for a given payroll, the employee's contribution exceeds the limits, the contribution must be reduced to fall within the limits.

415Z Limit

This is identical to the 415 limit with the exception that it applies to 403(b) plans only.

457 Limit

Section 457 plans are deferred compensation plans offered by state and local governments and employers that are exempt from federal income tax. The amount deferred annually by an employee cannot exceed a specific flat amount or one-third of the employee's taxable income, whichever is less.

Common Elements Used to Define Limits

| | |
|--|--|
| Rollover Allowed | Select if you want any contribution amount that exceeds the limit to roll over to another plan type or tax class. The actual destination of the excess funds is defined on the Savings Plan Table. |
| Maximum Benefit Base | The amount you enter in this field is determined by IRS regulations. It determines the maximum cap on the employee's annual earnings during the calculation of the employee's contribution. |
| Maximum Yearly Deduction | Enter the flat cap on yearly contributions. |
| Special Accumulator | Used to determine which year-to-date and current employee earnings are eligible for limit testing. |
| Max Percent of Accumulator (maximum percentage of accumulator) | Enter the percentage amount to use when calculating the maximum amount the employee can contribute. |
| Deductions Subject to Limit | <p>Select the deduction codes for any and all benefit plans that fall under the specified limit. This list should be as comprehensive as possible. Both general deductions and benefit plans may be specified.</p> <p>To associate a limit to a deduction enter the plan type, benefit plan, general deduction code, and deduction class.</p> <p>A single plan type may require more than one deduction classification. You may have to insert rows for after-tax, before-tax, nontaxable benefit and nontaxable pre-tax benefit classifications for a single 401(k) plan.</p> |
| Deductions Which Add to Spcl Accum (deductions which add to the special accumulator) and | <p>Enter deductions to add to the special accumulator. These are the taxable benefits that the IRS stipulates may be included in the calculation of the limits.</p> <p>The system increases the employee's eligible earnings by the total year-to-date plus the current amount of the taxable benefits you enter here before calculating the employee's current limit.</p> <p>To add a deduction to a special accumulator, enter the plan type, benefit plan, general deduction code, and deduction class.</p> |
| Deductions Which Subtract From Spcl Accum (deductions which subtract from the special accumulator) | <p>Enter the deductions that subtract from the special accumulator. These are deductions that the IRS stipulates must be excluded from the calculation of the limits. (Ordinarily, these are before-tax deductions, but you may encounter exceptions.)</p> |

The system reduces the employee's eligible earnings by the total year-to-date plus current amount of the deductions you enter here before calculating the employee's current limit.

For each taxable benefit, fill in the plan type, benefit plan, deduction code, and deduction class.

Page Used to Define Limits

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|------------------|--------------------|--|--|
| Limit Table | LIMIT_TBL1 | Define Business Rules, Define Base Benefits, Setup, Limit Table, Limit Table | Identify the rules that apply to the 401, 402, 403, 415, and 457 limits. |

Setting Up 401(a) Limits

Access the Limit Table page for 401(a) limits.

Limit Table

Limit Type: 401(a) Limit

Employee Earnings Limits Find | View All First 1 of 1 Last

*Effective Date: 01/02/2000 [BY] Rollover Allowed + -

*Description: 401 Short Description: 401

Maximum Benefit Base: \$170,000.00

▶ Deductions Subject To Limit

Limit Table - 401(a) Limit page

Setting Up 402(g) Limits

Access the Limit Table page for 402(g) limits.

Limit Table

Limit Type: 402(g) Limit

Employee Earnings Limits Find | View All First 1 of 1 Last

*Effective Date: 01/02/2000 Rollover Allowed + -

*Description: 402 Short Description: 402

Maximum Yearly Deduction: 10500.00

Deductions Subject To Limit

Limit Table - 402(g) Limit page

Setting Up 403(b) Limits

Access the Limit Table page for 403(b) limits.

Limit Table

Limit Type: 403(b) Exclusion Limit

Employee Earnings Limits Find | View All First 1 of 1 Last

*Effective Date: 01/01/2000 Rollover Allowed + -

*Description: 403 Short Description: 403

Special Accumulator: 401 Max Percent of Accumulator: 20.000

403b Limits

*403(b) Service Prorated By: FTE

Alternative Limits Parameters

Year of Separation Limit Years: 10

Any Year Limit Additional Excl: 40000.00

Any Year Maximum Exclusion: 15000.00

402(g) Limits and Cap Expansions

*Elect 402(g) Cap Expansion: Automatic Election

402(g) Per Year Max Average: 5000.00 402(g) Lifetime Cap Expansion: 15000.00

402(g) Annual Cap Expansion: 3000.00

Limit Table - 403(b) page (1 of 2)

- ▶ Deductions Subject To Limit
- ▶ Deductions Which Add to Spcl Accum
- ▶ Deductions Which Subtract From Spcl Accum

Limit Table - 403(b) page (2 of 2)

403(b) service Prorated By

Select the proration method to use for the 403(b) Service Year calculation in the Projection process. This information is pulled from the employee's Job record.

Alternative Limit Parameters

Some employees may be eligible to increase their maximum tax deferred contribution amounts. Enter the parameters that govern the amount by which an employee may increase the annual contribution.

Alternative Limits Parameters and 402(g) Limits and Cap Expansions

All these fields are determined by IRS regulations. Enter the current approved standards.

Setting Up 415(c) Limits

Access the Limit Table page for 415(c) limits.

Limit Table

Limit Type: 415(c) Limit

Employee Earnings Limits Find | View All First 1 of 1 Last

| | | | |
|----------------------|---|--|---------------------------------------|
| *Effective Date: | <input type="text" value="01/02/2000"/> | Rollover Allowed <input checked="" type="checkbox"/> | + - |
| *Description: | <input type="text" value="415"/> | Short Description: | <input type="text" value="415"/> |
| Special Accumulator: | <input type="text" value="B13"/> | Max Percent of Accumulator: | <input type="text" value="25.000"/> |
| | | Maximum Yearly Deduction: | <input type="text" value="35000.00"/> |

- ▶ Deductions Subject To Limit
- ▶ Deductions Which Add to Spcl Accum
- ▶ Deductions Which Subtract From Spcl Accum

Limit Table - 415 Limit page

Setting Up 457 Limits

Access the Limit Table page for 457 limits.

| Limit Table | |
|--|--|
| Limit Type: | 457 Limit |
| Employee Earnings Limits Find View All First 1 of 1 Last | |
| *Effective Date: | 01/01/2000 <input type="text"/> |
| *Description: | Section 457 Savings Plan Limit |
| Special Accumulator: | 401 <input type="text"/> |
| Rollover Allowed | <input checked="" type="checkbox"/> + - |
| Short Description: | Sec 457 |
| Max Percent of Accumulator: | 33.333 |
| Maximum Yearly Deduction: | 9000.00 |
| 457 Plans | |
| Max Annual 457 Catch Up: | 15000.00 |
| ▶ Deductions Subject To Limit | |
| ▶ Deductions Which Add to Spcl Accum | |
| ▶ Deductions Which Subtract From Spcl Accum | |

Limit Table - 457 Limit page

Maximum Annual 457 Catch Up

Section 457 plans have a catch-up rule. Within three years of retirement, a participant may increase the amount contributed to the savings plan. This field is determined by IRS regulations.

CHAPTER 4

Organizing Payroll Information for Base Benefits

This chapter discusses how to:

- Establish the benefits compensation base.
- Define leave and vacation earnings.
- Define special accumulators.
- Set up benefit deductions.

Defining Leave and Vacation Earnings

Leave plans and vacation buy and sell plans are benefits-related earnings that allow for an employee to receive income. This sections explains how to set up payroll information for:

- Leave accruals.
- Vacation buy and sell earnings.

See Also

PeopleSoft Payroll for North America PeopleBook, “Defining Earnings and Using Earnings Codes”, Establishing Earnings Programs

Setting Up Payroll Information for Leave Accruals

This section assumes that your payroll department utilizes PeopleSoft Payroll for North America. If your organization uses another payroll accounting system, you’ll need to ensure that the proper information is provided to the system for the correct processing of leave accruals.

Defining Leave Earning and How Earnings Affect Accruals

1. On the Earnings Table - Special Process page enter the leave plan type for the leave plan you’re defining in the Leave Plan Accrual group box.
2. Select the appropriate Add To Accrual Balance check box.

Add To Accrual Balance is important during the PeopleSoft Payroll Confirm process. It enables you to indicate where the accrued hours will be posted as Unprocessed Data on the employee's Leave Accruals pages.

3. You can choose to add hours to the Taken, Service Hours, Adjusted, Bought, and Sold accumulators.

The Leave Accrual process retrieves data from these sections to calculate the leave accrual award and the resulting leave accrual balance.

4. Select Taken when you want these hours to reduce the accrual balance (as in taken vacation hours or sick hours—but not regular hours).

Select Service Hours when the associated Leave Plans accrue a leave balance based upon the number of hours worked, and the hours for this earnings code should be considered in the accrual calculation.

5. Select Adjusted to define a special Earnings Type that adjusts accrual balances by adding to or subtracting from employee accrual balances.

Select Bought or Sold only when you are using this earning as the Vacation Buy or Vacation Sell earning.

Setting Up Vacation Buy and Sell Earnings

Organizations typically allow employees to buy or sell vacation once, at the beginning of a plan year, based on vacation buy and sell earnings, deduction, and benefit plan rules.

| |
|--|
| To set up vacation buy/sell earnings: |
|--|

1. Navigate to the Earnings Table - Special Process page.
2. For Vacation Buy plans, select *Bought* in the **Add to Accrual Balance** group box .
3. For Vacation Sell plans, select *Sold* in the **Add to Accrual Balance** group box .

Defining Special Accumulators

Sometimes it is necessary to define an employee's earnings based on specific types of earnings rather than total gross earnings. Special Accumulators accumulate only the earning types you want included in determining the employee's earnings.

For example, you might use a special accumulator to identify all the separate earnings to include when accumulating employee earnings for 401(k) deductions.

To name the special accumulator, use the Special Accumulator Table. Then, use the Earnings Table to identify all the separate earnings types, like regular earnings and vacation earnings, that you'll include in the computation of the special accumulator. In the Federal Government,

special accumulators are used to calculate the wages of hourly-paid wage grade employees. These accumulators are associated with pay plans in the Pay Plan Table.

See Also

PeopleSoft Payroll for North America PeopleBook, “Defining Earnings and Using Earnings Codes”, Establishing Special Accumulator Types

Setting Up Benefit Deductions

In this section, we discuss benefit deductions and how to:

- Define benefit deductions.
- Assign deduction classifications.
- Define how tax classifications affect tax calculations.
- Establish rules for partial deductions and arrears.
- Schedule deductions.
- Make changes to deductions.

Understanding Benefit Deductions

Deductions are amounts taken from employee pay during regular payroll processing. There are two types of deductions:

- **Benefit-related deduction:** An example of a benefit-related deduction is medical insurance—an employee pays an amount, usually each pay period, toward the cost of medical insurance.
- **General deduction:** An example of a general deduction is union dues.

Work with your Payroll department when setting up benefit deductions and do the following:

- Define standard arrears payback amounts.
- Define imputed income deduction information.

Deduction information includes a Deduction Code and your business rules for how to process the deduction—the priority of the deduction, how it affects taxes, related general ledger account codes, and other special payroll process indicators, such as how you handle arrears.

Benefit deduction rules work in conjunction with the rules that you define for each of your benefit plans. To calculate a benefit deduction, payroll uses both the benefit deduction rules and benefit plan rules. After you set up your rules and enroll employees, payroll will process deductions during each pay cycle.

Deductions are calculated for employees based upon their active enrollment in a benefit plan, or a general deduction.

Designing a Benefit Deduction Strategy

Make some basic decisions about your strategy before you set up deduction rules. These decisions depend in part upon how you want to report deductions to employees.

From an accounting viewpoint, you can use a deduction for more than one benefit plan if both plans are the same. For example, if you are processing characteristics for all medical plans, such as GL (general ledger) expense and liability accounts and tax implications, you might consider using the same deduction rules in order to reduce data entry.

However, besides accounting considerations, you'll want to consider how benefit deduction amounts and descriptions appear on employee paycheck stubs. Here's a quick reference chart that shows the basic benefit deduction pay stub reporting options:

| Objective | Action | Result on Pay Stubs: |
|---|---|---|
| To report the amount for each benefit plan. | Define a deduction code for each benefit plan—such as one for each medical, dental, and savings plan. | Itemized descriptions and deduction amounts appear for each selected plan type. |
| To report one total for a plan type. | Define a deduction code for a specific plan type—such as a single deduction code for all medical plans. | The total of all deductions for the selected plan type appears, along with the plan type's generic description. |
| To report one total for all deductions. | Customize your pay check print program to print the total deduction for several plan type series. For example, you might print the total deductions for all health and life plan type series, while still showing a separate deduction for a savings plan, like 401(k). | The total deduction of all plan types that you customize appears. |

Note: When an employee has worked less than a full pay period, PeopleSoft Payroll's Pay Calculation process will prorate Federal Employee Health Benefits (FEHB) and Federal Employee Group Life Insurance (FEGLI) deductions according to OPM (Office of Personnel Management) rules.

See Also

PeopleSoft Payroll for North America PeopleBook, "Calculating Pay"

Defining Benefit Deductions

Once you have a strategy for designing your benefit deductions, you'll use the Deduction Table to set up the deduction. The Setup page defines the Plan Type and Deduction Code. You will be prompted for these values when adding a new deduction code. Otherwise you can work with the set of preexisting plan types and deduction codes. In this section, we'll discuss only those fields that are important for benefit deductions.

See Also

PeopleSoft Payroll for North America PeopleBook, "Defining Deductions"

PeopleSoft Payroll Interface PeopleBook, "Defining Deductions"

Making Changes to Deductions

When employee net pay is insufficient to cover a deduction and it's not possible to deduct all appropriate amounts, the employee is in *arrears*. In other words, the employee owes the employer for a deduction that could not be made.

The frequency with which a deduction is taken on an employee's paycheck is normally controlled through the deduction table and paygroup. You can use Deduction Period to override the deduction frequency.

Pages Used to Override Maximum Arrears Payback

| Page Name | Object Name | Navigation | Usage |
|-------------------------------|--------------------|--|--|
| Benefit Arrears/Frequency Ovr | BENEF_DED_OVERRIDE | Compensate Employees, Administer Base Benefits, Use, Benefit Arrears/Frequency Ovr | Use this page to make changes to the frequency of a deduction for individual employees, and change the arrears deduction amount. |

Defining Maximum Arrears Payback Amount

Benefit Arrears/Frequency Ovrd

Santos, Antonio ID: KU0010

Find | View All First 1 of 1 Last

*Plan Type: + -

Benefit Plan:

| | |
|---|--|
| Deduction Period | Maximum Arrears Payback <input type="checkbox"/> <input type="text"/> |
| <input checked="" type="checkbox"/> First Pay Period | Company: GBI |
| <input type="checkbox"/> Second Pay Period | Pay Group: KU1 |
| <input type="checkbox"/> Third Pay Period | Employee Status: Active |
| <input type="checkbox"/> Fourth Pay Period | Benefit Program: GBI US Fulltime Benefit Pgm |
| <input type="checkbox"/> Fifth Pay Period | Currency: USD |

Benefit Arrears/Frequency Ovrd (benefit arrears/frequency override) page

Maximum Arrears Payback Enter the maximum amount of arrears payback that can be taken out of paycheck.

Deduction Period Select the pay period from which the deduction is to be taken.

Working With Imputed Income

Imputed income is “theoretical income” that a company pays on behalf of an employee which is added to the employee’s gross wages but is not received by the individual. There are three types of benefit plans that can have imputed income considerations.

- Group Term Life
- Dependent Life
- Nonqualified health plans

For the system to add this income to an employee’s gross wages, the deduction code for the plan must have a tax classification that adds to FICA.

See Also

PeopleSoft Payroll for North America PeopleBook, “Defining Deductions” and “Handling Group-Term Life Insurance”

CHAPTER 5

Setting Up Benefit Plans

This chapter provides an overview of benefit plans and discusses how to:

- Define benefit plans.
- Set up:
 - Health plans.
 - Life insurance and AD&D plans.
 - Disability plans.
 - Savings plans.
 - Leave plans.
 - FMLA plans.
 - FSA plans.
 - Retirement plans.
 - U.S. pension plans.
 - (CAN) Canadian pension plans.
 - Vacation buy/sell plans.

Understanding Benefit Plans

When structuring benefit programs and plans, start by mapping your current offerings to the PeopleSoft system. For example, if your organization has a standard set of benefits for all employees, you might have only one or two benefit programs that share many of the same plans—perhaps one for salaried employees and one for hourly employees. But if your organization offers a variety of benefits that cater to a variety of employee groups, you might need more benefit programs with several plans for each plan type.

| |
|--|
| To set up benefit plans and benefit programs: |
|--|

1. Identify the benefit plans your organization is offering.

2. Set up deduction codes, rates, calculation rules, and coverage codes for nonqualified dependents.
3. Set up providers and group numbers.
4. Define the plan and enter plan details.

Understanding Plan Types

Every benefit plan in PeopleSoft is distinguished by a unique combination of plan type and plan name. Plan types are assigned a numerical value and are divided into categories based upon those values. For example, all health-related plan types begin with a *I*, so all plan types in the range of 10–19 are recognized by the system as health plans.

For each plan category, you can add types by including a letter value with the predefined number value. Since all health plan types start with a *I*, for example, you can add plan types with values from 1A to 1Z.

Because PeopleSoft adds plan types starting from the beginning of the alphabet, we recommend that you start with *Z* and work backward to *A*.

Note. You should work within the PeopleSoft plan type series. If you add plan types that do not conform to the provided series, you'll have to add the new plan type to the Translate Table and update associated processing logic.

Domestic Partner Plan Types

Base Benefits includes health and life plan types for employees with *nonqualified* dependents—in other words, dependents that do not qualify under IRS Section 152 as legal dependents. You can use these plan types for domestic partner benefits.

In order to set up a benefits system that includes domestic partner benefit processing, you'll need to use specific deduction codes, benefit plans, calculation rules, rates, and coverage codes. Later, when you're building your organization's benefit programs, you'll bring all of these building blocks together to create a benefit program that efficiently processes both qualified and nonqualified dependents efficiently.

Summary of Plan Types

| Plan Type Series | Plan Types Delivered by PeopleSoft | Description |
|---|--|---|
| Health Plans have these plan type numbers: 10–19, 1A–1Z | 10 11 12 13 14 15 16 17 | Medical (USF) FEHB Dental Medical/Dental Major Medical Vision Nonqualified Medical Nonqualified Dental Nonqualified Vision |
| Life Insurance Plans have these plan type numbers: 20–29, 2A–2Z | 20 21 22 23 24 25 26 27 2Y 2Z | Basic Life (USF) FEGLI Supplemental Life (USF) Option B - Additional (FEGLI) AD/D Life and AD/D Dependent AD/D Dependent Life (USF) - Option C - Family (FEGLI) Survivor Income Supplemental AD/D (USF) FEGLI Living Benefits (USF) Option A - Standard (FEGLI) |
| Disability Plans have these plan type numbers: 30–39, 3A–3Z | 30 31 | Short-Term Disability Long-Term Disability |

| Plan Type Series | Plan Types Delivered by PeopleSoft | Description |
|---|--|--|
| Savings Plans have these plan type numbers: 40–49, 4B–4Z | 40 41 42 43 44 45 46 47 48 4A | 401(K) Profit Sharing Thrift IRA Capital Accumulation U.S. Savings Bonds Elective 403(b) Non-Elective 403(b) Employer Only Stock Purchase (Stock purchase administration only) |
| Leave Plans have these plan type numbers: 50–59, 5A–5Z | 50 51 52 53 5A | Sick Leave Vacation Leave Annual Leave Personal Leave FMLA Leave (obsolete) Company Car (European organizations only) |
| Flexible Spending Account Plans (U.S. and Canada) have these plan type numbers: 60–69, 6A–6Z | 60 61 65 66 | Health Care - FSA Dependent Care - FSA (CAN) Canadian Health Care (CAN) Canadian Retirement Counseling |
| Retirement Plans (United States) have these plan type numbers 70–79, 7A–7Z | 70 7Z | PERS, Retirement (USF) TSP 1% Agency Contribution |

| <i>Plan Type Series</i> | <i>Plan Types Delivered by PeopleSoft</i> | <i>Description</i> |
|---|---|-----------------------------|
| Pension Plans (U.S. and Canada) have these plan type numbers: 80–89, 8A–8Z | 80 | (CAN) Standard Pension |
| | 81 | (CAN) Supplementary Pension |
| | 82 | U.S. Pension Plan 1 |
| | 83 | U.S. Pension Plan 2 |
| | 84 | U.S. Pension Plan 3 |
| | 85 | U.S. Pension Plan 4 |
| | 86 | U.S. Pension Plan 5 |
| Vacation Buy/Sell Plans have these plan type numbers: 90–99, 9A–9Z | 87 | U.S. Pension Plan 6 |
| | 90 | Vacation Buy |
| | 91 | Vacation Sell |

See Also

PeopleSoft Stock Administration PeopleBook

PeopleSoft Human Resources PeopleBook: Administer Company Cars

“Building Base Benefit Programs”

Setting Up Health Plans for Domestic Partners

Defining Benefit Plans

Use the Benefit Plan Table to name each plan and enter basic information about it.

Page Used to Define Benefit Plans

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|--------------------|--------------------|---|---|
| Benefit Plan Table | BENEFIT_PLAN_TABLE | Define Business Rules, Define Base Benefits, Setup, Benefit Plan Table | Use this page to define benefit plans. |

Entering Benefit Plan Information

Access the Benefit Plan Table page.

Benefit Plan Table

Plan Type: 10 Medical Benefit Plan: BP0061

Benefit Plans Find | View All First 1 of 1 Last

*Effective Date: 01/01/1980 + -

*Description: Basic Medical - Comprehensive Short Description: Basic Med

SetID: USA Vendor ID: BVEN002

Group Number: SPD URL Id:

Default Deduction Code: B10-08 Medical After-Tax Deduction

Pay Mode

Pay Mode: Pay as Deducted

AP Payment Date Type: Check Date

Self-Service Plan Description:

Benefit Plan Table page

SetID Select a set ID for the vendor to be used.

Vendor ID If the provider is not on the list, use the Provider/Vendor Table to add it.

Group Number Defined on the Provider Policy Table.

SPD URL Id PeopleSoft eBenefits application to provide access to the summary plan description. on the Provider Policy Table.

Default Deduction Code Optional.

Entering a default code saves you from typing the deduction code each time that you associate this benefit plan with a benefit program on the Benefit/Deduction Program Table. (Deduction codes are created on the Deduction Code Table.)

Minimum Spousal Allocation % (minimum spousal allocation percentage) Certain qualified plans in the life, savings, or pension category have mandated lower limits on the percentage amount that must be assigned to a spouse. Enter that amount here and the system enforces or monitors compliance with this beneficiary right.

Include in Nondiscrimination Testing Available only to plan types in the 40-series (savings plans).

Pay Mode Complete if you are using PeopleSoft Payroll for North America with PeopleSoft Payables.

Select when the vendor will be paid:

Pay as Deducted: Pay the vendor each time payroll calculates this deduction.

Pay at Specified Date: Specify the date in the *AP Payment Date Type* field.

Pay when Collection Complete: Pay the vendor only when the goal amount or deduction end date has been reached. (This pay mode is valid for general deductions and garnishments.)

Separate AP Payment

Select to create a separate voucher for each deducted amount payable to the vendor.

Self-Service Plan Description

Used only for health (1x), disability (3x), leave (5x), and retirement (7x) plans. Enter text describing the benefit plan, to appear on PeopleSoft eBenefits application pages.

Setting Up Health Plans

This section describes how to:

- Enter health plan details.
- Set up health plans for domestic partners.

Page Used to Set Up Health Plans

| Page Name | Object Name | Navigation | Usage |
|-------------------|--------------------|---|--|
| Health Plan Table | HEALTH_PLAN_TABLE | Define Business Rules, Define Base Benefits, Setup, Health Plan Table | Define basic attributes that control enrollment validation and processing. |

Setting Up Health Plans for Domestic Partners

If you offer health coverage for domestic partners, their children, and other dependents defined as *nonqualified dependents* by IRS Section 152, you'll need to set up separate health plans and identify them as *nonqualified* health plans. Nonqualified plans should be identical as far as the benefits they offer and the provider they're linked with, although their deductions and costs will probably be different.

PeopleSoft delivers the following three nonqualified dependent plans:

| Plan Type | Description |
|------------------|-----------------------------------|
| 15 | NQ Medical (Nonqualified Medical) |
| 16 | NQ Dental (Nonqualified Dental) |
| 17 | NQ Vision (Nonqualified Vision) |

To cover nonqualified dependents, employees need to be enrolled in a regular health plan for themselves and any qualified dependents and in a corresponding nonqualified health plan for

nonqualified dependents. So if an employee wants to enroll a domestic partner in health insurance, he or she needs to be enrolled in a plan type 10 medical plan for individual coverage and plan type 15 medical plan for the domestic partner.

There are also tax consequences for nonqualified dependent health benefits, as all employer-paid benefits for nonqualified dependent health plans are considered taxable income for the employee by the IRS under IRS Section 152.

See Also

“Organizing Payroll Information for Base Benefits,” Working with Imputed Income

Setting Up Life Insurance and AD&D Plans

This section describes how to:

- Enter life insurance and AD&D plan details.
- (USF) Understand Option A - standard FEGLI plan calculations.

Page Used to Set Up Life Insurance and AD&D Plans

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|------------------|--------------------|--|---|
| Life/Accidental | LIFE_ADD_TABLE | Define Business Rules, Define Base Benefits, Setup, Life and AD/D Plan Table, Life/Accidental Death Plan Tbl | Calculate coverage for a life or AD/D plan. |

Entering Life Insurance and AD&D Plan Details

Access the Life/Accidental page.

Life/Accidental

Plan Type: 20 Life
Benefit Plan: BP0101 Basic Life Coverage Plan

Life/ADD Plans Find | View All First 1 of 1 Last

*Effective Date: 01/01/1980

*Coverage: Factor x Salary + Flat Amt Amount: Amount: Factor: 2.000

Coverage Group Code: B004

Life/Accidental page

Coverage

Select the appropriate coverage.

Flat Amount Only: Calculates coverage according to a flat amount. The amount can be negative.

(USF) Note. Option A - Standard and Option C - Family FEGLI plans include a flat amount of \$10,000 and \$5,000, respectively.

Factor x Benefits Base + Flat Amount: Calculates coverage based on an employee benefits base and a factor, or a factored base *and* an amount.

The amount can be negative.

(USF) Note. FEGLI basic life plans use a factor plus an amount.

Specified in Employee Record: Uses the amount of coverage that you specify when you enroll an employee.

(USF) Note. FEGLI living benefits plans use this level of coverage.

Special Calculation Routine: Uses a custom routine not supported by the standard system. You need to customize your SQR and COBOL programs accordingly.

Sum of Dependent Coverage: Uses the sum of the dependent coverage amounts that you enter when you enroll an employee.

Many dependent life plans use this type of coverage.

Coverage Group Code

Optionally enables you to define a maximum benefit amount for a group of life and AD/D plan types. Coverage group codes are defined on the Coverage Group Table.

You might do this if employees can choose more than one life plan type—perhaps life and AD/D—but the total

benefit for the *combined* plans cannot exceed a specific amount. The coverage group code maximum applies to all the life and AD/D benefit plans that you associate with a coverage group code and one benefit program.

Setting Up Life Plans for Domestic Partners

Dependent life plans can be used to cover domestic partners, their children, and other dependents classified as nonqualified by IRS Section 152. No special plan types are required for nonqualified dependents.

The imputed income rules for domestic partners are different from those for qualified dependents. Imputed income is calculated for the full value of nonqualified dependent life coverage, whether or not it exceeds \$2000. (Qualified dependent coverage is exempt from imputed income calculation if it is under that amount.)

Calculating Insurance Coverage

When you associate calculation rules that include coverage minimum and maximum amounts with a life benefit program and benefit plan combination, the system verifies that coverage for participants doesn't exceed those minimums and maximums, regardless of the coverage that you enter on the Life and AD/D Plan Table.

For example, you define a coverage group code with a \$500,000 maximum, then enter that coverage group code for a supplemental life plan and a group life plan, and associate both benefit plans with a benefit program. If you enrolled an employee in both of those plans, the system would ensure that the employee's total coverage by both plans does not exceed \$500,000.

If the maximum is exceeded, the system reduces the total coverage to meet the coverage maximum. As the system processes deductions, it accumulates the coverage amounts and begins reducing coverage when the coverage group maximum is reached. The system processes plans in order of deduction priority. If more than one plan has the same priority, it processes in increasing plan type order.

(USF) Understanding Option A - Standard FEGLI Plan Calculations

PeopleSoft Payroll for North America calculates coverage and premiums for the Option A - Standard FEGLI optional life plan in accordance with federal regulations. The Option A - Standard plan provides at least 10,000 USD in additional coverage, depending upon the employee's rate of pay.

When an employee's annual rate of pay is more than the sum of the annual rate of basic pay for Level II Executive Schedule positions under 5 U.S.C. 5313, plus \$10,000, Option A coverage automatically increases. The amount then becomes the difference between the employee's annual rate of pay and the maximum allowable Basic Insurance Amount (BIA). Calculations are included in the Calculation Rules Table for calculation rule ID *OPTA*.

The maximum allowable BIA appears in the Maximum Benefits Base field on the Calculation Rules Table page. PeopleSoft Payroll for North America uses this information to calculate coverage and premium amounts.

Setting Up Disability Plans

Insurance companies typically quote disability benefits on monthly terms (as opposed to life insurance benefits, which are quoted in annual terms).

Page Used to Set Up Disability Plans

| Page Name | Object Name | Navigation | Usage |
|-----------------|--------------------|--|--|
| Disability Plan | DISABILITY_PLN_TBL | Define Business Rules, Define Base Benefits, Setup, Disability Plan Table, Disability Plan Table | Define details for disability benefit plans. |

Entering Disability Plan Details

Access the Disability Plan page.

Disability Plan page

Salary Replacement % (salary replacement percentage) Enter the percent of employee salary this plan will replace, limited to the maximum monthly benefit.

(CAN) Use as Base for Premium Calc For Canadian employers who can use employee covered salaries to calculate disability plan premiums. When selected, disability plan premium calculations are based on the employee’s disability benefit salary replacement percentage, rather than the employee's covered salary. This amount is still limited to the specified maximum monthly benefit.

Calculation of Disability Plan Deductions

Disability plan deductions are calculated as follows:

$$\text{Annualized Premium} = (\text{Calculated Base} / \text{Unit}) * (\text{Calculation Rate}) * (\text{Premium Frequency})$$

Disability Deduction = Annualized Premium / Payroll Frequency

The disability calculated base value is displayed on the Paycheck Deduction page.

Suppose that the rate specified on the Rate Schedule Table has a premium frequency of biweekly, and a .5 rate per hundred. For an employee with a disability calculated base of \$1000, the premium is annualized as follows:

$$(\$1,000 / 100) * .5 * 26 = \$130$$

An employee paid semimonthly would have a deduction of $130/24 = \$5.42$.

For an employee with a calculated base of \$15,000, and who is a salaried employee paid monthly, the deduction is calculated as follows:

$$[(\$15,000 / 100) * .5 * 26] / 12 = \$162.50.$$

Setting Up Savings Plans

This section provides an overview of savings plans and describes how to:

- Define employee investment limits.
- Define employer match or other contributions.
- Set up employee rollover options.

Understanding Savings Plans

A number of steps need to occur before you can set up employee limits, define employer contributions, and determine rollover options.

To set up a savings plan:

1. Select a type of deduction process.
2. Create savings plan deduction codes.
3. Set up a special accumulator.
4. Set up a default calculation rule.
5. Enter provider information.
6. Define a plan type.
7. To link employer-matching contributions to an employee's length of service, create the Service Step Table.
8. Set up any limits that might apply under federal regulations.

Limits on Qualified Savings Plans

For qualified plans under federal regulations, PeopleSoft supports the following limits:

- The section 401(a) limit defines the amount of an employee’s maximum yearly compensation that can be used in a qualified plan’s contribution or benefit formula.
- The section 402(g) limit defines the maximum amount an employee can defer each year.
- The section 403(b) limit defines that the maximum percentage of earnings an employee can contribute each year.
- The section 415 limit for a defined contribution plan restricts the amount of additional annual contributions to an individual participant’s account.

Another factor that affects savings plans is employee enrollment. Employees indicate how much to contribute to a savings plan. The payroll process calculates an employee deduction amount by determining how much the employee wants to contribute, then looking at the business rules and applying them, and finally by looking at any government regulations that might apply.

See Also

“Setting Up Benefit Support Tables”, Defining Limits

“Reviewing Enrollments and Benefit Calculations”

Pages Used to Set Up Savings Plans

| Page Name | Object Name | Navigation | Usage |
|-------------------------------|--------------------|---|---|
| Employee Limit on Investments | SAVINGS_PLAN_TBL1 | Define Business Rules, Define Base Benefits, Setup, Savings Plan Table, Employee Limit on Investments | Enter a special accumulator and define limits on the amount an employee may put away each year, and that apply to highly compensated employees. |
| Employer Contribution/Match | SAVINGS_PLAN_TBL2 | Define Business Rules, Define Base Benefits, Setup, Savings Plan Table, Employer Contribution/Match | Define amounts an employer will contribute or match to a savings plan per pay period. |
| Rollover of Funds | SAVINGS_PLAN_TBL5 | Define Business Rules, Define Base Benefits, Setup, Savings Plan Table, Rollover of Funds | Define how employee rollovers from other savings plans are handled. |

Defining Employee Investment Limits

Access the Employee Limit on Investments page.

Employee Limit on Investments
Employer Contribution/Match
Rollover of Funds

Plan Type: 40 401(k)
Benefit Plan: KU401 401(k) Savings Plan

Savings Plan Information
Find | View All First 1 of 1 Last

***Effective Date:** 01/01/1980 ***Use Special Accumulator:** SVG ***Plan Contribution:** EE Contribution Required

Limits on Employee Investments

| Up-To-Threshold Limit (Percent of Gross) | Employee YTD Earning Threshold | Over-Threshold Limit (Percent of Gross) |
|--|--------------------------------|---|
| Total Investment: 10.000 | \$0.00 | Total Investment: <input type="text"/> |
| Before-Tax: 6.000 | | Before-Tax: <input type="text"/> |
| After-Tax: 6.000 | | After-Tax: <input type="text"/> |

Rules for Highly Compensated Employee Investments

| | Total Investment | Before-Tax Investment | After-Tax Investment |
|---|------------------|-----------------------|----------------------|
| Investment Limited to (Percent of Gross) | 0.000 | <input type="text"/> | <input type="text"/> |
| Investment Reduced by (Percentage) | | <input type="text"/> | <input type="text"/> |

▶ Investments

Employee Limit on Investments page (1 of 2)

▼ Investments

| *Investment Option | *Description | | |
|--------------------|-----------------------|---|---|
| 1 | Money Market | + | - |
| 2 | Asset Allocation Fund | + | - |
| 3 | Bond Fund | + | - |
| 4 | Corporate Stock Fund | + | - |
| 5 | Small Company Fund | + | - |

Employee Limit on Investments page (2 of 2)

Use Special Accumulator Enter a special accumulator to identify eligible earnings when calculating employee deductions. Special Accumulators are set up using the Special Accumulator Table.

Plan Contribution Select who will be a contributor to this savings plan:
EE Contribution Optional (employee contribution optional): You might use this for plans that feature an employer nonmatching contribution, with voluntary additional employee contributions. This might also be used for a zero-contribution enrollment plan allowing for rollover funds.

| | |
|--|---|
| | <i>EE Contribution Required</i> (employee contribution required): This option enables employer matching. |
| | <i>Employer Only (NO EE)</i> (employer only [no employee]): This could be used to establish an employer-funded savings benefit. |
| Total Investment (Up to Threshold), Before-Tax (Up to Threshold), and After-Tax (Up to Threshold) | Enter the before-tax, after-tax, and total percentage of earnings that an employee can invest, as long as the employee YTD earnings threshold has not been met. |
| Employee YTD Earnings Threshold | This amount is used to determine when the over-threshold limit applies. If left at zero, the up to threshold limits apply to all levels of earnings. |
| Total Investment (Over Threshold), Before-Tax (Over Threshold), and After-Tax (Over Threshold) | Enter the before-tax, after-tax, and total percentage amounts that an employee can invest after the YTD earnings threshold has been met. |
| Rules for Highly Compensated Employees Investments | <p>In response to marginal or failed 401(k) and 401(m) nondiscrimination testing, you may need to reduce investments by highly compensated employees (HCEs) in order to comply with regulations.</p> <p>For example, you could set a lower 8% before-tax contribution cap on HCEs or set up a 2% reduction on each HCE's elected contribution to bring deferrals into compliance. Depending on the results of the nondiscrimination testing, you can adjust the limits throughout the year.</p> |
| Investment Option | <p>Enter a numerical identifier for each investment option.</p> <p>(USF) Note. U.S. federal government users enter an alphabetical identifier.</p> |

Defining Employer Match or Other Contributions

Access the Employer Contribution/Match page.

| | | | | | |
|--|-------------------------------------|-----------------------------|---|-------------------|--|
| Employee Limit on Investments | | Employer Contribution/Match | | Rollover of Funds | |
| Plan Type: | 40 | 401(k) | | | |
| Benefit Plan: | BP0001 | 401(A) Savings | | | |
| Savings Plan Information Find View All First ◀ 1 of 1 ▶ Last | | | | | |
| Effective Date: | 01/01/1980 | | | | |
| Employee YTD Earning Threshold: | <input type="text" value="\$0.00"/> | Service Step Table ID: | <input type="text"/> | | |
| Before Tax Matching or Contribution <input type="radio"/> Flat Amount Per Pay Period <input type="radio"/> Pct of Employee Investment <input type="radio"/> Pct of Special Accumulator <input type="radio"/> Service Step Table <input type="radio"/> Special Calculation Routine <input checked="" type="radio"/> None | | | After Tax Matching or Contribution <input type="radio"/> Flat Amount Per Pay Period <input checked="" type="radio"/> Pct of Employee Investment Percentage Match <input type="radio"/> Pct of Special Accumulator <input type="text" value="50.000"/> <input type="radio"/> Service Step Table <input type="radio"/> Special Calculation Routine <input type="radio"/> None | | |

Employer/Contribution Match page (1 of 2)

| | | | | | |
|--|----------------------|------------------------------------|------------------|--|--|
| Employer Investment Limits | | | | | |
| Maximum Total Employee Contributions eligible for matching (or Maximum Total Employer non-matching Contributions) | <input type="text"/> | per Pay Period | | | |
| | And/Or | <input type="text" value="0.000"/> | Percent of Gross | | |
| Maximum Employee Contributions eligible for matching (or Maximum Employer non-matching Contributions) | Before-tax: | <input type="text"/> | Percent of Gross | | |
| | After-tax: | <input type="text"/> | Percent of Gross | | |

Employer/Contribution Match page (2 of 2)

Service Step Table ID

Use to link the rate of employer matching contributions to an employee’s length of service.

If you enter a service step table ID, the system automatically selects Service Step Table in the Before-Tax Matching or Contribution and After-Tax Matching or Contribution group boxes.

Flat Amount Per Pay Period

Applies to nonmatching contributions. After you make your selection, enter the dollar amount the employer will contribute per pay period regardless of the amount an employee contributes.

Percent of Employee Investment

Applies to matching contributions. Select and enter a percentage of an employee contribution in the **Under Threshold** field.

Percent of Special Accumulator

Applies to nonmatching contributions. Select and enter a percentage of an employer contribution in the **Under Threshold** and **Over Threshold** fields.

The **Over Threshold** field is optional; if left blank, the system uses the employee YTD earnings threshold from the Employee Limit on Investments page.

Special Calculation Routine Uses a custom routine not supported by the standard PeopleSoft system. You must customize your COBOL programs.

Employer Investment Limits

You can define the maximum amount the employer contributes to a savings plan, either on a matching or nonmatching basis.

When defining a plan that has an employer match, this defines the maximum amount of employee funds eligible for matching, rather than defining the amount of the employer match itself.

For example, your organization might match 50% of an employee's contributions, but only on a before-tax basis, up to 6% of earnings or \$1000 per pay period, whichever is less. You would enter 6% in the **Before-Tax** field and 1000 in the **Maximum Total Employee Contributions eligible for matching per Pay Period** field.

When defining a nonmatching contribution plan, this defines the actual amount an employer contributes.

For example, your organization might fund savings plans with before-tax dollars at 3% of the employee's earnings, up to 500 USD per pay period. You would enter 3% in the **Before-Tax** field and 500 in the **Maximum Total Employee Contributions eligible for matching per Pay Period** field.

Note. You should not combine matching and nonmatching funds in the same plan.

The combination of percentage amounts for before-tax matching and after-tax matching cannot be greater than the total employee contributions.

Setting Up Employee Rollover Options

Access the Rollover of Funds page.

| Employee Limit on Investments | Employer Contribution/Match | Rollover of Funds |
|--|-----------------------------|-------------------------------------|
| Plan Type: | 40 401(k) | |
| Benefit Plan: | KU401 401(k) Savings Plan | |
| Savings Plan Information | | Find View All First 1 of 1 Last |
| Effective Date: | 01/01/1980 | Use Special Accumulator: SVG |
| Rollover Options | | |
| <input checked="" type="radio"/> None <input type="radio"/> Specified at Plan Level <input type="radio"/> Specified at Employee Level <input type="radio"/> Refund Excess Over Limit | | |
| Payroll Interface Option | | |
| <input type="checkbox"/> Calculate Pct of Annual Rate | | |

Rollover of Funds page

Note. Employer-only plans cannot receive rollovers from another plan, because rollovers are a form of employee contribution.

Rollover Options

Choose from the following:

None: Rollovers are not allowed.

Specified at Plan Level: Rollover amounts are based on information entered on the benefit plan pages. Enter the plan type, benefit plan, deduction code, and class for either before-tax or after-tax or both.

Specified at Employee Level: Rollover amounts are based employee enrollment pages. The plan type, benefit plan, deduction code, and class for either before-tax or after-tax or both are made on employee enrollment records.

Refund Excess Over Limit: Use with 403(b) plans, where the limiting of employee contributions is more dynamic. The 403(b) Balance/Projection process estimates the applicable limits prior to each pay run. Variations in employee earnings can cause a specific projection to be inaccurate, such that an employee's contributions are not limited as quickly as they should be. On subsequent pay runs, the system may determine the employee was allowed to contribute too much. This option enables the system to reduce prior contributions in excess of the current limit by creating a refund or negative deduction of the excess deferral amount.

Note. Specified at Plan Level and Specified at Employee Level require that the employee be enrolled in the specified rollover savings plan before the actual rollover event occurs during a payroll run. If you want a savings plan to receive rollover funds without active employee contributions, set up the plan as Employee Contribution Optional on the Employee Limit on Investments page and enroll employees with a zero contribution amount.

Calculate Pct of Annual Rate (calculate percentage of annual rate)

Select to tell PeopleSoft Payroll Interface to calculate deductions for a savings plan. PeopleSoft Payroll Interface estimates employee deductions using an employee's annual compensation rate.

This is considered an estimate because the annual rates and actual earnings, not available to Payroll Interface, are not necessarily the same. Also, there are no year-to-date accumulators available to apply regulatory limits.

With the exception of savings plan deductions, PeopleSoft Payroll Interface does not calculate deductions that are based on a percentage of an employee's earnings. To calculate such deductions, you need either PeopleSoft Payroll for North America or an appropriate interface with another payroll system.

Setting Up Leave Plans

This section describes how to:

- Enter leave plan details.
- (USF) Set up automatic accrual processing.

Before you begin, make sure you have created earnings codes for the leave plans.

Note. The payroll tables summarized in this section are from PeopleSoft Payroll for North America. If your organization does not implement PeopleSoft Payroll for North America, you'll have to work with your payroll department to ensure that the system has access to the proper data for leave accrual processing.

See Also

“Organizing Payroll Information for Base Benefits”

Page Used to Set Up Leave Plans

| Page Name | Object Name | Navigation | Usage |
|------------------|------------------|---|----------------------------|
| Leave Plan Table | LEAVE_PLAN_TABLE | <ul style="list-style-type: none"> Define Business Rules, Define Base Benefits, Setup, Leave Plan Table, Leave Plan Table Define Business Rules, Define General Data (NLD), Setup, Leave Plan Table, Leave Plan Table | Define leave plan details. |

Entering Leave Plan Details

Access the Leave Plan Table page.

Leave Plan Table

Plan Type: 50 Sick
Benefit Plan: BP0216 Test Sick Leave

Leave Plans Find | View All First 1 of 1 Last

*Effective Date: 01/01/1980 **Balance Visible to EE for Self-Service** + -

Accrual Process Date:

Accrual Calculation

*Service Units: Months

*Accrual Rate Units: Hours per Month

Award Frequency: First Run of Month

Automatic Accrual Processing

Special Calculation Routine *Max Leave Balance: 80.000

Service Calc at Year Begin Max Leave Carryover: 40.000

Manual Accrual Processing

Pay in Lieu of Time Off

Pay at Termination Percent to Pay at Termination: 100.00

Allow Negative Balance Max Negative Hours Allowed:

Leave Plan Table page (1 of 2)

| First Year Award Values | | | Find View All | First | 1 of 1 | Last |
|-------------------------|---------------|-----------------|-----------------|-------|--------|------|
| *Employment Month | *Hours Earned | *Month Eligible | | | | |
| 0 | | | | | | |

| Accrual Rate Values | | | Find View All | First | 1-3 of 3 | Last |
|------------------------|------------------|----------|-----------------|-------|----------|------|
| After Service Interval | *Accrue Hours At | | | | | |
| 0 | Service Months | 4.000000 | Hours per Month | + | - | |
| 12 | Service Months | 6.000000 | Hours per Month | + | - | |
| 60 | Service Months | 8.000000 | Hours per Month | + | - | |

| Service Bonus Values | | | Find View All | First | 1-2 of 2 | Last |
|------------------------|--------------------|-----------|-----------------|-------|----------|------|
| After Service Interval | *Award Bonus Hours | | | | | |
| 0 | Service Months | 16.000000 | | + | - | |
| 60 | Service Months | 24.000000 | | + | - | |

| | | | Find View All | First | 1 of 1 | Last |
|--|--|--|-----------------|-------|--------|------|
|--|--|--|-----------------|-------|--------|------|

Leave Plan Table page (2 of 2)

Balance Visible to EE for Self Service

Select to allow employees to view their leave balances on the self-service transaction View Paycheck.

Accrual Process Date

Automatically displays the date on which the leave accrual calculation process was last run.

Service Unit

Select a unit by which length of service is calculated.

If you select *Months*, the system uses the service date on the employee employment record as the basis for accrued service. If you select *Hours*, the system uses the actual hours from the appropriate earnings code maintained by PeopleSoft Payroll for North America.

Accrual Rate Unit

The unit by which the accrual rate is quoted. Accrual awards are always measured in hours.

Award Frequency

Displays how often the leave accrual award is given to employees. Determined by the accrual rate unit.

- If the accrual rate unit is Hours per Hour, then the award frequency is Every Run.
- If the accrual rate unit is Hours per Month, then the award frequency is First Run of Month.
- If the accrual rate unit is Hours per Year, then the award frequency is First Run of Year.

Automatic Accrual Processing

Defines how leave hours are calculated.

Special Calculation Routine means your company has a custom calculation method.

Service Calculation at Year Begin calculates leave hours according to length of service as of January 1 of the current year.

Max Leave Balance (maximum leave balance) defines the maximum leave hours an employee can accrue. If there is no maximum, enter 9999.

Max Leave Carryover (maximum leave carryover) defines the maximum number of hours an employee can carry from one calendar year to the next. If there is no maximum enter 9999.

Manual Accrual Processing The values that you enter here are for reference only; they do not affect leave accrual processing in any way.

First Year Award Values For leave plans with annual accruals, use to define a leave plan in which, during the first year of service, leave hours are prorated based on the month employment begins. Only available when the leave plan's accrual rate unit is Hours Per Year.

Although the award frequency for annual accrual leave plans is First Run of Year, you will actually run the Leave Accrual process each month to process the first year award values exclusively. After the first year, employees receive awards only on the first run of the year, as planned.

Accrual Rate Values Defines how your employees accrue leave time. Directly tied to what you selected in the Service Unit field.

Service Bonus Values Defines how employees accrue bonus hours (in addition to regular leave accruals).

(USF) Setting Up Automatic Accrual Processing for Federal Employees

In line with federal leave processing guidelines, employees can continue earning leave above the Max Leave Carryover value, but all leave above the maximum leave carryover is lost if it is not taken during the leave year in which it is earned. However, this "lost" leave can be granted to employees by their supervisors under special circumstances as *restored leave*. An employee might be granted restored leave if an unusually heavy workload prevents him or her from taking the extra leave before the end of the year. Employees with "grandfathered" annual leave (plan type 51) in excess of their agency's leave ceiling cannot receive restored leave.

Note. For annual leave (plan type 51), the Max Leave Carryover value for most full- and part-time employees is 240.

Use the Restored Leave group box to define parameters for the granting of restored leave. In Months Until Expiration, enter the number of months employees have to use leave restored to them. Most federal agencies enter 24 months for annual leave (plan type 51) plans.

All federal employees use a service unit of Years, so their accrual rate increases according to the number of years they've worked. Full-time federal employees accrue a fixed number of hours of leave per each pay period, so their accrual rate unit is Hours per Pay Period. Part-time federal employees, on the other hand, accrue a fixed percentage of hours of leave for each hour they work, so their accrual rate unit is Hours per Hour.

Note. We strongly recommend that when you establish your leave plans you also group your employees by full or part-time status, their common leave ceilings, and their leave accrual rates.

See Also

“Enrolling Participants”, Enrolling in Leave Plans

Setting Up FMLA Plans

The Family Medical Leave Act (FMLA) protects health benefits and job restoration for U.S. employees who must take a leave from work to care for themselves or family members. The FMLA contains provisions regarding employer coverage, employee eligibility and entitlement, notice and certification, continuation of health benefits, and job restoration.

Because an FMLA plan is an entitlement type of leave plan, it is managed separately from your other enrolled leave plans. This section describes how to:

- Activate FMLA administration.
- Enter FMLA plan details.

See Also

“Managing FMLA”

Pages Used to Set Up FMLA Plans

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|------------------|--------------------|--|--|
| FMLA Plan Table | FMLA_PLAN_TBL | Define Business Rules, Define Base Benefits, Setup, FMLA Plan Table, FMLA Plan Table | Define FMLA plans and set administration parameters. |

Activating FMLA Administration

To activate FMLA Administration:

1. Access the Product Specific page on the Installation Table.
2. Select FMLA Administration in the Benefits Functions group box.

This enables you to gain access to pages and fields for setting up and administering FMLA plans balances.

See Also

PeopleSoft Application Fundamentals for HRMS PeopleBook, “Setting Up PeopleSoft HRMS,” Entering Product Specific Installation Information

Entering FMLA Plan Details

Access the FMLA Plan Table page.

The screenshot displays the 'FMLA Plan Table' page. At the top, the 'FMLA Plan ID' is 'KUF'. Below this is a table with one row. The table has columns for 'Effective Date', 'Status', 'Description', 'Short Description', 'FMLA Calendar Type', 'Eligibility Criteria', and 'Annual Entitlement'. The 'Effective Date' is '01/01/1980'. The 'Status' is 'Active'. The 'Description' is 'Roll-Forward FMLA Calendar'. The 'Short Description' is 'Roll-Fwd'. The 'FMLA Calendar Type' is 'Roll-Forward'. The 'Eligibility Criteria' section includes 'Minimum Service Weeks Required' (52) and 'Minimum Earned Hours Required' (1250). The 'Annual Entitlement' is '12.0 weeks'. The 'Source of Hours' is 'Std Hrs'.

FMLA Plan Table page

Calendar Type

Employees eligible for FMLA protected leave are entitled to at least twelve weeks of leave during each twelve month “FMLA year.” There are three different ways to define the FMLA year:

Fixed Calendar: Defines a twelve-month period with a specific starting date (defined with the Begin Month and Begin Day fields). It can be the calendar year, fiscal year, or a twelve-month period that is defined by state law. Employees with Fixed Calendar FMLA leave plans are

entitled to the defined annual entitlement less any FMLA protected leave taken in the current fixed calendar year. The eligibility weeks for an FMLA request that is made using a fixed calendar year are reduced according to the date the request is made.

Roll-Forward: Begins the FMLA year when employees take an FMLA protected leave and ends twelve months later. Employees' next FMLA year begins with the first FMLA protected leave they take after the first twelve-month FMLA year has passed.

Roll-Backward: Counts the FMLA year backwards for twelve months from the time that employees take FMLA protected leave. If employees have taken FMLA leave in the year previous to their scheduled FMLA leave start date, that amount of leave is subtracted from their annual entitlement for the upcoming FMLA protected leave request.

Annual Entitlement

Defines the number of weeks of FMLA protected leave that employees are entitled to every FMLA year. You can define an entitlement of more than the government-mandated twelve weeks, but less.

Minimum Service Weeks and Earned Hours Required

Use to define the length of service requirements that must be met before an employee is eligible for FMLA coverage. According to the standards set by the Family Medical Leave Act, the values for these fields cannot be greater than 52 weeks (12 months) and 1,250 hours, respectively.

Working any portion of a week counts as a full week of employment, which enables part-time and seasonal employees to meet this requirement. The weeks of employment are also not required to be consecutive, which means that employees rehired after a gap in employment may still meet this requirement. The **Earned Hours Required** field enables the definition of a specific number of hours (up to 1,250) that an employee must have worked for the company during the previous 52 weeks in order to qualify for FMLA coverage.

Source of Hours

If you use PeopleSoft Payroll for North America, define how earned hours required and entitlement hours are calculated.

Std Hrs (standard hours): Calculates the earned hours using standard hours per work week. The system determines standard hours per work week from the employee Job record effective as of the leave begin date.

Pay Hrs (payroll hours): Calculates the standard hours using the actual hours worked per week during the 52 weeks prior to the request begin date. Provides more

accuracy for employees who work an irregular schedule.

If payroll hours are used, you must establish an FMLA hours special accumulator to track FMLA hours. Special accumulators and their codes are defined through the Special Accumulator Table.

Note. If you do not use PeopleSoft Payroll for North America, the Pay Hrs option is not allowed.

See Also

“Organizing Payroll Information for Base Benefits,” Defining Special Accumulators

Setting Up FSA Plans

Flexible spending accounts (FSAs) are before-tax employee savings plans that can be used for certain approved expenses, such as health care or dependent care. The following plan types are predefined for FSAs:

- Plan type 60 - FSA health care for U.S. companies.
- Plan type 61 - FSA dependent care U.S. companies.
- Plan type 65 - FSA health care for Canadian companies.
- Plan type 66 - Canadian retirement counseling accounts.

Page Used to Set Up FSA Plans

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|------------------|--------------------|--|--------------------------|
| FSA Benefit Plan | FSA_BENEFITS_TABLE | Define Business Rules, Define Base Benefits, Setup, FSA Benefits Table, FSA Benefit Plan Table | Define FSA plan details. |

Entering FSA Plan Details

Access the FSA Benefit Plan page.

| FSA Benefit Plan | |
|--|--|
| Plan Type: | 65 Flex Spending Health - Canada |
| Benefit Plan: | KCHFSA Can Health Care FSA |
| FSA Plans Find View All First 1 of 1 Last | |
| *Effective Date: | 01/01/1980 <input type="text"/> <input type="button" value="BY"/> |
| SetID: | SHARE <input type="text"/> <input type="button" value="Q"/> |
| Balance ID: | CY <input type="text"/> <input type="button" value="Q"/> <input type="button" value="+"/> <input type="button" value="-"/> |
| Contribution Frequency: | M <input type="text"/> <input type="button" value="Q"/> Monthly |
| Employer Contribution | |
| *Employer Contribution: | None <input type="text"/> |
| Employer Carryforward Choice: | ER Credit <input type="text"/> <input checked="" type="checkbox"/> Future Borrowing? |

(CAN) FSA Benefit Plan page

| FSA Benefit Plan | |
|--|--|
| Plan Type: | 60 Flex Spending Health - U.S. |
| Benefit Plan: | BP0025 COBRA Testing FSA |
| FSA Plans Find View All First 1 of 1 Last | |
| *Effective Date: | 01/01/1980 <input type="text"/> <input type="button" value="BY"/> |
| SetID: | BNUSA <input type="text"/> <input type="button" value="Q"/> |
| Balance ID: | CY <input type="text"/> <input type="button" value="Q"/> <input type="button" value="+"/> <input type="button" value="-"/> |
| Contribution Frequency: | M <input type="text"/> <input type="button" value="Q"/> Monthly |
| Employer Contribution | |
| *Employer Contribution: | Flat Amount <input type="text"/> |
| Flat Contribution Amount: | \$500.00 <input type="text"/> Limit to %: <input type="text"/> |

(US) FSA Benefit Plan page

Balance ID

The system uses the pay period end date or check date and the schedule of balance periods associated with this balance ID to calculate FSA deductions.

Contribution Frequency

Select a frequency to define how you quote amounts for this FSA benefit plan.

If, when entering an employee's FSA election, an employee contribution percentage is specified in addition to an annual pledge, it is specified in terms of this contribution frequency.

Employer Contribution

Define an employer matching contribution:

None: No employer match is contributed.

Flat Amount: Matches the employee contribution with a flat amount that you enter, up to a chosen percent limit.

Percent of Employee Contribution: Matches a percent of the employee contribution that you enter, up to a limit that you define.

Special Calculation Routine: Uses a custom routine not supported by the standard PeopleSoft system.

(CAN) Employer Carryforward Choice

Carry forward credit or claim amounts from one plan year to the next.

(CAN) Future Borrowing

Select to allow plan enrollees to spend FSA credits prior to their inclusion within the plan year.

Setting Up Retirement Plans

You can set up retirement plans for PERS (the California Public Employees Retirement System) or the U.S. federal government.

Page Used to Set Up Retirement Plans

| Page Name | Object Name | Navigation | Usage |
|-----------------|-------------------|--|---|
| Retirement Plan | RTRMNT_PLAN_TABLE | Define Business Rules, Define Base Benefits, Setup, Retirement Plan Table, Retirement Plan Table | Set up California PERS or U.S. federal government retirement plans. |

Entering Retirement Plan Details

Access the Retirement Plan page.

Retirement Plan

Plan Type: 70 PERS
Benefit Plan: CCB Public Employees Retirement

Retirement Plans Find | View All First 1 of 1 Last

*Effective Date: 01/01/1980

Employer Contribution Percent: 5.000

Employee Contribution Percent: 5.000

Employer Contribution to Employee %: 3.000

Use Special Accumulator Instead of Gross

Coordinate with FICA

Retirement Plan page

Employer Contribution to Employee % (employer contribution to employee percentage)

Define how much the employer contributes to the employee’s total contribution percentage.

Use Special Accumulator Instead of Gross

To have the system use a special accumulator instead of the total gross, enter the desired accumulator code here.

To use a special accumulator, work with your Payroll department to define the code and its detail. You can set up special accumulators—as many as you need—to process savings, retirement, and pension plans.

(USF) Federal Retirement Plans

Federal employees who are enrolled in FERS retirement plans are automatically enrolled in a TSP 1% Agency Contribution plan as well. In this plan, the employee's agency contributes 1% of the employee's basic pay for each pay period to the employee's TSP account. The TSP 1% Agency Contribution plan is predefined; its benefits do not take the place of those offered by other retirement plans. Employees enrolled in the TSP 1% Agency Contribution plan receive these contributions whether or not they contribute their own money to their TSP accounts.

Select OASDI Offset and Subject to OASDI for retirement plans that have employee contributions offset by employee contributions to OASDI. The system reduces employee retirement plan contributions by the OASDI contribution amount until the maximum OASDI/FICA contribution level is reached.

See Also

Defining Special Accumulators

“Enrolling Participants”, Enrolling Employees in the TSP Agency Automatic Contribution Plan

Setting Up U.S. Pension Plans

U.S. pension plans are also managed by PeopleSoft Pension Administration. However, the pension plan must be set up in the Base Benefits business process.

See Also

PeopleSoft Pension Administration PeopleBook

Page Used to Set Up Pension Plans

| Page Name | Object Name | Navigation | Usage |
|--------------------|--------------------|---|---|
| Pension Plan Table | PENS_PLAN_TABLE_US | <ul style="list-style-type: none"> Define Business Rules, Define Base Benefits, Setup, Pension Plan Table (U.S.), Pension Plan Table (US) Define Business Rules, Define General Data (NLD), Setup, Pension Plan Table, Pension Plan Table | Enter details for U.S.-defined pension plans. |

Entering Pension Plan Details

Access the Pension Plan Table page.

The screenshot shows the 'Pension Plan Table' page. At the top, it displays 'Benefit Plan: KUPENS GBI Pension Plan' and 'Effective Date: 01/01/1980'. Below that, 'Plan Type: 82 Pension Plan 1 - U.S.' is shown. A blue header bar reads 'US Pension Plans' with navigation links 'Find | View All | First | 1 of 1 | Last'. The main form area includes:

- '*Effective Date: 01/01/1980' with a calendar icon and '+' '-' buttons.
- '*Pension Type: Qualified' with a dropdown menu and an unchecked checkbox for 'Allow Contingent Beneficiaries'.
- 'Plan Yr Begins (Month/Day): 1 / 1' with input boxes.
- 'Plan Yr Ends (Month/Day): 12 / 31' with input boxes.
- A section titled 'Contributory Plans' containing:
 - A checked checkbox for 'Voluntary Contributions Allowed'.
 - 'Special Accumulator Code: 401' with a search icon.
 - 'Rates of Deduction: 2.500 % up to 100,000 and 1.000 % over: 100,000'.

Pension Plan Table page

Allow Contingent Beneficiaries

Select if the plan allows nonspouse beneficiaries.

Plan Yr Begins (Month/Day) (plan year begins [month/day]) and **Plan Yr Ends (Month/Day)** (plan year ends [month/day])

Specify the month and day when your plan year begins. A plan year normally ends the day before the next one begins. However, if you change your plan year, the row for the resulting short plan year will have nonconsecutive beginning and end dates.

Warning! Be sure to include a row for a short plan year. Failure to do this can cause calculation errors.

| | |
|--|---|
| Contributory Plans | You can only incorporate U.S. pension plans (plan types 82 to 87) into a manual or automated benefit program if the plan is defined as a contributory plan in which the employee contributes some portion of their earnings to the plan. Note. The system makes no determination as to whether the rules that you set up meet Internal Revenue Code qualification standards. Such compliance is your responsibility. |
| Voluntary Contributions Allowed | There are no parameters for defining voluntary contribution rates; these are established on an employee-by-employee basis when you enroll employees in the plan. |
| Special Accumulator Code | Enter the code that tracks pensionable earnings. |
| Rates of Deduction | Enter contribution rates. You can have different rates above and below a threshold. For example, employees can contribute 2% of earnings up to \$50,000 and 3% of earnings above that. Enter the rate up to the threshold in the first Rates of Deduction field, the threshold in the next field, and the rate beyond the threshold in the final field. If the threshold changes—for example, if you use the Taxable Wage Base (TWB) as the threshold—insert additional effective-dated rows to record the changes. |

Setting Up Vacation Buy/Sell Plans

With a vacation buy plan, employees can use earnings to gain more vacation days. With vacation sell, they contribute vacation hours for cash.

Page Used to Set Up Vacation Buy/Sell Plans

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|-------------------|--------------------|--|--|
| Vacation Buy/Sell | VACATION_TABLE | Define Business Rules, Define Base Benefits, Setup, Vacation Buy/Sell Table, Vacation Buy/Sell Tbl Listing | Enter details for vacation buy/sell plans. |

Entering Vacation Buy/Sell Plan Details

Access the Vacation Buy/Sell page.

| Vacation Buy/Sell | |
|---|---------------------|
| Plan Type: | 90 Vacation Buy |
| Benefit Plan: | KUVCBY Vacation Buy |
| Vacation Plans Find View All First 1 of 1 Last | |
| *Effective Date: | 01/01/1980 |
| *Vacation Buy or Sell: | Vacn Buy |
| *Accruals Earnings Type: | VBY Vacation Buy |
| *Amount Frequency: | M Monthly |
| Vacation Hours | |
| Increment: | 8.00 |
| Minimum: | 8.00 |
| Maximum: | 40.00 |
| Vacation Amount | |
| Percent of Salary: | 2.000 |
| Maximum: | 1,000.00 |

Vacation Buy/Sell page

Vacation Buy or Sell

Vacation Buy is predefined plan type 90; Vacation Sell is plan type 91.

Accruals Earnings Type

Defined on the Earnings Table for PeopleSoft Payroll for North America.

When employees buy vacation, accrual balances increase. When employees sell vacation, accruals decrease.

Amount Frequency

Define the rate at which to store and calculate the value of vacation hours an employee buys or sells. This field is independent of pay period.

When an employee buys or sells vacation, two kinds of data are affected: leave accruals and pay. The first time you process leave accruals after an employee buys or sells vacation hours, you see current leave accrual balances, based on the total vacation hours bought or sold. However, for employee pay, PeopleSoft Payroll for North America spreads the vacation buy or sell amount over the remainder of the calendar year. This is done with the help of the amount frequency and accruals earnings type that you define.

Vacation Hours and Vacation Amount

When an employee buys or sells vacation, the system verifies that the amount is at least the minimum, not more than the maximum, and in the increment that you define. The system also verifies that the value of the hours bought or sold does not exceed the percent of salary or the maximum amount.

See Also

“Managing Leave Plans”

“Managing Vacation Buy/Sell Plans”

CHAPTER 6

Setting Up and Managing 403(b) and 457 Savings Plans

This chapter provides an overview of setting up and managing 403(b) and 457 savings plans and discusses how to:

- Enter and review 403(b) and 457 projections.
- Run the 403(b) Balances and Projections process.
- Review 403(b) projection error messages.

Understanding 403(b) and 457 Management

| |
|-------------------------------------|
| To manage your 403(b) plans: |
|-------------------------------------|

1. Make any adjustments that should be considered during the 403(b) calculation process using Adjusting 403(b) Annuity Amounts.
2. Run the 403(b) Balances/Projections - 403(b) Balance Page process before each payroll.
3. Review employee's contributions and deferrals on the Reviewing 403(b) Projections - 403(b) Balances page.
4. Review individual employee's projected calculated contribution amounts for each limit.
5. Enter any 415 Alternative Election data using the 403(b) Projections Page.
6. Print Generating the Section 403(b) Employee Letters projecting 403(b) information.

Pages Used to Manage 403(b) and 457 Plans

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|----------------------------------|--------------------|--|--|
| Savings Mgt (Savings Management) | SAVINGS_MGT_EE | Compensate Employees, Administer Base Benefits, Use, Savings Management | <p>Use this page to review the year-to-date and Life-To-Date balances from the 403(b) Projection Process, to enter contributions made at another company, to select a 415 Alternative Election for 403b plans, and to review an employee's contribution amount for each applicable limit.</p> <p>It is also used to select the Catch Up Limit election for 457 plans.</p> |
| 403(b) Balance | RUNCTL_SV403B | Compensate Employees, Administer Base Benefits, Process, 403(b) Balances/Projections | <p>Use the 403(b) Balances and Projections pages to calculate the company's or an individual employee's balances service years, eligible earnings, and the projected limits for the current or next year.</p> <p>This should be run prior to each payroll to ensure the most accurate results for the MEA tests during the pay calculation process.</p> <p>Employees don't need to be enrolled in the 403(b) Savings Plan to run the Balance and Projection process. This process updates the Savings Management page.</p> |

| Page Name | Object Name | Navigation | Usage |
|-----------------|----------------|---|--|
| 403(b) Proc Msg | SV403_MESSAGES | Compensate Employees, Administer Base Benefits, Inquire, 403(b) Process Messages, 403(b) Process Messages | Use the 403(b) Process Messages page to review any error message that occurred from the 403(b) Balances and Projections process. |

Entering and Reviewing 403(b) and 457 Projections.

Access the Savings Mgt (management) page.

Savings Mgt

Locherty, Betty ID: KU0007

Deferred Compensation View All First 1 of 1 Last

*Company: *Calendar Year: *Savings Plan Type:

| Projected Balance Information (all Applicable Companies) | | |
|--|----------------------------|--------------|
| | Projected (as at year end) | |
| | Year-to-Date | Life-to-Date |
| Elective Employee Deferrals(402(g)) | \$0.00 | \$0.00 |
| Non-Elective Employee Deferrals | \$0.00 | \$0.00 |
| Other Employer Contributions | \$0.00 | \$0.00 |
| Total Deferrals | \$0.00 | \$0.00 |
| Includible Earnings | \$0.00 | |
| 402(g) Cap Extension Used (Actual, not Projected) | \$0.00 | \$0.00 |

Savings Mgt page (1 of 2)

| Balance Adjustments (This Company Only) | | | |
|---|--------------------|---|--------------------|
| Elective Deferrals Adjustment: | \$0.00 | Vesting Adjustments: | \$0.00 |
| Non-Elective Deferrals Adjustment | \$0.00 | Includible Income Adjustment: | \$0.00 |
| Employer Contribution Adjustment | \$0.00 | | |
| General / Alternative Election Projection Data (all Applicable Companies) | | | |
| <input type="checkbox"/> Override Service Years Calc | Service Years YTD: | | Service Years LTD: |
| 415 Alternative Election Date: | | *415 Alternative Election: | None |
| 403(b) Expected Termination Dt: | | <input type="checkbox"/> Elect 402(g) Cap Expansion | |
| Exclusion Allowance: | \$0.00 | Proj Year of Sep Excl Limit: | \$0.00 |
| Employer Contribution Limit: | \$0.00 | Any Year Excl Limit: | \$0.00 |
| Employer Contribution Maximum: | \$0.00 | Overall Excl Limit: | \$0.00 |
| Elective Deferrals Limit: | \$0.00 | Hardship Withdrawal Date: | |
| Current Year Contribution Subject to 415 Limit: | \$0.00 | Limit Reduction Amount: | \$0.00 |
| Updated on | User ID | | |

Savings Mgt page (2 of 2)

Company, Calendar Year, Savings Plan Type

Select the desired company, calendar year, and savings plan.

Project Balance Information

The system displays the YTD and LTD balances calculated from the 403(b) Balances and Projections process.

Balance Adjustments

Use this group box to enter employee contributions from a previous employer. The 403(b) Balances and Projections process will use these figures.

Elective Deferrals Adjustment, Non-Elective Deferrals Adjustment, and Employer Contribution Adjustment

Enter the new amounts. Both the Balances and Projection and the Pay Calculation processes use these fields.

Vesting Adjustments

Enter the new amount. Both the Balances and Projection and the Pay Calculation processes use this field. A vesting adjustment is considered to be a type of employer contribution, so it is used along with the **Employer Contribution YTD/LTD** balance fields and the **Employer Contribution Adjustment** field.

Includible Income Adjustment

The amount entered here is directly applied into the calculation of the **Includible Earnings** field on the 403(b) Balances page. This is different from how the other adjustment fields operate because the Includible Earnings field is recalculated each time the process is run.

| | |
|---|--|
| Override Service Years Calc (override service years calculation) | Select this check box if you need to override the system-calculated Service Years YTD displayed on the 403(b) Projections page. |
| Includible Income Adjustment | Enter the new Includible Income Adjustment amount. The amount entered here is directly applied into the calculation of the Includible Earnings field on the 403(b) Balances page. This is different from how the other adjustment fields operate because the Includible Earnings field is recalculated each time the process is run. |
| 415 Alternative Election Date | If applicable, enter the date. |
| 415 Alternative Election | If applicable, select from the list of available options. |
| 403(b) Expected Termination Dt (date) | If applicable, enter the date. |
| Elect 402(g) Cap Expansion | If applicable, select this check box. |
| Exclusion Allowance | <p>This is the amount that may be contributed to the 403(b) savings plan on a pre-tax basis and includes both non-elective and elective contributions. The system calculates an employee's Exclusion Allowance for a taxable year by doing the following:</p> <p>Multiply the amount entered in the Maximum Percent of Accumulator field located on the Limit Table by the amount entered in the 403(b) Special Accumulator field located on the Limit Table. The system multiplies that amount by the employee's years of service, and subtracts the amount of the Life-to-Date Total Deferrals located on 403(b) Balances page from that figure.</p> |
| Proj Year of Sep Excl Limit (projected year of separation exclusion limit) | This is the amount for the Year of Separation from service limit on employer contributions. |
| Employer Contribution Limit | The system calculates this amount by summing the actual earnings and projected earnings associated with the Special Accumulator entered in the 415(c) Limit table and multiplying that amount by the amount entered in the Max Percent of Accumulator field located on the 415(c) Limit table. |
| Any Year Excl Limit (any year exclusion limit) | This limit replaces both parts of the 415(c) limit but not 402(g) and the lesser of 4,000 USD + 25% of compensation, MEA, and 15,000 USD. |
| Employer Contribution Maximum | This is the amount entered in the Maximum Yearly Deduction field located on the 415(c) Limit Table. |
| Overall Excl Limit (overall exclusion limit) | This limit ignores MEA and uses only 415(c) and 402(g). |

| | |
|---|--|
| Elective Deferrals Limit | <p>This field is used as an alternate limit when you select the Elect 402(g) Cap Expansion check box. The system uses the lesser of the following three:</p> <ol style="list-style-type: none"> 1. The amount entered in the 402(g) Annual Cap Expansion field located on the 403(b) Limit Table. 2. The amount entered in the 402(g) Lifetime Cap Expansion field located on the 403(b) Limit Table minus the amount of the Life-To-Date 402(g) Cap Used displayed on the 403(b) Balances page. 3. The employee's years of service multiplied by the amount entered in 402(g) Per Year Max Average field located on the 403(b) Limit Table, then subtract the amount of the Life-To-Date Employee Elective Deferrals 402(g) displayed on the 403(b) Balances page. |
| Hardship Withdrawal Date | <p>Enter if applicable. The Projection Process will calculate and display the corresponding Limit Reduction Amount in the record for the year following the hardship withdrawal date.</p> |
| Current Year Contribution Subject to 415 Limit | <p>This is the projected year-to-date deductions that are subject to the 415(c) limit. The system calculates this amount by adding the actual deductions taken, to the amount of the projected deductions through the end of the plan year.</p> |
| Limit Reduction Amount | <p>This amount constitutes the YTD elective deferrals up to the hardship withdrawal date, and is used to reduce the 402(g) limit for the following year when the contributions are reactivated.</p> |

Running the 403(b) Balances and Projections Process

Access the 403(b) Balances page.

403(b) Balances

Run Control ID: 1 [Report Manager](#) [Process Monitor](#)

Report Request Parameter(s)

*Company:

*Calendar Year:

*Process:

EmpID:

Checkpoint / Restart

Chk Point Interval in Minutes:

Restart Employee ID:

Process to Restart:

403(b) Balances page

Process

Select either of the following values: *Project to End of This Year* or *Project Thru End of Next Year* (project through end of next year).

Project to End of This Year should be run prior to each payroll to ensure the most accurate results for the maximum exclusion allowance and deduction limiting tests during Pay Calculation.

Near the end of the year, select *Project Thru End of Next Year* to give employees additional information during open enrollment.

Chk Point Interval in Minutes (check point interval in minutes)

Because this is a long process, you can indicate how often the system should save or update information to the database during the process.

In case of unexpected system failure, this could limit the amount of reprocessing the system would have to repeat.

Restart Employee ID and Process to Restart

Not available

Reviewing 403(b) Projection Error Messages

Access the 403(b) Proc Msg (process messages) page.

CHAPTER 7

Building Base Benefit Programs

This chapter provides an overview of benefit programs and discusses how to:

- Build benefit programs.
- Clone benefit programs.

Understanding the Components of Benefit Programs

This section discusses:

- Benefit Programs
- Plan Types
- Plans
- Effective Dates

See Also

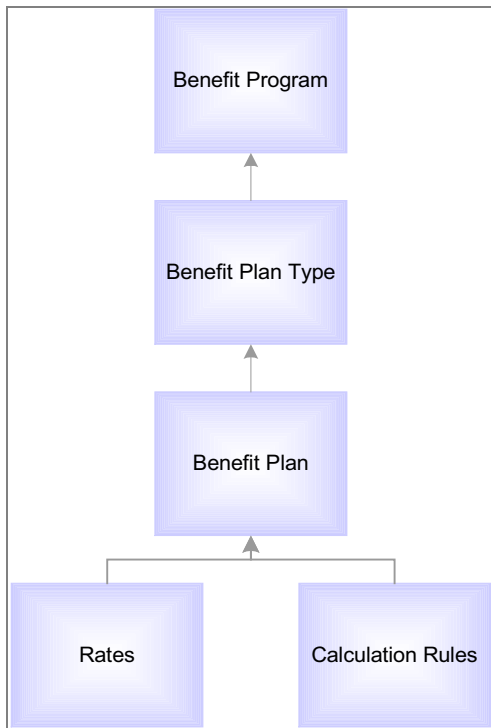
“Setting Up Benefit Plans”

PeopleSoft Benefits Administration PeopleBook, “Building Automated Benefit Programs”

Understanding Benefit Programs

A Benefit Program is a collection of benefits that are offered to a group of employees. You may have multiple benefit programs if you offer different benefits to different groups of employees, charge different premiums or administer enrollment rules differently for various employee groups.

Use the Benefit Program Table to establish a program for employees, link the appropriate plan types to it, and associate a variety of rules. The Benefit Program Table brings together all of the information that relates to a benefit program, including whether to process enrollments manually or use PeopleSoft Benefits Administration automated enrollment. The



Building Blocks for Benefit Programs

Understanding Plan Types

Plan types are essential in a benefit program. They group individual plans or options that may be elected by an employee for a particular type of benefit, such as Basic Life Insurance or Medical.

Understanding Plans

Plans are the individual benefits into which an employee may be enrolled. A Plan is always subordinate to a Plan Type. For example, you may offer employees a choice of 4 different medical plans, each from a different HMO or plan provider. In this case, you would be offering 4 different plans in the Medical plan type. Each plan has an associated deduction code, set of rates and calculation rules.

Understanding Effective Dates

To keep your benefit program accurate and consistent, the benefit plans, calculation rules, and options must be individually effective-dated in a coherent, logical manner. If they aren't, your benefit program will be left open to a variety of errors.

Effective-dating is an efficient way for you to maintain accurate records of your benefits information. You can create historical records and enter future-dated information at your

convenience, all because when you enter information, you also enter an effective date that is *synchronized* with the effective dates for the other elements of the benefit program.

Provider and Benefit Plan Effective Dates: An Example of Effective-Dating

Consider provider and benefit plan information. To set up a provider, enter its effective date on the Provider Table. To set up a benefit plan, enter the plan's effective date and identify its provider on the Benefit Plan Table. The system checks that the provider is effective earlier or on the same date as the benefit plan; otherwise, the provider information cannot exist for the benefit plan.

Benefit Programs and Effective Dates

Things get more complicated when you associate a set of rates and calculation rules, which also have effective dates, to a benefit program and its associated benefit plans. The system reviews the effective dates of the program, the plan, the rates, and the calculation rules. The system can't check that you've set up the correct dates, because it's possible that any date could be correct. Instead, it goes by the benefit program.

The system looks for effective dates for the benefit program that you're working with and the set of benefit plans that you associate with that benefit program. A benefit program and benefit plan combination is effective based on *both* sets of dates.

Plans associated with a benefit program can't be "in effect" unless their effective dates are set on or after the effective date of the benefit program. Similarly, the rates and calculation rules that you associate with the plans can't be in effect unless their effective dates are set on or after the dates of their respective plans.

If a benefit program and benefit plan combination is not effective when you think it should be, or if you press F4 for a list of valid benefit plans and your plan does not appear, check the effective dates of the benefit program *and* the benefit plan. The effective date of the benefit plan must be earlier or the same as the effective date of the benefit program.

Loading History: A Warning

When you're setting up tables, you *must* set effective dates to reflect when you want the data to go into effect. If you load employee history, make sure that you establish an early effective date. When preparing for a conversion, set all effective dates to the same date. Most tables also have a Status, which you would normally leave as *Active*.

Building Benefit Programs With the Benefit Program Table Components

In this section, we discuss building basic benefit programs and how to:

- Define the basic benefit program.
- Associate plan type with a benefit program.
- Link benefit plans to a benefit program.

- Link a benefit program and a plan type to rate and calculation rules.
- Set up benefit programs that provide benefits to nonqualified dependents.

Pages Used to Build Benefit Programs

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|--|--------------------|---|---|
| Benefit Program Table - Benefit Program | BEN_PROG_DEFN1 | <ul style="list-style-type: none"> • Define Business Rules, Define Automated Benefits, Setup, Benefit Program Table, Benefit Program • Define Business Rules, Define Base Benefits, Setup, Benefit Program Table, Benefit Program • Define Business Rules, Define Company Cars (GBL), Setup, Benefit Program Table, Benefit Program • Define Business Rules, Define General Data (NLD), Setup, Benefit Program Table, Benefit Program • Define Business Rules, Define Payroll Interface, Setup, Benefit Program, Benefit Program • Administer Workforce, Monitor Absence (GBL), Setup, Benefit Program Table, Benefit Program | Define basic benefit program information. |

| Page Name | Object Name | Navigation | Usage |
|---|--------------------|---|---|
| Benefit Program Table - Plan Type and Option | BEN_PROG_DEFN2 | <ul style="list-style-type: none"> • Define Business Rules, Define Automated Benefits, Setup, Benefit Program Table, Plan Type and Option • Define Business Rules, Define Base Benefits, Setup, Benefit Program Table, Plan Type and Option • Define Business Rules, Define Company Cars (GBL), Setup, Benefit Program Table, Plan Type and Option • Define Business Rules, Define General Data (NLD), Setup, Benefit Program Table, Plan Type and Option • Define Business Rules, Define Payroll Interface, Setup, Benefit Program, Plan Type and Option • Administer Workforce, Monitor Absence (GBL), Setup, Benefit Program Table, Plan Type and Option | Link plan types to the benefit program and to add important information about plan types. |

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|---------------------------------|--------------------|---|---|
| Benefit Program Table - Cost | BEN_PROG_DEFN3 | <ul style="list-style-type: none"> • Define Business Rules, Define Automated Benefits, Setup, Benefit Program Table, Cost • Define Business Rules, Define Base Benefits, Setup, Benefit Program Table, Cost • Define Business Rules, Define Company Cars (GBL), Setup, Benefit Program Table, Cost • Define Business Rules, Define General Data (NLD), Setup, Benefit Program Table, Cost • Define Business Rules, Define Payroll Interface, Setup, Benefit Program, Cost • Administer Workforce, Monitor Absence (GBL), Setup, Benefit Program Table, Cost | Link a benefit program and plan type to rate and calculation rules. |

Defining Basic Benefit Program Information

Access the Benefit Program page.

| Benefit Program | Plan Type and Option | Cost |
|---|--------------------------------|-------------------------------------|
| Benefit Program: | KC1 | |
| Effective Date: | 01/01/2000 | Status as of Effective Date: Active |
| *Description: | GBI Master CAN Benefit Program | Program Type: Automated |
| Short Description: | GBI CN Pgm | Currency Code: CAD |
| Dependent Limits | | |
| Dependent Age Limit: | 19 | |
| Student Age Limit: | 24 | |
| <input checked="" type="checkbox"/> Exclude Disabled from Age Lmt. <input checked="" type="checkbox"/> Dep Ineligible if Married | | |
| COBRA | | |
| COBRA Surcharge %: | <input type="checkbox"/> | |
| COBRA Disabled Surcharge %: | <input type="checkbox"/> | |
| FMLA | | |
| FMLA Plan ID: | XXX | Dummy |
| Benefits Administration | | |
| Apply Excess Credits to: | C | Cash |
| FSA | | |
| Flexible Spending Acct Run ID: | KC1 | FSA CAN |
| FSA Minimum Check Amount: | 5.00 | |
| FSA Maximum Annual Pledge: | 7000.00 | |
| Self-Service Configuration | | |
| <input checked="" type="checkbox"/> Show Credits on Enrollment Form | | |
| <input type="checkbox"/> Include Can Sales Tax on Form | | |
| Cost Freq on Enrollment Form: | Annual | |
| Handbook URL ID: | | |

Benefit Program Table - Benefit Program page

| | |
|------------------------------------|---|
| Effective Date | Date the row in the table becomes effective. This date determines when you can view and change information. |
| Status as of Effective Date | Indicates whether a row in the table is <i>Active</i> or <i>Inactive</i> . Processes ignore benefit programs designated as <i>Inactive</i> , even if the effective date defines the program as current. |
| Program Type | The type of program can be <i>Manual</i> or <i>Automated</i> . If you are using only Base Benefits, it is automatically set to <i>Manual</i> . If you activate PeopleSoft Benefits Administration on the Installation Table, it is automatically set to <i>Automated</i> . |
| Currency Code | This refers to the type of currency that is used for this program's benefit and deduction calculations. |
| Benefits Administration | This group box is available if Peoplesoft Benefits Administration is activated on the Installation Table. If you are using flexible credits, it is used to define how the system will process excess flexible credit amounts when an employee does not designate a rollover election during benefit enrollment. |
| Apply Excess Credits to | The system can convert excess flexible credit amounts to: <ul style="list-style-type: none"> C (Cash) D (FSA-Dependent Care) F (Forfeit Excess Credit) H (FSA-Health Care) |

| | |
|--|--|
| | R (FSA Retirement Counseling) |
| | S (Savings-401(k)) |
| Dependent Limits | This group box defines the age at which dependents are no longer eligible for health benefits. |
| Dependent Age Limit and Student Age Limit | Defines the age at which a dependent is no longer considered to be a dependent or a student. |
| Exclude Disabled from Age Lmt. (exclude disabled from age limit) | Select to exclude disabled dependents from the age limits by selecting this check box. |
| Dep Ineligible if Married (dependent ineligible if married) | Check this box to consider married dependents ineligible for health benefits, regardless of their age. |
| FSA (flexible spending account) | For FSA Administration users. Use this group box to set up your organization's business rules for flexible spending accounts. |
| Flexible Spending Acct Run ID (flexible spending account run ID) | For FSA Administration users. Enter the FSA Run ID that you created on the FSA Run Table. |
| FSA Minimum Check Amount | For FSA Administration users. Enter the minimum amount for which you will print a check. |
| FSA Maximum Annual Pledge | Enter the maximum amount an employee can pledge to deposit into a flexible spending account. |
| COBRA (consolidated omnibus budget reconciliation act) | This group box defines the rules regarding the surcharge amounts that your organization imposes on COBRA plans. |
| COBRA Surcharge % (COBRA surcharge percentage) | Enter the percentage amount of the benefit cost that you want added to the benefit cost. For example, if the cost of medical coverage is 100 USD and the COBRA surcharge % is 30%, the cost for medical coverage for someone on COBRA would be 130 USD. |
| COBRA Disabled Surcharge % (COBRA disabled surcharge percentage) | If you want a different percentage amount for a disabled person, enter that percentage amount. If you leave the field blank, the surcharge amount entered in the COBRA Surcharge % field will be applied to a disabled person with COBRA coverage. |
| Self-Service Configuration | Use this group box to define the rules for displaying and processing the PeopleSoft eBenefits application pages. |
| Show Credits on Enrollment Form (show credits on enrollment form) | Select if you want credit amounts to appear on the enrollment form. If you do not offer flexible credits, you may not want this heading to appear on the form. |

| | |
|---|--|
| (Can) Include Can Sales Tax on Form (include Canadian sales tax on form) | Select if you want Canadian sales tax information to display on the eBenefits Enrollment Summary page. |
| Cost Freq on Enrollment Form (cost frequency on enrollment form) | This defines how the cost of the benefits will appear on the enrollment form. Choose from the following valid values: <i>Annual:</i> Displays the costs as annual amounts. <i>Deduction:</i> Displays the costs as per-pay-period amounts. |
| Handbook URL ID (handbook uniform resource locator identification) | Enter the URL ID that connects to your benefit handbook. URL ID's are set up in the URL Table. |
| FMLA (family medical leave accounts) | Use this group box to define the rules for processing under the family medical leave act. |
| FMLA Plan ID (identification) | Enter the FMLA Plan ID that you created on the FMLA Plan Table. |

See Also

PeopleSoft Benefits Administration PeopleBook, “Setting Up Flexible Credits”

Associating Plan Types With a Benefit Program

Access the Plan Type and Option: Eligibility page.

Benefit Program Plan Type and Option Cost

Benefit Program: KU1 **Effective Date:** 01/01/1980

Plan Type Find | View All First 2 of 25 Last

*Plan Type: 10 Medical Minimum Annual Contribution: 0.00 + -

DispPlnSeq: 10 Maximum Annual Contribution: 0.00

Event Rules ID: KU1X Medical/Dental/Vision Rules HIPAA Plan

Waive Coverage: P Allowed with Proof COBRA Plan Load Cross Plan Values

Self-Service Configuration

Collect Dependent/Beneficiary Collect Fund Allocations Show if no choice

Domestic Coverage for: Handbook URL ID:

Option Find | View All First 1-5 of 26 Last

Eligibility Cross Plan

| Optn ID | *Optn Type | Benefit Plan | Covrg Code | Deductn Cd | Option Code | Default Option | Opt Level | Option Seq | Geog Locn | Elig ID |
|---------|------------|--------------|------------|------------|-------------|--------------------------|-----------|------------|-----------|---------|
| 1 | G | | | KUMED9 | | <input type="checkbox"/> | | 1 | | |
| 2 | W | | | KUMED9 | W | <input type="checkbox"/> | | 2 | | |
| 3 | O | KUMED1 | 1 | KUMED9 | 11 | <input type="checkbox"/> | 1 | 3 | KMID | KMED |
| 4 | O | KUMED1 | 2 | KUMED9 | 12 | <input type="checkbox"/> | 1 | 4 | KMID | KMED |
| 5 | O | KUMED1 | 3 | KUMED9 | 13 | <input type="checkbox"/> | 1 | 5 | KMID | KMED |

Benefit Program Table - Plan Type and Option: Eligibility page

Plan Type

Select the plan type that you want to add or display.

Minimum Annual Contribution

Defines the minimum amount an employee can elect to deposit into an FSA account.

DispPlnSeq (display plan sequence)

For Benefits Administration users. Indicates the order in which benefit plans appear. The default value is the plan type.

Maximum Annual Contribution

Defines the maximum amount an employee can elect to deposit into an FSA account. This amount cannot be larger than the amount entered on the Benefit Program page.

Event Rules ID (identification)

For Benefits Administration users. Select an event rule that you want to link to this benefit plan. Event Rules are set up on the Event Rules Table.

HIPPA Plan

This field applies only to health plans. Select this check box if you want to designate that this plan be included in the HIPPA Report.

Waive Coverage

For Benefits Administration users. Select the correct option that defines if and employees are permitted to waive coverage for this plan type.

| | |
|--|---|
| | In Base Benefits, you enroll the employee in a waive option instead of a coverage option. |
| COBRA Plan | Select this check box to designate which health plan types (limited to Plan Types 1x and 60) are COBRA-qualified plan types. If you make this plan type COBRA-qualified, enter an option code for each of your plans. Otherwise, the Option Code field will be unavailable. |
| Load Cross Plan Values | Click this button to automatically populate the cross-plan data for every option in this plan type. |
| Self Service Configuration | Use this group box to define the rules for displaying enrollment and plan information on the PeopleSoft eBenefits pages. |
| Collect Dependent/Beneficiary | Select this check box when you want the system to collect information pertaining to dependents and benefits and display that information on the eBenefit Summary and the eBenefit Detail Information pages. This works in conjunction with the Ignore Dep/Ben flag on the Event Rules page. |
| Collect Fund Allocations | When this check box is selected on the Benefit Program-Plan Type and Option page, the system collects the information pertaining to savings plans and displays that information on the eBenefit Savings Summary and the Detail Information pages. |
| Show if no choice | This check box controls whether a plan type is displays on the enrollment when the employee has no option to choose and cannot waive out of the option. A good example is paid vacation. Employees receive the benefit, but you don't display it on the enrollment form. If the check box is selected, the system displays the plan type in the enrollment form summary. When the check box is cleared, the system will not display the plan type. |
| Domestic Coverage for | This applies to only health plans. This field tells the system whether to display domestic coverage information along with the employee's coverage. |
| Handbook URL (uniform resource locator) | If you have a special handbook for this plan type, you can enter the URL ID. URL IDs are set up in the URL Table. |
| Option – Eligibility | Enter the options available to the employee for the designated plan type in this section. |
| Optn ID (option ID) | As you define options for each of the plan types that are offered, the system automatically enters the option ID. |
| Optn Type (option type) | Each option row needs to have an option type designation. Base Benefits enables you to select from the following list of valid values: |

O: At least one option is required per plan type, except for plan type 01. Plan type 01 is used only for PeopleSoft Benefits Administration. It is also called the "Program" level of the benefit program and is used only by programs that run in conjunction with PeopleSoft Benefits Administration.

G: Designates that this option is a general credit and used only in PeopleSoft Benefits Administration.

P: This used only for play type 01. It designates that this is a program and is required for automated benefit programs. Only one **P** row is allowed per benefit program.

W: Designates that waiving coverage is an option and is used only in PeopleSoft Benefits Administration.

Benefit Plan

Enter the code for a benefit plan that was defined on the Benefit Plan Table. If it is something other than a health plan, provide added detail in one of the various benefit plan detail pages.

Covrg Code (coverage code)

This applies only to health plan types. Indicate the level of coverage for health plans. It is a required field for those plan types. Coverage codes are defined on the Coverage Code Table.

Deductn Cd (deduction code)

Links the deduction code to the option.

Option Code

This field is available if the **COBRA Plan** check box is selected, or if this is a Benefits Administration (Automated) benefit program.

Default Option

- Applies to PeopleSoft Benefits Administration. Select this check box if you want this option to be used as the default when the PeopleSoft Benefits Administration process validates, loads, or finalizes participant elections.

The default option is the benefit plan option that is given to employees who do not make an election and is used if the associated event rule has a default method of *Option* or *Current Else Option*. Plan type defaults are used as substitutes for a participant's election when you finalize the event. Here are some guidelines for setting default options:

- Only select a default option for plan types **1x-3x, 5x, 7x, and 8x**.
- For **2x** plan types, you should not define options that require coverage to be specified at the employee level as defaults.

- Only the Waive Option Type is allowed as a default for plan types **4x**, **6x**, and **9x**.
- Options requiring proof should not be set as defaults, although it is an option.

Opt Level (option level)

Applies to PeopleSoft Benefits Administration. Option level refers to the level of benefits coverage provided by the option. For example, suppose you're setting up a set of supplemental life options that will give employees the ability to choose a coverage of 1, 2, 3 or 4 times their annual salary. You'd set option level values for these options of **1**, **2**, **3**, and **4**, respectively.

The option level values are used by the system during event processing. The event rule linked to the plan type to which these options belong, checks the option level when evaluating its change level rules. When an employee elects new coverage, the system compares the option level of the employee's new option election in that plan type with the employee's current option election. If the new election violates the associated event rule's Participate and Waive change level rules, the system rejects the employee's benefit option selection.

If, for example, the associated event rule's Maximum Number of Change Levels is 2, the system would prevent employees from changing their coverage more than two option levels in either direction. Therefore, an employee with coverage equal to 1 times their annual salary would not be allowed to select coverage equal to 4 times their annual salary during Open Enrollment.

Option Seq (option sequence)

Applies to PeopleSoft Benefits Administration. Indicates the order in which benefit options appear. The default value is the Plan Type.

Geog Locn (geographic location)

Applies to PeopleSoft Benefits Administration. If you want to link a geographic location rule to this option, enter the code. Geographic location rules are set up on the Geographic Location Table.

Elig ID (eligibility ID)

Applies to PeopleSoft Benefits Administration. If you want to link an eligibility rule to this option, enter the eligibility rule ID. Eligibility rules are created on the Eligibility Rules Table.

Cross Plan Tab

This tab is only for Benefit Administration users.

Optn ID (option identification),

The system displays the information created in the **Eligibility** section.

Optn Type (option type),
Benefit Plan

Covrg Code (coverage code)

Deductn Cd (deduction
code)

Option Code

Cross Plan Type If there is a cross-plan requirement for this option, enter the other plan type that must have an enrollment.

Cross Benefit Plan This field is for automated benefit programs and indicates that enrollment in this option is dependent upon enrollment in a particular benefit plan entered in *Cross-Plan Type* field.

Coverage Limit This field is for automated benefit programs and indicates that coverage is limited to a percentage of the employee's coverage amount in the other plan type.

Check Dependents This field is for automated benefit programs and tells the system to check the dependent's enrollment in this plan against the dependent enrollments in the other plan type.

The following chart shows you how to fill out the Plan Type and Option page for Plan Types **01** through **9X**:

| Field | Value For Plan Type 01 | Value for Plan Types 1x – 9x |
|-----------------------|--|---|
| Plan Type | 01 (Plan type 01 not allowed within Base Benefits) | 1x-9x |
| Display Plan Sequence | N/A | Not allowed |
| Event Rules ID | N/A | Not allowed |
| Waive Coverage | N/A | Not allowed |
| COBRA Plan | N/A | Allowed for plan types 1x and 6x |
| HIPAA Plan | N/A | Allowed for 1x plan types |
| Option Type | N/A | 0 - Only option type allowed for plan types 1x-9x |
| Benefit Plan | N/A | Required |

| Field | Value For Plan Type 01 | Value for Plan Types 1x – 9x |
|------------------------------|-------------------------------|--|
| Coverage Code | N/A | Required for plan type 1x Not allowed for plan types 2x-9x |
| Default Option Indicator | N/A | Not allowed |
| Deduction Code | N/A | Required |
| Option Sequence | N/A | Not allowed |
| Option Code | N/A | Not allowed, unless plan type 1x or 60 has been designated as a COBRA plan, in which case the Option Code is required. |
| Option Level | N/A | Not allowed |
| Geographic Location Table ID | N/A | Not allowed |
| Eligibility Rules ID | N/A | Not allowed |
| Cross-PlanType | N/A | Not allowed |
| Cross-Plan | N/A | Not allowed |
| Cross-Plan Limit Percentage | N/A | Not allowed |
| Cross-Plan Dependent | N/A | Not allowed |

See Also

Generating HIPPA Reports

“Enrolling Participants”

Linking a Benefit Program and Plan Type to Rate and Calculation Rules

Access the Benefit Program Table - Cost page.

| Benefit Program | | Plan Type and Option | | Cost | |
|------------------------------|----------------|------------------------------------|-------------------|---|-------------------|
| Benefit Program: KU1 | | Effective Date: 01/01/1980 | | | |
| Plan Type | | Find View All First 2 of 25 Last | | | |
| Plan Type: 10 Medical | | Option | | | |
| Option Id: 3 | | Option Type: 0 | | Benefit Plan: KUMED1 Coverage Code: 1 | |
| Cost | | Find View All First 3 of 26 Last | | | |
| Cost Type | Cost ID | Rate Type | Rate TblID | Earn Code | Calc TblID |
| Credit | 5 | Flat | KFMA | C10 | Med Cred |
| Price | 6 | Flat | KFMA | | |

Benefit Program Table - Cost page

Cost

Use this group box to identify the rate and calculation rules for each benefit program and option combination.

Cost Type

Identifies the cost type for this plan type and benefit option combination. For Base Benefits, the value will always be *Price*. The system calculates deductions for employees who select this option according to the deduction code linked to this benefit option.

For PeopleSoft Benefits Administration, the value can be *Price* or *Credit*. When you define a **Cost Type** as a *Credit*, you must enter the appropriate **Earn Code** (earnings code). Use the earnings code to tell the system how to calculate the flexible credit earnings for a participant. Use a different earnings code for each benefit plan type within a benefit program. The system assigns the frequency of the additional pay based on the deduction code that you identify for this benefit option.

Cost ID (identification)

When you enter a new Cost row, the **Cost ID** value is assigned automatically by the system and cannot be updated.

Rate Type

Identifies the type of rate (flat amount, age-graded, etc) associated with this plan type and benefit option combination.

Rate TblID (rate table identification)

Identifies which specific rate table is linked with this plan type and benefit option combination. You need the identification number because you may have established multiple tables for a particular rate type. Only plan types 01 through 3X can use rates.

Earn Code

Applies only to credits. Identifies the earning code that might be tied to the plan type.

Calc TblID (calculation table identification) Identifies the calculation rule linked to the plan type and benefit option combination.

Rate Availability by Plan Type

| Plan Type | Flat Rate | Age-Graded | Service Rate | Percent of Salary |
|------------------|------------------|-------------------|---------------------|--------------------------|
| 01 | ✓ | ✓ | ✓ | ✓ |
| 1X | ✓ | ✓ | ✓ | ✓ |
| 2X | ✓ | ✓ | ✓ | ✓ |
| 3X | ✓ | ✓ | ✓ | ✓ |
| 4X–9X | Not Used | Not Used | Not Used | Not Used |

For some plan types, you will need to specify the proper Calculation Rules Table Identification to ensure that the appropriate calculation rules are applied.

You don't have to indicate rates and calculation rules for *all* plan types. Certain rate types, on the other hand, *require* calculation rules. The following two tables provide additional information:

Rate and Calculation Rule Requirements by Plan Type

| Plan Type | Rate Tables | Calculation Rules Table |
|------------------|--------------------|--------------------------------|
| 1X | Required | Dependent on rate type |
| 2X | Required | Required |
| 3X | Required | Required |
| 4X | No | Required |
| 5X | No | Not Used |
| 6X | No | Not Used |
| 7X | No | Not Used |
| 8X | No | Not Used |
| 9X | No | Not Used |

Calculation Rule Requirements for Rate Types

| Rate Type | Calculation Rules |
|------------------|--------------------------|
| Age Graded | Required |
| Flat Amount | NA |

| <i>Rate Type</i> | <i>Calculation Rules</i> |
|------------------|--------------------------|
| Salary % | Required |
| Service | Required |

Setting Up Benefit Programs That Provide Benefits to Nonqualified Dependents

Base Benefits enables you to offer health and life benefits to your employees' domestic partners and other nonqualified dependents. You must define a specialized set of deduction rules, calculation rules, and age-graded rates. In addition, if you're planning on offering health benefits to nonqualified dependents, define one or more nonqualified dependent health plans. PeopleSoft delivers the following three health plan types for nonqualified dependents:

| <i>Plan Type</i> | <i>Description</i> |
|------------------|-----------------------------------|
| 15 | NQ Medical (nonqualified medical) |
| 16 | NQ Dental (nonqualified dental) |
| 17 | NQ Vision (nonqualified vision) |

If you're setting up a life plan for domestic partners and other nonqualified dependents, use a Dependent Life plan type.

Keep in mind that the IRS considers all of the benefits received by nonqualified dependents to be taxable income. The IRS will tax employees for the employer-paid portions of nonqualified health benefits, and it will also tax *all* of the benefits that nonqualified dependents receive from dependent life plans. In both cases, the system will perform imputed income calculations.

When you design a benefit program that enables employees to offer health and life benefits to domestic partners and other nonqualified dependents or beneficiaries, set up rows for nonqualified dependent health plan types—such as NQ Medical and NQ Vision—that complement the Medical and Vision plan types that are already present in your program. Your employees must elect (in an ordinary health plan type) to provide health coverage for themselves and their qualified dependents and a complimentary "NQ" health plan type to provide health coverage for their nonqualified dependents.

Note. If you are currently implementing PeopleSoft Benefits Administration, use the application's Cross-Plan Validation feature to set up the system to perform a validation check during the PeopleSoft Benefits Administration process that ensures that employees who attempt to enroll in an "NQ" health plan type are already enrolled in a regular health plan type.

See Also

“Organizing Payroll Information for Base Benefits,” “Setting Up Benefit Deductions”

PeopleSoft Benefits Administration PeopleBook, “Building Benefit Plans,” Setting Up Cross-Plan Validation

Cloning Benefit Programs, Eligibility Rules, or Event Rules

The Benefit Program Clone Utility enables you to identify a benefit program and make an exact copy of that program with a different effective date. You can give the duplicate program the same name as the original or rename it.

Page Used to Create a Copy of an Existing Benefit Program

| Page Name | Object Name | Navigation | Usage |
|--|--------------------|--|--|
| Benefit Program Clone Utility - Prog. Clone Util. (program clone utility) page | BN_CLONE | <ul style="list-style-type: none"> Define Business Rules, Define Automated Benefits, Setup, Benefit Clone Utility Define Business Rules, Define Base Benefits, Setup, Benefit Program Clone Utility, | <p>Create a copy of an existing benefit program. Give the duplicated program a new effective date and the choice of giving the program a new name or keeping it the same.</p> <p>Create a copy of an existing eligibility or event rule for Benefits Administration.</p> |

Using the Cloning Utility

Access the Benefits Clone page.

Benefits Clone

*Object Type to Clone: Benefit Program

Copy From

| Benefit Programs | | | | |
|-------------------------------------|-----------------|-------------------|----------------|--------|
| Selected | Benefit Program | Description | Effective Date | Status |
| <input type="checkbox"/> | B01 | BAS Eligibility 1 | 01/01/1998 | A |
| <input type="checkbox"/> | B01 | BAS Eligibility 1 | 01/01/1990 | A |
| <input checked="" type="checkbox"/> | B02 | BAS Eligibility 2 | 01/01/1990 | A |
| <input type="checkbox"/> | B03 | BAS Eligibility 3 | 01/01/1990 | A |

Copy To

Benefit Program: DCD Effective Date: 1/1/2001

*Program Type: Automated

Clone

Benefits Clone page

Object Type to Clone

Select either:

Benefit Program

Eligibility Rule (Benefits Administration only)

Event Rule (Benefits Administration only)

Selected

Select the check box for the object, benefit program, eligibility rule or event rule, that you would like to clone.

Copy To

This group box defines the name of the new object that will be created. These fields vary, depending upon the type of object you're cloning.

CHAPTER 8

Setting Up Dependent and Beneficiary Information

This chapter provides an overview of dependent and beneficiary information and discusses how to:

- Set up dependent roles.
- Enter dependents and beneficiaries.
- Enter dependent/beneficiary comments.
- (USF) Designate beneficiaries for a final check.
- Review and maintain beneficiary/dependent data.
- Enter court orders and spousal waivers.

Understanding Dependent and Beneficiary Information

Accurate dependent and beneficiary information—name, address, birth date, gender, and relationship—helps ensure that benefit claims are quickly and correctly processed.

By setting up dependent/beneficiary data, you can:

- Simplify benefit enrollment for dependents and beneficiaries.
- Review data and print reports.

Additionally, requirements such as a Qualified Medical Child Support Order (QMCSO) and Qualified Domestic Relations Order (QDRO) mandate that employees provide benefits to dependents and beneficiaries. When you enter a court order, the system checks to see if a court order is tied to an employee record. If the system finds a court order, it checks to see if any changes are allowed to the benefit enrollments. If changes are not allowed, then a warning appears.

When you set up dependent/beneficiary data, you need an employee identification number. So you need to enter employee administration data—personal information, compensation allowances, and job data—first.

You can view basic human resources information for employees by using personnel administration components such as Personal Data and Job Data in PeopleSoft Human

Resources or by viewing the Employee Data Summary in Base Benefits. Employees can review, update and add their own dependent and beneficiary information using the PeopleSoft eBenefits application pages.

See Also

“Reviewing Enrollments and Benefit Calculations”

PeopleSoft Human Resources PeopleBook: Administer Workforce, “USF - Hiring Employees”

Setting Up Dependent Roles

You can define the relationships—for example, son, daughter, grandmother, grandfather, nephew, and niece—that qualify as dependents according to your organization’s rules. If you define relationships, you cannot enter dependents whose relationships are not defined. (So if you had not defined *grandmother* as an allowable dependent type, you couldn’t enter an employee’s grandmother as a dependent.) This setup is optional; if you don’t define relationships, the system doesn’t restrict who can be a legal dependent.

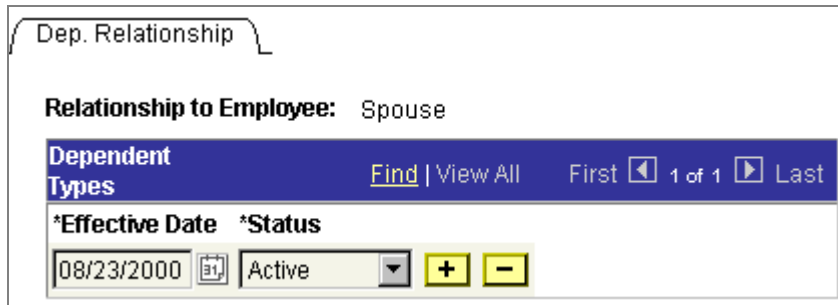
Beneficiary relationships are not tracked, because they do not have the same legal ramifications as dependents.

Page Used to Set Up Dependent Roles

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|---|--------------------|---|--|
| Dep. Relationship (dependent relationship) | DEPBEN_TYPE_TBL | Define Business Rules, Define Base Benefits, Setup, Dependent Relationships Table, Dependent Relationship Table | Tie relationships (spouse, son, daughter, and so on) to benefit roles. |

Defining Dependent Roles

Access the Dep. Relationship page.



Dep. Relationship page

| | |
|---------------------------------|---|
| Relationship to Employee | The relationship that you selected to access the page. |
| Effective Date | Enter a date on which the dependent status of this relationship goes into effect. |
| Status | If the rule is Inactive, this relationship is no longer considered a valid dependent. |

Entering Dependents and Beneficiaries

Dependent and beneficiary information is entered in the Dependent Data component of PeopleSoft Human Resources - Administer Workforce and is fully documented in the PeopleSoft Human Resources Administer Workforce PeopleBook.

See Also

PeopleSoft Human Resources PeopleBook: Administer Workforce, “Entering Additional Data in Human Resources Records”

Pages Used to Enter Dependent and Beneficiary Information

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|------------------------|--------------------|--|--|
| Federal Medicare Flags | BN_DEPBEN_EFFDT | Compensate Employees, Administer Base Benefits, Use, Dependent/Beneficiary | (USF) Select federal Medicare flags and types if required. |

(USF) Entering Medicare Flags

Access the Federal Medicare Flags page.

Federal Medicare Flags page

Medicare A Indicator and **Medicare B Indicator** Select if the dependent is enrolled in Medicare A or Medicare B.

Entering Dependent/Beneficiary Comments

Comments you make about dependents and beneficiaries are for your use only; they are not used by the system.

Page Used to Enter Dependent/Beneficiary Comments

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|------------------|--------------------|--|---|
| Benefit Comments | BENEFIT_COMMENTS | Compensate Employees, Administer Base Benefits, Use, Dependent/Beneficiary Comment, Benefit Comments | Enter notes about a dependent or beneficiary. |

Recording Dependent/Beneficiary Comments

Access the Benefit Comments page.

Benefit Comments page

Action Date Enter the date on which the comment becomes or became effective.

Comments By Enter your name or the name of the person providing the information.

(USF) Designating Beneficiaries for a Final Check

You can designate dependents or beneficiaries to receive an employee's final check in the event that the employee dies. This page is used for informational purposes only; the system does not use the data entered on this page for benefits processing.

Page Used to Designate Beneficiaries for a Final Check

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|------------------|--------------------|---|---|
| Final Check | GVT_FIN_CHK_BEN | Compensate Employees, Administer Base Benefits, Use, Final Check Beneficiary Data, Final Check Beneficiary Data | Specify dependents or beneficiaries to receive an employee's final check. |

Specifying Beneficiaries for a Final Check

Access the Final Check page.

Final Check

Andrews, Olivia Employee EmpID: B-BARET201 Empl Rcd#: 0

Final Check Beneficiary Data View All First ◀ 1 of 1 ▶ Last

*Effective Date:

Benefit Information View All First ◀ 1 of 1 ▶ Last

| | Percent of Benefit | Flat Amount | Excess | Contingent | |
|---|----------------------|----------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="button" value="+"/> <input type="button" value="-"/> |

Total:

Final Check page

- Percent of Benefit and Flat Amount** Enter a flat amount or percentage for the beneficiary to receive from the final paycheck.

The total percentage for all beneficiaries should equal 100, unless you have contingent beneficiaries. The sum of the flat amounts cannot be greater than the paycheck.
- Excess** If flat amounts are used, select to designate a beneficiary to receive any excess funds.
- Contingent** Select if this dependent or beneficiary is not a primary beneficiary.

Amounts attributed to contingent beneficiaries must also add up to 100 percent.

Terminating Dependent Enrollments or Beneficiary Status

Remember that you enroll dependents and assign beneficiaries when you enroll employees. To terminate a dependent enrollment or beneficiary status, you must enter a row of data with the termination date (just as you do with employees). You make these changes on the Benefit Detail page for the benefit in question, such as Life & AD/D Benefits. You do not make the changes on the Dependent/Beneficiary Data page.

If you try to delete dependent/beneficiary records on benefit detail pages that have court orders applied to them, the system informs you that the dependent or beneficiary has a court order that provides a legal right to benefit coverage.

Warning! If you delete dependent/beneficiary data using the Dependent/Beneficiary Data page, you'll destroy history. Once you change enrollment data, it won't matter that the dependent or beneficiary data is available on the Dependent/Beneficiary Data page. In fact, it must remain to provide correct historical information.

Entering Court Orders and Spousal Waivers

Spouses, ex-spouses, and children of employees may have court orders that provide them with a legal right to benefit coverage from those employees. In addition, certain benefit plans may require that a spouse have a required minimum coverage amount.

Court orders are entered on the Dependent/Beneficiary Riders page, and minimal spousal amounts are entered on the Benefit Plan Table.

To track court-ordered benefits, print the Court Ordered Coverage Audit report.

See Also

PeopleSoft Application Fundamentals for HRMS PeopleBook, “Appendix: PeopleSoft Application Fundamentals for HRMS Reports

CHAPTER 9

Enrolling Participants

This chapter provides an overview of the enrollment process and discusses how to:

- Review employee eligibility.
- Enroll in benefit programs.
- Enroll participants in benefit plans.
- (USF) Enroll employees in benefit programs and plans through the PAR.
- (USF) Enroll employees in benefit programs using Base Benefits pages.
- (USF) Assign FEGLI benefits.
- (USF) Enroll employees in TSP Agency Automatic Contribution plan.
- Audit your benefit information.

See Also

PeopleSoft Benefits Administration PeopleBook, “Introduction to PeopleSoft Benefits Administration”

Understanding the Enrollment Process

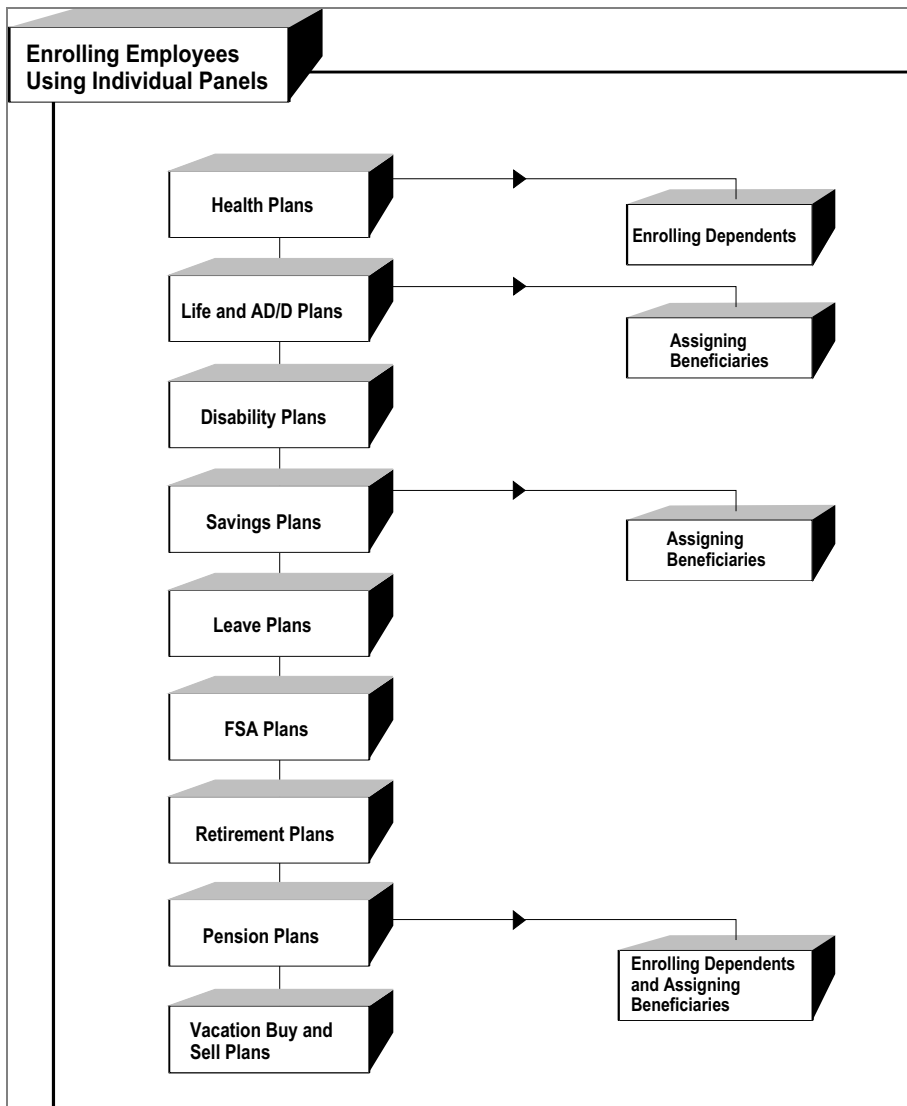
Using the Base Benefits business process to enroll participants consists of two parts:

1. Enroll a participant in a benefit program.

Initially, an employee’s benefit program assignment is assigned to the employee based on his or her employee pay group, but you can override this assignment at the employee level. Verify that the employee is enrolled in the correct benefit program, because you can only enroll participants in benefit plans that are associated with their assigned benefit program.

2. Using individual benefit pages, enroll the participant in all appropriate benefit plans within the benefit program.

When you enroll employees in health, life, savings, FSA, and Canadian pension benefit plans, you also enroll dependents and assign beneficiaries.



Enrolling employees and their dependents and beneficiaries




Note. You should set up that data *before* you start enrollments. That way, for each dependent enrollment and beneficiary assignment, you can prompt for the data once rather than enter it several times.

See Also

“Setting Up Dependent and Beneficiary Information”

Auditing Your Benefit Information

Common Elements Used in This Chapter

| | |
|---|--|
| Plan Type | Select the appropriate benefit plan type. |
| Coverage Code | Defines who is covered by the benefit. |
| Coverage Begin Date | Select the coverage begin date. |
| Deduction Begin Date | Defaults to the Coverage Begin Date, but you can change it. The system verifies that the Benefit Program is in effect as of the Deduction Begin Date. |
| Coverage Election and Participation Election | Use to define whether the employee is electing, waiving, or terminating coverage. Select from the following valid values: <i>Elect</i> : If the employee is electing coverage. <i>Waive</i> : If the employee is not electing coverage. <i>Terminate</i> : If the employee is terminating coverage. |
| Election Date | Enter the date the coverage is elected, waived, or terminated. |
| Benefit Plan | Select the benefit plan. Only the benefit plans that you've associated with the employee's chosen Benefit Program as of the Deduction Begin Date appear in the selection list. |
|  | Indicates this field operates in deferred mode. Deferred mode means the system does not automatically validate the field. You can validate the field by clicking this button or when you click the Save button. |
|  | Click to list all eligible dependants and beneficiaries. |
|  | Click to update the totals. |

(USF) Understanding the Federal Enrollment Process

To enroll employees in health benefits:

1. Use PeopleSoft Human Resources PAR process to enroll participants in a benefit program.
2. Use the Benefits/FEHB Data and FEGLI/Retirement/FICA pages, to enroll the participant in all appropriate benefit plans within the benefit program.

When you enroll employees in health, life, and savings plans, you also enroll dependents and assign beneficiaries.

3. Set the Medicare Flags for both employees and dependents.

See Also

(USF) Enrolling Employees in Benefit Programs and Plans Through the PAR

“Setting Up Dependent and Beneficiary Information”, (USF) Entering Medicare Flags

Page Used to Enter Employee Medicare Flags

| | | | |
|----------------------|-----------------|---|--|
| Benefits Person Data | BN_PERSON_EFFDT | Compensate Employees, Administer Base Benefits, Use, Benefits Person Data | Federal users only, select the appropriate Federal Medicare flags to indicate employee enrollment. |
|----------------------|-----------------|---|--|

(USF) Entering Medicare Flags for Employees

Access the Benefits Person Data page.

The screenshot shows the 'Benefits Person Data' page for employee KOG001, Susan Jones. The 'Effective Date' is 07/23/2001. There are three checkboxes for Medicare indicators: Medicare A Indicator, Medicare B Indicator, and Champus Indicator, all of which are currently unchecked. The page includes navigation controls like 'View All', 'First', '1 of 1', and 'Last', along with '+' and '-' buttons.

Benefits Person Data page

Medicare A Indicator Indicates that the employee is enrolled in Medicare A.

Medicare B Indicator Indicates that the employee is enrolled in Medicare B.

Champus Indicator Indicates that the employee is enrolled in Champus.

Reviewing Employee Eligibility

Before you can enroll a participant, your Human Resources department must set up personnel administration data: personal information, compensation allowances, and job data.

Page Used to Review Employee Eligibility

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|-----------------------|--------------------|---|---|
| Employee Data Summary | EMPLOYEE_SUMMARY1 | <ul style="list-style-type: none"> • Compensate Employees, Administer Automated Benefits, Inquire, Employee Data Summary, Employee Data Summary • Compensate Employees, Administer Base Benefits, Inquire, Employee Data Summary, Employee Data Summary • Define Business Rules, Define General Data (NLD), Inquire, Employee Data Summary, Employee Data Summary • Develop Workforce, Plan Careers, Inquire, Employee Summary, Employee Data Summary | View the personnel administration data. |

Viewing Personnel Administration Data

Access the Employee Data Summ (summary) page.

| Employee Data Summary | | |
|-----------------------------------|---------------------------|--------------------------|
| Santos, Antonio | ID: KU0010 | Empl Rcd#: 0 |
| Employee Summary Data | | |
| Employee Status: | Active | |
| Benefits Employee Status: | Active | |
| Full/Part Time: | Full-Time | |
| Regular/Temporary: | Regular | |
| Standard Hours: | 40.00 | |
| Work Period: | Weekly | |
| Pay Group: | US Weekly | |
| Company: | Global Business Institute | |
| Employee Type: | Hourly | |
| Business Unit: | US006 | GBI BU for US006 |
| Job Code: | KU051 | Administrative Assistant |
| Department: | KU001 | Human Resources |
| Location Code: | KUNY00 | Corporation Headquarters |
| Annual Benefits Base Rate: | | |

Employee Data Summary page (1 of 2)

| National ID | | | |
|--------------------------------|------------|-----------------------|---------------------------------------|
| Country: | USA | NID Type: | PR SSN National ID 578-29-0482 |
| Gender: | Male | | |
| Marital Status: | Married | | |
| Significant Dates | | | |
| Hire Date: | 09/12/1997 | Service Date: | 09/12/1997 |
| Company Seniority Date: | 09/12/1997 | Rehire Date: | |
| Termination Date: | | Date of Birth: | 08/09/1972 |
| Effective Date: | 09/12/1997 | Date of Death: | |

Employee Data Summary page (2 of 2)

Annual Benefits Base Rate This field is blank if your organization uses a benefits base different from regular pay.

Set up the annual benefits base rate in the Compensation page of the Job Data Component, in the Annual Benefits Base Rate field.

See Also

PeopleSoft Human Resources PeopleBook: Administer Workforce, "Hiring Your Workforce," Hiring an Employee

Enrolling in Benefit Programs

Enroll participants in benefit programs during new-hire processing. Set up a default benefit program, which you can change if needed

Pages Used to Enroll in Benefit Programs

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|---|--------------------|--|---|
| Ben. Prog. Partic. (Benefit Program Participation) | EN_PROG_PARTICPTN | <ul style="list-style-type: none"> • Compensate Employees, Administer Base Benefits, Use, Benefit Program Participation, Benefit Program Participation • Define Business Rules, Define General Data (NLD), Use, Benefit Program Participation, Benefit Program Participation • Define Business Rules, Define Payroll Interface, Setup, Benefit Program Participation, Benefit Program Participation | Enroll the employee in the appropriate benefit program. |

Enrolling Employee in a Benefit Program

Access the Ben. Prog. Partic. (benefit program participation) page.

| Ben. Prog. Partic. | |
|--|---|
| Santos, Antonio | ID: KU0010 Empl Rcd#: 0 |
| Benefit Program Participation Find View All First 1 of 1 Last | |
| *Effective Date: | 01/01/1999 <input type="text"/> <input type="button" value="B7"/> <input type="button" value="+"/> <input type="button" value="-"/> |
| *Benefit Program: | <input type="text" value="KU1"/> <input type="button" value="Q"/> GBI Master US Benefit Program Currency Code: USD |

Ben. Prog. Partic. (benefit program participation) page

Benefit Program

Set up a default benefit program because if you run a payroll before you enter a benefit program, payroll cannot process the employee.

You can override the default benefit programs with the correct benefit program.

Enrolling Participants in Benefit Plans

In this section, we discuss enrolling participants in benefit plans and how to:

- Enroll in health plan types.
- Enroll in life plans.
- Enroll in disability benefit plans.
- Enroll in savings benefit plans.
- Enroll in leave plans.
- Enroll in FSA plans.
- Enroll in the Public Employees Retirement System benefit plans.
- Enroll in pension plans.
- Enroll in vacation benefit plans.

See Also

“Setting Up Benefit Plans”

“Building Base Benefit Programs”

Pages Used to Enroll Participants in Benefit Plans

| Page Name | Object Name | Navigation | Usage |
|---|------------------------------|--|---|
| Health Benefits Elections | HEALTH_BENEFITS1 | Compensate Employees, Administer Base Benefits, Use, Health Benefits, Health Benefits Elections | Enroll employees and dependents in health plan types: medical, dental, and vision. |
| Life/ADD Elections | IFE_ADD_BENEF1 | Compensate Employees, Administer Base Benefits, Use, Life and AD/D Benefits, Elections | Enroll participants in life plans and to assign beneficiaries to those plans. |
| Disability Benefit | DISABILITY_BENEFIT | Compensate Employees, Administer Base Benefits, Use, Disability Benefits, Disability Benefits | Enroll employees in disability benefit plans. |
| Savings Plan Elections | SAVINGS_PLANS1 | Compensate Employees, Administer Base Benefits, Use, Savings Plans, Elections | Enroll employees in savings benefit plans, assign beneficiaries, and identify investment elections. |
| Leave Plans | LEAVE_PLANS LEAVE_PLANS_A | <ul style="list-style-type: none"> • Compensate Employees, Administer Base Benefits, Use, Leave Plans, Leave Plans (USA) • Compensate Employees, Administer Base Benefits, Use, Leave Plans (Can/Intl), Leave Plans | Enroll employees in leave plans. |
| FSA Benefits (USA) (Flexible Spending Account Benefits) | FSA_BENEFITS | <ul style="list-style-type: none"> • Compensate Employees, Administer Base Benefits, Use, FSA Benefits, FSA Benefits (USA) • Compensate Employees, Administer Base Benefits, Use, FSA Benefits (Can), FSA Benefits (Can) | Enroll employees in North American companies in FSA plans. |

| Page Name | Object Name | Navigation | Usage |
|------------------------|--------------------|---|--|
| Retirement Plans | RTRMNT_PLANS | <ul style="list-style-type: none"> • Compensate Employees, Administer Base Benefits, Use, Retirement Plans, Retirement Plans | Enroll employees in Public Employees Retirement System (PERS) benefit plans. |
| Pension Plan Elections | PENSION_PLAN1 | <ul style="list-style-type: none"> • Compensate Employees, Administer Base Benefits, Use, Pension Plans (US) • Compensate Employees, Administer Base Benefits, Use, Pension Plans (CAN) | Enroll employees in benefit plans. |
| Vacation Benefit | VACATION_BENEFIT | Compensate Employees, Administer Base Benefits, Use, Vacation Benefit | Enroll employees in vacation buy and sell plans. |

Enrolling in Health Benefit Plans.

Access the Health Benefits Elections page

Health Benefit Elections

Chretien, Shirley ID: B-BARET203

Plan Type Find | View All First 1 of 1 Last

*Plan Type:

Coverage Find | View All First 1 of 1 Last

*Coverage Begin Date: *Deduction Begin Date:

Coverage Election: Elect Waive Terminate *Election Date:

Benefit Program:

Benefit Plan: Option Code:

Coverage Code:

Health Provider ID: Previously Seen

HIPAA Report Date (Emp):

HIPAA Report Date (Dep): Employee Status: Active

Dependent/Beneficiaries 1 of 1

| *ID | Name | Relationship | Health Provider ID | Prev Seen |
|---|------|--------------|----------------------|---|
| <input type="text"/> <input type="button" value="Q"/> | | | <input type="text"/> | <input type="checkbox"/> <input type="button" value="-"/> |
| <input type="button" value="+"/> | | | | |

Health Benefits Elections page

Health Provider ID

Tracks the primary care physician information for the employee's health provider. You can enter the name of the employee's doctor, an ID number, or any other format the health provider may require.

Previously Seen

Select this check box to indicate that the employee is a current patient of the indicated physician.

HIPAA Report Date (Emp and Dep)

Displays the date that the employee's certificate of creditable health coverage was printed, if his or her health coverage was terminated.

Other Covrg (other coverage)

For Federal users only, this check box indicates the dependent has another active insurance plan.

Insurance Name

For Federal users only, enter the name of the other insurance plan.

FEHB Ind (Federal Employee Health Benefits indicator)

For Federal users only, this check box indicates the dependent in enrolled in FEHB.

See Also

“Setting Up Benefit Plans”, Setting Up Health Plans

Enrolling in Life Plans.

Access the Life and AD/D (life and accidental death and dismemberment benefits) Elections page

The screenshot displays the 'Life/ADD Elections' interface for employee Chretien, Shirley (ID: B-BARET203). The interface is organized into several sections:

- Plan Type:** Includes a search field and navigation controls (Find, View All, First, 1 of 1, Last).
- Coverage:** Contains fields for *Coverage Begin Date, *Deduction Begin Date, Coverage Election (radio buttons for Elect, Waive, Terminate), and *Election Date (07/06/2001).
- Benefit Program:** Includes fields for Benefit Plan and Option Code.
- Coverage Options:** Features a Factor field, Times, a dropdown for Annual Rate, and/or Flat Amount.
- Smoker and Employee Status:** A checkbox for Smoker and a field for Employee Status (Active).
- Dependent/Beneficiaries:** A table with columns for ID, Name, Relationship, Percent of Benefit, Flat Amount, Excess, and Contingent. A summary row shows Total Primary Percent: 0 and Total Contingent Percent: 0, with an Update Totals button.

Life and AD/D (life and accidental death and dismemberment benefits) Elections page

Coverage Options and Benefits Base

Use these group boxes to define plan coverage and the benefits base calculation rules.

These sections are active only if, in the Life and AD/D Plan Table page, you indicate that Coverage Options and Benefits Base information should be *Specified at the Employee Level*.

Flat Amount and Factor

Define coverage as either a flat amount only or a factor x benefits base/salary + flat amount. In the latter case, enter both a **Flat Amount** and a **Factor**.

Also enter the rate with which the life or AD/D plan calculations are performed. Select either the **Annual Rate** (the employee's pay rate) or **Annual Benefits Base Rate**.

Smoker

Smoker is selected if you have indicated that the dependent is a smoker in the Dependent/Beneficiary - Personal Profile page.

On this page, the **Smoker** check box is a display-only field. When **Smoker** is selected, the system uses the age-

graded rates that have been defined for smokers when calculating the employee's life benefit cost.

ID

Select the beneficiary ID. The selection list includes all of the beneficiaries that you set up for the employee using the Dependent/Beneficiary Data pages. Only beneficiaries that you identified as *Beneficiary* or *Both* (beneficiary or dependent) can be selected.

To delete a dependent enrollment, position the cursor at the line for the dependent that you want to delete and click the delete button.

Percent of Benefit and Flat Amount

Define the distribution benefit as a percent of benefit or a flat amount. If you enter a **Flat Amount** and more than one beneficiary, select one of the beneficiaries to receive any excess funds. Select the beneficiary by selecting the **Excess** check box.

Contingent

(Optional) Indicate whether a beneficiary is primary or contingent (secondary to a primary beneficiary) by selecting this check box.

If you set up a primary beneficiary to receive 100 percent of the benefit, all other beneficiaries have **Contingent** selected.

Note. If you are working with a Dependent Life plan, add dependent IDs for all of the dependents that will be covered by the plan. In Dependent Life plans, the dependents are covered by life insurance, and the *employee* is the beneficiary.

If you have defined the Coverage method of the Life or AD/D plan that you're working with to be the *Sum of Dependent Coverage* in the Life and AD/D Plan Table, the **Percent of Benefit** field is not available for entry.

The **Totals** for all beneficiaries must equal 100 percent. If they do not, the system displays an error message and does not allow you to save your entries. To correct the entry, change one or more of the percentages so that the **Totals** are equal to 100 percent.

See Also

“Setting Up Benefit Plans”, Setting Up Life Insurance Plans

“Organizing Payroll Information for Base Benefits”, Establishing the Compensation Base

“Setting Up Dependent and Beneficiary Information”

Enrolling in Disability Benefit Plans

Access the Disability Benefit page.

Disability Benefit

Jimenez,Jiovan ID: 0002

Plan Type View All First 1 of 1 Last

*Plan Type:

Coverage Find | View All First 1 of 1 Last

*Coverage Begin Date: *Deduction Begin Date:

Coverage Election: Elect Waive Terminate *Election Date:

Benefit Program: GBI US Fulltime Benefit Pgm

Benefit Plan: Option Code:

Currency: USD Employee Status: Active

Disability Benefit page

See Also

“Setting Up Benefit Plans”, Setting Up Disability Plan Information

Enrolling in Savings Benefit Plans

Access the Savings Plan Elections page.

Savings Plan Elections

Chretien,Shirley ID: B-BARET203 Highly Compensated

Plan Type Find | View All First 1 of 1 Last

*Plan Type:

Coverage Find | View All First 1 of 1 Last

*Coverage Begin Date: *Deduction Begin Date:

Participation Election: Elect Waive Terminate *Election Date:

Benefit Program:

Benefit Plan: Option Code:

| Before Tax Investment | After Tax Investment |
|--|--|
| Flat Amount: <input type="text"/> <input type="button" value="USD"/> | Flat Amount: <input type="text"/> <input type="button" value="USD"/> |
| Percent of Earnings: <input type="text"/> | Percent of Earnings: <input type="text"/> |
| Annual Excess Credits: <input type="text"/> | |

Employee Status: Active

Dependent/Beneficiaries 1 of 1

| *ID | Name | Relationship | Beneficiary Percentage |
|----------------------|----------------------|----------------------|---|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> <input type="button" value="-"/> |
| | | | <input type="button" value="+"/> |

Total Beneficiary Percentage:

Savings Plan Elections page (1 of 2)

The screenshot shows a software interface for managing investments. At the top, there's a header 'Investments' with a '1 of 1' indicator. Below it, there are two input fields: '*Investment Option' and '*Investment Percent'. A '+' button is on the left, and a '-' button is on the right. Below these is a 'Total Investment Percentage:' label and an 'Update Totals' button. The bottom section is titled 'Rollover Options' and contains a table with columns: Plan Type, Benefit Plan, Deduction Code, and Deduction Class. There are two rows: 'Before Tax to:' and 'After Tax to:', each with a checkbox and a search icon for each column.

Savings Plan Elections page (2 of 2)

Before Tax Investment and After Tax Investment

Flat Amount and Percent of Earnings Define investment contributions as a flat amount or percent of earnings.

The system compares the **Percent of Earnings** to the percent of gross limits for employee **Before-** and **After-Tax Investment** values. The system also verifies that the sum of the **Before-** and **After-Tax Investment** values does not exceed the overall investment limit percentage that you defined for the savings benefit plan on Savings Plan Table.

Dependent/Beneficiaries

ID Select the beneficiary ID. The selection list includes the beneficiaries that you set up for the employee using Dependent/Beneficiary Data.

To delete a dependent enrollment, position the cursor at the line for the dependent that you want to delete and click the delete button.

Percent of Benefit Enter the percent of benefit for each beneficiary.

Note. The **Total** for all beneficiaries must equal 100 percent. If it do not, the system displays an error message and does not allow you to save your entry. To correct the entry, change one or more of the percentages so that **Total** is equal to 100 percent.

Investments

Investment Option Select an investment option and allocate an investment percentage. Investment percentages must total 100 percent before they can be saved into the system. If there

is more than one investment option associated with the chosen employee's savings plan, add more rows.

Rollover Options

You can enter rollover options only if **Specified at Employee Level** is selected on Savings Plan Table 3.

Enter the **Before Tax to** and **After Tax to** rollover **Plan Type**, **Benefit Plan**, **Deduction**, and (if applicable) **Deduction Class** in the rows provided.

See Also

“Setting Up Dependent and Beneficiary Information”

“Setting Up Benefit Plans,” Setting Up Savings Plans

Enrolling in Leave Plans

Access the Leave Plans page.

The screenshot shows the 'Leave Plans' page for employee Chretien, Shirley (ID: B-BARET203). The page is divided into several sections:

- Plan Type:** A search field with a magnifying glass icon and a '+ -' button.
- Coverage:** A section with a 'View All' button and 'First 1 of 1 Last' navigation. It includes:
 - *Effective Date:** A date field with a calendar icon and a '+ -' button.
 - Coverage Election:** Radio buttons for 'Elect' (selected), 'Waive', and 'Terminate', with a refresh icon.
 - *Election Date:** A date field with a calendar icon, showing '07/06/2001'.
- Benefit Program:** A search field with a magnifying glass icon.
- Benefit Plan:** A search field with a magnifying glass icon.
- Currency:** A field for selecting the currency.
- Employee Status:** Displayed as 'Active'.

Leave Plans page

Note. The Leave Plans page for Canadian and International users is identical to the page for U.S. users with the exception that it does not offer the option of choosing the *FMLA* (Family Medical Leave Act) **Plan Type**.

See Also

“Setting Up Benefit Plans,” Setting Up Leave Plans

Enrolling in FSA Plans

Access the FSA Benefits (USA) page.

FSA Benefits (USA)

Santos, Antonio ID: KU0010

Plan Type: 60 Flex Spending Health - U.S.

Coverage

*Coverage Begin Date: 01/01/2000 *Deduction Begin Date: 01/01/2000

Coverage Election: Elect Waive Terminate *Election Date: 06/23/2000

Benefit Program: GBI US Fulltime Benefit Pgm

Benefit Plan: KUH FSA Healthcare FSA Option Code: 1

Contribution Level

Annual Pledge: 2000.00

Credit Rollover Included in Pledge: \$0.00

Empl Contribution Override: Monthly

Account Information

FSA Account Status: Active

Contributions YTD: \$0.00

Employee Status: Active

FSA Benefits (USA) page

Note. The FSA Benefits page for Canadian users is essentially the same as the page for U.S. users with two exceptions. It offers a choice between Canadian Health Care and Canadian Retirement Counseling plan types (Plan Types 65 and 66) instead of Health and Dependent Care plan types (Plan Types 60 and 61), and it displays a Carryforward option of either *Claim* or *Credit*, if applicable.

Contribution Level

| | |
|---|---|
| Annual Pledge | Enter the employee's annual pledge amount. |
| Credit Rollover Included in Pledge | Used by PeopleSoft Benefits Administration. It displays the amount of the excess benefits credits that have been assigned to an FSA plan at the end of a plan year. The PeopleSoft Benefits Administration system automatically provides the <i>Credit Rollover Included in Pledge</i> from the previous year, if you have designated that excess credits should be assigned to FSA plans in the Benefit Program Table. |
| Employee Contribution Amount | Appears if you are not using PeopleSoft Payroll for North America or PeopleSoft Payroll Interface and is a required field. |
| Employee Contribution Override | Appears if you are using PeopleSoft Payroll for North America or PeopleSoft Payroll Interface. |

Employee Contribution Override

If PeopleSoft Payroll for North America or PeopleSoft Payroll Interface is not implemented, this is optional.

Enter a value to have the system use this amount to calculate the employee's FSA contribution.

Leave the field blank to have the system use the *Annual Pledge* amount to calculate the employee's FSA contribution.

Account Information

The system reflects the **FSA Account Status** of the employee's FSA plan, as well as the employee's **FSA Contributions YTD** (contributions year-to-date).

Employees cannot transfer FSA funds from one account to another. As a rule, unused funds in an account at the end of a plan year are transferred to the employer.

Carryforward

Appears for Canadian Pension Plans. This value is automatically set to the value that you entered for the Employer Carryforward Choice in the FSA Benefits Table (Canada).

See Also

“Setting Up Benefit Plans,” Setting Up FSA Plans

PeopleSoft FSA Administration PeopleBook, “Administering FSA”

Enrolling in the Public Employees Retirement System Benefit Plans

Access the Retirement Plans page.

The screenshot displays the 'Retirement Plans' page for employee Shirley Chretien (ID: B-BARET203). The page is divided into two main sections: 'Plan Type' and 'Coverage'.
 - **Plan Type:** Includes a search field and navigation buttons (+, -).
 - **Coverage:** Contains several fields:
 - *Deduction Begin Date: A date input field with a calendar icon and a refresh icon.
 - Participation Election: Radio buttons for 'Elect' (selected), 'Waive', and 'Terminate', with a refresh icon.
 - *Election Date: A date input field showing '07/06/2001' with a calendar icon.
 - Benefit Program: A search field.
 - Benefit Plan: A search field.
 - Option Code: A search field.
 - Employee Status: Displayed as 'Active'.
 Both sections have 'Find | View All' and 'First | 1 of 1 | Last' navigation options.

Retirement Plans page

See Also

“Setting Up Benefit Plans,” Setting Up Retirement Plans

Enrolling in Pension Plans

Access the Pension Plan Elections page. For U.S. users the plan types are 80 or 81. For Canadian users, the plan types are 82 through 87.

Pension Plan Elections

Chretien, Shirley ID: B-BARET203

Plan Type Find | View All First 1 of 1 Last

*Plan Type: [] [Q] [+ -]

Coverage Find | View All First 1 of 1 Last

*Deduction Begin Date: [] [Q] [R] [R] [+ -]

Participation Election: Elect Waive Terminate [R] *Election Date: [07/06/2001] [Q]

Benefit Program:

Benefit Plan: [] [Q] Option Code:

Voluntary Contributions

Flat Amount Contribution: [0.00] Or Percent of Earnings: [0.000]

Salary for Pension Calculation: [] Employee Status: Active

Pension Plan Elections page (1 of 2)

Assign All Beneficiaries

Dependent/Beneficiaries 1 of 1

| ID | Name | Relationship | Percent of Benefit | Flat Amount | Excess Contingent |
|---------|------|--------------|--------------------|-------------|---|
| [] [Q] | | | [] | [] | <input type="checkbox"/> <input type="checkbox"/> |

[+]

Total Primary Percent: Total Contingent Percent: [] []

[Update Totals]

Pension Plan Elections page (2 of 2)

Salary for Pension Calculation

Use to calculate the pension using a salary other than the employee pay rate.

Voluntary Contribution Amount

Enter an amount that the employee voluntarily contributes to the pension plan. This is an amount *over* the amount that you define in the Pension Plan Table. Instead of an amount, you can enter a **Percent**.

Dependent/Beneficiaries

ID Select the beneficiary ID.
 The selection list includes the beneficiaries that you set up for the employee using Dependent/Beneficiary Data.
 To delete a dependent enrollment, position the cursor at the line for the dependent that you want to delete and click the delete button.

Percent of Benefit and Flat Amount Define the distribution benefit as a percent of benefit or a flat amount. If you enter a **Flat Amount** and more than one beneficiary, select one of the beneficiaries to receive any excess funds. Select the beneficiary by selecting the **Excess** check box.

Note. The **Total** for all beneficiaries must equal 100 percent. If it does not, the system displays an error message and does not allow you to save your entry. To correct the entry, change one or more of the percentages so that **Total** is equal to 100 percent.

See Also

“Setting Up Benefit Plans”, Setting Up Pension Plans
 “Setting Up Dependent and Beneficiary Information”

Enrolling in Vacation Benefit Plans

Access the Vacation Benefit page.

The screenshot displays the 'Vacation Benefit' page for employee Chretien, Shirley (ID: B-BARET203). The page is divided into two main sections: 'Plan Type' and 'Coverage'.
 - **Plan Type:** Includes a search field and navigation buttons (+, -).
 - **Coverage:** Includes fields for 'Deduction Begin Date', 'Coverage Election' (with radio buttons for Elect, Waive, Terminate and a refresh icon), 'Election Date' (07/06/2001), 'Benefit Program', 'Benefit Plan', 'Option Code', 'Vacation Hours' (with a 'Calculate' button), 'Buy/Sell Flat Amounts', 'Goal Amount', 'Goal Balance', and 'Employee Status' (Active). There is also a 'Vacation Buy or Sell' field and a 'Vacation Accrual Processed' checkbox.

Vacation Benefit page

When you define vacation buy or sell benefit plans with the Vacation Buy/Sell Table, you define increments for the vacation hours and minimum and maximum amounts that an employee can buy or sell.

| | |
|-----------------------------------|--|
| Vacation Hours | <p>Number of hours that an employee buys or sells for the full plan year (a 12-month period).</p> <p>The vacation hours that you enter must be at least the Minimum and not more than the Maximum numbers of vacation hours that are defined in the Vacation Buy/Sell Table. In addition, they must be entered in the Increment specified in the Vacation Buy/Sell Table.</p> |
| Goal Balance | <p>Updated by payroll. The system automatically stops deductions when the Current Goal Balance equals the Goal Balance.</p> |
| Vacation Accrual Processed | <p>During the first payroll processing cycle of the plan year, PeopleSoft Payroll calculates bought and sold vacation earnings for each participant. The system automatically selects Vacation Accrual Processed.</p> <p>You will not see the buy or sell transactions reflected in employee leave balances until after you perform leave accrual processing, at which time, the system clears the check box.</p> |

Note. If you change employee job data after the system performs vacation buy and sell processing, it does not update its calculations based on the new job data.

For example, an employee is hired on September 1 and is paid monthly, at a rate of \$20.00 per hour. The employee wants to buy 40 hours of vacation.

The system assumes a 12-month period in which to spread the deduction. It calculates the Goal Amount as \$800.00 (40 hours * \$20 an hour), and calculated the pay period deduction as \$66.67 (40 hours * \$20 an hour/12 monthly periods per year).

However, the company wanted the vacation amount based on the hire date. Because there were 4 months remaining in the year, September through December, the company manually calculated and entered \$200, or \$800 divided by 4.

See Also

“Setting Up Benefit Plans,” Setting Up Vacation Buy/Sell Plans

PeopleSoft Benefits Administration PeopleBook, “Introduction to PeopleSoft Benefits Administration”

“Managing Leave Plans”

(USF) Enrolling Employees in Benefit Programs and Plans Through PAR

In this section, we discuss enrolling employees in benefit programs and plans through the PAR and how to:

- Enroll participants into benefit programs and plans.
- Determine FEGLI (Federal Employee Group Life Insurance) plan coverage, manage retirement coverage, and designate FICA status.

See Also

PeopleSoft Human Resources PeopleBook: Administer Workforce

Page Used to Enroll Employees in Benefit Programs and Plans Through the PAR

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|----------------------------|----------------------|--|---|
| Benefits/FEHB Data | GVT_BENDATA_SE C | Click Benefits/FEHB Data in the Job page. | Enroll participants into benefit programs and plans. |
| FEGLI/Retirement Data/FICA | GVT_BENDATA1_SE C | Click FEGLI/Retirement/FICA in the Job page. | Select the participant's FEGLI plan coverage, manage the employee's retirement coverage, designate and FICA status. |

(USF) Enrolling Participants Into Benefit Programs and Plans

Access the Benefits/FEHB Data page.

| Benefits/FEHB Data | |
|---|---|
| Benefits Control | |
| Benefits Employee Status: | Active |
| BAS Group ID: | <input type="text" value="LFG"/> <input type="button" value="Q"/> Full Benefits Group |
| Benefit Program: | <input type="text" value="LFB"/> Full Time Employee Benefit Pgm |
| FEHB Eligibility | |
| <input checked="" type="radio"/> Permanent <input type="radio"/> Continuing Coverage <input type="radio"/> Temporary Appointment > 1 yr <input type="radio"/> Temp Appt < 1yr + FedSvc > 1yr <input type="radio"/> Not Eligible | |
| FEHB Date | |
| FEHB Date: | <input type="text"/> |
| Eligibility | |
| Elig Fld 1: | <input type="text"/> |
| Elig Fld 2: | <input type="text"/> |
| Elig Fld 3: | <input type="text"/> |
| Elig Fld 4: | <input type="text"/> |
| Elig Fld 5: | <input type="text"/> |
| Elig Fld 6: | <input type="text"/> |
| Elig Fld 7: | <input type="text"/> |
| Elig Fld 8: | <input type="text"/> |
| Elig Fld 9: | <input type="text"/> |
| Benefits System | |
| Benefits System: | <input type="text" value="Benefits Administration"/> <input type="button" value="v"/> |
| <input type="button" value="OK"/> <input type="button" value="Cancel"/> | |

Benefits/FEHB Data page

Benefits Control

BAS Group ID (benefits administration group identification)

Applies only if your benefits system uses PeopleSoft Benefits Administration. It is used to link the participant to a particular Benefits Administration Group for PeopleSoft Benefits Administration processing later.

Benefit Program

Automatically set to the benefits program specified for the employee's Pay Group, which you specify in the Position Data page.

FEHB Eligibility

Permanent

Select this option for employees with a career conditional career appointment. Employees are eligible for FEHB if fields 1–9 in the **Eligibility** group box are also for users of Peoplesoft Benefits Administration. Here you enter eligibility values that refer to eligibility configuration values in the Eligibility Rules Table.

| | |
|---|---|
| Continuing Coverage | Select this option for employees who are transferring into a position from another agency without a break in service and for rehires with a break in service of less than 30 days. Employees are eligible for FEHB. |
| Temporary Appointment > 1 yr | Select this option for an employee with a temporary appointment greater than one year. Employees are eligible for FEHB. |
| Temporary Appointment < 1 yr + FedSvc > 1 yr | Select this option for an employee with a temporary appointment less than one year and continuous service greater than one year. Employees with this eligibility pay the entire cost of their FEHB coverage. |
| Not Eligible | Select this option for employees ineligible for FEHB plan coverage. Most commonly used for employees with a temporary appointment of less than one year of service. |

Eligibility

| | |
|--|--|
| Elig Fld 1–9 (eligibility fields 1–9) | These fields are also for users of PeopleSoft Benefits Administration. Enter eligibility values that refer to eligibility configuration values in the Eligibility Rules Table. |
|--|--|

FEHB Date

| | |
|------------------|--|
| FEHB Date | Enter the future date on which an employee will be eligible for FEHB coverage. Typically, the FEHB Date is one year from the employee's hire date. |
|------------------|--|

Benefits System

| | |
|------------------------|---|
| Benefits System | Select whether you are using <i>Base Benefits</i> or <i>Benefits Administration</i> . |
|------------------------|---|

Agency FEHB Contributions for Part-Time Employees

When an employee is a part-time career employee (working 16–32 hours per week), that employee is entitled to a government contribution in direct proportion to the percentage of full-time service regularly performed.

Use the following formula to determine the government contribution:

1. Average employee hours scheduled per biweekly pay period/80 = percentage of hours.
2. The percentage is multiplied by the employer and employee portion of FEHB cost.
3. The calculated result is subtracted from the total health insurance cost (employer plus employee portions).
4. The remainder is the health insurance deduction amount subtracted from the employee's pay.

Determining FEGLI Plan Coverage, Managing Retirement Coverage, and Designating FICA Status

Access the FEGLI/Retirement Data/FICA page.

FEGLI/Retirement Data/FICA

FEGLI

FEGLI Code: Basic + Family + 1 Times Pay

Post 65 Basic Life Reduction:

Living Benefits Coverage Amount:

Retirement

Retirement Plan: FERS and FICA

FERS Coverage:

Previous Retirement Coverage:

Annuitant Indicator: Not Applicable

Annuity Commencement Date:

CSRS Frozen Service:

FICA Status-Employee

FICA Status-Employee:

FEGLI/Retirement Data/FICA page

FEGLI

FEGLI Code

Use this field to select the participant's FEGLI plan coverage, including termination, waiving coverage, and coverage ineligibility.

Only active employees are allowed to increase their FEGLI coverage.

You can assign beneficiaries and allocate survivor benefits through the Life and AD/D Benefits - Beneficiaries page.

Note. When you have two or more FEGLI-related transactions to process for one employee that are effective on the same date, each one must be processed separately. You must enter the first transaction and save it before inserting a row to process the second transaction. When a second transaction is entered without saving the first, the system returns a message reporting that the transaction will be canceled.

Federal employees may assign their FEGLI benefits to another person, trust, or to a settlement company that will pay them a cash amount for these benefits. Assignment of benefits is handled in the FEGLI Assignments page group of the Administer Base Benefits (USF) menu.

Post 65 Basic Life Reduction

After federal employees pass the age of 65, their Basic Life plan coverage may be reduced. In the **Post 65 Basic Life Reduction** field, determine whether the chosen employee's life plan value will be reduced by 50%, 75%, or not at all.

Living Benefits

Select for terminally ill federal employees and retirees who have a life expectancy of nine months or less. With living benefits, a full or partial payment of the FEGLI Basic Life Insurance benefit is paid directly to the employee or retiree.

When an employee's request for living benefits has been approved by OFEGLI, use the PAR pages to process the election. Select an NOA Code of *805* (Elect Full Living Benefit) or *806* (Elect Partial Living Benefit).

When you select **Living Benefits** to process a partial living benefit, the **Coverage Amount** field becomes available.

After an employee selects living benefits, the only FEGLI code values available to the employee are the following: *Terminate All* and *Waive All Life Insurance*.

Coverage Amount

Used for employees who elect a partial living benefit. In this field, enter the Basic Insurance Amount (BIA). This is the balance of the coverage amount remaining.

Warning! You should not select living benefits for a new hire.

Retirement

Use to coordinate the enrollment of employees into every type of federally mandated retirement plan except the TSP 1% Agency contribution plan, which all employees automatically receive after becoming eligible for Thrift Savings Plan coverage.

Retirement Plan

Select the employee's retirement plan coverage

Note. The **Retirement Plan** field, contains the entire list of U.S. federal government retirement programs that may be available to your employees. Whether or not your agency actually offers all of these programs depends upon whether or not you have set them up in the Retirement Plan Table and have associated them with the benefit programs that your agency offers.

FERS Coverage

Indicate the level of FERS coverage allocated to employees who had federal retirement plan coverage prior to 1984. Employees before 1984, can select from the

following valid values: *Elected Coverage Under FERS* or *Not Covered by FERS*.

All employees, who started federal retirement coverage after 1984, have a FERS Coverage of *Automatically Covered by FERS*.

Previous Retirement Coverage

Employees transferring in from another agency previously covered by a federal benefit plan should select *Previously Covered*. If the employee was not covered, select *Never Covered*.

Annuitant Indicator

Use for employees who are being rehired from retirement. If a formerly retired employee is receiving an annuity such as a pension plan payment, their pay may be offset by that annuity amount.

Determine whether or not the retirement annuity is applicable to the employee's wages. Indicate the former employment status of the employee, whether or not the employee was a retired enlisted or military officer, and the employee's retirement plan type (CSRS or FERS).

Annuity Commencement Date

Date when retirement annuities for a retired or soon-to-be-retired employee began or will begin. The system uses this date when determining how to calculate agency contributions and employee deductions for FEHB and FEGLI during the employee's last pay period.

Note. When an employee has worked less than a full pay period, PeopleSoft Payroll's Pay Calculation process prorates Federal Employee Health Benefits (FEHB) and Federal Employee Group Life Insurance (FEGLI) deductions according to OPM (Office of Personnel Management) rules.

CSRS Frozen Service

Frozen service is the U.S. federal government term for the total years and months of civilian and military service that is creditable in a CSRS component of an FERS employee (retirement plans FERS and FICA, FERS and FICA - Air Traffic Control, FERS and FICA - Special, and FERS and FICA - Reserve Tech), or in the case of a CSRS Offset employee (Retirement plans FICA + CSRS - Partial and FICA + CSRS Special - Partial), the service that would be covered in a CSRS component if the employee ever becomes covered by FERS.

In the **CSRS Frozen Service** field, enter this time span as a four-number code. The first and second positions indicate the number of years, while the third and fourth positions indicate the number of months. For example, a time span of 5 years and 3 months would be entered in **CSRS Frozen Service** as *0503*.

FICA Status - Employee

FICA Status - Employee Select the employee's FICA status. Select from the following valid values:

E – Exempt, M – Medicare only, or N – Subject.

Once you set up an employee's initial benefit program and plan enrollments through the PAR, you're ready to go on to the individual benefit pages to continue benefit plan enrollments, add plan coverage detail, enroll dependents, and assign beneficiaries. You can make changes in these pages without opening a PAR.

See Also

Enrolling Employees in the TSP Agency Automatic Contribution Plan

PeopleSoft Payroll for North America PeopleBook, "Calculating Pay"

(USF) Enrolling Participants Into Benefit Programs and Plans

Assigning FEGLI Benefits

In this section, we discuss assigning FEGLI benefits and how to:

- Designate assignees for FEGLI benefits coverage.
- Designate beneficiaries.

Understanding Assigning FEGLI Benefits

Federal civilian employees and retirees covered by FEGLI have the right to irrevocably assign 100 percent of their life insurance benefits coverage to another individual, a group of individuals, a corporation, or a trustee. Assignment means that the employee transfers ownership of their Basic Life, Option A - Standard and Option B - Additional insurance to the assignee. When employees assign their FEGLI benefits, they also assign their right to:

- Cancel their assigned FEGLI coverage.
- Designate and change beneficiaries.

The employee continues to be the insured party and is still obligated to pay life insurance premiums.

Note. An employee can assign benefits options to two or more assignees. In addition, each assignee can designate one or more beneficiaries.

Family optional FEGLI insurance (Option C - Family) cannot be assigned. For this reason, we recommend clearing the Assignment Allowed check box in the FEGLI Plan Table for Option C - Family FEGLI plans.

You can't assign Basic Life plans if the employee has elected Living Benefits and has no optional insurance.

Pages Used to Assign FEGLI Benefits

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|---|--------------------|--|--|
| FEGLI Assignments - Assignee | GVT_ASSIGNEE | Compensate Employees, Administer Base Benefits, Use, FEGLI Assignments, Assignee | Designate one or more assignees for an employee's FEGLI benefits coverage. Each assignee is given a share of the total coverage being assigned. The total of these percentages must be 100. |
| FEGLI Assignments - Assignee Benef (assignee beneficiary) | GVT_ASSIGNEE_BEN | Compensate Employees, Administer Base Benefits, Use, FEGLI Assignments, Assignee Benef | Designate one or more beneficiaries. Use to assign the FEGLI benefits of U.S. federal government employees and retirees. |

Designating Assignees for FEGLI Benefits Coverage

Access the FEGLI Assignments - Assignee page.

| Assignee | | Assignee Benef | |
|----------------------------|---|----------------|--|
| Rodriguez, Anna Lucia | | Employee | |
| | | ID: L00001 | |
| View All First 1 of 1 Last | | | |
| Assignee Number: | <input type="text" value="01"/> | Assignee Name: | <input type="text" value="Enrico Rodriguez"/> |
| Assignee Share (Pct): | <input type="text" value="100"/> | + - | |
| Address | | | |
| Country: | <input type="text" value="USA"/> <input type="button" value="Q"/> United States | | |
| Address 1: | <input type="text"/> | | |
| Address 2: | <input type="text"/> | | |
| Address 3: | <input type="text"/> | | |
| City: | <input type="text"/> | | |
| County: | <input type="text"/> | Postal: | <input type="text"/> |
| State: | <input type="text"/> <input type="button" value="Q"/> | Phone: | <input type="text"/> |
| View All First 1 of 1 Last | | | |
| National ID | | | |
| Country | <input type="text" value="USA"/> <input type="button" value="Q"/> | *NID Type | <input type="text" value="PR"/> <input type="button" value="Q"/> |
| | | SSN | <input type="text"/> |
| National ID | <input type="text"/> | | Primary <input type="checkbox"/> |
| | | | + - |

FEGLI Assignments - Assignee page

Assignee Number

Designated automatically by the system; it automatically increases by one with each new assignee that you designate for an employee.

Assignee Name, National ID, and Assignee Share (Pct) (assignee share percentage)

Enter the information for each assignee.

The total assignee shares for all assignees associated with an employee should equal 100.

Once you enter assignee information and save it, the system selects the Assigned check box in the FEGLI - Elections page for coverage that has been assigned, with the exception of FEGLI plan options that have been *Waived*. When an employee elects a partial living benefit, the Basic Insurance Amount (BIA) is assigned along with any optional insurance. This is with the exception of Option C - Family coverage.

Designating Beneficiaries.

Access the FEGLI Assignments - Assignee Benef (assignee beneficiary) page.

Assignee Assignee Benef

Rodriguez,Anna Lucia Employee ID: L00001

View All First 1 of 1 Last

Assignee Number: 01 Enrico Rodriguez

Beneficiary Information View All First 1 of 1 Last

Assignee Beneficiary Number: 01 Assignee Name: [Text Field] + -

Benef Share (Pct): [Text Field] Relationship: [Dropdown] National Id

Address

Country: [Text Field] [Dropdown] [Text Field]

[Text Field] Same Address As Assignee Postal Search

[Text Field] [Text Field]

[Text Field] [Text Field] [Dropdown]

[Text Field]

[Text Field]

[Text Field] [Text Field]

[Text Field] [Text Field]

Phone: [Text Field]

FEGLI Assignments - Assignee Benef (assignee beneficiary) page

| | |
|--|---|
| Assignee Beneficiary Number | The system designates and automatically increases by one for each beneficiary added to an assignee. |
| Assignee Name, Relationship, and Benef Share (Pct) (benefit share percentage) | Enter the information for each assignee. |
| Same Address as Assignee | Select this check box if the beneficiary shares this information with the assignee. While this check box is selected, the address and phone information fields are unavailable. |

Enrolling Employees in the TSP Agency Automatic Contribution Plan

In this section, we discuss enrolling employees in the TSP Agency Automatic Contribution Plan and how to:

- Enroll employees.
- Select investment options.

Understanding Enrolling Employees in the TSP Agency Automatic Contribution Plan

Federal employees who are enrolled in the FERS retirement plan are automatically eligible for enrollment in a TSP (Thrift Savings Plan) Agency Automatic 1% Contribution plan. Once they are eligible, each pay period the employee's agency contributes an amount equivalent to 1 percent of the employee's basic pay for that pay period to the employee's TSP account. The employee receives these contributions whether or not they contribute their own money to a TSP account. In addition, employees who participate in the Thrift Savings Plan program continue to receive matching contributions that the agency may already provide through the employee's TSP plan.

Flat Amounts must be evenly divisible by 5. Only whole numbers are allowed. Percent of Gross values must also be whole numbers. For both Flat Amounts and Percent of Gross, the system sends you an error message if you enter a value that is greater than 10 percent of the employee's basic pay each pay period.

For federal employees, the Thrift Savings Plan program is presently solely a Before-Tax program; there are no situations where After-Tax calculations would be valid. Employees have three funds available for TSP investment: C (Common Stock Investment Fund), F (Fixed Income Investment Fund), and G (Government Securities Investment Fund).

Pages Used to Enroll Employees in the TSP Agency Automatic Contribution Plan

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|--------------------------|--------------------|---|--|
| TSP - Agency Basic | GVT_TSP_AUTO | Compensate Employees, Administer Base Benefits, Use, TSP Agency Basic, TSP Agency Basic | Enroll employees in the TSP Agency Automatic 1% Contribution plan. |
| TSP Investment Elections | GVT_TSP_INVEST | Compensate Employees, Administer Base Benefits, Use, TSP Investment Elections, TSP Investment Elections | Select investment options. |

Enrolling in the TSP Agency Automatic Contribution Plan

Access the TSP - Agency Basic page.

| | |
|----------------|---|
| Option | Enter the type of investment in which you are allocating an investment percentage. If there is more than one investment option associated with the chosen employee's savings plan, you can add more rows. |
| Percent | Enter the investment percentage allocated for each Option associated with this savings plan. Investment percentages must total 100 before they can be saved into the system. |

Auditing Your Benefit Information

PeopleSoft uses the same set of audits for both PeopleSoft Human Resources Base Benefits business process and PeopleSoft Benefits Administration.

Audits are intended to catch errors that would otherwise show up when you try to process enrollments or changes. Some of them can be used at any time and others relate to a specific purpose, such as eligibility analysis or enrollment.

If you look through the audits, you see why it's important to audit your data and make corrections before you process enrollments.

Here are the PeopleSoft Human Resources audits and corrective actions. Perform these audits regardless of whether you use PeopleSoft Human Resources or PeopleSoft Benefits Administration to enroll participants.

Base Benefits Audit Functions and Corrective Actions

| Base Benefits Audit | Audit Functions | Corrective Actions |
|----------------------------|---|---|
| Benefit Tables | Identifies vacation plans in the Benefit Program Table with an associated Calculation Rules code where rounding rules are defined in the Calculation Rules Table. | Set up the Calculation Rules Table information without rounding rules. |
| | Identifies health plans in the Benefit Program Table with a rate unit that is not set to <i>None</i> in the Rate Schedule Table. | Correct the information in the Rate Schedule Table. |
| Employee Data | Identifies employees with Personal data but with no Employment data. | Enter employee Employment data. |
| | Identifies employees with Personal and Employment data but with no Job data. | Enter employee Job data. |
| | Identifies employees with birth dates less than or equal to 16 years from the current date. | Verify that employee should be 16 years old or less or correct the error. |

| Base Benefits Audit | Audit Functions | Corrective Actions |
|----------------------------|--|--|
| Enrollment Data | Identifies participants with a nonstandard dependent - not a spouse, son, daughter, father, or mother - enrolled in health benefits. | Verify that the person should be a dependent or correct the error. |
| | Identifies participants that work in the same company as their dependents, elect the same health coverage in the same plan type as their dependents, and cover the health benefits of their dependents. For the system to perform this check, enter both SSNs on employee Personal Data and on Dependent Data. | Verify that the enrollments are correct or correct the error. |
| | Identifies participants with dependents enrolled in health benefits where the dependent is older than 25 (or older than 19 and not a student), not a spouse, and not handicapped. The audit identifies persons who typically are not dependents. | Correct the dependent information. |

The following table contains a list of the plan types delivered by the Base Benefits business process for the U.S. federal government and a breakdown of how benefit plan information is controlled by the PAR process and the individual benefit plan pages.

Note. Benefit plan enrollments for FEGLI and Retirement are made in the PAR while benefit plan enrollments for FEHB, TSP, and Leave are performed through the individual benefit plan pages.

Where Employee Benefits Data is Controlled: PAR versus the Individual Benefit Plan

| Plan Type | Benefits Data Controlled in PAR | Benefits Data Controlled in Individual Plan Pages |
|------------------|--|--|
| FEHB | FEHB Eligibility | Coverage Begin and End Date (Elections) Deduction Begin and End Date (Elections) Plan Type (FEHB Election) (Elections) Coverage Code (Elections) Dependent ID (Dependents) |
| FEGLI | FEGLI Coverage Living Benefits Enrollment | FEGLI Assignments (Beneficiaries) % Of Benefit Allocation (Beneficiaries) |

| Plan Type | Benefits Data Controlled in PAR | Benefits Data Controlled in Individual Plan Pages |
|------------------|---|--|
| TSP | | Coverage Begin and End Date (TSP Employee/Matching - Elections) Deduction Begin and End Date (TSP Employee/Matching - Elections) Benefit Plan (TSP Election) (TSP Employee/Matching - Elections) Before Tax Investment (TSP Employee/Matching - Elections) After Tax Investment (TSP Employee/Matching - Elections) Investment Option/Investment Percent (TSP Employee/Matching - Investments) Beneficiary ID/Percent of Benefit (TSP Employee/Matching - Beneficiaries) |
| Leave Plans | | Effective Date, End Date (Leave Plans) Benefit Plan (Leave Plan Election) (Leave Plans) Grandfathered Carryover (Leave Plans) |
| Retirement Plans | Retirement Plan FERS Coverage Annuitant Indicator Previous Retirement Coverage CSRS Annuity Offset Amount | TSP 1% Agency Contribution (TSP Agency Basic) |

Note. PeopleSoft provides audits for your benefit information. Some audits are specifically for the Base Benefits business process and others are for PeopleSoft Benefits Administration. After you enroll participants, check your data using the PeopleSoft Human Resources audits.

CHAPTER 10

Reviewing Enrollments and Benefit Calculations

This chapter discusses how to:

- Review payroll calculations.
- Override deduction amounts for individual employees.

Viewing Benefits Summary Data

During regular payroll processing cycles, the system uses all relevant human resources, benefits, and payroll table information and employee data to process deductions and compensation.

Regardless of whether your organization uses PeopleSoft Payroll or PeopleSoft Payroll Interface, you can view a summary of employee benefit data, including the most recent payroll deduction. You can view either:

- The general benefits summary.
- The payroll interface benefits summary.

See Also

PeopleSoft eBenefits PeopleBook

Pages Used to View Benefits Summary Data

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|-------------------------------|--------------------|--|--|
| Benefits Summary | BENEFITS_SUMMARY1 | <ul style="list-style-type: none"> • Compensate Employees, Administer Automated Benefits, Inquire, Benefits Summary (Pay Dedns), Benefits Summary • Compensate Employees, Administer Base Benefits, Inquire, Benefits Summary (Pay Dedns), Benefits Summary • Define Business Rules, Define General Data (NLD), Inquire, Benefits Summary, Benefits Summary | View deduction information for all the selected employee's benefit plans. |
| Benefits Summary (PI DedCalc) | BENEFITS_DED_SUMM1 | <ul style="list-style-type: none"> • Compensate Employees, Administer Base Benefits, Inquire, Benefits Summary (PI DedCalc), Benefits Summary (PI DedCalc) • Define Business Rules, Define General Data (NLD), Inquire, Benefits Deduction Summary, Benefits Summary (PI DedCalc) | View details for all an employee's benefits programs. For U.S. employees only. |

Viewing the Benefits Summary

Access the Benefits Summary page.

| Benefits Summary | | | | | | | | |
|-------------------------------------|-------|-----------------|-----------|---------------------|---------------------|-----------|-----------|----------------|
| ID: KU0010 | | Santos, Antonio | | | Empl Rcd#: 0 | | | |
| Employee Status: | | Active | | | | | | |
| Health Coverage | | | | | | | | |
| Find View All First 1-3 of 3 Last | | | | | | | | |
| Plan Type | Elect | Benefit Plan | Coverage | Coverage Begin Date | Pay End Date | Ded Class | Sales Tax | Last Deduction |
| Medical | E | KUMED1 | Family | 01/01/1999 | 04/30/2000 | B | B | 25.38 |
| Dental | E | KUDEN2 | Family | 01/01/1999 | 04/30/2000 | B | B | 7.79 |
| Vision | E | KUVIS1 | Family | 01/01/1999 | 04/30/2000 | B | B | 4.00 |
| Life AD/D Coverage | | | | | | | | |
| Find View All First 1-3 of 6 Last | | | | | | | | |
| Plan Type | Elect | Benefit Plan | Coverage | Coverage Begin Date | Pay End Date | Ded Class | Sales Tax | Last Deduction |
| Life | E | KUBLIF | 50,000.00 | 01/01/1999 | 04/30/2000 | N | B | 0.58 |
| Supp Life | E | KUSL2X | 37,000.00 | 01/01/1999 | 04/30/2000 | A | B | 0.26 |
| AD/D | E | KUAD25 | 25,000.00 | 01/01/2000 | 04/30/2000 | N | B | 0.46 |

Benefits Summary page

Viewing the PI DedCalc Benefits Summary

Access the Benefits Summary (PI DedCalc) page.

| Benefits Summary (PI DedCalc) | | | | | | | | |
|-------------------------------------|-------|-----------------|----------|---------------------|---------------------|-----------|----------------|--|
| ID: KU0010 | | Santos, Antonio | | | Empl Rcd#: 0 | | | |
| Employee Status: | | Active | | | | | | |
| Health Coverage | | | | | | | | |
| Find View All First 1-3 of 3 Last | | | | | | | | |
| Plan Type | Elect | Benefit Plan | Coverage | Coverage Begin Date | Pay End Date | Ded Class | Last Deduction | |
| Medical | E | KUMED1 | Family | 01/01/1999 | | | | |
| Dental | E | KUDEN2 | Family | 01/01/1999 | | | | |
| Vision | E | KUVIS1 | Family | 01/01/1999 | | | | |
| Life AD/D Coverage | | | | | | | | |
| Find View All First 1-3 of 6 Last | | | | | | | | |
| Plan Type | Elect | Benefit Plan | Coverage | Coverage Begin Date | Pay End Date | Ded Class | Last Deduction | |
| Life | E | KUBLIF | | 01/01/1999 | | | | |
| Supp Life | E | KUSL2X | | 01/01/1999 | | | | |
| AD/D | E | KUAD25 | | 01/01/2000 | | | | |

Benefits Summary (PI DedCalc) page

Overriding the Frequency of Benefit Deductions

After the system has performed benefit deductions for your employees, you can override the frequency of a deduction amount for individual employees using the Benefit Arrears/Frequency Ovrdd page.

See Also

“Organizing Payroll Information for Base Benefits,” Benefit Arrears/Frequency Ovrdr Page

CHAPTER 11

Performing Nondiscrimination Testing

This chapter provides an overview of Section 401 and Section 129 nondiscrimination tests and discusses how to:

- Define highly compensated earnings.
- Identify highly compensated employees.
- Set up test criteria and plans.
- Define the nondiscrimination test run control.
- Initiate a nondiscrimination test with the PeopleSoft Process Scheduler.
- View nondiscrimination test results.
- Set limits to comply with test results.

Understanding Section 401 Nondiscrimination Tests

In this section, we discuss the details of the following 401 nondiscrimination tests:

- Basic and Alternate Section 401(k) Tests
- Basic and Alternate Section 401(m) Tests
- Aggregate Limit Test

Basic and Alternate Section 401(k) Tests

According to current IRS criteria, to be considered nondiscriminatory a 401(k) plan must meet one of two tests:

- The basic Actual Deferral Percentage (ADP) test for Section 401(k) states that the average ADP for highly compensated employees (ADP_{HCE}) cannot be more than 125 percent of the average ADP for employees that are not highly compensated (ADP_{NHCE}).

- The alternate ADP test requires that the ADP_{HCE} cannot exceed the ADP_{NHCE} by more than 200 percent, provided the difference between the ADP_{HCE} and the ADP_{NHCE} does not exceed 2 percentage points.

Basic and Alternate Section 401(m) Tests

The basic Actual Contribution Percentage (ACP) test for Section 401(m) states that the average ACP for highly compensated employees (ACP_{HCE}) cannot be more than 125 percent of the average ACP for employees that are not highly compensated (ACP_{NHCE}).

According to the alternate 401(m) test, the ACP_{HCE} cannot exceed the ACP_{NHCE} by more than 200 percent, provided the difference between the ACP_{HCE} and the ACP_{NHCE} does not exceed 2 percentage points.

Aggregate Limit Test

If both the ADP and ACP Tests do not pass the basic 125 percent test and both pass the alternative 2 percent test, the system *automatically* runs the new Aggregate Limit Test when you run the 401(k) or 401(m) NDT report. The Aggregate Limit Test indicates that the sum of the ADP and ACP for the entire group of eligible highly compensated employees cannot exceed the *aggregate limit* of the non-highly compensated group, which is the *greater* of:

1. The sum of 1.25 times the *greater* of the ADP_{NHCE} or the ACP_{NHCE} , *and*:
1.25 times the *greater* of the ADP_{NHCE} or the ACP_{NHCE} , and
2. Two percentage points plus the *lesser* of the ADP_{NHCE} or the ACP_{NHCE} , with the exception that this cannot exceed two times the *lesser* of the ADP_{NHCE} or the ACP_{NHCE} ;
OR
3. The sum of:
1.25 times the *lesser* of the ADP_{NHCE} or the ACP_{NHCE} , *and*
4. Two percentage points plus the *greater* of the ADP_{NHCE} or the ACP_{NHCE} , with the exception that this cannot exceed two times the *greater* of the ADP_{NHCE} or the ACP_{NHCE} .

The results of the Aggregate Limit Test will appear on the new Section 401 Results page after the 401(k) and 401(m) reports have been run. If you view the Section 401 Results page *before* you run one or both of these reports, the Aggregate Limit Test portion of the Section 401 Results page will be blank.

Defining Highly Compensated Earnings

Before you run a nondiscrimination test, define the highly compensated earnings to be processed in the nondiscrimination test.

| |
|---|
| To define highly compensated earnings: |
|---|

1. Define a special accumulator for highly compensated earnings.
2. Link that special accumulator to the appropriate earnings.

See also

PeopleSoft Payroll for North America, “Defining Earnings and Using Earnings Codes”,
Establishing Special Accumulator Types

PeopleSoft Payroll for North America, “Defining Earnings and Using Earnings Codes”
Establishing Earnings Programs

Identifying Highly Compensated Employees

Now that the parameters for running nondiscrimination testing are defined, you must identify employees who are highly compensated employees using the Job Data Component.

A highly compensated employee is defined as someone who:

1. Was a 5 percent (or more) owner of the organization at any time during the current or preceding year; or
2. Received more than \$80,000 (indexed for inflation) in compensation in the preceding year; or
3. Received more than \$80,000 (indexed for inflation) in compensation in the preceding year, and was among the most highly paid 20 percent of employees in the organization.

An active employee is not treated as highly compensated in the current (determination) year if that employee was not considered highly compensated in the preceding (look-back) year. This rule does not apply if the employee is a 5 percent (or more) owner. The system will not classify employees hired during the current year as highly compensated employees unless they also are or were a 5 percent (or more) owner during the current year.

| |
|--|
| To identify employees who are 5 percent (or more) owners: |
|--|

1. Access the Work Location - Employment Information: Employment Data page.
2. Select the **Owns 5% (or More) of Company** check box to identify an employee as a 5 percent or more owner.

See Also

PeopleSoft Human Resources PeopleBook: Administer Workforce, “Hiring Your Workforce,”
Hiring an Employee

Setting Up Test Criteria and Plans

You can perform nondiscrimination tests for 401(k) and 401(m) plans. For 401(k), the system uses before-tax amounts. For 401(m), it uses after-tax amounts. Perform these tests according to IRS criteria that you define, for the benefit plans that you identify.

Pages Used to Set Up Criteria and Plans

| Page Name | Object Name | Navigation | Usage |
|--|---------------|---|---|
| Nondiscrimination Test Table - NDT Rules Table | NDT_HCE_TABLE | Define Business Rules, Define Base Benefits, Setup, Nondiscrimination Test Table, Nondiscrimination Rules Table | Set up the test parameters with the Nondiscrimination Test Table before you perform a test. |

Setting Up Test Parameters

Access the Nondiscrimination Test Table - NDT Rules Table page.

The screenshot displays the 'Nondiscrimination Test Table' configuration page. It includes the following sections and fields:

- Effective Date:** 01/01/2000
- HCE Determination Criteria:**
 - *Compensation Method to be Used: Compensation in Top Percent
 - Compensation Minimum: \$85,000.00 and in Top %: 20
 - Optional Exclusions: Minimum Age: Minimum Service Months:
- ADP Calculation Criteria:**
 - *Annual Compensation Limit: \$170,000.00
 - *Annual Contribution Limit: \$10,500.00
 - Calculate using: Current Year
- 401(k) and 401(m) NDT Rules:**
 - ADP for HCE is not more than ADP for other employees multiplied by: 1.25
 - Excess of ADP for HCE over that of other employees is not greater than %: 2.00
 - and ADP for HCE is not more than ADP for other employees multiplied by: 2.00

Nondiscrimination Test Table - NDT Rules Table page

Effective Date Enter the effective date for your nondiscrimination test criteria which enables you to maintain history of your test criteria.

HCE Determination Criteria

| | |
|---|--|
| Compensation Minimum | Set up the system to take into account <i>all</i> employees who have received the compensation minimum, or you can narrow the determination down to those employees who received the compensation minimum and who are among the most highly paid (top 20 percent) employees in your organization. We give you the option of changing this percentage. |
| Minimum Age and Minimum Service Months | To set up your system to exclude certain employees from the determination of the top paid 20 percent of employees in your organization, enter the appropriate minimum age or minimum service months. Because HCE determination is based upon the previous year's wages, the system refers to the end of the previous year when checking these values against the employee population. If you are running your nondiscrimination test for the <i>current</i> plan year and you've set a Minimum Age of 21 , the top 20 percent group will be reduced by the number of employees who have not reached age 21 by the end of the <i>previous</i> plan year. |

ADP Calculation Criteria

| | |
|--|---|
| Annual Compensation Limit and Annual Contribution Limit | Enter the annual compensation limit and annual contribution limit for the test. |
| Calculate Using | Employers have the option to perform the ADP and ACP calculations based on either the current or previous year's data. You can run 401(k) and 401(m) tests that use either current or previous year data. On the Nondiscrimination Testing Table, you can tell the system which year's data to use by selecting Current Year or Previous Year . |

Note. Because the nondiscrimination testing procedure for 401(k) and 401(m) plans includes compensation data from the preceding plan year, use the results of the tests to better forecast for the current year. This is because the preceding year compensation data is used to calculate Actual Deferral Percentages and Actual Contribution Percentages for the non-highly compensated employee (NHCE) population, upon which nondiscrimination test results are based. With these figures defined, you can monitor your HCE population for compliance.

If you choose to perform nondiscrimination testing using previous year NHCE data, there is no need to perform NHCE forecasting; only HCE data needs to be forecasted and compared to the previous year's data. You can still elect to test based on the current year's data, however, and utilize the forecasting feature to help monitor your plan's nondiscrimination status throughout the year.

Identifying Benefit Plans to Include in a Test

| |
|---|
| To identify benefit plans to include in NDT testing: |
|---|

1. Access the Benefit Plan Table page.
2. Select **Include in Nondiscrimination Testing** check box.

The test will include *all* of the benefit plans with this check box selected. This option is available for all savings plans.

See Also

“Setting Up Benefit Plans,” Defining Benefit Plans

Defining the Nondiscrimination Test Run Control

After you set up your special accumulators and their associated earnings, set up the parameters for your nondiscrimination test through run control pages.

Pages Used to Define the Nondiscrimination Test Run Control

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|---|--------------------|---|---|
| 401 NDT Run Control - NDT 401 Run Parm (parameters) | RUNCTL_NDT | Compensate Employees, Administer NDT, Process, 401 NDT Run Control, NDT Section 401 Run Params | Define the special accumulator that you want the system to use and to identify the company and pay group combinations that you want to include in your test. |
| 129 NDT Run Control - Run 129 Testing | RUNCTL_129 | Compensate Employees, Administer NDT, Process, 129 NDT Run Control, NDT Section 129 Run Parameters | Define the information that controls nondiscrimination testing for Section 129 dependent care reimbursement accounts. |

Defining Special Accumulators and Company and Pay Group Criteria

Access the 401 NDT Run Control - NDT 401 Run Parm (parameters) page.

NDT 401 Run Params

*Special Accumulator Code: 401K Eligible Earnings

*Plan Year Begin Date:

*Month End Date:

Year End Projection Percentage:

*Benefits Base:

*Year Code:

| NDT Section 401 | | | |
|----------------------------------|---------------------------|----------------------------------|---------------------------|
| *Company | Description | *Pay Group | Description |
| <input type="text" value="GBI"/> | Global Business Institute | <input type="text" value="KU1"/> | US Weekly |
| <input type="text" value="GBI"/> | Global Business Institute | <input type="text" value="KU2"/> | US Biweekly |
| <input type="text" value="GBI"/> | Global Business Institute | <input type="text" value="KU3"/> | US Semi-Monthly |
| <input type="text" value="GBI"/> | Global Business Institute | <input type="text" value="KU4"/> | US Monthly |
| <input type="text" value="GBI"/> | Global Business Institute | <input type="text" value="KU5"/> | US R & D Biweekly |
| <input type="text" value="GBI"/> | Global Business Institute | <input type="text" value="KU6"/> | US Fire Safety - Biweekly |
| <input type="text" value="GBI"/> | Global Business Institute | <input type="text" value="KU7"/> | US PI Wkly 1 |
| <input type="text" value="GBI"/> | Global Business Institute | <input type="text" value="KU8"/> | US PI Wkly 2 |

401 NDT Run Control - NDT 401 Run Params (parameters) page

| | |
|---------------------------------------|--|
| Special Accumulator Code | Enter the special accumulator code for the test. The system will use this accumulator to determine employee compensation for the test. |
| Plan Year Begin Date | Use to define the plan year that you want to use for the test. |
| Month End Date | Enter the month end date through which compensation data will be in the database. |
| Year End Projection Percentage | When testing for the current year, this field enables you to define whether you want the system to project until year-end. To define a projection, enter the percentage that you want the system to use. |
| Benefits Base | Enter the benefits base that you want to use, either <i>Annual Rate</i> or <i>Annual Benefits Base Rate</i> . For example, suppose you initiate a test for the current year on May 31, but you want projections until the end of the plan year, you need to project for the remaining 7 of the total 12 months, which means you enter 58.33% as the Year End Projection Percentage . |

Year Code

Use the year code to indicate whether testing is for the **Current and Prior Plan Year**, the **Current Plan Year**, or for the **Prior Year**. Because the new rules for the determination of highly compensated employees determine HCE status based primarily upon the previous year’s data, the system must gather salary information for the previous year and store it. When you run a Section 401 test for the first time in the testing year, always select **Current and Prior Plan Year** on the 401 NDT Run Control page. In subsequent testing throughout that year you can select **Current Plan Year**.

NDT Section 401

Company and Pay Group

Identify the companies and the pay groups that you want to include in this test.

Defining Section 129 Rules

Access the 129 NDT Run Control - Run 129 Testing page.

Run 129 Testing

*Special Accumulator Code: 401K Eligible Earnings

*Plan Year Begin Date:

*Month End Date:

Year End Projection Percentage:

*Benefits Base: Exclusion: Min Service Months:

*Year Code: Exclusion: Minimum Age:

| Employee Test Population | | | |
|----------------------------------|---------------------------|----------------------------------|-------------------|
| *Company | Description | *Pay Group | Description |
| <input type="text" value="GBI"/> | Global Business Institute | <input type="text" value="KU1"/> | US Weekly |
| <input type="text" value="GBI"/> | Global Business Institute | <input type="text" value="KU2"/> | US Biweekly |
| <input type="text" value="GBI"/> | Global Business Institute | <input type="text" value="KU3"/> | US Semi-Monthly |
| <input type="text" value="GBI"/> | Global Business Institute | <input type="text" value="KU4"/> | US Monthly |
| <input type="text" value="GBI"/> | Global Business Institute | <input type="text" value="KU5"/> | US R & D Biweekly |

▶ SLOB Criteria for the 55% Test

129 NDT Run Control - Run 129 Testing page (1 of 2)

SLOB Criteria for the 55% Test

Cafeteria Plan Dollar Limit: \$25,000.00 Minimum Employee Count: 10

| Single Line of Business Definition | | | | Find View All | First | 1-5 of 8 | Last |
|------------------------------------|---------------------------|------------|-------------------|-----------------|-------|----------|------|
| *Company | Description | *Pay Group | Description | | | | |
| GBI | Global Business Institute | KU1 | US Weekly | | | | - |
| GBI | Global Business Institute | KU2 | US Biweekly | | | | - |
| GBI | Global Business Institute | KU3 | US Semi-Monthly | | | | - |
| GBI | Global Business Institute | KU4 | US Monthly | | | | - |
| GBI | Global Business Institute | KU5 | US R & D Biweekly | | | | - |
| + | | | | View All | First | 1-5 of 8 | Last |

129 NDT Run Control - Run 129 Testing page (2 of 2)

Special Accumulator Code Enter the special accumulator code for the test. The system will use this accumulator to determine employee compensation for the test.

Plan Year Begin Date Use to define the plan year that you want to use for the test.

Month End Date Enter the month end date through which compensation data will be in the database.

Exclusion: Min Service Months (exclusion: minimum service months) Enter to establish a minimum length of service for employees included in the test.

Exclusion: Minimum Age Use to set a minimum age limit for the employees included in the test.

Benefits Base You must enter the benefits base—either *Annual Rt* or *Benef Base*.

Year Code When you run a Section 129 test for the first time in the testing year, always select *Both Years* on the 129 NDT Run Control page. In subsequent testing throughout that year you can select *Current Yr*.

Note. The system requires you to always select the *Both Years* option if you will be testing based on Separate Lines of Business (SLOB). You can choose from *Both Years*, *Current Yr*, or *Prior Yr*.

Employee Test Population

Pay Group and Pay Group Identify the companies and the pay groups that you want to include in this test.

SLOB Criteria for the 55% Test

Cafeteria Plan If you have a flexible benefits or cafeteria plan, select the **Cafeteria Plan** check box.

- Dollar Limit** Companies that have cafeteria plans typically set the **Dollar Limit** to **\$25,000**, but it can be set lower. If you set the limit to **\$25,000**, employees who earn less than that amount will be excluded from the Section 129 test.
- Minimum Employee Count** Use to restrict the size of separate lines of business included in the test.
- SLOB Criteria for the 55% Test** For the **SLOB Criteria for the 55% Test** field, choose between two methods of restricting the test population. You can restrict the test population by company and pay group or by SLOB.
- Company and Pay Group** If you use SLOB, indicate the company and pay group associated with each separate line of business.

Running Nondiscrimination Tests

In this section, we discuss how to:

- Determine the number of highly compensated employees.
- Run 401(k) and 401(m) testing.
- Run Section 129 nondiscrimination testing.
- Produce the 401 Nondiscrimination Testing report.
- Product the Section 129 Nondiscrimination Testing report.

Pages Used to Run Nondiscrimination Testing

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|--|--------------------|--|--|
| 129 Highly Comp Employees – 129 HCE Test 401 Highly Comp Employees - NDT 401 HCE Test | RUNCTL_NDT001 | <ul style="list-style-type: none"> • Compensate Employees, Administer NDT, Process, 129 Highly Comp Employees, NDT Section 129 HCE Testing • Compensate Employees, Administer NDT, Process, 401 Highly Comp Employees, NDT Section 401 HCE Testing | Determine the number of highly compensated employees in your organization before you perform Section 401 or Section 129 nondiscrimination tests. |

| Page Name | Object Name | Navigation | Usage |
|---|--------------------|---|--|
| 401(k) Nondiscrimination - Run Control | PRCSRUNCNTL | <ul style="list-style-type: none"> • Compensate Employees, Administer NDT, Process, NDT 401k Nondiscrimination • Compensate Employees, Administer NDT, Process, NDT 401m Nondiscrimination | Initiate 401(k) and 401(m) testing using the NDT 401(k) and 401(m) Nondiscrimination pages. |
| NDT 129 Eligibility Cross Section Test NDT 129 55 Pet Average Benefits Test NDT 129 Concentration Test | PRCSRUNCNTL | <ul style="list-style-type: none"> • Compensate Employees, Administer NDT, Process, NDT 129 Elig Cross Section (eligibility or cross section test) • Compensate Employees, Administer NDT, Process, NDT 129 55% Average Benefits • Compensate Employees, Administer NDT, Process, NDT 129 Concentration Test | Initiate Section 129 nondiscrimination testing. The run control page is identical for all three tests. |

Determining the Number of Highly Compensated Employees.

Access the 401 Highly Comp Employees - NDT 401 HCE Test page or the 129 Highly Comp Employees – 129 HCE Test page.

NDT 401 HCE Test

Run Control ID: 1 [Report Manager](#) [Process Monitor](#) [Run](#)

Report Request Parameter(s)

NDT Test Type:

NDT 401 HCE Test page

129 HCE Test

Run Control ID: 1 [Report Manager](#) [Process Monitor](#) [Run](#)

Report Request Parameter(s)

NDT Test Type:

129 Highly Comp Employees – 129 HCE Test page

Warning! Before determining the number of highly compensated employees, first set the nondiscrimination test parameters in the 401 NDT Run Control or 129 NDT Run Control pages.

NDT Test Type

Choose from the following valid values:

Std NDT (Standard Nondiscrimination Test, for Section 401 plans), **129 NDT** (Section 129 Nondiscrimination Test), and **129 SLOB** (Section 129 Separate Line of Business Nondiscrimination Test).

Run

Click to run this request. PeopleSoft Process Scheduler runs the HCE test process at user-defined intervals.

Running 401(k) and 401(m) Testing

Access the 401(k) Nondiscrimination - Run Control page.

| | | |
|-------------------|--------------------------------|--|
| Run Control | | |
| Run Control ID: 1 | Report Manager | Process Monitor <input type="button" value="Run"/> |

401(k) Nondiscrimination - Run Control page

Warning! Before running a nondiscrimination test using this page, you must first set the nondiscrimination test parameters in the 401 NDT Run Control page and determine the number of highly compensated employees in the 401 Highly Comp Employees - NDT 401 HCE Test page.

When the system performs a test, it uses the total eligible earnings for employees. For total earnings, the system uses the earnings balance for the special accumulator that you defined in the run control for this test.

If an employee works in multiple companies, the system accumulates earnings for all the companies that you marked for nondiscrimination testing.

Run Click to run this request. PeopleSoft Process Scheduler runs the 401 NDT test process at user-defined intervals.

Running Section 129 Nondiscrimination Testing

Access the NDT 129 Eligibility Cross Section Test page.

| | | |
|--------------------------------|--------------------------------|--|
| Eligibility Cross Section Test | | |
| Run Control ID: 1 | Report Manager | Process Monitor <input type="button" value="Run"/> |

NDT 129 Eligibility Cross Section Test page

Note. For Separate Line of Business (SLOB) users: The SLOB rules only relate to the NDT 129 55% Average Benefits test. If you want to run this test for separate lines of business, use the following procedure:

To run the Section 129 SLOB testing process:

1. Run the Highly Compensated Employees determination test.
Select *129SLOB* as your NDT Test Type.
2. Run the NDT 129 55% Average Benefits test.

3. Re-run the Highly Compensated Employees Determination test.

This time, select *129NDT* as your NDT Test Type.

4. Run the remaining NDT 129 tests.

Warning! Before running a nondiscrimination test using this page, first set the nondiscrimination test parameters in the 129 NDT Run Control page and determine the number of highly compensated employees in the 129 Highly Comp Employees – 129 HCE Test page.

When the system performs a test, it uses the total eligible earnings for employees. For total earnings, the system uses the earnings balance for the special accumulator that you defined in the run control for this test.

If an employee works in multiple companies, the system accumulates earnings for all the companies that you marked for nondiscrimination testing.

Run Click to run this request. PeopleSoft Process Scheduler runs the process at user-defined intervals.

Viewing Nondiscrimination Test Results

In this section, we discuss nondiscrimination test results and how to:

- View results for an individual.
- View Section 401 test results for all employees.
- View Section 129 test results for all employees.

Understanding Nondiscrimination Test Results

As a result of a nondiscrimination test, the system updates employee data for the current and previous year tests, using these codes:

| | |
|---|---|
| N | Indicates an employee not eligible for the plan. |
| E | Indicates a highly compensated employee who is not a 5 percent owner. |
| H | Indicates a highly compensated employee (who may be a 5 percent owner). |

The Savings Plans page receives employee data for the current and previous year nondiscrimination tests from the system's Personal Data record, PS_PERSONAL_DATA. You can review the nondiscrimination testing codes provided for an employee on PS_PERSONAL_DATA directly through SQLTalk or SQLQuery. These codes show up in the flags HIGHLY_COMP_EMPL_C (Highly Compensated Employees - Current Year) and HIGHLY_COMP_EMPL_P (Highly Compensated Employees - Previous Year). You cannot view these codes online.

Pages Used to View Nondiscrimination Test Results

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|---------------------------------------|--------------------|---|---|
| Savings Plans - Elections | | Compensate Employees, Administer Base Benefits, Use, Savings Plans, Elections | Use to view nondiscrimination test results for an individual. |
| Section 401 Results - Results of 401 | NDT_401_RESULTS | Compensate Employees, Administer NDT, Process, Section 401 Results, Results Section 401 Testing | Use the Section 401 Results page to view the nondiscrimination test results for all employees in 401(k) and 401(m) tests. |
| Section 129 Results - NDT Results 129 | NDT_129_RESULTS | Compensate Employees, Administer NDT, Process, Section 129 Results, Results Section 129 Testing | Use the Section 129 Results page to view the nondiscrimination test results for all employees. |

Viewing Results for an Individual

Access the Savings Plans - Elections page.

Elections **Rollovers** Investments Beneficiaries

Santos, Antonio ID: KU0010 Empl Rcd#: 0
 Highly Compensated

Plan Type Find | View All First 1 of 3 Last
 *Plan Type: 401(k) + -

Coverage Find | View All First 1 of 1 Last
 *Coverage Begin Date: 01/01/2000 *Deduction Begin Date: 01/01/2000 + -
 Participation Election: Elect Waive Terminate *Election Date: 06/23/2000
 Benefit Plan: KU401M 401(k) Employer Pct Match Option: 1

| | |
|---|---|
| Before Tax Investment | After Tax Investment |
| <input type="radio"/> Flat Amount | <input checked="" type="radio"/> Flat Amount 200.00 |
| <input checked="" type="radio"/> Percent of Gross 3.000 | <input type="radio"/> Percent of Gross |

Employee Status: Active Annual Excess Credits:
 Benefit Program: GBI US FT Currency: USD

Savings Plans - Elections page

As a result of the last nondiscrimination test that you performed, the system indicates that an employee is highly compensated (based on the current year) by selecting **Highly Compensated** at the top of the page.

Viewing Section 401 Test Results for All Employees

Access the Section 401 Results - Results of 401 page.

Results of 401

NonDiscrimination test results for Plan Year beginning 01/01/2000 **using data as of** 04/30/2000
Testing performed using Current Year **data for NHCE population.**

| | | |
|-------------------------------|------------------------------------|------------------------------------|
| Employee Counts: HCE: | NHCE: | |
| | Actual Year-to-Date Results | Forecasted Year-End Results |
| | ADP 401(k) ACP 401(m) | ADP 401(k) ACP 401(m) |
| Average for HCE: | | |
| Average for NHCE: | | |
| Basic 125% Test: | | |
| Alternate 2% Test: | | |
| Discriminatory Excess: | | |
| Aggregate Limit Test: | | |

Section 401 Results - Results of 401 page

| | |
|---|---|
| Average for HCE and Average for NHCE (average for highly compensated employees and non-highly compensated employees) | The system will report the average actual contribution percentage (ACP) and actual deferral percentage (ADP) for highly compensated and non-highly compensated employees. |
| Basic 125% Test and Alternate 2% Test | The systems will automatically indicate a <i>Pass</i> or <i>Fail</i> status. |
| Discriminatory Excess | If both the Basic and the Alternate 2% Tests are failed, the system displays the discriminatory excess percentage. |
| Aggregate Limit Test | If the system runs this test, it will automatically indicate a <i>Passed</i> or <i>Failed</i> status. |

Viewing Section 129 Test Results for All Employees

Access the Section 129 Results - NDT Results 129 page.

| NDT Results 129 | | | |
|---|-------------------------------|---|--------------------|
| NonDiscrimination test results for Plan Year beginning 01/01/2000 using data as of 04/30/2000 | | | |
| Eligibility Cross-Section Test | | | |
| Eligible NHCE Count: | Unsafe Harbor Pct: | | Test Result |
| Eligible HCE Count: | Safe Harbor Pct: | | NOT RUN |
| NHCE LookUp Concentration (%): | Calculated Harbor Pct: | | |
| 55% Average Benefit Test | | | |
| Count: NHCE: | HCE: | Separate Line of Business <input type="checkbox"/> | Test Result |
| Benefits: | | | FAILED |
| Avg Benefits: | Benefits Ratio (%): | | |
| 5% Owner Concentration Test | | | |
| Benefits Paid to 5% Owners: | | | Test Result |
| Total Benefits Paid: | Benefits Ratio (%): | | NOT RUN |

Section 129 Results - NDT Results 129 page

The Section 129 Results page displays the results of the **Eligibility Cross-Section Test**, the **55% Average Benefit Test**, and the **5% Owner Concentration Test**. If you elected to test for separate lines of business, the **Separate Line of Business** check box will be selected.

Running Nondiscrimination Test Reports

You can produce nondiscrimination testing reports that provide a breakdown of the testing results by employee (divided into highly compensated employee and non-highly compensated employee groups) as well as a display of the calculations involved in the test.

401 Nondiscrimination Testing reports will also show the results of the Aggregate Limit Test if test result conditions require this test to be performed.

See Also

PeopleSoft Application Fundamentals for HRMS PeopleBook, “Appendix: PeopleSoft Application Fundamentals for HRMS Reports

Setting Limits to Comply With Test Results

In order to comply with the regulations governing non-discrimination testing, you may need to change the savings limits for a highly compensated employee for a specific benefit plan. This applies only to 401(k) and 401(m) plans.

See Also

“Enrolling Participants”, Enrolling in Savings Benefit Plans

CHAPTER 12

Managing FMLA Plans

This chapter provides an overview of administering FMLA plans and discusses how to:

- Enter FMLA leave requests.
- Determine FMLA eligibility.
- Schedule FMLA leave.
- Track FMLA activity.

Understanding FMLA Plan Administration

The Family Medical Leave Act (FMLA) protects benefits and job restoration for employees who take a leave from work to care for themselves or family members. This law went into effect August 5, 1993, and contains provisions regarding employer coverage, employee eligibility and entitlement, notice and certification, continuation of health benefits, and job restoration.

Before you can actively manage FMLA information for your workforce, you must first activate PeopleSoft's FMLA Administration facility and then define your organization's FMLA plans. You'll use the Installation Table and the FMLA Plan Table to perform these steps. You'll also need to associate FMLA plans with benefit programs, using the Benefit/Deduction Program Table.

After setting up your plans, you use their parameters to determine employee eligibility and to calculate available FMLA leave.

See Also

“Setting Up Benefit Plans” Setting Up FMLA Plans

“Building Base Benefit Programs”

Entering FMLA Leave Requests

This section describes how to:

- Request employee leaves.

- Monitor request progress.

Page Used to Enter FMLA Leave Requests

| Page Name | Object Name | Navigation | Usage |
|-----------|----------------------|--|-------------------------------|
| Request | FMLA_LV_REQUES T1 | Compensate Employees, Administer FMLA, Use, FMLA Leave, Request | Enter FMLA leave requests. |

Requesting Employee Leaves

Access the Request page.

Request page

FMLA Request ID

Initially given a value of NEW.

When the request is saved, the system assigns a unique FMLA request ID. IDs are incremented sequentially from 001 to 999 within each employee record.

Note. If you are processing employees with multiple jobs, the FMLA Administration facility does not use the employee record number. The system tracks FMLA leave requests by individual employees rather than by job.

Request Date

The date the employee made the FMLA protected leave request.

| | |
|------------------------|---|
| Begin Date | <p>The first day of the employee’s requested leave.</p> <p>The system uses the begin date for any record needing an effective date. Because eligibility and entitlement can be affected when the begin date is edited, you cannot to edit it once the request’s approval status changes to Approved or Denied, or once the request has been completed or canceled.</p> <p>To change the begin date after one of these events has taken place, change the approval status back to Open, recalculate eligibility and entitlement with the Leave Request Eligibility page, and manually adjust the leave schedule.</p> |
| Return Date | <p>The date the employee is scheduled to return from leave.</p> <p>The return date is not the day of FMLA protected leave, rather, it is the first day of work after the leave is completed.</p> <p>Select Expected/Open if the request is still pending or in process.</p> <p>Select Actual/Completed when the employee actually returns from leave.</p> |
| Leave Reason | <p>Select the appropriate leave reason. You can add more valid reasons through the PeopleTools Data Designer.</p> |
| Leave Type | <p>Indicate the “regularity” of the requested leave.</p> <ul style="list-style-type: none"> • Continuous leave is unbroken full-day leave. • Irregular leave is broken, but on a regular schedule; for example, every Thursday and Friday for eight weeks. • Irregular/Intermittent leave involves unspecified times during the planned leave period. If you change these fields after the leave is completed, the system gives you a warning. <p>If you change this field after the leave is completed, the system gives you a warning.</p> |
| Time Requested | <p>For reference only.</p> |
| Approval Status | <p>When you select Approved or Denied, the system automatically populates the Approver and Apprvl Dt (approval date) fields with your employee ID and the current date.</p> <p>Note. You can approve requests for employees determined to be ineligible for FMLA coverage.</p> |

Leave Canceled On

If the employee decides to cancel the leave request before taking any leave, enter the date of this decision.

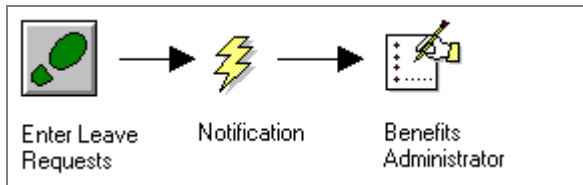
Do *not* use to indicate denial of the request or to record the employee's early return from leave.

See Also

PeopleSoft Applications Fundamentals for HRMS PeopleBook, "Working with Multiple Jobs"

Monitoring Leave Requests

Use the Monitor Leave Requests Workflow Process to locate new requests and notify the benefits administrator via email.



Monitor Leave Requests Workflow

See Also

PeopleTools PeopleBook: Workflow, "Using Workflow"

Determining FMLA Eligibility

The system uses data from a selected FMLA plan, the leave request, and job and payroll information to determine leave eligibility.

Page Used to Determine FMLA Eligibility

| Page Name | Object Name | Navigation | Usage |
|------------------|--------------------|---|---|
| Eligibility | FMLA_LV_REQUEST2 | Compensate Employees, Administer FMLA, Use, FMLA Leave, Eligibility | Determine FMLA leave eligibility and entitlement. |

Determining Eligibility

| Request | Eligibility | History | Activity |
|--|---|----------------------------------|---|
| Santos, Antonio | | Employee | |
| | | ID: KU0010 | |
| Request Find View All First ◀ 1 of 1 ▶ Last | | | |
| Request ID: | 001 | Begin Date: | 03/15/2000 |
| | | Return Date: | 07/15/2000 + - |
| | | Reason: | EI |
| | | Status: | E |
| *FMLA Plan ID: <input type="text" value="KUF"/> Roll-Fwd FMLA Year Begin Date: 03/15/2000 | | | |
| Eligibility and Entitlement Date of Last Determination: 03/01/2000 | | | |
| Eligibility Determination | | Entitlement Determination | |
| FMLA Eligible Hours: | 2092 <input checked="" type="checkbox"/> Eligible | Weeks = Std-Hours | |
| FMLA Eligible Svc Weeks: | 132 <input checked="" type="checkbox"/> Eligible | As of Requested Begin Dt: | 12.0 480.0 |
| | | As of Expected Return Dt: | |
| Job and Employment Data | | | |
| Original Hire Date: | 09/12/1997 | Std Hours /Week: | 40.00 |
| Officer Code: | None | Std Hours Override: | <input type="text"/> |

Eligibility page

FMLA Plan ID

Attach the FMLA leave request to a specific FMLA leave plan. The system uses the parameters defined for the chosen plan to calculate eligibility and entitlement values. You cannot edit the FMLA plan ID once the request has been approved, denied, completed, or canceled.

If you change the FMLA plan ID when the approval status is Open and the Eligibility and Entitlement process has been run, the system resets all fields dealing with eligibility and entitlement to their default values and sends you a warning informing you that eligibility and entitlement must be reexamined.

Eligibility and Entitlement button

Starts eligibility and entitlement process. These processes use employee job history, the FMLA plan parameters, payroll data, and data on the Request page to populate all of the other fields on the Eligibility page with the exception of **Std Hours Override** (standard hours override).

Note. The Eligibility and Entitlement button is not available if the prerequisite data for the leave request is not entered in the Request page. It will also be unavailable if the request's status is Completed, Denied, or Canceled.

FMLA Eligible Hours

Displays the results of the system's determination of the employee's FMLA eligible hours. The eligible hours are defined as the hours worked during the 52 weeks before

the leave effective date. Depending upon the rules that you've established for the associated FMLA plan, the system determines the eligible hours using either the employee's job history or PeopleSoft Payroll data. The system will select the Eligible check box if the employee has worked enough hours to be eligible for FMLA protected leave.

FMLA Eligible Svc Weeks
(FMLA eligible service weeks)

Displays the results of the system's determination of the employee's FMLA eligible service weeks. FMLA Administration determines service weeks using information from the employee's job history and the rules for the associated FMLA plan. The system will select the Eligible check box if the employee has worked enough service weeks to be eligible for FMLA protected leave.

As of Requested Begin Dt
(as of requested begin date)

Displays the weeks and hours of FMLA protected leave that the employee is entitled to as of the leave's begin date.

To determine whether the request can be approved, compare the values displayed here to the time requested in the employee's FMLA protected leave request.

As of Expected Return Dt
(as of expected return date)

Only used for leaves requested under plans that use a Roll-Backward calendar year. Displays the weeks and standard hours of entitled protected leave *remaining* for the employee in the current FMLA year as of the leave's expected return date.

The Roll-Backward calendar is so dynamic that a leave request using it may appear to demand denial based on an apparent lack of entitlement; however, the employee in question would gain the necessary entitlement during the course of the leave.

Original Hire Date, Officer Code, Std Hours/Week

The Job and Employment Data group box displays basic job and employment information for the employee as of the leave effective date and the last determination of eligibility and entitlement.

The system enters the average number of hours the employee works per workweek as of the leave effective date in the Std Hours/Week (standard hours per week) field.

Std Hours Override
(standard hours override)

Sometimes system-computed Standard Hours values are not accurate. Employees often make leave requests well in advance of their leave's begin date, and part-time employees' weekly hours can be variable.

Enter a new value when appropriate and recalculate eligibility and entitlement.

See Also

“Setting Up Benefit Plans”, Setting Up FMLA Plans

Scheduling FMLA Leave

This section describes how to:

- Manually schedule FMLA leave.
- Schedule repeating weekly leaves.
- Designate paid leave days for repeating schedules.

Pages Used to Schedule FMLA Leave

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|---------------------|--------------------|--|---|
| History | FMLA_LV_HISTORY | Compensate Employees, Administer FMLA, Use, FMLA Leave, History | Schedule and track FMLA leave. |
| Schedule Leave Days | FMLA_LV_SCHED_DLG | Compensate Employees, Administer FMLA, Use, FMLA Leave, History, click Scheduled Leave | Create repeating weekly FMLA schedules. |
| Mark Paid Leave | FMLA_LV_PAID_DLG | Compensate Employees, Administer FMLA, Use, FMLA Leave, History, click Mark Paid Leave | After creating a repeating schedule, designate specific days as paid leave. |

Manually Scheduling FMLA Leave

Access the History page.

History page

- Leave Summary** Tracks the weeks and hours of FMLA protected leave that are scheduled and that have already been taken.

 - Entitlement Summary** Tracks the total amount of FMLA protected leave that the employee is entitled to (for all leaves, not just the current one).

 - Schedule Leave** Click to create “template” schedules for repeating leave.

 - Mark Paid Leave** Click to designate a portion of the FMLA leave as paid leave.

 - Week Begin Dt** (week begin date) and **Sun** (Sunday) through **Sat** (Saturday) Enter the start date of each scheduled week of FMLA protected leave and the hours of leave for each leave day. To treat certain days of leave as paid leave, select the check box for those days. (Some employers require that employees use paid leave before they can use FMLA leave.)
- Note.** You can use these fields to manually schedule a leave request on a day-by-day basis. You can also use it to adjust a previously scheduled leave. But if you use the automatic scheduling capabilities of the Schedule Leave Days and Mark Paid Leave pages (detailed later in this section), keep in mind that the system will overwrite previously scheduled days with the template schedules that you design through these pages.

Scheduling Repeating Weekly Leaves

Access the Schedule Leave Days page.

Schedule Leave Days

| Scheduling Information | | | | | | | |
|------------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| | Sun | Mon | Tue | Wed | Thu | Fri | Sat |
| Weekly Template | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Repeat Template From | <input type="text"/> | | Through | <input type="text"/> | | | |
| Repeat Template For | Every Week | | | | | | |

| Current Schedule Summary | | | |
|--------------------------|-------|---|-------|
| | Weeks | = | Hours |
| Entitlement: | 12.0 | | 480.0 |
| Scheduled: | 3.6 | | 144.0 |
| Unscheduled: | 8.4 | | 336.0 |

Schedule Leave Days page

| | |
|------------------------------|---|
| Weekly Template | Enter the number of hours for each day in the schedule. |
| Repeat From...Through | Enter the begin and end dates during which you want the schedule to repeat. The leave request's scheduled Begin and Return dates are the defaults. |
| Repeat For | <p>Choose a time period for the schedule to repeat. If you choose an option other than Every Week, you can plan the intervening weeks with separate rounds of scheduling.</p> <p>For example, if you have an employee with four weeks of FMLA leave, you can schedule the first and third weeks with one Schedule Leave Days Template that repeats for every other week and starts on the first day of the first week. You can then schedule the second and fourth weeks with another template.</p> |
| Entitlement | Weeks and hours of FMLA leave that the employee is entitled to. |
| Scheduled | FMLA leave hours currently scheduled for the employee. |
| Unscheduled | FMLA leave weeks and hours remaining to the employee. This value can be negative if more hours are scheduled than available to the employee. |

Designating Paid Leave Days

Access the Mark Paid Leave page.

Mark Paid Leave

| Summary of Paid Leave Accrued | | | |
|-------------------------------|------|-----------------|-----------------------|
| | | Find View All | First ◀ 1 of 1 ▶ Last |
| Plan Type | | Accrual Date | Hours Accrued |
| 50 | Sick | 03/12/2000 | 2.000000 |

Mark first scheduled days (Hrs) as Paid Leave.

Mark Paid Leave page

Summary of Paid Leave Accrued

Displays the various leave plan types and the hours accrued by the employee.

The accrual date is when the employee’s FMLA leave request was submitted, which means that the **Hours Accrued** values may be inaccurate by the begin date of the leave.

Mark first . . . scheduled days (. . . Hrs) as Paid Leave

Enter the number of days to treat as part of the employee’s paid leave.

The system assumes that the paid leave days are substituted only for the beginning of the leave.

Only whole 8-hour days can be marked as paid leave days. The number of scheduled hours represented by those days can be compared with the leave accrual balances, which are always calculated as hours. When you enter a certain number of days into this field, the number of hours they represent appear in the (. . . Hours) box.

When you return to the History page, days selected as paid leave days have their check boxes selected.

Tracking FMLA Activity

You can record significant events that affect FMLA leaves, such as employee inquiries, requests for extensions, and the sending and receiving of notices and medical documents. This information is for reference only; it does not affect processing.

Page Used to Track FMLA Activity

| Page Name | Object Name | Navigation | Usage |
|-----------|------------------|--|---------------------------------------|
| Activity | FMLA_LV_ACTIVITY | Compensate Employees, Administer FMLA, Use, FMLA Leave, Activity | Log events that affect an FMLA leave. |

Tracking Activity

Access the Activity page.

| Request | Eligibility | History | Activity |
|---|---------------------------------------|-------------------------------------|---|
| Santos, Antonio | | Employee | |
| | | ID: KU0010 | |
| Request Find View All First 1 of 1 Last | | | |
| Request ID: 001 | Begin Date: 03/15/2000 | Return Date: 07/15/2000 | |
| | Reason: EI | Status: E | |
| Leave Summary | | Entitlement Summary | |
| Scheduled: | Weeks: 3.6 Hours: 144.0 | As of Leave Begin: | Weeks: 12.0 Hours: 480.0 |
| Taken Today: | Weeks: 3.6 Hours: 144.0 | Remaining Today: | Weeks: 8.4 Hours: 336.0 |
| Activity Find View All First 1-3 of 3 Last | | | |
| *Activity Date | *Activity Type | Follow Up Reqd | Long Description |
| 05/15/2000 | MedCertif | <input checked="" type="checkbox"/> | Requested confirmation of ongoing treatments |
| 03/01/2000 | MedCertif | <input type="checkbox"/> | Requested physician's certification of E's treatment plan. Rcvd: 03/15/2000 |
| 03/01/2000 | NOL Sent | <input type="checkbox"/> | |

Activity page

Activity Date and Activity Type

More than one activity type can occur on the same date, but only one type can be entered per record.

You can add or change activity types with the PeopleTools Data Designer.

Follow Up Required

Select if the activity you're entering requires follow-up action (as in the case of requests for medical certification, for example).

CHAPTER 13

Managing Leave Plans

This chapter provides an overview of the leave process and discusses how to:

- Process leave accruals.
- View employee balances.

See Also

Managing Vacation Buy and Sell Plans

Understanding the Leave Process

The purpose of leave accrual processing is to maintain employee leave balances. When you initiate leave accrual processing, the system calculates the leave accrual award and the resulting leave balance.

In most federal agencies, employees accrue leave according to their length of service:

| | |
|---------------------|---|
| Full Time Employees | For the first two years, they earn four hours per pay period. For service years 3–14, they earn six hours per pay period. After their 15th year, full-time employees earn eight hours per pay period. Full-time federal employees with 3–15 years of service also receive an additional four hours of leave in the last pay period of the calendar year. |
| Part-Time Employees | These employees accrue leave based on their years of service and the number of hours they've been working. For their first two years of service, they earn one hour for every 20 hours worked. Between service years 3 and 14, they earn one leave hour for every 13 hours worked. After their 15th year, part-time employees will earn one leave hour for every 10 hours worked. |

In order to properly process leave accruals, the system will need to obtain information from your payroll system, including hours taken, hours adjusted, hours bought, hours sold and service hours for each employee involved in the process. If your organization implements

PeopleSoft Payroll, the system will get this information from PeopleSoft Payroll during the normal run of the process.

The system processes leave accruals depending on how you define your leave accrual plans. You can base how you want employees to earn leave on one of two things: the length of the service they've provided to your organization or the total number of hours they've worked.

You can accrue leave based on *length of service* without using payroll data because the system refers to the Employment Data Table for each employee's service date. However, if you're planning to accrue leave based on *service hours*, your system will need to obtain data from your payroll application in order to find out how many hours a particular employee has worked.

See Also

"Defining Benefit Plans," Setting Up Leave Plans

Processing Leave Accruals

Use the Leave Accrual Process run control page to set up operating parameters for an accrual cycle. After you set up the run control, run the Leave Accrual process with the PeopleSoft Process Scheduler.

Pages Used to Process Leave Accruals

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|--|--------------------|--|---|
| Leave Accrual Process - Leave Accrual Proc (leave accrual process) | RUNCTL_ACCRUAL | Compensate Employees, Administer Base Benefits, Process, Leave Accrual Process, Leave Accrual Processing | Set up the operating parameters for an accrual cycle. |

Setting Up Operating Parameters for an Accrual Cycle

Access the Leave Accrual Process - Leave Accrual Proc (leave accrual process) page.

Leave Accrual Proc

Run Control ID: 1 [Report Manager](#) [Process Monitor](#)

Company:

*Plan Type:

*Benefit Plan:

Last Process Date:

*Accrual Process Date:

Leave Accrual Process - Leave Accrual Proc (leave accrual process) page

| | |
|-----------------------------------|--|
| Run Control ID | The system will prompt you to enter an existing ID or add a new one |
| Company | Enter the company that you want to process. You may leave the Company field blank, which means that employees in <i>all</i> companies will be processed for the specified plan type and benefit plan. |
| Plan Type and Benefit Plan | Enter the plan type and benefit plan that you want to process. |
| Last Process Date | Displays the date that you last ran the Leave Accrual process for this plan type and benefit plan. |
| Accrual Process Date | <p>Date upon which you want the leave accrual calculations to be based. The system will automatically set the accrual process date to the current date, but you can change it as long as the date that you enter is later than the last process date.</p> <p>Process leave accruals for a given company, plan type, and benefit plan a maximum of once per accrual process date and a minimum of once per the Award Frequency that you've defined on the Leave Plan Table. The leave accrued will be awarded only once per the Award Frequency for each employee participating in the plan as of the accrual process date, but all other leave processing—the maintenance of the leave taken, leave adjusted, leave bought, and leave sold balances—will take place each time that you run the Leave Accrual process.</p> <p>Note. The Leave Accrual process will process all employees who are currently enrolled in the selected plan type and benefit plan. It does not check the employment status of the employee.</p> |

For example, suppose your leave balance available is 10 hours, your unprocessed leave taken is 8 hours, your Award Frequency is *First Run of Month*, your **Last Process Date** is *11/1/96*, and you run the Leave Accrual process with an **Accrual Process Date** of *11/15/96*. In this case, no leave will be awarded but the unprocessed leave taken will be moved from unprocessed data to the leave accrual balances and the resulting leave balance available will be 2 hours.

Run

Click to run this request. PeopleSoft Process Scheduler runs the leave accrual process at user-defined intervals.

Viewing Employee Balances

View the results of leave accrual processing for an employee using the Leave Accrual page. You have the option to print a report. Employees can also view their leave balances through ePay or the HRMS Portal Pack

See also

PeopleSoft ePay PeopleBook

PeopleSoft HRMS Portal Pack PeopleBook

Page Used to View Employee Balances

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|--|--------------------|---|-------------------------------|
| Leave Accrual - Leave Accrual Balances | LEAVE_ACCRUALS | Compensate Employees, Administer Base Benefits, Use, Leave Accruals, Leave Accrual Balances | View employee leave balances. |

Viewing Employee Balances

Access the Leave Accrual - Leave Accrual Balances page.

| Leave Accrual Balances | |
|--|---|
| Santos, Antonio | ID: KU0010 Empl Rcd Nbr: 0 |
| Leave Accruals Find View All First 1 of 12 Last | |
| Company: GBI Global Business Institute | Benefit Program: KU1 GBI US Fulltime Benefit Pgm |
| Plan Type: Sick | Currency: USD |
| Accrual Date: 04/30/2000 | |
| Accrual Balances - Hours | |
| Carried over from previous year: | |
| Earned Year-to-Date: | 40.000000 |
| Taken Year-to-Date: | 32.000 |
| Adjusted Year-to-Date: | |
| Bought Year-to-Date: | |
| Sold Year-to-Date: | |
| Service Data | |
| Service Date: | 09/12/1997 |
| Service Hours: | |
| Unprocessed Data | |
| Hours Taken: | |
| Hours Adjusted: | |
| Hours Bought: | |
| Hours Sold: | |
| Service Hours: | |
| Accrual Totals | |
| Hours Balance: | 8.000000 |
| Hours Value: | 71.20 |

Leave Accrual - Leave Accrual Balances page (1 of 1)

Accrual Date Last date that you initiated a leave accrual for this employee.

Accrual Balances - Hours

Carried Over from previous year Updated only during the first run of the year.

Earned Year-to-Date Maintains the accrued leave awarded and is updated only once per Award Frequency. If you find that you need to modify the earned year-to-date balance, use the Earnings Code that you defined to adjust the accrual balance on Earnings Table 4.

Taken Year-to-Date, Adjusted Year-to-Date, Bought Year-to-Date, and Sold Year-to-Date Updated each time the Leave Accrual process is run and values are moved from the corresponding **Unprocessed Data** fields.

Accrual Totals

Hours Value Current monetary value of the hours balance.

The system calculates the hours value, or value of the unused hours, by multiplying the leave balance by the current hourly rate for hourly employees or the hourly equivalent for salaried employees.

Hours Balance Employee's current accrued time available.

The system calculates the **Hours Balance** by totalling:

Carried Over from Previous Year +
 Earned Year-to-Date -
 Taken Year-to-Date +
 Adjusted Year-to-Date +
 Bought Year-to-Date -
 Sold Year-to-Date -
 Unprocessed Hours Taken +
 Unprocessed Hours Adjusted +
 Unprocessed Hours Bought -
 Unprocessed Hours Sold.

Service Data

Service Date Date used for length of service calculations when the Service Unit is defined as *Months*.

Service Hours Number of hours used for length-of-service calculations when the Service Unit is defined as *Hours*.

Unprocessed Data

Displays the hours that you have *not* yet processed using the accrual process. These are hours passed from the PeopleSoft Payroll Pay Confirmation process since the accrual date.

Service Hours Confirmation process will only update the service hours when the employee is participating in the leave plan as of the Pay End Date.

Hours Taken, Hours Adjusted, Hours Bought, and Hours Sold. Updated each time the Pay Confirmation process is run.

See Also

“Setting Up Benefit Plans”

Managing Vacation Buy/Sell Plans

This chapter provides an overview of vacation buy/sell plans and describes how to review vacation buy/sell calculation results.

Understanding the Vacation Buy/Sell Process

To process vacation buy/sell earnings:

1. Enroll eligible employees into vacation buy/sell benefit plans using the Vacation Benefit Table and enter their vacation buy and sell elections.

Employees normally elect to buy or sell vacation once at the beginning of the plan year. When an employee buys vacation, your PeopleSoft Human Resources system spreads the cost over the plan year, deducting from employee pay based on the frequency that you define on the Deduction Table. The same is true for vacation sell—the system refunds the money over the plan year according to the frequency that you define.

2. Use PeopleSoft Payroll for North America during the first payroll cycle of the plan year to calculate the effect of the buy or sell transaction on the employee's leave balance.
3. Run the Leave Accrual process, which updates employee leave balances with the results of the buy or sell transaction.

Working With Mid-Year Buy or Sell Transactions

In Base Benefits, if an employee elects to enroll in a Vacation Buy/Sell plan at a time other than the beginning of the plan year, you will have to calculate the buy or sell amount to be deducted from or added to employee pay, spread out over the remainder of the plan year. Enter this amount in the Vacation Benefit page.

In PeopleSoft Benefits Administration, the system calculates the per-pay-period amount based on the beginning of the plan year. If an employee buys or sells vacation at another time, you need to calculate the buy or sell amount to be deducted from or added to employee pay, spread out over the remainder of the plan year. Then override the amount calculated by the system on the Vacation Benefit page.

See Also

“Organizing Payroll Information for Base Benefits,” Defining Vacation Buy/Sell Earnings and Setting Up Benefit Deductions

PeopleSoft Benefits Administration PeopleBook, “Understanding the Benefits Administration Process,” Using Open Enrollment

“Managing Leave Plans”

Reviewing Vacation Buy/Sell Calculation Results

This section describes how to:

- Determine Leave Accrual processing status.
- View the number of vacation hours an employee has bought or sold.

See Also

“Enrolling Participants,” Reviewing Employee Eligibility

Page Used to Review Vacation Buy/Sell Calculation Results

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|------------------|--------------------|---|---|
| Vacation Benefit | VACATION_BENEFIT | Compensate Employees, Administer Base Benefits, Use, Vacation Benefit, Vacation Benefit | Review Leave Accrual processing status for a specific employee. |

Determining Leave Accrual Processing Status

Access the Vacation Benefit page.

| Vacation Benefit | |
|---|---|
| Default, Tocurrent8 | ID: B-BARET117 |
| Plan Type Find View All First 1 of 2 Last | |
| Plan Type: 90 | Vacation Buy + - |
| Coverage Find View All First 1 of 1 Last | |
| *Deduction Begin Date: 04/01/1997 | + - |
| Coverage Election: <input checked="" type="radio"/> Elect <input type="radio"/> Waive <input type="radio"/> Terminate | *Election Date: 04/14/1997 |
| Benefit Program: BAS Retro Regression | |
| Benefit Plan: BP0091 EM Vacation Buy | Option Code: 1 |
| Vacation Hours: 8.00 Calculate | Vacation Buy or Sell: Vacn Buy |
| Buy/Sell Flat Amounts: 13.46 Monthly | |
| Goal Amount: 161.53 | Goal Balance: |
| Employee Status: Active | <input type="checkbox"/> Vacation Accrual Processed |

Vacation Benefit page

When you enroll an employee, the system clears the **Vacation Accrual Processed** check box. **Vacation Accrual Processed** becomes selected after payroll has been processed for the employee and the Leave Accrual process has been run.

Viewing the Number of Vacation Hours Bought or Sold

During the first payroll run for the employee after enrollment, PeopleSoft Payroll for North America creates Other Earnings data for the total vacation bought or sold hours. This data is used for accrual purposes.

You can view the Other Earnings data on the employee's paysheet, in the Manage Payroll Process page. For example, if an employee sells 10 hours of vacation, PeopleSoft Payroll for North America creates Other Earnings data to reflect the 10 hours, using the earnings code that you defined in the Vacation Buy/Sell Table for the vacation sell benefit plan.

Note. You can also see the total number of hours bought and sold using the Benefits Summary page.

See Also

PeopleSoft Payroll for North America PeopleBook, "Working with Paysheets"

CHAPTER 15

Setting Up COBRA Administration

This chapter provides an overview of COBRA Administration and discusses how to:

- Activate COBRA.
- Link COBRA to benefit packages.
- Identify COBRA-eligible benefits plans.
- Establish coverage codes for COBRA.
- Define COBRA-qualifying events.
- Identify COBRA events.
- Specify COBRA administrator information.

Understanding COBRA Administration

COBRA (Consolidated Omnibus Budget Reconciliation Act) legislation requires employers to offer continued health care coverage to employees and their dependents who lose coverage under certain conditions. These conditions, or qualifying events, include voluntary termination, layoff, divorce, retirement, and Medicare eligibility. All health benefit plans are subject to COBRA continuation of coverage. Any individual, whether employee or dependent, who is covered under a health plan at the time of a qualifying event has the option to elect COBRA coverage.

The Base Benefits business process provides COBRA administration that is designed to work with the base benefits processing and PeopleSoft Benefits Administration enabling you to make continuation of coverage available and communicate with COBRA-qualified beneficiaries.

With PeopleSoft, each employee chooses benefits within an eligible benefit program. This is also true for COBRA beneficiaries. COBRA Administration assigns each individual who becomes eligible for a COBRA benefit program, and then offers the plan types within that program that have been identified as COBRA-eligible plans to the COBRA participant.

Activating COBRA

| |
|---------------------------|
| To activate COBRA: |
|---------------------------|

1. Access the Installation Table - Product Specific page.
2. Select the COBRA Administration check box under the Benefits Functions group box.

Linking COBRA to Benefit Packages

To link COBRA to your benefit package, use the Benefit Program Table. On the Benefit Program Table, identify the following:

- The age at which a dependent is no longer considered a dependent.
- The age at which a dependent is no longer considered a student.
- Whether a disabled person is excluded from the age limits.
- Whether dependents are ineligible for regular benefits if married.

You will also identify any extra charges that you want added to the cost of the benefits for both disabled and non-disabled persons.

See Also

“Building Base Benefit Programs”

Identifying COBRA-Eligible Benefit Plans

To identify which benefit plans offered within a benefit program are eligible for COBRA Administration, use the Benefit Program Table. When you design your benefit program, if you designate Health *1x* and FSA *60* plan types as COBRA-qualified plan types, you must designate an Option Code for those plan types. The system uses the option codes for the enrollment of employees into COBRA benefit plans. This restriction only applies if you *do not* utilize PeopleSoft Benefits Administration.

In general, only medical and health plan types (Plan Types *1x* and *6x*) are designated as COBRA-qualified plan types. However, PeopleSoft allows you to identify non-medical plan types as COBRA-qualified plans if your organization’s policy is to offer them to your employees as part of their COBRA coverage. You will need to modify the COBRA COBOL for plan types other than Medical *1x* or FSA *6x* plan types.

For COBRA, medical coverage is a core benefit. COBRA Administration defines non-core benefits such as dental and vision care benefits. If your benefits program combines core and non-core benefits, you may have to offer COBRA participants a core option that is not available to other active employees.

Currently, nonqualified medical, dental, and vision plans are not currently supported for COBRA coverage. You should not designate these plans as COBRA-qualified plans.

See Also

Building Benefit Programs

Establishing Coverage Codes for COBRA

Define and manage coverage codes for your COBRA-eligible plans with the Coverage Codes page. PeopleSoft delivers seven basic coverage codes—four of which work with COBRA—and you can add more coverage codes as your organization requires. The coverage codes for nonqualified dependents—Nonqualified Adult, Nonqualified Children, and Nonqualified Adult+Children—are not for use with COBRA Administration. To indicate that a coverage code is to be used by COBRA processing, enter a code in the COBRA Coverage Set field.

According to COBRA rules, only employees and their spouses can elect coverage codes other than *Employee Only*. Dependents must elect individual coverage. COBRA Administration will automatically determine the eligible set of options that a participant can elect under COBRA for each plan type that the participant is qualified to receive coverage from. The system will make this determination whether you enroll your employees manually or automatically with the assistance of PeopleSoft Benefits Administration processes.

If your organization does not use PeopleSoft Benefits Administration, PeopleCode routine will check the new coverage that is available to the COBRA-qualified beneficiary after the qualifying event and check it against the existing coverage. Employees, spouses, and ex-spouses must have a new coverage code that offers an amount of coverage that is less than or equal to the existing coverage code. For example, suppose an employee had an *Employee + Spouse* coverage before the COBRA-qualifying event, that employee would only be eligible for the same coverage or the *Employee Only* coverage thereafter. Dependents are eligible for the *Employee Only* coverage code only.

Defining COBRA-Qualifying Events

PeopleSoft delivers COBRA Administration with the following qualifying events:

- Voluntary termination.
- Involuntary termination.
- Reduction of hours.
- Death of an employee.
- Divorce and legal separation.
- Loss of dependent status (due to marriage or arrival at the age limit for benefit coverage).

- Employee becomes eligible for Medicare.
- Retirement.

According to federal government guidelines, employees and spouses of employees who undergo voluntary or involuntary termination for "gross misconduct" are *not* eligible for COBRA coverage. We do not deliver COBRA Administration with the capability to differentiate between terminations for gross misconduct and other termination types, but you can set up Action Reason codes and add PeopleCode to have the system perform this function.

You should review the set of events provided, change them, and add new events as necessary based on the qualifying events that your organization recognizes. Then, for each valid event:

- Define when COBRA coverage begins and how long it will last.
- Define any grace periods.
- Define when the employee has to notify the organization of the event and when the organization has to notify the employee of COBRA benefits.
- Define the qualified beneficiaries for the event.
- Define the secondary event rules for the event.

If you want to set up additional COBRA Event Rule records for a particular COBRA Event Classification, insert a new row with a different Effective Date. The system will always use the record with the Effective Date that is closest to the current date.

You can set up Cobra Event Rule records with future effective dates. This allows you to have the definition of a COBRA Event Classification change on a predetermined date.

Determining COBRA Coverage Period

COBRA coverage begins the day following the last day of regular active coverage and generally extends for 18 or 36 months following a qualifying event. If an employee is terminated on the 15th, COBRA coverage begins on the 16th.

The determination of the COBRA period begin date is dependent on several factors. The first factor is whether or not the COBRA period includes alternative coverage. Alternative coverage is the grace period of continued active coverage beyond the date that an employee's active health coverage would normally terminate. Grace periods are provided either manually through Base Benefits or automatically with the PeopleSoft Benefits Administration system.

Regardless of whether the COBRA period includes the alternative coverage, the COBRA Coverage Begin Date is always set to the day following the last day of active coverage. It is the calculation of the COBRA Coverage End Date that is dependent on the inclusion or exclusion of alternative coverage.

In the case of disabled COBRA participants, however, regulations allow an extension up to 11 months past the original 18 months for termination of employment and reduction in work hours events. You can extend the coverage for disabled participants by completing the Additional Months if Disabled field on the Event Rules page.

The date on which COBRA coverage ends is defined as the COBRA period begin date + the number of Months of Coverage + any Additional Months if Disabled.

Providing Grace Periods

There may be situations where you want to provide “grace periods” for your employees that begin on the day following the last day of regular coverage. During these grace periods, your organization pays all or part of the employee benefits premiums. Extending the termination dates of an individual’s health benefit plans past the COBRA-qualifying event date sets grace periods. You can do this manually or arrange for it to happen automatically through PeopleSoft Benefits Administration processes. To provide a grace period, select Include Alternative Coverage and specify when you want the COBRA period to actually begin, which will be the day after the grace period ends. The system includes grace periods in the COBRA coverage period. You can select to have COBRA begin on the day of the event, on the first day of the month after the event, or on the first day of the pay period after the event day.

If you do not want a grace period to be included in the COBRA period, do not select Include Alternate Coverage. The COBRA period begin date will be the same and COBRA coverage will start on the day after the grace period ends. This means that if your organization paid for all or part of the employee premiums during a grace period, the COBRA period does not begin until *after* the conclusion of alternative coverage. The length of continued coverage from the qualifying event is the length of the grace period plus 18 months of COBRA continuation coverage.

The system calculates the COBRA Coverage End Date according to a formula derived from the parameters defined in the COBRA Event Rules.

Here are examples showing how COBRA can calculate COBRA coverage end dates for an employee who experiences a COBRA qualifying event on March 15, has a pay period on March 22, whose last day of active coverage is on June 30, and is allowed 18 months of COBRA coverage.

| Last Day of Active Coverage | Include Alternative Coverage | COBRA Period Begins Code | COBRA Period Begin Date | COBRA Coverage Begin Date | COBRA Coverage End Date |
|------------------------------------|-------------------------------------|---------------------------------|--------------------------------|----------------------------------|--------------------------------|
| 6/30 | N | | 7/1 | 7/1 | 12/31 |
| 6/30 | Y | Event Date | 3/15 | 7/1 | 9/14 |
| 6/30 | Y | Month After | 4/1 | 7/1 | 9/30 |
| 6/30 | Y | Pay Period | 3/22 | 7/1 | 9/21 |

The Coverage End Date will always be equivalent to the COBRA period begin date plus the Months Of Coverage for each plan type with two exceptions:

- For employees and spouses, COBRA coverage will end *before* the scheduled Coverage End Date on the date that the employee or spouse turns 65 and becomes eligible for Medicare.

- For dependents of employees who become eligible for Medicare, the COBRA Coverage End Date will be the latter of the COBRA period begin date or the employee’s Medicare entitlement date plus 36 months.

Setting Rules For Secondary COBRA Events

Secondary COBRA-qualifying events are events that extend the amount of time a participant is eligible for COBRA coverage.

An event must fulfill the following basic qualifications in order for it to qualify as a COBRA secondary event:

- The initial COBRA event must be a COBRA event classification associated with a change to an employee’s job status, such as a reduction in hours, termination, or retirement.
- The employee and dependent must currently be participating in an active initial COBRA event and has COBRA coverage.
- The secondary event must be one of the COBRA event classifications that involves loss of coverage for the employee’s dependent, such as divorce, marriage of dependent, overage dependent, death of employee, or a Medicare entitlement.

For example, suppose a married employee is terminated. The employee and his spouse will receive 18 months of COBRA coverage after the termination. If the employee and spouse divorce, the divorce would be considered a secondary event for the ex-spouse. If the divorce occurred *before* the termination, the termination would *not* be a secondary event for the ex-spouse.

The classification of the event determines the amount of time for which coverage is extended and the method by which coverage is extended. In the previous example, the secondary event would cause the coverage of the ex-spouse to be extended from 18 to 36 months from the coverage begin date of the initial event. In general, even with secondary events, a dependent’s coverage cannot exceed 36 months.

The exception would be a case where the secondary event is a Medicare entitlement. When a qualified COBRA beneficiary turns 65, and is Medicare entitled, their COBRA coverage ceases. In this case, the system adds the 36 months to the COBRA event date (the Medicare entitled date), thereby extending the dependent’s COBRA coverage past 36 months.

COBRA-Qualified Beneficiary

The following chart illustrates how the Benefit Lost Level and COBRA-Qualified Beneficiary relate to one another. For each COBRA Event Classification, it displays the Benefit Lost Level and COBRA-Qualified Beneficiaries typically associated with that event.

| COBRA Event Classification | Benefit Lost Level | COBRA-Qualified Beneficiaries |
|-----------------------------------|---------------------------|---------------------------------------|
| TER RET RED MIL | Employee | Employee Spouse Son Daughter |

| COBRA Event Classification | Benefit Lost Level | COBRA-Qualified Beneficiaries |
|-----------------------------------|---------------------------|--------------------------------------|
| DEA MED | Employee | Spouse Son Daughter |
| OVG DEP | Dependent | Son Daughter |
| DIV | Dependent | Ex-spouse |

See Also

Creating Event Rules

Identifying COBRA Events

In this section, we discuss identifying COBRA events.

Page Used to Identify COBRA Events

| Page Name | Object Name | Navigation | Usage |
|------------------|------------------------|---|--|
| Event Rules | COBRA_EVENT_RU LES1 | Define Business Rules, Define COBRA, Setup, Event Rules, COBRA Event Rules | Identify the events that result in the loss of health plan coverage for a qualified beneficiary. |

Identifying COBRA Events

Access the Event Rules page.

Event Rules

COBRA Event Classification: TER

COBRA Event Rules Find | View All | First < 1 of 1 | Last

*Effective Date: 01/01/1980 Status: Active

*Description: Termination Short Description: Termination

Response Days Allowed: 60

Days to Notify of Event: 30

Payment Grace Days: 45

Manual Events Allowed

Waive COBRA Surcharge

COBRA Period Determination

Months of Coverage: 18 Include Alternative Coverage

Additional Months if Disabled: 11

COBRA Period Begins: On the Event Date

Use BenAdmin Event Rules

Secondary Event Rules

Secondary Event Role: Preceding Initial Event

Second Event Additional Months:

Secondary Event Add Mode: N

Benefit Lost Level: Employee

COBRA Qualified Dependents

Relationship to Employee

Daughter

Employee

Son

Spouse

Event Rules page

COBRA Event Rules

Effective Date

Enter or select the date on which this COBRA Event goes into effect. The system always uses the record with the effective date that is closest to but not past the current date.

Status

Select whether this COBRA Event is *Active* or *Inactive*.

Description

Enter a description of the COBRA Event using 30 characters.

Short Description

Enter a brief description of the COBRA Event using 10 characters.

Days to Notify of Event

Identifies the number of days an employee or dependent has to notify the organization following a qualifying COBRA event.

Response Days Allowed

Specifies the maximum number of days that a beneficiary has to elect coverage from the date of notification. COBRA eligibility expires after the response period.

Payment Grace Days

Enter the number of payment grace days employees will be given to submit their payment after they send in their election.

Manual Events Allowed

Select this check box if you want to allow manual entry of the event.

Waive COBRA Surcharge Select this check box if, for this event classification, you want the system to disregard the COBRA surcharge percentages defined in the Benefit Program Table.

COBRA Period Determination

Include Alternate Coverage Select this check box to set up a grace period.

COBRA Period Begins Select a value to define when COBRA coverage begins. Choose from the following valid values:

On the Event Date: The COBRA period begin date will be the same as the day of the event. COBRA coverage actually begins the day after the event date or the day after the grace period ends.

On Month-Begin After Event: The COBRA begin date is on the first day of the month after the event.

On PayPeriod Begin After Event: The COBRA begin date is on the first day of the pay period after the event day.

Months of Coverage Identifies how long coverage will extend for a particular qualifying event. COBRA coverage generally extends for 18 or 36 months following a qualifying event.

Additional Months if Disabled Enter the extension for disabled participants. Regulations allow an extension up to 11 months past the original 18 months for termination of employment and reduction in work hours events for disabled participants.

Secondary Event Rules

Secondary Event Role Indicates whether or not the displayed COBRA event classification can be considered a secondary event. You can choose from the following valid values:

Succeeding Second Event (S): This indicates that the COBRA event classification is a secondary event.

Preceding Initial Event (P): If the **Secondary Event Role** field has a value of **P**, then the other two **Secondary Event Rules** fields will be unavailable for data entry.

Second Event Additional Months If **Secondary Event Role** is selected, the **Second Event Additional Months** field defines the number of months the original COBRA coverage will be extended.

Secondary Event Add Mode Defines whether the system adds **Second Event Additional Months** to the original coverage begin date of the initial event or to the COBRA event date of the secondary event.

In the event classifications that we deliver, the Death, Divorce, Married Dependent, and Overage Dependent

events have a **Second Event Add Mode** value of *E* (Extended) while the Medicare Entitlement event has a **Second Event Add Mode** value of *A* (Added).

Note. For the *Divorce* COBRA Event Classification, the sole-defined COBRA Qualified Beneficiary is *X* (Ex-Spouse).

Benefit Lost Level

In the **Benefit Lost Level** field, you define whether the COBRA event affects the employee only, the dependent only, or both. You can choose from the following valid values: *Employee, Dependent* (a COBRA-Qualified Beneficiary) or *neither*.

Specifying COBRA Administrator Information


For each benefit program, define the name, address, and title displayed on COBRA letters. The information that you enter here prints at the bottom of your COBRA letters. You can maintain this information in your database instead of directly modifying the format of the letters.

Page Used to Define COBRA Administrator Information

| Page Name | Object Name | Navigation | Usage |
|-------------------------------------|--------------------|--|--|
| COBRA Administrator - Administrator | COBRA_ADMINISTRATR | Define Business Rules, Define COBRA, Setup, COBRA Administrator, COBRA Administrator | Define the COBRA administrator's name and address. This information will print on COBRA notification, enrollment, and termination letters. |

Defining COBRA Administrator Information

Access the COBRA Administrator - Administrator page.

| | |
|------------------------|--|
| Administrator | |
| Description: | GBI Master US Benefit Program |
| *Name: | <input type="text"/> |
| Business Title: | <input type="text"/> |
| Country: | <input type="text"/>  |
| Address 1: | |
| Address 2: | |
| Address 3: | |
| City: | |
| County: | Postal: |
| State: | |
| Phone: | <input type="text"/> |

COBRA Administrator - Administrator page

Name and **Business Title** Enter the name and job title of the COBRA Administrator.

CHAPTER 16

Managing COBRA

This chapter provides an overview of managing COBRA and discusses how to:

- Determine qualified COBRA events.
- Run the COBRA process.
- Send notification letters.
- Enter COBRA elections and waivers.
- Process enrollments for secondary events.
- Enter COBRA elections and waivers.
- Manage COBRA events.
- Manage benefit plan and dependent information.
- Manage non-employee COBRA participants.
- Terminate COBRA coverage.

Understanding COBRA Management

The system searches the database for COBRA qualifying events that you define and identify those employees and dependents that are eligible for COBRA benefits. Once these qualified beneficiaries are identified, you can retrieve data in the COBRA pages and track the qualifying event, the calculated coverage begin and end dates, and COBRA status for each beneficiary. You can also enter health and FSA benefit elections.

| |
|-----------------------------|
| To administer COBRA: |
|-----------------------------|

1. Perform PeopleSoft Human Resources functions as usual.

For example, terminate employees, retire employees, and record marital status changes. These functions trigger COBRA activity.
2. Run the COBRA process to identify qualifying events and beneficiaries.
3. Generate COBRA notification letters and enrollment forms.

4. Enter COBRA elections or waive coverage.
5. Manage COBRA benefits for non-employee COBRA beneficiaries and their dependents.
6. Terminate COBRA enrollment for beneficiaries who lose their coverage due to lack of payment or voluntary termination.

Determining Qualified COBRA Events

A qualified COBRA event:

- Is defined in the COBRA Event Rules Table.
- Results in a recognized loss of coverage in a health or FSA plan.

If you do not use Benefits Administration, manually terminate employee health coverage through the Health or FSA pages.

In Base Benefits, qualifying events are triggered through PeopleCode. In Benefits Administration, qualifying events are triggered after Event Maintenance has been finalized. The exception (for both Base Benefits and Benefits Administration) is overage dependent processing. Overage dependent events are identified during the COBRA batch process and are automatically adjusted.

Information about triggered events is transferred to the COBRA Activity Table for further analysis during the COBRA process.

Page Used to Determine Qualified COBRA Events

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|------------------|--------------------|---|---------------------------------------|
| COBRA Activity | COBRA_ACTIVITY | Compensate Employees, Administer COBRA, Use, COBRA Activity, COBRA Activity | Add, delete, and review COBRA events. |

Understanding Initial COBRA Events

There are two types of COBRA events: initial and secondary. An initial event is the first qualifying event for an employee.

The following table shows the initial qualifying COBRA events that PeopleSoft delivers, the user actions that trigger them, and the potential COBRA beneficiaries of each event.

| <i>Qualifying COBRA Event</i> | <i>User Action Trigger</i> | <i>Potential COBRA Beneficiaries</i> |
|--|---|--------------------------------------|
| Loss of eligibility due to termination | Employee status changes to Terminated or Suspended. | Employee and dependents |

| Qualifying COBRA Event | User Action Trigger | Potential COBRA Beneficiaries |
|--|---|--------------------------------------|
| Loss of eligibility due to reduction in hours | Employee status remains Active; Standard hours decrease. | Employee and dependents |
| Loss of eligibility due to retirement | Employee status changes to Retired. | Employee and dependents |
| Loss of eligibility due to military leave | Leave of Absence/Military Leave action/action reason combination is entered for the employee. | Employee and dependents |
| Death of employee | Employee status changes to Deceased or a Family Status Change/Death action/action reason combination is entered for an employee. | All dependents |
| Divorce | Marital status changes to Divorced; spouse becomes Ex-Spouse. | Spouse |
| Marriage of dependent | Dependent marital status changes to Married. | Individual dependent |
| Dependent reaches coverage age limit (Overage dependent) | No user action; current age of dependent exceeds maximum dependent age or maximum student dependent age. (The system checks whether or not the dependent is a student.) | Individual dependent |
| Employee becomes entitled to Medicare | Medicare entitlement date is entered. | All dependents |

Note. According to federal government guidelines, employees and spouses of employees who undergo voluntary or involuntary termination for "gross misconduct" are *not* eligible for COBRA coverage. COBRA Administration does not differentiate between terminations for gross misconduct and other termination types, but you can set up action reason codes and add PeopleCode to perform this function.

Understanding Secondary COBRA Events

Secondary events extend coverage eligibility and are limited to dependents who are currently enrolled in COBRA coverage. A secondary event must meet the following requirements:

- The dependent must currently be enrolled in COBRA coverage as a result of an initial COBRA event.

- The initial COBRA event must be associated with a change to an employee's job status (such as a reduction in hours, termination, or retirement), and the secondary event must involve loss of coverage for the employee's dependent (such as divorce, marriage of dependent, overage dependent, death of employee, or a Medicare entitlement).

The triggers for secondary events are identical to the triggers for initial events, with one exception. If the initial event is a termination and the secondary event is a death, you must use the delivered action/action reason combination of FSC/DEA to successfully process the event.

See Also

Processing Secondary COBRA Qualifying Events

Overriding Initial and Secondary COBRA Events

The system assumes that the date of the event and the date that an employee's benefits terminate are the same, which is not always true.

For example, suppose that an employee drops spousal coverage during Open Enrollment and then later gets divorced. The benefit plan must make COBRA coverage available upon receiving notice of the divorce.

Another example is when an employee decides not to return to work from FMLA. COBRA coverage becomes available on the day human resources is notified the employee is not returning, not on the last day of the FMLA, unless notification is made on the last day of FMLA. The maximum coverage period usually begins on that day also.

In order for the COBRA process to recognize these events as enabling dependents to become eligible for COBRA benefits, you must enter the event directly into the COBRA Activity Table.

You cannot enter an event unless you have selected Manual Events Allowed in the COBRA Event Rules Table for the COBRA event classification. You may want to add a new COBRA event classification to identify these specific situations. COBRA events triggered through the Base Benefits business process or Benefits Administration can be deleted on the COBRA Activity Table, but not modified. COBRA events that you enter through the COBRA Activity page can be changed.

Adding, Deleting, and Reviewing COBRA Events

Access the COBRA Activity page.

| COBRA Activity | | | | | | | | |
|-------------------------------------|-----------|-----------------|-------------------|-------------|------------------|----------|--------------|--------------|
| Find View All First 1-3 of 3 Last | | | | | | | | |
| Activity | | | Coverage Override | | | | | |
| *EmpID | Empl Rcd# | Name | *Event Date | *CBR Action | *Activity Source | Ben Rcd# | BAS Sched ID | BAS Event ID |
| KU0106 | 0 | Chae, Kevin | 05/25/2000 | TER | BenAdmin | 0 | KUEM | 1 |
| KU0115 | 0 | Mapin, George N | 05/01/2000 | DIV | BenAdmin | 0 | KUEM | 2 |
| KU0117 | 0 | Snow, Lucius | 03/01/2000 | TER | BenAdmin | 0 | KUEM | 1 |

Activity page

Activity Tab

CBR Action (COBRA action) Describes the type of event that took place.

Activity Source Indicates who or what initiated the event.

Ben Rcd# (benefit record number) Indicates the benefit record affected by the event.

Coverage Override Tab

| COBRA Activity | | | | | | | |
|-------------------------------------|-----------|-----------------|-------------------|-------------|--------------------------|---------------------|---------------------|
| Find View All First 1-3 of 3 Last | | | | | | | |
| Activity | | | Coverage Override | | | | |
| *EmpID | Empl Rcd# | Name | *Event Date | *CBR Action | Coverage Override | Alt Covrg Term Date | Coverage As-Of Date |
| KU0106 | 0 | Chae, Kevin | 05/25/2000 | TER | <input type="checkbox"/> | | |
| KU0115 | 0 | Mapin, George N | 05/01/2000 | DIV | <input type="checkbox"/> | | |
| KU0117 | 0 | Snow, Lucius | 03/01/2000 | TER | <input type="checkbox"/> | | |

CBR Act Src (COBRA action source) This identifies the source of the activity record.

Coverage Override Select when an alternate coverage termination date should be used to determine qualified COBRA coverage.

Alt Covrg Term Date (alternate coverage termination date) The date when coverage was previously terminated. Required when the coverage override flag is selected.

Covrg As-Of Date (coverage as of date) The date that coverage should begin if the event is fully qualified. Optional; automatically set to the COBRA event date if left blank.

See Also

PeopleSoft Benefits Administration PeopleBook, “Defining Eligibility Rules,” “Creating Event Rules,” and “Understanding the Benefits Administration Process”, Event Maintenance and COBRA Administration

Running the COBRA Process

This section provides an overview of the COBRA process and describes how to:

- Run the process.
- Understand COBRA event status.
- Assign beneficiaries to benefit plans.
- Determine eligible plan types for beneficiaries.
- Determine eligible options for beneficiaries.
- Determine COBRA costs.
- Process secondary qualified COBRA events.
- View error messages.

Understanding the COBRA Process

The COBRA process determines employee and dependent eligibility for COBRA benefit coverage.

For an employee or dependent to become a qualified COBRA beneficiary, the following two requirements must be met:

- The person must have experienced a qualifying event.
- The person must have health coverage on the day of the qualifying event and have lost coverage.

If these requirements are met, COBRA process assigns the beneficiary a benefit program and allows that person to elect COBRA health coverage.

Pages Used to Run the COBRA Process

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|------------------|--------------------|---|--|
| Run Control | COBRA_RUNCTL | Compensate Employees, Administer COBRA, Process, Run Control, COBRA Process Run Control | Determine COBRA eligibility. |
| Process Messages | COBRA_MESSAGES | Compensate Employees, Administer COBRA, Inquire, Messages, COBRA Process Messages | View error messages for the COBRA process. |

Running the COBRA Process

Access the Run Control page.

Run Control

Run Control ID: 1 [Report Manager](#) [Process Monitor](#)

Process Date: 08/24/2000

Restart Information

COBRA Processing Phase: Ready

Process Overage Dependents

Chk Point Interval in Minutes:

Restart Position

| | |
|---------------------|--------------------------|
| EmplID: | Benefit Program: |
| Empl Rcd#: 0 | CBR Evt Id: |
| Ben Rcd#: 0 | COBRA Event Date: |
| Dep/Benef: | COBRA Action: |

Run Control page

| | |
|--|---|
| COBRA Processing Phase | Displays the phase where processing begins. Possible phases are: <i>Ready:</i> Ready for processing. <i>Overage:</i> Processing overage dependents. <i>Activity:</i> Processing COBRA activity. <i>Qualify:</i> Processing qualifying events. <i>Participant:</i> Processing COBRA participants. <i>Complete:</i> Processing completed. |
| Process Overage Dependents | Leave clear to skip overage dependent processing during the batch run. |
| Chk Point Interval in Minutes (check point interval in minutes) | Enter the number of minutes before the process commits information that's been processed so far and updates the information displayed in the Restart Position group box. If an error occurs, the system restarts the process from the last checkpoint. |
| Restart Position | Displays the position to restart the COBRA process from if a system failure occurs. |

Understanding COBRA Event Status

Once a COBRA event has been triggered (online or through Benefits Administration), the COBRA process determines whether any employees or dependents have lost health coverage due to the event. The system considers these people to be qualified COBRA beneficiaries.

Each person analyzed by the COBRA process receives three status values:

- Event qualification status.
- Initial event status.
- Secondary event status.

The event qualification status identifies participants who qualify for COBRA. Values are:

- Not COBRA Qualified
- COBRA Qualify Error
- COBRA Qualified
- Qualify Pending
- Unprocessed

The initial event status tracks the process of the event in the COBRA cycle; it also marks whether participants have their options prepared and are notified of coverage. Values include:

- Qualify Pending
- Qualified
- Not Qualified
- Options Prepared
- Notified
- Election Entered
- Election Error
- Election Enrolled
- Enrollment Complete

The secondary event status is always Not Qualified unless the COBRA participant has been affected by a secondary event, such as divorce or Medicare entitlement. Other values include:

- Qualify Pending
- Qualified

- Notified
- Coverage Extended

When a participant is enrolled in COBRA coverage through an initial event and a qualified secondary event occurs for all of that participant's plans, the system sets the participant's initial event status to Not Qualified.

In the case of a combination event, which acts as an initial event for certain plans and as a secondary event for other plans, plans for which the combination event acts as a secondary event are set to Not Qualified. Initial event status values for plans where the combination event acts as an initial event are set to appropriate levels for the current stage of processing.

Status values for initial and secondary events are updated as participants move through the COBRA process.

See Also

Processing Secondary COBRA Qualifying Events

Assigning Qualified COBRA Beneficiaries to Benefit Programs

Benefit program assignment differs for COBRA events initiated by the Base Benefits business process and PeopleSoft Benefits Administration.

If a COBRA event is initiated by Base Benefits, the system assigns each qualified beneficiary to the benefit program that the employee was enrolled in on the day prior to the COBRA event date.

If the event is processed through PeopleSoft Benefits Administration, then the system determines benefit program eligibility for each qualified COBRA beneficiary, using the eligibility parameters from the latest run of PeopleSoft Benefits Administration and the qualified beneficiary's ZIP code. If no benefit programs satisfy this eligibility criteria, then the participant is assigned to the benefit program enrolled in on the day prior to the COBRA event date.

Note. This process only occurs for qualified participants who have a COBRA process status of Open For Processing (as opposed to Closed or Void)

See Also

Adjusting and Reprocessing COBRA Events

PeopleSoft Benefits Administration PeopleBook, "Understanding the Benefits Administration Process", Event Maintenance and COBRA Administration

Determining Eligible Plan Types

Beneficiaries are eligible for all COBRA-qualified group health plan types they were enrolled in prior to the COBRA event. This includes all Health (1x) plan types and the Health FSA (60) plan types.

In order for a plan type within a specific benefit program to be designated as COBRA-qualified, you must select the COBRA Plan check box in the Plan Type and Option page of the Benefit/Deduction Program component.

Determining Eligible Options

Eligible options are determined for each qualified plan type.

For employees, spouses, and ex-spouses, eligible options must satisfy the following criteria:

- The benefit plan associated with the options matches the benefit plan of the lost coverage of the employee, spouse, or ex-spouse.
- The coverage code has the COBRA Coverage Set field selected and is less than or equal to the coverage code of the lost coverage of the employee, spouse, or ex-spouse.
- For spouses and ex-spouses, the coverage code selected cannot *require* a spouse or ex-spouse.

For all dependents besides spouses and ex-spouses, eligible options must satisfy the following criteria:

- The benefit plan associated with the options matches the benefit plan of the dependent's lost coverage.
- The dependent's coverage code is Employee Only.

Benefits Administration uses a different method to determine option eligibility.

See Also

PeopleSoft Benefits Administration PeopleBook, “Understanding the Benefits Administration Process”, Event Maintenance and COBRA Administration

Calculating COBRA Costs for Eligible Options

| |
|---------------------------------|
| To calculate COBRA cost: |
|---------------------------------|

1. Access the Benefit Program page.
2. Enter the COBRA percentage amount.

The COBRA process calculates a charge for each option using the sum of the total

coverage costs (employee plus employer) multiplied by the surcharge defined here.

3. Enter the COBRA disabled surcharge percentage.

If the COBRA participant is *disabled*, the COBRA cost for months 19-29 is multiplied by this surcharge.

When you select Waive COBRA Surcharge on the COBRA Event Rules Table page for a specific COBRA event classification, the system does not add the COBRA surcharge or disabled surcharge.

COBRA charges are sent to the COBRA beneficiary through Benefits Billing processes, as long as Benefits Billing is selected in the Products page of the Installation component.

See Also

“Implementing Benefits Billing”

Processing Secondary COBRA Qualifying Events

Although COBRA governmental regulations describe secondary COBRA qualifying events should be processed, PeopleSoft event rules allow for a different implementation of secondary event processing.

Three fields defined on the Event Rules page are used to process secondary events.

| | |
|---------------------------------------|--|
| Secondary Event Role | Identifies whether the event can be considered a secondary event. |
| Second Event Additional Months | Defines how many months the secondary event extends a COBRA participant’s coverage. |
| Secondary Event Add Mode | Defines whether the additional months extend the coverage 36 months from the coverage begin date of the initial event or add 36 months to the COBRA event date of the secondary event. |

See Also

“Setting Up COBRA Administration”

Processing Enrollments for Secondary Events

Viewing Error Messages

Access the Process Messages page.

| Process Messages | |
|----------------------|--|
| COBRA Messages | |
| EmpID: | KU0115 Mapin,George N |
| Benefit Rcd#: | 0 CBR Evt Id: 1 |
| Dep/Benef: | |
| Message ID: | 000258 |
| Description: | The system has generated a billing enrollment for a FSA plan. The billing system can only calculate flat amount charges for FSA plans. Please put the proper flat amount in the billing enrollment record. (MSGdata1: Plan type, MSGdata2: COBRA event ID, MSGdata3: Effective date of enrollment) |
| Message Data: | 60 001 2000-03-01 |

Process Messages page

| | |
|--|--|
| Benefit Rcd# (benefit record number) | The employee benefit record number that was affected by the COBRA event. |
| CBR Evt Id (COBRA event identification) | The identification number assigned to the event by the COBRA process. |
| Dep/Benef (dependents/beneficiaries) | Any relevant dependents or beneficiaries. |

Creating Notification Letters

This section describes how to:

- Determine notification recipients.
- Print notification letters for initial events.
- Print notification letters for secondary events.
- Reprint notification letters.

See Also

“Processing Enrollments for Secondary Events”

PeopleSoft Application Fundamentals for HRMS PeopleBook, “Appendix: PeopleSoft Application Fundamentals for HRMS Reports

Pages Used to Print Notification Letters

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|---|--------------------|--|--|
| COBRA Qualify Ltr (COBRA qualify letter) | RUNCTL_CBR001 | Compensate Employees, Administer COBRA, Report, Initial Notification Letter, COBRA Initial Qualify Letter | Print notification letters for initial COBRA events. |
| Secondary Evt Ltr (secondary event letter) | RUNCTL_CBR002 | Compensate Employees, Administer COBRA, Report, Secondary Notification Letter, COBRA Secondary Event Letter | Print notification letters for secondary COBRA events. |
| Letter Reprinting | CBR_PRT | Compensate Employees, Administer COBRA, Report, Letter Reprint, COBRA Letter Reprinting | Select parameters for reprinting notification letters. |

Determining Notification Recipients

The qualifying event determines recipients.

- For termination, reduction in hours, and retirement events, the employee and each covered dependent are notified.
- When Medicare entitlement or death of employee events occur, each dependent is notified.
- When divorce or loss of dependent status events occur, the spouse or dependent is notified.

Printing Notification Letters for Initial Events

Access the COBRA Qualify Ltr page.

COBRA Qualify Ltr page

The Initial Notification Letter process generates letters for COBRA participants with an initial event status of Options Prepared and an event status of Open For Processing. Letters include:

- The nature of the qualifying event and the date it occurred.
- The last day of active coverage of the qualified participant's original benefit plans.
- The plan types for which the qualified participant is eligible to receive COBRA coverage.
- The COBRA coverage start and end dates for each plan, and the response date by which the qualified participant must notify you of their elections.

Along with each initial notification letter, the system prints a COBRA continuation coverage election form for employees to record their elections.

Once an initial notification letter is generated for a qualified COBRA participant, the initial event status is changed to Notified. The election end date is calculated for each plan type as 60 days past the latter of the notification date (on the notification letter) or the loss of coverage.


| | |
|-------------------------------------|--|
| As of Date | Enter the date for the time period that you want the letters. |
| 'Reprint' Appears on Letters | Select this check box if you want the word <i>Reprint</i> to appear on the letter. |
| Reprint ID | Select the ID number associated with the letters that you want reprinted. |

Printing Notification Letters for Secondary Events

Access the Secondary Evt Ltr page.

Secondary Evt Ltr


Run Control ID: 1 [Report Manager](#) [Process Monitor](#) Run

As Of Date: 

Reprint Parameters

Reprint Letter

'Reprint' Appears on Letters

Reprint ID: 

Secondary Evt Ltr page

The process for printing notification letters for secondary events is identical to that for initial events.

The secondary notification letter includes information on how long COBRA coverage is to be extended.

Recipients have their secondary event status changed to Notified and their process status changed to Closed for Processing.

Reprinting Notification Letters



Access the Letter Reprinting page.











Letter Reprinting

Print ID:

Reprint All Participants

Notification Date

Start Date:  End Date: 

| Reprint Detail | | | | | | Find View All | First  1 of 1  Last |
|--|------|--|--|--|----------------|---|---|
| *EmpID | Name | Ben Rcd# | COBRA Event Id | Dep/Benef | Dependent Name | Reprint all Dependents | |
| <input type="text"/>  | | <input type="text"/>  | <input type="text"/>  | <input type="text"/>  | | <input type="checkbox"/> |  |
|  | | | | | | First  1 of 1  Last | |

Letter Reprinting page

The Letter Reprint page enables you to reprint all letters, or to select specific employees for whom letters are to be reprinted. You can specify a notification date range for which the reprint is to occur.

Entering COBRA Elections and Waivers

This section provides an overview of COBRA election entry describes how to:

- Record COBRA elections and waivers.
- Validate and enroll elections.

Understanding COBRA Elections

Qualified COBRA beneficiaries can:

- Select COBRA for one or more plan types.
- Waive COBRA for all plan types.
- Revoke a waiver for one or more plan types.

Unlike Benefits Administration, COBRA participants can make enrollment decision at the plan type level.

Employees and dependents are individually qualified for COBRA coverage, and they can choose to be covered as individuals.

For example, suppose that an employee with Employee plus Spouse coverage terminates employment and loses all regular health coverage. The employee and the spouse both qualify for COBRA coverage. The spouse can select either to be covered individually as a non-employee (even if the employee doesn't elect coverage) or can continue to be covered under the employee as a dependent.

When you enter elections for qualified COBRA participants, the system sets their Initial Event Status to *Election Entered*.

See Also

“Managing Non-Employee COBRA Participants”

Pages Used to Enter COBRA Elections and Waivers

| Page Name | Object Name | Navigation | Usage |
|------------------|--------------------|---|---|
| Participant Data | COBRA_PARTIC_ENT1 | Compensate Employees, Administer COBRA, Use, Data Entry, COBRA Participant Data Entry | Record elections or waivers for COBRA coverage. |

Recording Elections and Waivers

Access the Participant Data page.

Participant Data

Snow, Lucius **EmpID:** KU0117 **Ben Rcd#:** 0
COBRA Event Id: 1 **Event Class:** Termination

Dep/Benef: 00 Snow, Lucius **COBRA Emplid:** KU0117
COBRA Election: **Election Date:** **Waive:** **Revoke:**

Participant Enrollment [Find](#) | [View All](#) First 1 of 3 Last

Plan Type: 10 **Covrg Begin:** 03/01/2000 **Covrg End:** 08/31/2001 **Election End:** 04/30/2000
COBRA Election: **Election Date:** **Waive:** **Revoke:**
Option Code: **Benefit Plan:** **Coverage Code:**
Provider ID: **Previously Seen**

Dependent Enrollment [Find](#) First 1 of 1 Last

| Dependent | Relationship | Health Provider ID | Prev Seen |
|-----------|--------------|----------------------|--|
| | | <input type="text"/> | <input type="checkbox"/> <input type="button" value="+"/> <input type="button" value="-"/> |

Participant Data page

COBRA Election

Indicate whether to elect or waive COBRA coverage.

To revoke a waiver of coverage, change the selection from *Waive* to *Elect*. Waivers cannot be revoked after the election end date.

Today's date is automatically set as the election, waive, or revoke date, although you can override that value for elections.

Participant Enrollment

Plan Type

Enter the elected option choices.

Covrg Begin (coverage begin), **Covrg End** (coverage end), **Election End**

Predetermined by the COBRA process.

COBRA Election

Elect or waive each plan type.

The election or waive date is automatically set, although you can override the election date.

Provider ID

For health plan types. Enter the name of the employee's doctor, an ID number, or any other format that the health provider requires.

Previously Seen

Select to indicate that the employee is a current patient of the indicated physician. Becomes available when information is entered into a provider ID is entered.

Once an election has been entered, validated and enrolled, the election cannot be changed without COBRA reprocessing. After reprocessing, you can add new elections or make election changes if the coverage election date is on or before the coverage election end date and if the elections have not been entered.

Validating and Enrolling Elections

The system reviews plan type, option code, and dependent/beneficiary elections made for qualified COBRA participants as their elections are saved. If all of the plan types for which the participant is eligible reflect either an enrollment election or waiver, the system changes the participant's initial event status to Enrollment Completed and the process status to Closed for Processing. If some of the plans have *not* had an entry made, the participant's initial event status changes to Enrolled (for the specific plan), and the process status remains Open for Processing. In either case, if errors are discovered, the initial event status becomes Election Error.

Enrollment in Health or FSA Plans

If the initial election status is Enrollment Completed or Enrolled, you can access health and/or FSA plan information in the Health Benefits and FSA Benefits pages.

Creation of Non-Employee Status

If a dependent elects individual COBRA coverage or has a qualifying second event, then that non-employee participant receives a system-generated employee ID.

Notification to Billing System

If Benefits Billing is selected in the Installation Table, validated and enrolled COBRA participants are enrolled in the Benefits Billing system for elected plan types. COBRA surcharges and coverage start and end are also sent to Benefits Billing

Validation and Enrollment Error Messages

Error messages generated during validation and enrollment can be viewed either by using the Process Messages page or by running the COBRA Error report. Each time the COBRA validation and enrollment process is run, error messages from the previous run are deleted.

See Also

Managing Non-Employee COBRA Participants

“Implementing Benefits Billing”

Viewing Error Messages

Processing Enrollments for Secondary Events

This section describes issues regarding:

- Initial event status and secondary events.
- Differences in individual and dependent coverage processing.
- Combination events.

Initial Event Status and Secondary Events

When a secondary event is processed, the system reviews the initial event to determine if its event status is Closed to Processing (indicating that the participant has made an election or waived COBRA coverage). If the initial event is not closed, the secondary event's status becomes Qualified Pending; the secondary event needs to be reprocessed after the initial event is closed.

This can happen if dependents are covered under an employee's coverage instead of electing independent coverage.

For example, suppose that an employee and her dependents become qualified beneficiaries after she terminates her employment. She enrolls in family coverage for plan types 10 and 11—covering herself, her spouse and her daughter—and waives plan type 14. As a result, the terminated employee's record is Closed to Processing. But the dependents' records remain Open for Processing, because they have not independently elected or waived coverage.

| |
|---|
| To close an initial event and reprocess a secondary event: |
|---|

1. A secondary event, such as a divorce or dependent marriage, occurs.
The HR system processes the personnel action.
The COBRA process evaluates the secondary event and returns a status of Qualified Pending.
2. Determine that the initial event is still Open for Processing because the dependent records were not waived or enrolled.
3. Waive or elect options for the dependents and run the COBRA process to close the initial event.
4. Use the Event Status Update page to reprocess the secondary event by changing the reprocess status for the secondary event to Qualify Event.

After you run the COBRA process again, the secondary event should be set to Qualified.

See Also

Adjusting and Reprocessing COBRA Events

Differences in Individual and Dependent Coverage Processing

When secondary events occur, COBRA participants with individual coverage are processed differently than those with dependent coverage.

For participants with individual coverage, a secondary event extends coverage according to the defined secondary event rules. The system deletes the existing termination record, reinserts it into the coverage begin date, and sets an effective date equal to the extended COBRA coverage end date + 1. The COBRA enrollment status is set to Coverage Extended.

Participants with dependent coverage are switched to individual COBRA participants, with individual COBRA coverage as of the COBRA event date of the secondary event. The system automatically establishes the participant as a non-employee in the system and enrolls the participant in employee-only coverage for all plan types that meet this condition. The employee-only coverage is within the same benefit plan that the participant was covered in as a dependent under COBRA. The coverage end date is calculated based on the predefined secondary event rules, and the COBRA enrollment status is set to Coverage Inserted.

Combination Events

A COBRA event can be an initial event for one plan type and a secondary event for another type. For example, suppose that an employee has Employee Plus Spouse coverage for plan types 10, 11, and 14. Then the employee transfers and both the employee and the spouse lose coverage under plan types 11 and 14; they are eligible for 18 months of COBRA coverage for these types, and they elect this coverage.

The employee divorces while the COBRA coverage is still active. The divorce event causes the employee's ex-spouse to lose coverage for plan type 10 (an initial event); the ex-spouse is qualified for 36 months COBRA coverage under that plan. The divorce is also a secondary event for plan types 11 and 14; the ex-spouse is qualified to have coverage extended for those plans for up to 36 months from the original coverage begin date.

The two events—the initial event for plan type 10 and the secondary event for plan types 11 and 14—progress through the COBRA system independently in terms of notification letters and ongoing status indicators.

Managing COBRA Events

This section describes how to:

- Review COBRA event summaries.
- Adjust and reprocess COBRA events.

Pages Used to Manage COBRA Events

| Page Name | Object Name | Navigation | Usage |
|---------------|------------------|--|---|
| Event Summary | COBRA_EVENT_INQ1 | Compensate Employees, Administer COBRA, Inquire, Event Summary, COBRA Event Summary | Review information about COBRA events and associated beneficiaries. |
| Event Status | COBRA_STATUS1 | Compensate Employees, Administer COBRA, Use, Event Status Update, COBRA Event Status | Adjust, reprocess, and void COBRA events. |

Reviewing COBRA Event Summaries

Access the Event Summary page.

Event Summary

Mapin, George N EmplID: KU0115 Ben Rcd#: 0

Event Status [Find](#) | [View All](#) First 1 of 1 Last

CBR Evt Id: 1 **Empl Rcd#:** 0 **Event Process Status:** Closed for Processing
Event Date: 03/01/2000 **BAS Evt ID:** 1 **Event Qualification Status:** COBRA Qualified
Event Class: Termination **BAS Sched ID:** KUEM **Event Reprocess Indicator:** Normal Processing

Employee/Dependent Status [Find](#) | [View All](#) First 1 of 4 Last

Dep/Benef: 00 Mapin, George N **Relationship:** Employee
COBRA Election: Elect **COBRA Emplid:** KU0115

Processing Information

Qualification Status: COBRA Qualified **Initial Event Status:** Enrollment Complete
Process Status: Closed **Secondary Event Status:** Not Qualified
Reproc Indicator: Normal Processing **BAS Assign Status:** Program Elig Assign None
Benefit Program: GBI US Fulltime Benefit Pgm

Date Information

Election: 03/15/2000 **Notifications Dates**
Waive: **Initial:** **Second:** **Term Notification:**
Revoke:

Event Summary page (1 of 2)

| Plan Status | | | |
|--------------------------|-----------------------|---------------------|---------------------|
| Plan Type: | 10 | Covrg Election: | Elect |
| Covrg Cdt: | 4 | Option Code: | 34 |
| | Family | Benefit Plan: | KUMED |
| | | Covrg Begin: | 03/01/2000 |
| | | End: | 08/31/2001 |
| Event/Status Information | | | |
| Process Status: | Closed for Processing | Event Type: | Initial COBRA Event |
| Reprocess Indicator: | Normal Processing | Initial Event Id: | |
| Enrollment Status: | Enrolled | Second Event Id: | |
| Date Information | | | |
| Elect: | 03/15/2000 | Waive: | |
| Elect End: | 04/30/2000 | Revoke: | |
| | | Term Date: | |
| | | Termination Reason: | Not Terminated |

Event Summary page (2 of 2)

Adjusting and Reprocessing COBRA Events

Access the Event Status page.

| Event Status | | | | | | | |
|---------------------------|---------------------|-----------------|---|-------------------|--|----------------------|-------------|
| Mapin, George N | | | EmpID: KU0115 | | | | |
| Event Id: | 1 | Event Date: | 03/01/2000 | Empl Rcd#: | 0 | Event Class: | Termination |
| Qualification Status: | COBRA Qualified | | Ben Rcd#: | 0 | *Process Status: | Closed | |
| *Reprocess Indicator: | Normal Processing | | <input type="checkbox"/> COBRA Event Conflict | | <input type="checkbox"/> BAS Data Change | | |
| Employee/Dependent Status | | | | | | | |
| Dep/Benef: | 00 | Mapin, George N | | *Process Status: | Closed for Processing | | |
| Qualification Status: | COBRA Qualified | | *Reprocess Indicator: | Normal Processing | | | |
| Init Event Status: | Enrollment Complete | | Second Event Status: | Not Qualified | | | |
| Plan Status | | | | | | | |
| Plan Type | Event Type | COBRA Election | Event ID | *Process Status | Enrollment Status | *Reprocess Indicator | |
| 10 | Initial | Elect | | Closed | Enrolled | Normal Processing | |
| 11 | Initial | Elect | | Closed | Enrolled | Normal Processing | |
| 60 | Initial | Elect | | Closed | Enrolled | Normal Processing | |

Event Status page

Reprocess Indicator

Set to reprocess a COBRA phase for events, participants, or plan types. .

To reprocess any level, the process status for that level and any above it must be Open for Processing.

You cannot reprocess initial events that have secondary events dependent on them.

At the event level, you can only reprocess to **Prepare Options** if the **Option Prepare** phase has already been completed.

At the participant plan type level, you can only select **Elect Options** when the plan type is Enrolled and the associated event is an initial event.

After choosing a value, run the COBRA process again to reprocess to the selected status.

COBRA Event Conflict is Selected if the system determines that two or more events are in conflict with each other. An example is when an event is entered and processed, and another event is entered with an earlier date than the first event.

Sends a message to the COBRA administrator to analyze the conflicting events and take any appropriate actions.

Voiding Events, Participants or Benefit Plans

When you enter Void Event in the Reprocess Indicator at the COBRA event level, the system ignores all reprocessing indicators at the lower levels. All COBRA participants and participant plans are voided, and all enrolled COBRA benefits are deleted. Notification is sent to the Benefits Billing system to terminate billing for voided participants.

When you enter Void Event in the Reprocess Indicator at the COBRA participant level, the result is similar to voiding a COBRA event. The COBRA participant record and all COBRA benefit plan records associated with that participant are deleted, and Benefits Billing is notified to terminate billing.

Voiding a COBRA benefit plan associated with an initial event deletes all enrolled COBRA benefit records associated with that plan; Benefits Billing is notified to terminate billing. Voiding a COBRA benefit plan associated with a secondary event readjusts termination dates back to those associated with the initial plan; Benefits Billing is notified to adjust billing.

Qualifying Events

When you enter Qualify Event in the Reprocess Indicator at the COBRA event level, all reprocessing indicators at the lower levels are ignored. All enrolled COBRA benefits are deleted.

Preparing and Electing Options

When you set Prepare Options at the event level, if a participant or plan has a Reprocess Indicator setting of Void Event, that reprocessing command takes precedence over Prepare Options. For example, if you want to void the COBRA election plan type 10 and prepare options for plan type 11, the system first voids plan type 10 and then prepares options for plan type 11.

Prepare Options reprocessing deletes all of the plan, option, and dependent records associated with that event. Benefits Billing is notified to terminate billing.

See Also

Running the COBRA Process

Managing COBRA Benefit Plan and Dependent Information

This section describes how to:

- Change benefit programs.
- View or update health plan elections.
- Enroll dependents in health plans.
- View or update FSA enrollments.
- Add new dependents.
- Enter dependent address information.
- Enter dependent details.

Pages Used to Manage COBRA Benefit Plan and Dependent Information

| Page Name | Object Name | Navigation | Usage |
|---|--------------------|---|---|
| Prog Participatn (program participation) | COBRA_PROG_PARTIC1 | Compensate Employees, Administer COBRA, Use, Benefit Program Participation, Benefit Program Participation | Change benefit program participation for Open Enrollment and Family Status Change events. |
| Election | COBRA_HEALTH1 | Compensate Employees, Administer COBRA, Use, Health Benefits, Election | View or update health plan elections. |
| Dependents | COBRA_HEALTH2 | Compensate Employees, Administer COBRA, Use, Health Benefits, Dependents | Enroll dependents in health plans. |
| FSA Benefit Enrol (FSA benefit enroll) | COBRA_FSA | Compensate Employees, Administer COBRA, Use, FSA Benefits, COBRA FSA Benefit Enrollment | View or update FSA enrollments. |

| Page Name | Object Name | Navigation | Usage |
|------------------|--------------------|--|--|
| Name | COBRA_DEP_BENEF1 | <ul style="list-style-type: none"> • Compensate Employees, Administer COBRA, Use, Dependent/Beneficiary Data, Name • Compensate Employees, Administer Base Benefits, Use, Dependent/Beneficiary Data, Personal Profile | Add new dependents for COBRA participants (including non-employee participants). |
| Address | COBRA_DEP_ADDR | <ul style="list-style-type: none"> • Compensate Employees, Administer COBRA, Use, Dependent/Beneficiary Data, Address • Compensate Employees, Administer Base Benefits, Use, Dependent/Beneficiary Data, Personal Profile | Enter dependent address information. |
| Personal Profile | COBRA_DEP_BENEF2 | <ul style="list-style-type: none"> • Compensate Employees, Administer COBRA, Use, Dependent/Beneficiary Data, Personal Profile • Compensate Employees, Administer Base Benefits, Use, Dependent/Beneficiary Data, Personal Profile | Enter dependent details. |

Changing Benefit Programs

Access the Prop Participatn page.

Prog Participatn

Mapin, George N ID: KU0115 Empl Rcd#: 0

Benefit Program Enrollment Find | View All First 1 of 1 Last

*Effective Date: 03/01/2000 COBRA Event Id: 1

Benefit Program: KU1 GBI US Fulltime Benefit Pgm Currency Code: USD

Prog Participatn page

To change the benefit program, use the search function to select a new one.

Viewing and Updating Health Plan Elections

Access the Election page.

Election Dependents

Mapin, George N ID: KU0115 Empl Rcd#: 0

Plan Type Find | View All First 1 of 2 Last

*Plan Type: 10 Medical COBRA Event Id: 1

Coverage Find | View All First 1 of 2 Last

*Coverage Begin Date: 09/01/2001

*Coverage Election: Term *Election Date: 03/15/2000

Benefit Plan: Option:

Coverage Code:

Health Provider: Previously Seen

HIPAA Report Date (Emp):

Description: KU1 GBI US Fulltime Benefit Pgm Currency: USD

Health Benefits - Election page

- Coverage Begin Date** Automatically set to the date in the Event Summary 2 page.
- Coverage Election** Displays whether the COBRA health benefit record in view is currently elected or terminated.
- Coverage Code** When you exit this field, the monthly cost of the benefit is calculated.
- Health Provider** Enter the name of the employee's doctor, an ID number, or any other format that the health provider may require..
- Previously Seen** Indicate that the employee is a current patient of the indicated physician. Becomes available when a health provider is entered..

HIPAA Report Date (Emp)
(HIPAA Report Date
[employee])

Displays the date that the employee's certificate of creditable health coverage was printed, if health coverage was terminated. These certificates are guaranteed to employees by the Health Insurance and Accountability Act (HIPAA) of 1996; you can print them by running HIPAA reports.

Note. The certificate of creditable coverage lists all group health coverage that an employee had for the twelve month period prior to the date coverage ended.

Enrolling Dependents in Health Plans

Access the Dependents page.

The screenshot shows the 'Dependents' page for employee George N. Mapin (ID: KU0115, Empl Rcd#: 0). The page is divided into several sections:

- Plan Type:** Medical, COBRA Event Id: 1
- Coverage:** Coverage Begin Date: 09/01/2001
- Dependent/Beneficiaries:** A table with columns: *ID, Name, Relationship, Health Provider ID, Previously Seen. The table is currently empty.

Dependents page

ID Select a dependent ID to add available beneficiaries to the selected COBRA plan.

Health Provider ID Enter the name of the dependent's doctor, an ID number, or any other format that the health provider may require..

Previously Seen Select to indicate that the dependent is a current patient of the indicated physician. Becomes available when a health provider ID is entered.

Viewing and Updating FSA Enrollments

Access the FSA Benefit Enrol page.

FSA Benefit Enrol page

Use the **Coverage Election** field to view and change whether the displayed COBRA FSA plan is elected or terminated.

Adding Dependents

Access the Name page.

Name page

DepBenef Type Displays COBRA Only, because this component is for COBRA dependents.

Managing Non-Employee COBRA Participants

When a COBRA-qualified dependent selects individual coverage after an initial event or undergoes an event that involves a loss of dependent status, that dependent becomes a non-

employee COBRA participant. Non-employee COBRA participants can declare their own dependents and change benefit programs and plans.

This section describes how to:

- Enter non-employee personal profile information.
- Maintain non-employee identity and department security information.
- Convert non-employee individual coverage to dependent coverage.

Note. When you add a non-employee through COBRA, the non-employee record may not show in other PeopleSoft HR processes until the Refresh Personal Data process is run.

See Also

PeopleSoft Human Resources PeopleBook: Administer Workforce, “Hiring Your Workforce,” Hiring an Employee and “Updating Workforce Information”

Pages Used to Manage Non-Employee COBRA Participants

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|---|--------------------|--|---|
| Non-Employee Data - Name Page | PERSONAL_DATA1 | Compensate Employees, Administer COBRA, Use, Non-Employee Data, Name | Update COBRA-qualified dependent information. |
| Non-Employee Data - Address Page | PERSONAL_DATA1B | Compensate Employees, Administer COBRA, Use, Non-Employee Data, Address | Update COBRA-qualified dependent information. |
| Non-Employee Data - Personal Profile Page | CBR_PERSONAL_DATA2 | Compensate Employees, Administer COBRA, Use, Non-Employee Data, Personal Profile | Update COBRA-qualified dependent information. |
| Identity/Dept Security (identify/department security) | CBR_PERSONAL_DATA3 | Compensate Employees, Administer COBRA, Use, Non-Employee Data, Identity/Dept Security | Maintain department security information for non-employee COBRA participants. |

Maintaining Non-Employee Identity and Department Security Information

| | | | | | | | |
|---------------------------------|--------------------------|------------------------|--------------------|-------------------------------------|--|------------------------|--|
| Names | | Address History | | Personal Profile | | Identity/Dept Security | |
| Name: Stankowski,Richard | | | | Non-Employee | | EmplID: C10001 | |
| National ID | | | | | | | |
| Country | *National ID Type | Description | National ID | Primary ID | | | |
| USA | PR | Social Security Number | 545-77-8854 | <input checked="" type="checkbox"/> | | | |
| Employment Information | | | | | | | |
| Empl Rcd#: 0 | | Ben Rcd#: 0 | | Service Date: 07/01/1999 | | | |
| Job Information | | | | | | | |
| *Effective Date | *Business Unit | *Department | | | | | |
| 07/15/2000 | GBIBU | 13000 | | | | | |

Identity/Dept Security page

- Country** Enter the country that issued the worker’s national ID. Values are stored in the Country Table.
- National ID Type** Populated automatically from the National ID Type Table. You can select another type if you want.
- National ID** Enter the worker’s national ID number. The system checks the format of your entry against the default format from the National ID Type Table.
- Primary ID** Select if the national ID is the employee’s primary ID. If this is the only data row for this person, the system selects the check box by default.
- Employment Information** During the COBRA processing, automatically populated with the original data of the employee that experienced the COBRA event.
- Job Information** Review and update a historical record of the non-employee participant's business unit and department affiliations.

Converting Non-Employee Individual Coverage to Dependent Coverage

When a spouse or ex-spouse COBRA participant enrolls in individual non-employee COBRA coverage, the child dependents of the employee are inherited as dependents for the non-employee.

All non-employee participants are assigned a unique system-generated employee ID, for which the numbering convention is established in the Installation Table.. All dependents of the non-employee participant also have this new COBRA employee ID, along with their original dependent/beneficiary ID.

When a secondary event occurs, however, all an employee's dependents become independently covered. For example, a former employee elects COBRA coverage for himself, his spouse, his son, and his daughter. He later dies, which qualifies as a secondary event for the dependents. The spouse, son, and daughter all become non-employee participants, and are assigned IDs as shown in the following table.

| Person | Employee ID | Dependent/Beneficiary ID |
|-------------------------|--------------------|---------------------------------|
| Employee (Deceased) | Z001 | 00 |
| Spouse (Non-employee) | C00015 | 01 |
| Son (Non-employee) | C00016 | 02 |
| Daughter (Non-employee) | C00017 | 03 |

If no further action is taken, the system creates COBRA health benefit records with employee-only coverage for the spouse and dependents, with their COBRA coverage extended to a total of 36 months from the initial event.

However, the spouse can also enroll the children as dependents under her coverage. To change from independent coverage for non-employees to dependent coverage, follow the steps below.

To convert non-employee independent coverage to non-employee dependent coverage:

1. Access the COBRA health benefit record for the non-employee who's remaining independently covered.
2. Change the coverage code to an appropriate coverage code for dependent coverage for the plan types affected and add the dependent IDs to cover.
3. Access the Participation Termination page and create Voluntary Termination records for the dependents that are now covered under the spouse. The termination date for each termination record should be the same date that dependent coverage begins.

See Also

Managing COBRA Benefit Plan and Dependent Information

Terminating COBRA Coverage

COBRA can be terminated:

- Automatically, when the COBRA coverage end date is reached.
- Manually, when the COBRA participant fails to pay bills or requests to terminate coverage ahead of the scheduled end date.

This section describes how to:

- Manually terminate COBRA coverage.

- Send termination letters for participants with plans about to expire.

Pages Used to Terminate COBRA Coverage

| Page Name | Object Name | Navigation | Usage |
|--------------------------------------|-------------------|---|--|
| Participant Term | COBRA_PARTIC_TERM | Compensate Employees, Administer COBRA, Use, Participation Termination, COBRA Participant Termination | Manually terminate COBRA coverage if bills are unpaid or participants request. |
| Termination Ltr (termination letter) | RUNCTL_CBR003 | Compensate Employees, Administer COBRA, Report, Termination Letter, COBRA Termination Letter | Send letters to COBRA participants with plans about to expire. |

Manually Terminating COBRA Coverage

Access the Participant Term page.

| Participant Term | | | | | | | |
|-----------------------|----------------|-----------------|---------------------|-------------------|-------------------|----------------------|--------------------|
| Mapin, George N | | EmpID: | KU0115 | Ben Rcd#: | 0 | COBRA Event Id: | 1 |
| Dep/Benef: | 00 | Mapin, George N | | COBRA Emplid: | KU0115 | | |
| COBRA Election: | Elect | | Election Date: | 03/15/2000 | | | |
| Participant Elections | | | | | | | |
| Plan Type | COBRA Election | Election Date | Coverage Begin Date | Coverage End Date | Enrollment Status | Termination Date | Termination Reason |
| 10 | Elect | 03/15/2000 | 03/01/2000 | 08/31/2001 | Enrolled | <input type="text"/> | Not Terminated |
| 11 | Elect | 03/15/2000 | 03/01/2000 | 08/31/2001 | Enrolled | <input type="text"/> | Not Terminated |
| 60 | Elect | 03/15/2000 | 03/01/2000 | 08/31/2001 | Enrolled | <input type="text"/> | Not Terminated |

Participant Term page

For each plan type to terminate, enter the termination date and reason.

When you save this page, the coverage end date of the enrolled plan type is adjusted to the termination date.

Sending Termination Letters

Access the Termination Ltr page.

Termination Ltr

Run Control ID: 1 [Report Manager](#) [Process Monitor](#) [Run](#)

Start Date: 01/01/2000

End Date: 06/01/2000

Reprint Parameters

Reprint Letter

'Reprint' Appears on Letters

Reprint ID:

Termination Ltr page

Termination letters are printed for employees whose coverage ends during the period between the start and end dates.

See Also

PeopleSoft Application Fundamentals for HRMS PeopleBook, “Appendix: PeopleSoft Application Fundamentals for HRMS Reports and “Generating Form Letters”

Manually Enrolling Participants in COBRA Coverage

You can bypass the automated COBRA Administration batch process and force the system to enroll employees and dependents into COBRA health benefits.

When you bypass the batch process, participants do not require COBRA-qualifying events in order to be eligible for COBRA benefits. Instead, the system automatically gives all participants enrolled in COBRA coverage through these pages a COBRA event ID of 900.

Note. When you manually enroll an employee or dependent in COBRA coverage, subsequent COBRA processing, such as secondary event processing, is not aware of the manually enrolled COBRA coverage.

When you add a non-employee through COBRA, the non-employee record may not show in other PeopleSoft HR processes until the Refresh Personal Data process is run.

Warning! Because these pages ignore the processing rules that regulate COBRA coverage eligibility, manually process COBRA coverage only after careful consideration.

This section describes how to:

- Manually change employee dependents to non-employees.

- Manually assign participants to benefit programs.
- Manually enroll participants in benefit plans.
- Manually enroll dependents in benefit plans.

See Also

Managing COBRA Benefit Plan and Dependent Information

Managing Non-Employee COBRA Participants

PeopleSoft Human Resources PeopleBook: Administer Workforce, “Updating Workforce Information”

Pages Used to Manually Enroll Participants in COBRA Coverage

| Page Name | Object Name | Navigation | Usage |
|--|--------------------|--|--|
| Non-Employee | CBR_MANUAL_ENT1 | Compensate Employees, Administer COBRA, Use, Non-Employee Data (Manual), Create COBRA Non-Employee | Manually establish an employee dependent as a non-employee, in preparation for manually enrolling the dependent into COBRA coverage. |
| Program Partic (program participation) | CBR_MANUAL_PARTIC1 | Compensate Employees, Administer COBRA, Use, Benefit Prog Partic (Manual), COBRA Program Participation | Manually assign an employee or COBRA non-employee to a benefit program or make changes to that manual assignment over time. |
| Elections | CBR_MANUAL_HEALTH1 | Compensate Employees, Administer COBRA, Use, Health Benefits (Manual), Elections | Manually enroll participants in COBRA health benefits. |
| Dependents | CBR_MANUAL_HEALTH2 | Compensate Employees, Administer COBRA, Use, Health Benefits (Manual), Dependents | Manually enroll dependents in COBRA health benefits. |

Manually Changing Employee Dependents to Non-Employees

Access the Non-Employee page.

Non-Employee

COBRA Manual Entry

EmplID:

Empl Rcd#:

Dep/Benef:

COBRA Event Date:

Non-Employee page

EmplID (employee ID) and **Empl Rcd#** (employee record number)

Enter the ID and employee record number for the employee that the non-employee participant is a dependent or beneficiary of.

Dep/Benef (dependent/beneficiary)

Enter the dependent or beneficiary number.

COBRA Event Date

Enter the event date for the non-employee participant's COBRA enrollment.

Save and Add Next

Click this button to save the information. A message appears informing you of the COBRA employee ID assigned to this person.

Take note of the new employee ID for the COBRA non-employee and click OK.

Manually Assigning Participants to Benefit Programs

Access the Program Partic page.

Program Partic

Stankowski, Karl ID: C10001 Empl Rcd#: 0

| Benefit Program Participation | | Find View All | First | 1 of 1 | Last |
|-------------------------------|---|-----------------|-------|--------|------|
| *Effective Date: | <input type="text" value="07/25/2000"/> | COBRA Event Id: | 900 | | |
| Benefit Program: | <input type="text"/> | Currency Code: | | | |

Program Partic page

The benefit program is assigned a COBRA event ID of 900.

Manually Enrolling Participants in Benefit Plans

Access the Elections page.

The screenshot displays the 'Elections' page for a participant named Stankowski, Richard. The page is divided into several sections:

- Participant Information:** Stankowski, Richard; ID: C10001; Empl Rcd#: 0.
- Plan Type:** Medical; COBRA Event Id: 1.
- Coverage Section:**
 - *Coverage Begin Date: (empty field)
 - *Coverage Election: Elect (dropdown menu)
 - *Election Date: 08/24/2000 (calendar icon)
 - Benefit Plan: (empty field)
 - Coverage Code: (empty field)
 - Health Provider ID: (empty field)
 - HIPAA Report Date (Emp): (empty field)
 - Descr: GBI US Fulltime Benefit Pgm
 - Currency: USD
 - Option: (checkbox) Previously Seen

Elections page

The health benefit record of the selected participant receives a COBRA Event ID of 900.

| | |
|--------------------------------|---|
| Coverage Begin Date | Automatically set to today's date. |
| Coverage Election | Elect or terminate a benefit plan. |
| Option | The system displays the COBRA option that goes with the selected benefit plan. |
| Health Provider ID | Enter the name of the employee's doctor, an ID number, or any other format that the health provider may require.. |
| Previously Seen | Select to indicate that the employee is a current patient of the indicated physician. Becomes available you enter a health provider ID. |
| HIPAA Report Date (Emp) | Displays the date that the employee's certificate of creditable health coverage was printed, if health coverage was terminated. These certificates are guaranteed to employees by the Health Insurance and Accountability Act (HIPAA) of 1996, and you can print them by running HIPAA Reports. |
| | Note. The certificate of creditable coverage lists all group health coverage that an employee had for the twelve month period prior to the date that coverage ended. |

Manually Enrolling Dependents in Benefit Plans

Access the Dependents page.

The screenshot displays the 'Dependents' page for a participant named Stankowski, Richard (ID: C10001, Empl Rcd#: 0). The page is divided into several sections:

- Plan Type:** Shows 'COBRA Event Id: 1' with expand/collapse buttons (+/-).
- Coverage:** Shows 'Coverage Begin Date', 'Benefit Plan', and 'Coverage Code' with expand/collapse buttons (+/-).
- Dependent/Beneficiaries:** A table with the following columns: ID, Name, Relationship, Health Provider ID, and Previously Seen. The table is currently empty.

Dependents page

Relationship

Identifies the relationship to the participant.

Dependent ID

Select the dependent ID to add available beneficiaries to the selected COBRA participant/plan type/benefit plan combination.

Health Provider ID

Enter the name of the employee's doctor, an ID number, or any other format that the health provider may require..

Previously Seen

Select to indicate that the employee is a current patient of the indicated physician. Becomes available when you enter a health provider ID.

Arranging Retroactive Benefits and Deductions

This chapter discusses how to:

- Activate retroactive benefits and deductions.
- Define retroactive benefits and deductions programs.
- Define retroactive benefit and deduction selection criteria for mass events.

Note. Because the Retroactive Benefit and Deduction facility involves PeopleSoft Payroll processes in the calculation of retroactive benefits and deductions and the loading of retroactive benefit and deduction totals to payroll, it is unavailable to those users who do not currently implement PeopleSoft Payroll.

Deductions based on *earnings* (such as garnishments or savings plan deductions) are *not* included in the retroactive benefits and deductions process. They are handled as part of the PeopleSoft Payroll adjustment process.

Activating Retroactive Benefits and Deductions

You must activate Retroactive Benefits/Deduction before using the Retroactive Benefit and Deduction facility.

| |
|---|
| To activate Retroactive Benefits and Deductions: |
|---|

1. Access the Installation Table - Product Specific page.
2. Select Retroactive Benefit and Deduction check box in Benefits Functions group box.

Defining Retroactive Benefit and Deduction Programs

Before you can start processing retroactive employee benefits and deductions, you must first define programs for individual and mass event processing using the Retroactive Benefit/Deduction Program Table.

The Retroactive Benefit/Deduction Program Table is divided into two pages:

- Use the first page to define the high-level information for your retroactive benefit and deduction program.
- Use the second page to define detail information for your retroactive benefit and deduction program.

Note. If you are setting up a *mass* retroactive benefits and deductions program, first define the program, and then define the request. Use the Retroactive Benefit and Deduction Program to define a Retro Ded Program ID (retroactive deduction program ID) and set up high-level program information. Then use the Retro Ben/Ded Mass Request (retroactive benefit/deduction mass request) page to define a Mass Retro Request ID (mass retroactive request ID) and to define detail selection information for your mass retroactive benefit and deduction program.

Page Used to Define Retroactive Benefit and Deduction Programs

| Page Name | Object Name | Navigation | Usage |
|---|----------------------|---|---|
| Retro Ben/Ded Program (retroactive benefit/deduction program) | RETRODED_PGM_T BL | Define Business Rules, Define Retroactive Process, Setup, Retro Ben/Ded Program, Retro Ben/Dedn Program Table | Define high-level information for your organization’s retroactive benefit and deduction programs. |

Defining Retroactive Benefit and Deduction Programs

Access the Retro Ben/Ded Pgm (retroactive benefit/deduction program) page.

The screenshot shows the 'Retro Ben/Ded Pgm' page with the following details:

- Retro Program ID:** KU1
- Program Definition:** Includes navigation options: Find | View All | First | 1 of 1 | Last
- *Effective Date:** 01/01/2000
- *Status:** Active
- *Retro Program Type:** Individual
- *Description:** US Individual Retro Ben/Ded
- Short Description:** US BenDed
- Refunds Paysheet Processing:** Includes checkboxes for Off Cycle and Sep Check.

Retro Ben/Ded Program (retroactive benefit/deduction program) page (1 of 2)

| Benefit/General Deductions | | | | | | | | | |
|--|---------|-----------------|--------------|------------|----------|-----------|-----------|----------|-----|
| Deductions Find View All First 1-8 of 85 Last | | | | | | | | | |
| Mass Retro Override | | | | | | | | | |
| Plan Type | Company | Benefit Program | Benefit Plan | Covrg Code | Ded Code | Ded Class | Base Flag | Job Flag | |
| Medical | | KU1 | KUHM01 | | | | | | + - |
| Medical | | KU1 | KUHM02 | | | | | | + - |
| Medical | | KU1 | KUHM03 | | | | | | + - |
| Medical | | KU1 | KUMED | | | | | | + - |
| Medical | | KU1 | KUMED1 | | | | | | + - |
| Medical | | KU1 | KUMED2 | | | | | | + - |
| Dental | | KU1 | KUDEN1 | | | | | | + - |
| Dental | | KU1 | KUDEN2 | | | | | | + - |

View All | First 1 of 1 Last

Retro Ben/Ded Program page (2 of 2)

Program Definition

Retro Program ID (retroactive program ID)

When you first select this page from the menu, enter a new or current Retro Program ID (retroactive benefit and deduction program ID). This ID links the retroactive benefit and deduction requests to a specific retroactive benefit and deduction program, which helps the system identify which benefits or deductions are eligible for retroactive processing.

Retro Program Type

The system assigns each retroactive benefit and deduction program a **Retro Program Type** (retroactive benefit and deduction program type) of *Individual* or *Mass*.

Individual programs apply to all of the employees and companies in your database; therefore, define only one individual program for that database. *Mass* programs apply to different groups of employees; therefore, you can define multiple mass programs with different Retro Program IDs for the same database.

Warning! If you change the **Retro Program ID** after retroactive benefit and deduction processing begins, improper retroactive benefit and deduction calculations will result.

Refunds Paysheet Processing

Off Cycle

This check box enables you to manage your one-time deduction refunds. In the event of a refund, the **Off-Cycle** field controls whether or not the retroactive benefit and deduction calculation program will create new one-time deduction refunds as an off-cycle deduction or an on-cycle deduction.

Off-cycle or separate check processing of retroactive benefits and deductions generally is used only when you are processing retroactive pay in the same cycle as regular pay. If you select **Off-Cycle**, the system treats each retroactive deduction associated with this program as an off-cycle one-time deduction refund, and delivers the refunds to your employees in separate checks from their regular paychecks.

If you do not select the **Off-Cycle**, the system treats the retroactive deductions associated with the program as on-cycle deductions and combines employee refunds with their regular paychecks.

Note. When you load your retroactive benefits or deductions to employee paysheets, the On- or Off-Cycle selection for the Retro Ben/Ded Payroll Load run control must match the On- or Off-Cycle selection for this field.

Sep Check (separate check)

Select this check box to indicate that the one-time deduction refund records associated with the retroactive benefit or deduction will be loaded to a separate check on the employee paysheets.

Deductions Tab

Base Flag

Select to have the system process retroactive benefits or deductions when the request is triggered by a change in the Annual Benefits Base Rate.

Job Flag

Select to have the system process retroactive benefits or deductions for individual retroactive benefit and deduction programs when the request is triggered by a change in the Compensation Rate or any of its related fields.

Mass Retro Override

If you are setting up a **Mass** retroactive benefit and deduction program, fill in the **Start Date Ovrld for Mass Retro** (start date override for mass retroactive benefit/deduction) and **End Date Ovrld for Mass Retro** (end date override for mass retroactive benefit/deduction) fields to override the process start date and process end date for the requests that are created.

Refunds Versus Deductions

The system only loads refunds to employee paysheets. In situations where the Retroactive Benefit and Deduction process finds that employees owe additional payments, the system collects these funds through the PeopleSoft Payroll arrears adjustment process. The system drops all employee retroactive benefits and deductions into the arrears balance via arrears adjustments. If there is enough money, the system will collect the amounts during the current payroll run, according to the arrears rules that you defined for that deduction.

See Also

“Retro Ben/Ded Payroll Load - Run Retro Ben/Ded”

“Triggering Mass Retroactive Benefit and Deduction Requests”

“Organizing Payroll Information for Base Benefits”

Defining Retroactive Benefit and Deduction Selection Criteria for Mass Events

We designed the Retroactive Benefit and Deduction Mass Request facility to give you the ability to create a large number of requests via a batch process. This is necessary when you retroactively update system-level pages that affect multiple employees. System-level pages that could generate mass retroactive benefit and deduction requests include the following:

- Deduction Table.
- General Deduction Table.
- Most benefit plan design tables (such as the Life and AD/D Plan Table).
- Calculation Rules Table.
- All rate tables.

Page Used to Define Retroactive Benefit and Deduction Selection Criteria for Mass Events

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|--|--------------------|---|---|
| Retro Ben/Ded Mass Request (retroactive benefit/deduction mass request) - Retro Mass Request | RETRODED_MASS_RQST | Define Business Rules, Define Retroactive Process, Setup, Retro Ben/Ded Mass Request, Retro Mass Request Definition | <p>Set up your mass retroactive benefit and deduction programs by assigning them a Mass Retro Request ID and by defining detailed information.</p> <p>To set up a new mass retroactive deduction and benefit program, enter a Mass Retro Request ID to open the page. The system uses the Mass Retro Request ID to generate mass retroactive benefit and deduction requests and</p> |

| Page Name | Object Name | Navigation | Usage |
|-----------|-------------|------------|--|
| | | | to calculate the retroactive benefit and deduction earnings based on those requests. |

Setting Up Mass Retroactive Benefit and Deduction Programs

Access the Retro Ben/Ded Mass Request (retroactive benefit/deduction mass request) - Retro Mass Request page.

Retro Mass Request

Mass Request ID: MRR1 Status: Not Proc.

Description:

Comments:

*Process Start Dt: *Process End Dt: 08/24/2000 *Retro Program ID:

*Selection Start Dt: *Selection End Dt: Delete Request

Hire Date: Service Date:

Selection Criteria Find | View All First 1 of 1 Last

*Company: Mass Seq#: 1

Union Code: Pay Group:

Business Unit: Reg/Temp: Full/Part Time:

Department: Job Elig Cal Days: Employee Type:

Job Code: Locn Elig Cal Days: Employee Class:

Location Code: Un Cd Elig Cal Days: Employee Status:

Retro Ben/Ded Mass Request (retroactive benefit/deduction mass request) - Retro Mass Request page

- Description**

Enter a description that explains the purpose of this mass retroactive benefit and deduction ID.
- Comments**

Describe the need for the particular mass retroactive benefit and deduction program that you are creating.
- Process Start Dt** (process start date) and **Process End Dt** (process end date)

Define the period during which the mass request calculates retroactive benefits or deductions. The **Process End Dt** is automatically set to today's date when a new **Mass Request ID** is created. The process start date becomes the effective date of the generated requests, except for cases where the selected employee begins to meet the criteria at some point after the start date, in which case that latter date is used as the effective date of the request.
- Retro Program ID** (retroactive benefit/deduction program ID)

Select an appropriate ID from the list. Only those retroactive benefit and deduction programs defined for *Mass* processing will appear.

| | |
|--|---|
| Selection Start Dt (selection start date) Selection End Dt (selection end date) | During the processing period set up by the Process Start and End Dates, the system searches employee records <i>active</i> between the Selection Start and Selection End Dates for the information specified in the Selection Criteria group box. |
| Delete Request | Use this check box to stop the mass retro benefit and deduction process if you have not yet run the calculation process for your Mass Retro ID. When you run the Mass Retro batch process, it deletes every Mass Request ID and related request that has this check box selected and has not yet been through the calculation process. |
| Hire Date | (Optional) Use to select employees that have a hire date on the Employment Table that is less than or equal to this date. If this field is blank, the system creates requests for employees that have a hire date less than or equal to the Selection End Dt . |
| Service Date | Functions the same way as the Hire Date field except that it refers back to the Employment Table's Service Date field. |
| Selection Criteria | The fields in this group box define the types of employees that the Mass Retro batch process looks for. You can set up multiple rows of selection criteria for your mass retroactive benefit and deduction program to open up a new one. |
| Company | Use this required field to indicate the company whose employees you want to process. You can have multiple rows of selection criteria with the same company if you want to change the values of the other fields. |
| Mass Seq# (mass sequence number) | Each time that you enter a new row of selection criteria, the Mass Seq# will be incremented forward by one. |
| Department, Job Code, and Location Code | These fields are linked to the Business Unit field. |
| Business Unit | You must define a business unit before entering Department, Job Code, and Location Code values. |
| Reg/Temp (regular/temporary), Full/Part Time, Employee Type, Employee Class, and Employee Status | (Optional) Specify additional selection criteria using valid values from the list boxes. |

Enter the other selection criteria as necessary. Values for all selection criteria fields that are blank will be selected by the system. If you want to use more than one of the available values of a particular field in your selection request, enter an additional row.

The three Elig Cal Days (eligible calculation days) fields are linked to the **Job Code**, **Location Code**, and **Union Code** fields. They each enable you to create selection requests for employees who have been assigned a specific job code, location or union code for a specific number of days. For each Elig Cal Days field, the system takes a look at the **Effective Date** of the selected job record.

CHAPTER 18

Processing Retroactive Benefits and Deductions

This chapter provides an overview of retroactive benefits and deductions and discusses how to:

- Trigger individual retroactive benefit/deduction requests.
- Trigger mass retroactive benefit/deduction requests.
- Handle duplicate requests.
- View retroactive benefit/deduction requests.
- Calculate retroactive benefits and deductions.
- Review and update calculated retroactive benefits and deductions.
- Load calculations into PeopleSoft Payroll for North America.

See Also

“Arranging Retroactive Benefits and Deductions”

Understanding Retroactive Benefits and Deductions

A retroactive change to employee or benefit-related data has an effective date prior to the last confirmed pay end date of the employee’s pay group. Retroactive changes to benefits and deductions might become necessary for a variety of reasons: late paperwork, data-entry errors, modified union contracts, and changes to employment laws, for example.

Base Benefits retroactive benefits and deduction features flag these events internally and create retroactive benefit/deduction requests that you can view by employee.

Triggers for individual events and mass events are defined differently. The system identifies individual events without any user intervention, while mass event processing occurs only by user request.

Note. Retroactive benefits and deductions features are only available if you also use PeopleSoft Payroll for North America. PeopleSoft Payroll for North America processes are used to calculate retroactive benefits and deductions and load retroactive benefit/deduction totals to payroll.

Triggering Individual Retroactive Benefit/Deduction Requests

Retroactive changes to the following pages and fields trigger PeopleCode to automatically generate an individual retroactive benefit/deduction request:

| <i>Application Component</i> | <i>Page</i> | <i>Trigger Fields</i> |
|------------------------------|-------------------------------|---|
| Maintain Payroll Data | General Deduction Data | All Fields |
| Administer Base Benefits | Health Benefits | All Fields |
| | Life and AD/D Benefits | All Fields |
| | Disability Benefits | All Fields |
| | Vacation Benefits | All Fields |
| | Benefit Program Participation | All Fields |
| Administer Workforce | Job Data 1 | Effective Date |
| | Job Data 3 | Comp Frequency Compensation Rate Change Amount Change Percent Annual Benefits Base Rate |
| | Benefit Program Participation | All Fields |

Note. With Benefits Administration, retroactive changes can be made to the above pages and fields as a result of Open Enrollment or Event Maintenance. System requests for retroactive benefits and deductions are created exactly as if you had made these changes manually.

(USF) Pages That Trigger Individual Retroactive Benefit and Deduction Requests

| <i>Application Component</i> | <i>Page</i> | <i>Trigger Fields</i> |
|--------------------------------|------------------------|-----------------------|
| Maintain Payroll Data (USF) | General Deduction Data | All Fields |
| Administer Base Benefits (USF) | FEHB Benefits | All Fields |
| | FEGLI Benefits | All Fields |

| <i>Application Component</i> | <i>Page</i> | <i>Trigger Fields</i> |
|------------------------------|---|---|
| | Benefit Program Participation | All Fields |
| Administer Workforce (USF) | PAR - Data Control | Effective Date |
| | Current Job - Compensation | Comp Frequency Compensation Rate Change Amount Change Percent Annual Benefits Base Rate |
| | Current Job - Benefit Program Participation | All Fields |
| | PAR - Compensation Data | Pay Rate Determinant Pay Basis Base Pay FEGLI Base |

Triggering Mass Retroactive Benefit/Deduction Requests

This section describes how to:

- Create a mass retroactive benefit/deduction program.
- Define a mass retroactive benefit/deduction request.
- Run the Mass Retro Request (mass retroactive request) process.

Page Used to Define Mass Retroactive Benefit/Deduction Requests

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|---|---------------------|--|--|
| Run Retro Ben/Ded (run retroactive benefit/deduction) | RUNCTL_RTRODEDM ASS | Compensate Employees, Manage Retroactive Processing, Process, Retro Ben/Ded Mass Request, Run Retro Ben/Ded Mass Request | Generates mass retroactive benefit/deduction requests. |

Creating a Mass Retroactive Benefit/Deduction Program and Defining the Request

Use the Retroactive Benefit/Deduction Table to set up:

- A mass retroactive benefit/deduction program.
- A mass retroactive benefit/deduction request with selection criteria that involve the benefit program changes.

See Also

Arranging Retroactive Benefits and Deductions

Running the Mass Retro Request Process

Access the Run Retro Ben/Ded page.

Run Retro Ben/Ded page

Pay Calendar Validation

Select to validate that the selected employees are hired into a confirmed pay calendar before generating a request for them.

Leave this box clear to select employees who have been placed in a special pay group that does not yet have a confirmed pay calendar.

Handling Duplicate Requests

A request that affects the same retroactive benefit/deduction information as a previous request is considered a *duplicate request*.

The duplicate resolution process differs depending upon the types of request involved (individual or mass) and the status of the initial request.

Individual Requests

When the system encounters duplicate individual requests with different effective dates, it attempts to use earlier date for processing.

When a duplicate individual request is triggered and the initial individual request is Not Processed, the system compares the effective dates of the two requests, keeps the request with the earliest effective date, and deletes the request with the later effective date.

If the initial request is Calculated, the system compares the effective dates of the two requests, marks the previously calculated request Not OK to Process, sets the status to Invalidated, sets the Duplicate Flag to Y (yes), and gives the new request the earlier of the two effective dates.

Mass Requests

For duplicate mass requests, the system checks the status of the initial request. If it is Not Processed or Calculated, the system marks both requests Not OK To Process. You'll have to examine both requests and decide which one to run.

This process is also followed when one of the duplicate requests (either the original or the duplicate) is an individual request, while the other is a mass request.

See Also

Viewing Retroactive Benefit/Deduction Requests

Pages Used to Review and Update Calculated Retroactive Benefits and Deductions .

Viewing Retroactive Benefit/Deduction Requests

You can view requests by employee, mass retroactive request ID, effective date, or process status.

Page Used to View Retroactive Benefit/Deduction Requests

| Page Name | Object Name | Navigation | Usage |
|--|------------------------|--|---|
| Retro Ben/Ded Rqst (retroactive benefit/dedication request) | RETRODED_RQST_SUM M | Compensate Employees, Manage Retroactive Processing, Inquire, Retro Ben/Ded Request Summary, Retro Ben/Dedn Request Summary | View retroactive benefit/deduction requests by employee, mass retro request ID, effective date, or process status. |

Viewing Retroactive Requests

Access the Retro Ben/Ded Rqst page.

| | |
|-------------------------|---|
| Retro Program ID | The retroactive benefit/deduction program that the request is validated against. Only one retro program ID is defined for individual requests, which are generated online. If the employee was selected through a mass request, the mass request's mass request ID is displayed. |
| Duplicate Flag | Automatically set to <i>Y</i> when a duplicate request is identified. |
| Plan Type | Appears only for requests that involve changes to general deduction and benefit plan information |
| Benefit Plan | Appears only for benefit plan-related requests. |
| Deduction Code | Appears only for requests that involve changes to general deduction information. |

See Also

Arranging Retroactive Benefits and Deductions

Handling Duplicate Requests

Calculating Retroactive Benefits and Deductions

For each pay period after the process start date through the process end date, the retroactive benefit/deduction calculation process determines:

- The original benefit and deduction amounts.
- The retroactive benefit and deduction amounts.

This section describes:

- Running the process.
- Viewing error messages.

Pages Used to Calculate Retroactive Benefits and Deductions

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|--|--------------------|---|--|
| Run Retro Ben/Dedn (run retroactive benefit/deduction) | RUNCTL_RTRODEDCALC | Compensate Employees, Manage Retroactive Processing, Process, Retro Ben/Ded Calculate, Run Retro Ben/Dedn Calculation | Set up calculation processes for individual and mass retroactive benefit/deduction requests. |

| Page Name | Object Name | Navigation | Usage |
|--|-------------------|--|--|
| Retro Ben/Ded Proc (retroactive benefit/deduction process) | RETRODED_MESSAGES | Compensate Employees, Manage Retroactive Processing, Inquire, Retro Ben/Ded Messages, Retro Ben/Ded Process Messages | View error messages for the calculation process. |

Running the Process

Access the Retro Ben/Dedn page.

Run Retro Ben/Dedn page

Individual and Mass

Select to run an individual or a mass request. You can run all requests or a request associated with a specific ID.

To process several individual employees, you need to set up multiple run controls for each, then run the process several times.

Viewing Error Messages

Access the Retro Ben/Ded Proc page.

Retro Ben/Ded Proc

EmplID:

Line #: 0 **Company:** **Empl Rcd#:** 0

Page #: 0 **Pay Group:** **Retro Seq#:** 123908

Off Cycle **Pay End Date:** 01/01/2000 **Separate Check #:** 0

Retroactive Deduction Messages Find | View All First ◀ 1 of 1 ▶ Last

Message ID: 008203

Group Message:

Request is rejected. No data available to do Retro Deductions.

Message Data: J

Retro Ben/Ded Proc page

You can select specific sets of error messages when you bring up this page. The system will prompt you to search for error messages based on aspects of the retroactive benefit/deduction requests involved. For example, you can select error messages for retro benefit/deduction requests that have a specific company, pay group, and pay end date combination.

Reviewing and Updating Calculated Retroactive Benefits and Deductions

This section describes how to:

- Review calculation details and override deduction totals.
- Review calculation summaries.

Pages Used to Review and Update Calculated Retroactive Benefits and Deductions

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|--|--------------------|---|--|
| Retro Ben/Ded Calc (retroactive benefit/deduction calculation) | RETRODED_DEDS | Compensate Employees, Manage Retroactive Processing, Use, Retro Ben/Ded Review and Updt, Retro Ben/Dedn Calc Review | Review individual line items for each pay end date and override deduction amounts. |

| Page Name | Object Name | Navigation | Usage |
|--|------------------|--|---------------------------------------|
| Retro Ben/Ded Calc (retroactive benefit/deduction calculation) | RETRODED_SUMMARY | Compensate Employees, Manage Retroactive Processing, Inquire, Retro Ben/Ded Summary, Retro Ben/Dedn Calc Summary | View summaries of calculation totals. |

Reviewing Calculation Details and Overriding Deduction Totals

Access the Retro Ben/Ded Calc page.

Retro Ben/Ded Calc

EmpID: G205 Gallagher, Michael
Retro EffDt: 09/29/1996 **Status:** Loaded PS

Mass Rqst ID: **Retro Seq#:** 13282 **Duplicate Flag:** N

| Retroactive Deduction Data | | | Find View All | First | 1 of 7 | Last |
|----------------------------|------------|-------------------------|-----------------|--|---|------|
| Company: | C/CB | Benefit Program: | FLX | Old Ded Amount: | 0.00 | |
| Pay Group: | SBW | Plan Type: | 10 | New Ded Amount: | 34.62 | |
| Pay End Date: | 10/12/1996 | Benefit Plan: | MDBC | Override Ded Amt: | <input type="text"/> | |
| Page #: | 0 | Coverage Code: | 1 | Retro Ded Amount: | 34.62 | |
| Line #: | 0 | Deduction Code: | MEDIC | <input checked="" type="checkbox"/> OK To Process | | |
| | | Deduction Class: | B | <input type="checkbox"/> Off Cycle | <input type="checkbox"/> Exception | |

Retro Ben/Ded Calc page

Retroactive Deduction Data Results are broken up by pay end date and then further by deduction code and deduction classification.

Use the scroll arrow to see calculations for each available combination.

Pay End Date Derived from the employee's actual pay history unless none exists. This can happen if the employee is a retroactive hire, for example. In these cases, the pay end date from the appropriate pay calendar is used.

Company, Pay Group, Benefit Program, Plan Type, Benefit Plan, Coverage Code, Deduction Code, Deduction Class, Page # (page number), Line # (line number), and Off Cycle Populated with values from the employee's actual pay history.

If the employee has no pay history, the data is obtained from the job row effective for the selected record's pay end date. The page number and line number are set to zero, and the Off Cycle box is cleared.

Old Ded Amount (old deduction amount) Shows the actual amount that was calculated in the displayed pay period for the displayed deduction code and deduction class.

| | |
|--|---|
| New Ded Amount (new deduction amount) | Shows the amount that should have been deducted, according to the current data. |
| Override Ded Amount (override deduction amount) | Enter a new amount to override the New Ded Amount value. Note. To enter a new amount, the request must have reached Calculation status, but cannot have reached Loaded status. |
| Retro Ded Amount | Displays the difference between the new and old deductions. |
| Exception | Selected for duplicate requests. |
| OK To Process | Selected for all requests that aren't duplicates. |

See Also

Handling Duplicate Requests

Reviewing Calculation Summaries

Access the Retro Ben/Ded Calc page.

Retro Ben/Ded Calc

EmpID: G205 Gallagher,Michael

| Retroactive Deduction Summary | | Find View All | First | 1 of 7 | Last |
|----------------------------------|-------|--------------------------------|------------|--------|------|
| Retro Sequence#: | 13282 | Retro Effective Date: | 09/29/1996 | | |
| Duplicate Flag: | N | Retro Request Type: | Job Chg | | |
| Mass Request ID: | | Process Flag: | Loaded PS | | |
| Plan Type: | 10 | Retro Deduction Amount: | 34.62 | | |
| Benefit Plan: | MDBC | | | | |
| Deduction Code: | MEDIC | | | | |
| Deduction Classification: | B | | | | |

Retro Ben/Ded Calc page

Use the scroll arrow to see calculation amounts for each deduction code/deduction classification combination.

Loading Calculations Into PeopleSoft Payroll for North America

This section describes how to:

- Run the payroll load process.

- Process payroll for retroactive benefits and deductions.

Pages Used to Load Calculations Into PeopleSoft Payroll for North America

| Page Name | Object Name | Navigation | Usage |
|--|------------------------|--|---|
| Run Retro Ben/Ded (run retroactive benefit/deduction) | RUNCTL_RTRODEDPS HT | Compensate Employees, Manage Retroactive Processing, Process, Retro Ben/Ded Payroll Load, Run Retro Ben/Ded Payroll Load | Load retroactive benefit/deduction calculations into payroll. |

Running the Payroll Load Process

Access the Run Retro Ben/Ded page.

Run Retro Ben/Ded page

Warning! Before loading retroactive benefits and deductions to payroll, you must first run Paysheet Creation to create paysheets with normal pay for this period.

You can load employee retroactive benefit calculations by pay run ID or by company, pay group, and pay end date. You can use either method to process an off-cycle pay run; use the pay run ID method for on-cycle pay runs.

Note. Off-cycle payroll runs are generally used to handle one-time deduction refunds, and the resulting refunds are delivered on separate checks from the regular payroll checks received by employees. You should process off-cycle retroactive benefits and deductions in conjunction with off-cycle retroactive pay processing.

When you load benefits or deductions for a particular retroactive benefit/deduction program to PeopleSoft Payroll for North America, the on or off-cycle selection here must match the selection for the same program on the Retroactive Benefit/Deduction Table.

Use the same pay run ID that you set up in your regular on-cycle or off-cycle pay run. The employees included under the ID must:

- Have already had their retroactive benefits and deductions calculated through the Retroactive Benefit/Deduction Calculation process.
- Have at least one of their calculated benefits and deductions marked OK To Process on the Retro Ben/Ded Calc page.

For the company, pay group, or pay end date method, if you leave a field empty, the system processes all appropriate values for that field during the load.

Select **Process Terminated Employees** to have paysheets created for employees who are receiving refunds and have been retroactively terminated.

See Also

PeopleSoft Payroll for North America PeopleBook

Arranging Retroactive Benefits and Deductions

PeopleTools PeopleBook: Process Scheduler

Processing Payroll for Retroactive Benefits and Deductions

After calculations are loaded, PeopleSoft Payroll for North American processes the retroactive benefits and deductions in the next payroll cycle. Retroactive benefits and deductions owed to the employer are collected via arrears processing. You can use the arrears processing pages to control how much money is deducted from employee paychecks.

For on-cycle processing, retroactive benefits owed to the employee are reimbursed in the next paycheck. If you've used off-cycle processing, refunds are delivered in a separate check.

Note. You can use the Retro Ben/Ded Review page to review the results of the Retroactive Benefit/Deduction Payroll Load process at any time after it has been run. The status of the request is Loaded to Payroll.

See Also

Organizing Payroll Information for Base Benefits

CHAPTER 19

Implementing Benefits Billing

This chapter provides an overview of Benefits Billing and describes how to:

- Set up Benefits Billing.
- Enroll participants.
- Calculate charges.
- Review charges.
- Generate Benefits Billing statements.
- Process payments.
- Adjust charges and payments.
- Review charge and payment history.

Understanding Benefits Billing

You use Benefits Billing to process billing for employees and dependents who are charged directly for benefit plan elections instead of paying through payroll deductions. Benefits Billing can be used for:

- Regular benefits.
- COBRA benefits.
- Through Benefits Billing, you can:
 - Enroll qualified participants into the billing system, both automatically and manually.
 - Calculate charges.
 - Generate billing statements.
 - Process payments.
 - Adjust charges and payments as needed.

Setting Up Benefits Billing

This section describes how to:

- Set up billing parameters.
- Set up payment due dates.

Pages Used to Set Up Benefits Billing

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|-------------------|--------------------|---|---|
| Billing Parameter | BILL_PARMS | Define Business Rules, Define Benefits Billing, Setup, Parameters | Define billing parameters. You establish only one set of Benefits Billing parameters for your entire system |
| Billing Calendar | BILL_CALENDAR | Define Business Rules, Define Benefits Billing, Setup, Calendar | Set up begin, end, and payment due dates for individual billing periods. Also control billing statement printing and enter comments that appear on statements printed during a particular billing period. |

Setting Up Billing Parameters

Access the Billing Parameter page.

Billing Parameter

*Billing Frequency:

Due Dates

| | |
|---|--|
| <p>Regular Billing</p> <p>Days Due: <input type="text"/></p> <p>Days to Overdue: <input type="text" value="15"/></p> | <p>COBRA Billing</p> <p>Days Due: <input type="text" value="31"/></p> <p>Days to Overdue: <input type="text" value="60"/></p> |
|---|--|

Billing Parameter page

| | |
|--------------------------|--|
| Billing Frequency | Indicate how often to calculate billing amounts. |
| Days Due | Enter the number of days after the billing period begin date that the payment is due. This value is used to determine the default payment due date on the Billing Calendar page. Note. COBRA requirements mandate at least 30 days for COBRA billing. |
| Days to Overdue | Enter the number of days past the payment due date that make a payment overdue. |

Setting Up Payment Due Dates

Access the Billing Calendar page.

Billing Calendar

Billing Period: 9612

*Period Begin Date:

*Payment Due:

*Period End Date:

*COBRA Payment Due:

Comment:

Billing Calculation Run

Billing Statements Printed

Billing Calendar page

| | |
|--|--|
| Billing Period | When you first access the page, you are asked to enter a billing period code that identifies the billing period that you're setting up the calendar for. The code may be any unique four-character combination. We recommend <i>YYMM</i> as an identification code for monthly calendars. |
| Period Begin Date and Period End Date | <p>The system uses the period begin date and the Days Due value set on the Billing Parameter page to calculate default payment due dates for regular and COBRA Benefits Billing processes.</p> <p>The system uses the period end date to evaluate effective dates. The period end date is also used as the posting date for billing charges.</p> |

Note. The system does not edit the billing frequency to ensure that it matches the begin and end dates.

**Payment Due, COBRA
Payment Due**

The system automatically sets Payment Due and COBRA Payment Due according to the Days Due values set in the Billing Parameters page and the Period Begin Date that you've defined for this billing period. You can override the default dates if necessary.

Note. You cannot set a COBRA due date that is less than 30 days past the begin date.

Comment

Enter text to appear on all of the billing statements sent out for this billing period. Optional.

**Billing Calculation Run,
Billing Statements Printed**

Indicates current processing stage for this billing calendar.

Enrolling Participants

This section describes how to:

- Locate eligible participants.
- Automatically enroll participants.
- Manually enroll participants.
- Override Benefits Billing parameters for individual enrollees.

Pages Used to Enroll Participants

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|------------------------------|--------------------|---|---|
| Benefits Billing Enrollments | BILL_ENROLL | Compensate Employees, Administer Benefits Billing, Use, Billing Enrollment | Manually enroll employees into the Benefits Billing system and update previous enrollments. |
| Billing Override | BILL_EMPL_PARM | Compensate Employees, Administer Benefits Billing, Use, Override Parameters | Override Benefit Billing parameters at the individual enrollee level. Set up comments, designate an alternate address, or hold statements for an individual enrollee. |

Locating Eligible Participants

A typical Benefits Billing population might include:

- Employees on leave without pay.
- Employees on reduced schedules who do not earn enough to pay for coverage.
- Retirees who continue company-sponsored coverage.
- Terminated employees enrolled in COBRA.
- Dependents of employees enrolled in COBRA.
- Survivors of deceased employees and retirees.

Note. Dependents of active employees cannot be billed through Benefits Billing. Only dependents who have been given a “non-employee” status through COBRA processing or some other means can be enrolled in Benefits Billing.

Automatically Enrolling Participants

If you currently implement PeopleSoft Benefits Administration, you can use Event Maintenance processes to locate employees and dependents who are eligible for Benefits Billing and enroll them into the Benefits Billing system.

You can also use COBRA Administration processes to locate and enroll COBRA participants who are eligible for Benefits Billing.

See Also

PeopleSoft Benefits Administration PeopleBook, “Creating Event Rules”

”Managing COBRA”

Manually Enrolling Participants

Access the Benefits Billing Enrollment page.

Benefits Billing Enrollment

Lopez,Daisy ID: KU0013 Empl Rcd#: 0

Billing Enrollment Details Find | View All First 1 of 5 Last

*Plan Type: 10 Medical + -

COBRA Event Id: 0 + -

Deduction Calculation per Billing Period Find | View All First 1 of 1 Last

*Effective Date: 01/01/2000 Event Identification: + -

*Billing Status: Active *Billing Reason: Manual

Percent Calculation 100 % of: Total Rate plus/or Flat Amount of 0.00

Benefits Billing Enrollment page

Employee ID

When you first enter the Benefits Billing Enrollment page, you are prompted for the ID of the employee that you want to enroll or update.

You cannot create Benefits Billing enrollment records that cover all of an employee's multiple jobs at once.

Plan Type

You can enter multiple plan types, including:

- Simultaneous active and COBRA billing enrollments.
- Multiple COBRA billing enrollments.

COBRA Event Id

Automatically assigned by the COBRA batch process, but can also be entered. Should be zero for non-COBRA billing.

Effective Date

You can have multiple effective-dated billing records for COBRA and non-COBRA events.

Event Identification

For records created through Benefits Administration processes only. Indicates if the record was created through Event Maintenance or Open Enrollment.

Billing Status

Controls billing calculations for each plan type:

Active: You are billing the employee for this plan type.

Hold Billing: Charges are not calculated for this plan type. If you change the status to *Active* after *Hold Billing* has been in effect, the system retroactively calculates charges the next time that you run the Benefits Billing calculation process. While *Hold Billing* is selected for a particular plan type, the system continues to bill for other plan types and continues to produce statements.

Billing Reason

Inactive: You are no longer billing for this plan type.

Identifies the source of the billing entry and the reason that the employee is being billed; for reference only.

Manual. Indicates you are entering the billing enrollment record manually

Arrears indicates the participant cannot gross enough to cover deductions.

If the system has automatically enrolled the employee or dependent into Benefits Billing through Benefits Administration or COBRA batch processes, the system selects either Benefits Administration or COBRA to identify the process by which this enrollment record was entered into the system.

Percent Calculation and Flat Amount

Determines how to modify the deduction calculation for billing purposes.

Select **Percent Calculation** to use the system deduction calculation routines with either the normal Employee Rate or the Total Rate to calculate the amount owed for each billing period. The system then multiplies the calculated value by the percentage entered. The percentage can be more than 100 percent.

Select **Flat Amount** to add a dollar amount to the amount calculated by the Percent Calculation settings. If the Percent Calculation check box is cleared, the system bills the employee the flat amount for each billing period. The amount can be a negative number.

See Also

“Setting Up Benefit Support Tables,” Setting Up Calculation Rules

Overriding Benefits Billing Parameters for Individual Enrollees

Access the Billing Override page.

Billing Override

bill4,dwayne Employee EmpID: B-BILL4

Billing Override Parameters Find | View All First 1 of 1 Last

Effective Date: 08/29/2001

Country: []

Address 1:

Address 2:

Address 3:

City:

County: Postal:

State:

Hold Billing

Hold Statements

Comment:

Print Comments

On Every Statement

Just One Statement

Billing Override page

Effective Date

You can enter more than one set of override parameters per employee and order them by effective date.

Hold Billing

Select to halt billing for all plan types.

When you clear Hold Billing and run the Benefits Billing calculation process, the system retroactively calculates charges that occurred during the period that the hold was in effect.

Hold Statements

Select to stop printing billing statements for this employee.

Address Information

Enter an alternate address to send upcoming billing statements.

The default address is on the enrollee's Personal Data record.

Comments

Enter comments to be printed on upcoming billing statements for this employee.

Calculating Charges

This section provides an overview of the Billing Calculation process and describes how to:

- Automatically calculate charges.
- Manually calculate charges for individual participants.

Understanding the Billing Calculation Process

The Billing Calculation process creates Billing Charge records for a selected billing calendar. Each Billing Charge record contains charge information for an individual plan type/billing period combination.

The system queries the Base Benefits business process tables to determine the coverage in effect for the plan type as of the end date of the billing calendar. It passes the coverage code and other relevant data to the Deduction Calculation (DedCalc) programs. The DedCalc programs calculate the billing amount using normal rules, which the billing system then modifies based on the rate qualifier.

Rerunning the Billing Calculation Process

Just as in PeopleSoft Payroll for North America, you can rerun billing calculations repeatedly for a given billing calendar until you print billing statements for that calendar. The system backs out any previously calculated charges as well as any open credit that it applied previously to the charges.

The system cannot reprocess charges for a billing calendar if you have made adjustments to the charges or have applied payments.

Retroactive Processing

When retroactive processing is called for, the Billing Calculation process compares:

- Billing calendar dates.
- The date billing begins for the plan type.
- The dates of any charge records for the plan type.
- The system then generates retroactive Billing Charge records for all previous billing periods that:
 - Have passed since the billing begin date.
 - Do not have Billing Charge records.

Billing Calculation Limitations

The Billing Calculation process calculates payments based on employee enrollments in Base Benefits tables and the rates specified in benefit programs. The Billing Calculation process does not:

- Include any offset from credits when calculating deductions. Enter flat amounts into Billing Enrollment records to simulate the use of credits.
- Calculate imputed income or any other taxable/nontaxable benefit calculations. The process only calculates before-tax and after-tax deduction classifications.

- Bill benefit programs, leave plans and vacation buy/sell plans (plan types 01, 5x, and 9x).
- Update any deduction or other payroll balances. You have to do this manually. Not making these adjustments can affect imputed income reporting, savings plan limit testing, and FSA claims processing.
- Check group limits on life and AD/D insurance plans.

The Billing Calculation process only bills flat dollar amounts for savings plans, FSA plans, retirement plans, and pension plans (plan types 4x, 6x, 7x, and 8x).

Pages Used to Calculate Charges

| Page Name | Object Name | Navigation | Usage |
|---|---------------|---|--|
| Billing RuncCntl (billing run control) | BILL_RUNCTL | Compensate Employees, Administer Benefits Billing, Process, Billing Calculation | Calculate charges and create Billing Charge records for a selected billing calendar. |
| Manual Charge | BILL_CHRG_ADD | Compensate Employees, Administer Benefits Billing, Use, Charge Entry | Manually post new Billing Charge records to the system. |

Automatically Calculating Charges

Access the Billing RuncCntl page.

Billing RuncCntl

Run Control ID: 1 [Report Manager](#) [Process Monitor](#) Run

Process Date: 06/30/2000

*Billing Period: to

*Payment Due:

*COBRA Payment Due:

Restart Information

Chk Point Interval in Minutes:

Billing Processing Phase: R Ready

Restart Position

EmplID:

Empl Rcd#: 0

Payment Id:

Billing RuncCntl page

Billing Period

Select the period that indicates the billing calendar for which you want to calculate benefits billing charges.

Note. You can rerun the Billing Calculation process until you run the Statement Print process for that billing period.

Payment Due and COBRA Payment Due

Automatically populated with the dates that were defined for this billing calendar. May be modified if necessary.

Manually Calculating Charges for Individual Participants

Access the Manual Charge page.

Manual Charge

Manual Charge Entry

*EmpID:

*Billing Period: to Empl Rcd#:

*Plan Type: CBR Evt Id:

Benefit Program: Coverage Code:

Benefit Plan: Deduction Code:

*Sales Tax:

*Date Due:

Date Overdue:

Billing Reason: Billing Source: Date Entered:

Charge:

Manual Charge page

You might use this page to enter a partial charge for an employee's first billing period and start automatic billing for that employee in the next billing period. You can also use this page to enter a partial month billing for the last billing period.

If you enter a Billing Charge record manually for an employee, the Billing Calculation process does *not* automatically calculate the same billing period's charges for that employee. The Billing Calculation process never deletes manual charge entries, even when the process is rerun for a particular billing period.

Employee ID

Enter the ID of the employee to billed.

Billing Period

Select the billing period from the Billing Calendar.

Plan Type

Determine the plan type.

(CAN) Sales Tax

Canadian users can enter charges that represent various Canadian sales taxes associated with another benefits

charge.

For example, a billing charge for a medical plan may have a Canadian sales tax associated with it. You enter this tax as a separate charge and identify the type of sales tax here.

This field can be used for the Goods and Services Tax (GST), the Provincial Sales Tax (PST), the Provincial Premium Tax (PPT), the Provincial Sales Tax on Insurance (PSTI), and the Harmonized Sales Tax (HST).

Note. You always enter sales tax as a separate charge, as this is the only way that the system can track it. On all Benefits Billing pages dealing with benefits charges, sales tax charges are identified with their sales tax type.

Charge

Enter the total charge for this employee and billing period.

Note. Once you save a Charge Entry record, you cannot directly change the amount of that charge. Any changes must be made through the Bill Charge Adjustment page.

Reviewing Charges

This section describes how to:

- Review individual charge records.
- Review charge actions.
- Review charges by billing period.
- Review charges by plan type.

Pages Used to Review Charges

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|------------------|--------------------|--|---|
| Charge | BILL_CHRG_VW | Compensate Employees, Administer Benefits Billing, Inquire, Charge Review, Charge | See how Benefits Billing charges and payments add up for a selected employee. |
| Charge Detail | BILL_CHRG_DET | Compensate Employees, Administer Benefits Billing, Inquire, Charge Review, Charge Detail | View details of charge actions. |

| Page Name | Object Name | Navigation | Usage |
|---|--------------------|--|---|
| Charge Summary | BILL_CSUM_BY_BPER | Compensate Employees, Administer Benefits Billing, Inquire, Charge Summary By Billing Period | Arranges a participant's charges by billing period. |
| Sumry byPlantype (summary by plan type) | BILL_CSUM_BY_PTYPE | Compensate Employees, Administer Benefits Billing, Inquire, Charge Summary by Plan Type | Arranges a participant's charges by plan type. |

Reviewing Individual Charge Records

Access the Charge page.

Charge
Charge Detail

Lopez,Daisy ID: KU0013

Billing Period: 2001 01/01/2000 to 01/31/2000 **Empl Rcd#:** 0
Plan Type: 10 Medical **Charge Id:** 13 **CBR Evt Id:**

Benefit Program: KU1 GBI US FT **Coverage Code:** Employee Only
Benefit Plan: KUHMO2 HMO Plan 2 **Deduction Code:** KUHMOKHMO Kaiser

***Date Due:**

Date Overdue:

Billing Reason: Manual

Billing Source: Automated

Date Entered: 07/18/2000

Print Period:

| | |
|-----------------------------|-----------|
| Charge: | 61.00 |
| Charge Adjustments: | (+) 0.00 |
| Total Charge: | (=) 61.00 |
| Payment: | (-) 61.00 |
| Payment Adjustments: | (+) 0.00 |
| Amount Due: | (=) 0.00 |

Charge page

- Charge Id** A system-generated number that ensures the uniqueness of Billing Charge records.
- CBR Evt Id (COBRA event ID)** If this coverage is calculated under COBRA, provides a link to the COBRA event.
- Benefit Program, Coverage Code, Benefit Plan, and Deduction Code** Obtained from the participant's Base Benefits records.
Can be used to trace back to the rate tables and calculation rules that created the charge.

- (CAN) Sales Tax** Appears if the charge is for Canadian sales tax associated with another benefits charge.
- Date Due and Date Overdue** You can modify these dates.
- Print Period** Indicates the begin and end dates of the Billing Calendar during which the statement for this charge was sent.
- Charge** Original charge calculated by the batch calculation process or entered in the Charge Entry page.
- Charge Adjustments** From the Charge Adjustment page.
- Payment Adjustments** From the Payment Adjustment page.

Note. Participants who are billed for more than one billing period, or who are being billed for more than one plan type, employee record number, or COBRA event within a particular billing period, have multiple Billing Charge records.

Reviewing Charge Details

Access the Charge Detail page.

Charge
Charge Detail

Lopez,Daisy **ID:** KU0013

Billing Period: 2001 01/01/2000 to 01/31/2000 **Empl Rcd#:** 0

Plan Type: 10 Medical **Charge Id:** 13 **CBR Evt Id:**

| | | | | | |
|-----------------|-------|-----------------------------|------|----------------------|-------|
| Charge: | 61.00 | Charge Adjustments: | 0.00 | Total Charge: | 61.00 |
| Payment: | 61.00 | Payment Adjustments: | 0.00 | Amount Due: | 0.00 |

| Bill Details | | | | | | Find View All | First <input type="button" value="◀"/> | 1-2 of 2 | <input type="button" value="▶"/> Last |
|--------------|-------------|--------|--------------------|---------|---------------------|---|--|----------|---------------------------------------|
| Posting Date | Action Type | Charge | Charge Adjustments | Payment | Payment Adjustments | | | | |
| 04/30/2000 | Charge | 61.00 | | | | | | | |
| 07/19/2000 | Payment | | | 61.00 | | | | | |

Charge Detail page

- Posting Date** Displays the dates that actions were entered into the system.

For detail records with an Action Type of Charge, the posting date is the last day of the billing cycle.

Action Type

Possible actions include Charge, Charge Adjustment, Payment, and Payment Adjustment.

Charge

Amount of the original charge. If the charge is associated with a Canadian sales tax, the sales tax type (GST, PST, PSTI, and so on) is indicated as well.

Reviewing Charges by Billing Period

Access the Charge Summary page.

Charge Summary

Lopez,Daisy Employee ID: KU0013

Billing Period: 2001 01/01/2000 to 01/31/2000 Empl Rcd#: 0

| Charge Summary by Bill Period | | | | | | |
|-------------------------------|----------------------|-----------|----------------|--------|------------|--------------|
| Plan Type | Plan Type | Charge Id | COBRA Event Id | Charge | Adjustment | Total Charge |
| 10 | Medical | 13 | | 61.00 | 0.00 | 61.00 |
| 20 | Life | 14 | | 0.00 | 0.00 | |
| 21 | Supplemental Life | 15 | | 6.40 | 0.00 | 6.40 |
| 31 | Long-Term Disability | 16 | | 0.00 | 0.00 | |

Charge Summary page

(CAN) If the charge is associated with a Canadian sales tax, the sales tax type (GST, PST, PSTI, and so on) is indicated before the Charge column.

Reviewing Charges by Plan Type

Access the Smmry byPlantype page.

Smmry byPlantype

Lopez,Daisy Employee ID: KU0013

Plan Type: 10 / Medical Empl Rcd#: 0

| Charge Summary by Bill Period | | | | | | | |
|-------------------------------|------------|------------|-----------|----------------|--------|------------|------------|
| Billing Period | Begin Date | End Date | Charge Id | COBRA Event Id | Charge | Adjustment | Total Chrg |
| 2001 | 01/01/2000 | 01/31/2000 | 13 | | 61.00 | 0.00 | 61.00 |
| 2002 | 02/01/2000 | 02/29/2000 | 9 | | 61.00 | 0.00 | 61.00 |

Smmry byPlantype page

(CAN) If the charge is associated with a Canadian sales tax, the system displays the sales tax type (GST, PST, PSTI, and so on) of the charge to the left of the charge amount.

Generating Benefits Billing Statements

This section describes how to:

- Print and reprint billing statements.
- Set print IDs for reprinting statements.

Pages Used to Generate Benefits Billing Statements

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|-------------------|--------------------|---|--|
| Billing Statement | RUNCTL_BEN040 | Compensate Employees, Administer Benefits Billing, Report, Billing Statements | Print and reprint billing statements |
| Statement Print | BILL_PRINT | Compensate Employees, Administer Benefits Billing, Report, Statement Reprint | Set up print Ids and select employees for reprinting billing statements. |

Print and Reprint Billing Statements

Access the Billing Statement page.

Billing Statement

Run Control ID: 1 [Report Manager](#) [Process Monitor](#) Run

Language: Specified Recipient's

Billing Period: to

As Of Date: Statement Date and Date for determining Past Due

Reprint

Print ID:

Billing Statements page

| | |
|-----------------------------|---|
| Billing Period | Select from the Billing Calendar. |
| As Of Date | Used to determine which charges are overdue. The system totals charges with due dates prior to the As Of Date and prints the total as the amount overdue. This date has been kept separate because some organizations bill in advance for benefits. |
| Reprint and Print ID | If you want to reprint statements, select the Reprint check box and enter a Print ID. You define reprint report Print IDs in the Statement Print page, which we detail in the following section. |

The printed statements include all plan types being billed. They do not differentiate between COBRA and non-COBRA charges, and they don't itemize the charges by an employee's different employee record numbers (if the employee has multiple jobs). The inclusion of a due date on each item allows for separate due dates for COBRA coverage.

Billing statements can also include statement comments. You can use the Billing Parameter page to create global comments that appear on the statements of all employees participating in a given Billing Calendar, and you can use the Employee Override page to compose a statement comment that appears on an individual employee's billing statement.

Note. The system only produces statements for individuals who have active billing enrollments or outstanding balances in the Benefits Billing system. The system does not print statements for employees who are inactive with a zero balance or who have Hold Statements selected in the Employee Override page. If a charge displayed on the statement is subject to a Canadian sales tax, the system displays the charge's sales tax type (GST, PST, PSTI, and so on) to the left of the charge amount.

Establishing Print IDs For Reprinting Statements

Access the Statement Reprint page.

Statement Reprint page

Billing Period

Select from the Billing Calendar.

Employee ID

Select the employees for whom Billing Statements need to be reprinted.

Processing Payments

This section describes how to:

- Log payments.
- Review payment history.
- Review payments by posting date.

Pages Used to Process Payments

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|--|--------------------|--|---|
| Payment Entry | BILL_PAYMENT | Compensate Employees, Administer Benefits Billing, Use, Payment Entry | Log individual payments from a participant and allocate those payments to separate charges. |
| Benefits Billing Payment Review | BILL_PAYMENT_VW | Compensate Employees, Administer Benefits Billing, Inquire, Payment Review | Examine charge payment history for a selected participant. |
| Smmry by Pst Date (summary by post date) | BILL_PSUM_BY_PTDT | Compensate Employees, Administer Benefits Billing, Inquire, Payment Summary By Post Date | Review payments for a specific participant, arranged by posting date. |

Logging Payments

Access the Payment Entry page.

Payment Entry

Bill Payment

*EmpID:

*Posting Date: Posting Sequence: *Form of Payment:

Payment: Payment Id:

Allocation Details Find | View All First 1 of 1 Last

| Date Due | Period Cd | Plan Type | CBR Evt Id | Benefit Plan | Sales Tax Type | Covrg Cd | Original Charge | Amount Owed | Payment |
|----------|-----------|-----------|------------|--------------|----------------|----------|-----------------|-------------|----------------------|
| | | | | | | | | 0.00 | <input type="text"/> |

Applied to Open Credit: **Total Allocation:** 0.00

Payment Entry page

| | |
|-------------------------------|---|
| Payment | Enter the total payment provided by the employee. The system automatically allocates this payment to the oldest charges. You can redistribute the payment among the participant's various charges manually. |
| Posting Sequence | Provided by the system. Enables you to enter multiple payments on the same day. |
| Form of Payment | You can enter either Check or Cash in this field, but the Interface value can only be set automatically by the Billing Calculation batch process. |
| Payment | Enter the total payment amount provided by the employee. The system automatically allocates this payment to the oldest charges. You can redistribute the payment allocation in the Allocations group box. |
| Allocation Details | This group box enable you to manually distribute the payment to the various open charges. When a charge is paid in full, it is closed by the system and does not appear the next time that you access the Payment Entry page. If, after allocation of the payment, a charge is <i>not</i> paid in full, it remains open for the next payment. |
| Applied to Open Credit | If payment exceeds the total amount owed, the system posts the excess payment here. Note. The system does not allow participants to have payments applied to open credit as long as they have unpaid charges. |

Note. Any changes to saved payment entries must be made through the Payment Adjustments page.

Reviewing Payment History

Access the Benefit Billing Payment Review page.

| Benefit Billing Payment Review | | | | | | | | |
|--------------------------------|----------------|-----------------------------|----------------|---|----------|--------------|------------|-------------------|
| Lopez,Daisy | | Employee | | ID: KU0013 | | | | |
| Posting Date: | 07/21/2000 | Posting Sequence: | 1 | Form of Payment: | Check | | | |
| Entry Date: | 07/21/2000 | Print Period: | | Payment Id: | 2 | | | |
| Payment: | 150.00 | Payment Adjustments: | 0.00 | Actual Payment: | 150.00 | | | |
| Payment Review | | | | | | | | |
| | | | | Find View All | First | 1-3 of 3 | Last | |
| Date Due | Billing Period | Plan Type | COBRA Event Id | Benefit Plan | Covrg Cd | Total Charge | Amount Due | Total Amount Paid |
| 01/26/2000 | 2001 | Medical | | HMO Plan 2 | 1 | 123.00 | 0.00 | 123.00 |
| 01/26/2000 | 2001 | Dental | | Std Dental | 1 | 26.00 | 0.00 | 26.00 |
| 01/26/2000 | 2001 | Life | | Basic Life | | 32.50 | 31.50 | 1.00 |
| Total Allocation: | | | | | | | 0.00 | |

Benefit Billing Payment Review page

| | |
|----------------------------|--|
| Posting Date | Date when the payment was actually applied to the charges. |
| Entry Date | Date when you entered the payment record into the system.. |
| Print Period | The billing period during which information about this payment appeared on the participant's billing statement. |
| Payment | Payment amount originally entered. |
| Payment Adjustments | Adjustments made on the Payment Adjust page. |
| Actual Payment | The amount of the payment that was actually applied against charges. This value is identical to either the Payment or Payment Adjustment value except in cases where overpayments were Applied to Open Credit. |

Adjusting Charges and Payments

This section describes how to:

- Make adjustments to charges.
- Make adjustments to payments.
- Review adjustments for a participant.

Pages Used to Adjust Charges and Payments

| Page Name | Object Name | Navigation | Usage |
|---------------------------------------|------------------|--|--|
| Charge Adjustment | BILL_CHRG_ADJUST | Compensate Employees, Administer Benefits Billing, Use, Charge Adjustment | Adjust charges on existing Billing Charge records. |
| Payment Adjust (payment adjustment) | BILL_PAY_ADJUST | Compensate Employees, Administer Benefits Billing, Use, Payment Adjustment | Adjust payments to existing Billing Payment records. |
| Adjustm. Summary (adjustment summary) | BILL_ADJ_SMRY | Compensate Employees, Administer Benefits Billing, Inquire, Adjustment Summary | View a summary of all adjustments for a participant. |

Making Adjustments to Charges

Access the Charge Adjustment page.

Charge Adjustment

Lopez,Daisy Employee ID: KU0013

Charge Adjustments [Find](#) | [View All](#) First 1 of 1 Last

Billing Period: 2001 01/01/2000 to 01/31/2000 **Empl Rcd#:** 0
Plan Type: 10 Medical **CBR Evt Id:**

Charge: 61.00 **Charge Adjustments:** 0.00
Payment: 61.00 **Payment Adjustments:** 0.00 **Net:** 0.00

Adjustment Details [Find](#) First 1-2 of 2 Last

| Posting Date | Action Type | Charge Amount | Charge Adjustments | Payment Amount | Pmt Adjust |
|--------------|-------------|---------------|--------------------|----------------|------------|
| 04/30/2000 | Charge | 61.00 | | | |
| 07/19/2000 | Payment | | | 61.00 | |

Post Date: 07/26/2000 **Adjustment Description:**

Post Seq: 1

Adj Amt: 0.00

Charge Adjustment page

You can only apply one charge adjustment at a time.

- Post Date** Automatically set to today’s date, but you can change it.
- Post Seq (post sequence)** Assigned by the system. Enables you to schedule more than one charge adjustment for a particular post sate.
- Adj Amt (adjustment amount)** Enter the amount of the adjustment.
 If you increase the charge, the system checks to see if the participant has any overpayments allocated to open credits. It applies open credits to the increase in the charge, updates the charge balance, and inserts detail rows showing the allocation of the open credits to the charge.
 If you reduce a charge that has already been paid, you end up with an overpayment. The system checks to see if the employee has other open charges. If there are open charges, the system requests that you make a payment adjustment. If there are no open charges, the system selects a payment allocated to the charge being adjusted and automatically creates a payment adjustment that reduces the payment. The system then increases the open credit balance by the amount by which the payment was reduced.
- Adjustment Description** Enter the reason for the adjustment.

Making Adjustments to Payments

Access the Payment Adjust page.

Payment Adjust

Lopez,Daisy Employee EmpID: KU0013

Posting Date: 07/21/2000 Posting Sequence: 1 Form of Payment: Check
 Entry Date: 07/21/2000 Print Period: Payment Id: 2

Payment: 150.00 Payment Adjustments: 0.00 Total Payment: 150.00

Post Date: Adjustment Description:
 Post Seq: 1 Payment Change:

Net Adjustment: 50.00

| Adjustment Distribution | | | | | | | | Find View All | | First | 1-4 of 20 | Last |
|-------------------------|----------------|-----------|----------------|--------------|----------|------------|-------------|----------------------|----------------------------------|----------------------------------|-----------|------|
| Date Due | Billing Period | Plan Type | COBRA Event Id | Benefit Plan | Covrg Cd | Amount Due | Amount Paid | Payment Adjustments | | | | |
| 01/26/2000 | 2001 | Medical | KUHMO2 | HMO Plan 2 | 1 | 0.00 | 123.00 | <input type="text"/> | <input type="button" value="+"/> | <input type="button" value="-"/> | | |
| 01/26/2000 | 2001 | Dental | KUDEN1 | Std Dental | 1 | 0.00 | 26.00 | <input type="text"/> | <input type="button" value="+"/> | <input type="button" value="-"/> | | |
| 01/26/2000 | 2001 | Life | KUBLIF | Basic Life | | 31.50 | 1.00 | <input type="text"/> | <input type="button" value="+"/> | <input type="button" value="-"/> | | |
| 01/26/2000 | 2001 | Supp Life | KUSL1X | 1x Salary | | 6.40 | 0.00 | <input type="text"/> | <input type="button" value="+"/> | <input type="button" value="-"/> | | |

Net Adjustment Allocated: 0.00

Payment Adjustment page

| | |
|---------------------------------|--|
| Post Date | Automatically set to today's date, but you can change it. |
| Post Seq (post sequence) | Assigned by the system. Enables you to schedule more than one charge adjustment for a particular post sate. |
| Payment Change | Enter the total adjustment. |
| Payment Adjustments | Distribute the total adjustment among the charges. |
| Net Adjustment | <p>The net adjustment is equal to the payment change if the adjustment increases the payment or if there is no open credit associated with the payment.</p> <p>If the payment adjustment reduces the payment or there is an open credit, the Net Adjustment field represents the amount left over when the open credit has been wiped out, which then has to be subtracted from charges.</p> <p>The system requires that the Net Adjustment field equal the Net Adjustment Allocated field, except when the total adjustment exceeds the total due on charges. In this case, as with payments, the system requires that all the charges are paid off, and it applies the remainder to open credit.</p> |
| Adjustment Amount | You can redistribute the payment to other charges through the adjustment. |

Reviewing Charge and Payment History

You can view a history of all payments, charges, and remaining balances for an employee.

Page Used to Review Charge and Payment History

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|------------------|--------------------|---|--|
| Employee Billing | BILL_BLNC_SMRY | Compensate Employees, Administer Benefits Billing, Inquire, Employee Balance Review | View charges, payments, and grand totals associated with an individual employee. |

Reviewing Employee Billing History

Access the Employee Billing page.

| Employee Billing | | | | | |
|-------------------------|-------------------------|--------------|---------------|-------|--|
| Tomita, Jason | | Employee | EmpID: KU0078 | | |
| Employee Balance Review | | | | | |
| Billing Period | Plan Type | Total Charge | Total Payment | Net | |
| 2001 | 20 Life | 4.50 | 4.50 | 0.00 | |
| 2001 | 21 Supplemental Life | 9.00 | 9.00 | 0.00 | |
| 2001 | 22 AD/D | 2.00 | 2.00 | 0.00 | |
| 2001 | 25 Dependent Life | 1.60 | 1.60 | 0.00 | |
| 2001 | 31 Long-Term Disability | 24.00 | 24.00 | 0.00 | |
| 2002 | 20 Life | 4.50 | 4.50 | 0.00 | |
| 2002 | 21 Supplemental Life | 9.00 | 9.00 | 0.00 | |
| 2002 | 22 AD/D | 2.00 | 2.00 | 0.00 | |
| 2002 | 25 Dependent Life | 1.60 | 1.60 | 0.00 | |
| 2002 | 31 Long-Term Disability | 24.00 | 21.80 | 2.20 | |
| Grand Total: | | 164.40 | 80.00 | 84.40 | |

Employee Billing page

The charge and payment values displayed are accounted for in all adjustments previously posted against them. The **Net** column displays the balance still outstanding for each charge/payment combination.

Note. Canadian sales tax types (GST, PST, PSTI, and so on) are displayed the left of the charge listing when appropriate.

The grand total adds the **Total Charge**, **Total Payment**, and **Net** columns.

Managing Carrier Interfaces

This chapter provides an overview of extracting benefit data and discusses how to:

- Specify the data to extract.
- Run the Enrollment Reporting Snapshot program.
- Understand database reporting tables.
- Send data to benefit providers.
- (USF) Send information to the OPM.

Understanding Benefit Data Extraction

Just as you provide information to employees regarding provider benefit plans, you also provide information to benefit providers about employee changes to plan elections.

Similarly, federal agencies send changes in health plan elections to the OPM.

| |
|--|
| To send benefits data to providers: |
|--|

1. Specify the information to extract from your HRMS database.
2. Run the Enrollment Reporting Snapshot program to extract the data and write it to the snapshot tables: BN_SNAP_PER, BN_SNAP_JOB, and BN_SNAP_PLAN.

You run this step only once per reporting period and generate all of your extracts from a single snapshot.
3. Create carrier extract files for your benefit providers.
4. Review the data in the snapshot tables or review a log that contains the date and time that the Enrollment Reporting Snapshot, Carrier Extract, and Carrier Interface Supplier Integration processes were run.

Specifying Data to Extract

You can extract benefit plan types and other benefit-related information, such as deduction amounts, life and disability coverages, implied terminations, and the original enrollment date.

Page Used to Specify Data to Extract

| Page Name | Object Name | Navigation | Usage |
|----------------------|----------------|---|--|
| Enrollment Reporting | BN_SNAP_CONFIG | Define Business Rules, Define Base Benefits, Setup, Enrollment Snapshot Options | Define data to extract from the HRMS database. |

Defining Data to Extract

Access the Enrollment Reporting page.

Enrollment Reporting

Plan Types to Include

| | | |
|--|--|---|
| <input checked="" type="checkbox"/> Health | <input checked="" type="checkbox"/> Life | <input checked="" type="checkbox"/> FSA |
| <input checked="" type="checkbox"/> Savings | <input checked="" type="checkbox"/> Pension | <input checked="" type="checkbox"/> Vacation Buy/Sell |
| <input checked="" type="checkbox"/> Retirement | <input checked="" type="checkbox"/> Disability | |

Processing Options

| | |
|--|--|
| <input checked="" type="checkbox"/> Include Payroll Deduction Info | <input checked="" type="checkbox"/> Calculate Life/Disability Cvg |
| <input checked="" type="checkbox"/> Include Implied Terminations | <input checked="" type="checkbox"/> Include Original Enrollment Dt |

Enrollment Reporting page

Plan Types to Include

Select only the plan types for which you will create a carrier interface extract or transmit data to through the Carrier Interface Supplier Integration process in eBenefits.

Include Payroll Deduction Info (include payroll deduction information)

Select to include the last deduction taken and the pay end date for each enrollment.

Calculate Life/Disability Cvg (calculate life/disability coverage)

Select to have Enrollment Reporting Snapshot process calculate coverage for life and disability plans using the plan definitions, calculation rules, and the employee's compensation rate or annual benefits base rate.

Include Implied Terminations

Select to include enrollments that are no longer valid because the participant has enrolled in another plan type, waived coverage, or transitioned to COBRA coverage.

Include Original Enrollment Dt (include original enrollment date)

Select to include an employee's earliest continuous enrollment date in the current, active plan. This applies only to employee-level enrollments and allocations.

Changes to coverage codes in health plans, employee-specified coverage amounts in life and disability plans, or employee contribution amounts do not constitute a change in plan.

Running the Enrollment Reporting Snapshot Process

The Enrollment Reporting Snapshot program extracts data you specified on the Enrollment Reporting page from the HRMS database and writes it to the BN_SNAP_PER, BN_SNAP_JOB, and BN_SNAP_PLAN tables. Each time that you run the Enrollment Reporting Snapshot program, the data in the snapshot tables is cleared and new information is written.

Every time that the Enrollment Reporting Snapshot, or Carrier Report processes are run, a record is written to the BN_SNAP_HIST Table. You can review this log using the Run History page.

Page Used to Run the Enrollment Reporting Snapshot Process

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|----------------------------|--------------------|--|---|
| Enrollment Snapshot | RUN_BEN100A | Compensate Employees, Administer Base Benefits, Process, Enrollment Reporting Snapshot | Extract information from Base Benefits tables into the BN_SNAP_PER, BN_SNAP_JOB, and BN_SNAP_PLAN tables. |
| Run History | BN_SNAP_HIST | Compensate Employees, Administer Base Benefits, Inquire, Enrollment Snapshot History | Review a history of when the Enrollment Reporting Snapshot, the Carrier Interface Extract, and the Carrier Interface Supplier Integration processes were run. |
| Snapshot History Detail | BN_SNAP_HIST_DTL | Click the Detail link on the Run History page. | Review additional information about the history record. |
| Enroll Snapshot | BN_SNAP_PLAN | Compensate Employees, Administer Base Benefits, Inquire, Enrollment Snapshot Data | Review the information extracted by the Enrollment Reporting Snapshot process. |
| Enrollment Snapshot Detail | BN_SNAP_PLAN_DTL | Click the Detail link on the Enroll Snapshot page. | View additional information regarding the selected enrollment or allocation record. |

Understanding Database Record Layout Details

The following tables are populated by the Enrollment Reporting Snapshot program and used by the Carrier Interface Extract and Carrier Interface Supplier Integration processes. You need this information when creating a provider-specific SQR extract.

BN_SNAP_PER

This table includes one row per participant (employee, dependent/beneficiary, and so on).

| COLUMN | KEY | NOTES |
|-------------------|------------|--|
| EMPLID | Yes | |
| DEPENDENT_BENEF | Yes | Blank for employees. Populated for dependents and beneficiaries. |
| EFFDT | No | The as of date specified by the user on the run control page. The value is the same for every row. Simplifies finding related displays and descriptions. |
| NAME | | |
| LAST_NAME | Alt | |
| FIRST_NAME | | |
| NAME_PREFIX | | |
| NATIONAL_ID | | Primary national ID. If the employee, dependent, or beneficiary has not been assigned a primary ID, the field is blank. |
| BIRTHDATE | | |
| SEX | | |
| RELATIONSHIP | | Blank for employees. |
| SMOKER | | Y/N |
| STUDENT | | Y/N; Applies only to dependents and beneficiaries. |
| STUDENT_STATUS_DT | | Applies only to dependents and beneficiaries. |
| DISABLED | | Applies only to dependents and beneficiaries. |
| COUNTRY | | |
| ADDRESS1 | | |
| ADDRESS2 | | |
| ADDRESS3 | | |
| ADDRESS4 | | |
| CITY | | |
| NUM1 | | |

| COLUMN | KEY | NOTES |
|---------------|------------|--------------|
| NUM2 | | |
| HOUSE_TYPE | | |
| ADDR_FIELD1 | | |
| ADDR_FIELD2 | | |
| ADDR_FIELD3 | | |
| COUNTY | | |
| STATE | | |
| POSTAL | | |
| GEO_CODE | | |
| IN_CITY_LIMIT | | |
| HOME_PHONE | | |

BN_SNAP_JOB

There is one row per employee/benefit record/COBRA event; there are no rows for dependents and beneficiaries. For an employee with multiple jobs, all job-related information is taken from the employee's primary job for the indicated benefit record.

| COLUMN | KEY | NOTES |
|-----------------|------------|--|
| EMPLID | Yes | |
| BENEFIT_RCD_NBR | Yes | |
| COBRA_EVENT_ID | Yes | Non-zero indicates a COBRA enrollment event for this employee ID/benefit record number. |
| EMPL_RCD | | Primary job as of the date entered on the run control page. |
| JOB_EFFDT | | Effective date of the primary job on the Job table. |
| JOB_EFFSEQ | | Effective sequence of the primary job on the Job table. |
| EFFDT | No | The as of date entered on the run control page. The value is the same for every row. Simplifies finding related displays and descriptions. |
| SERVICE_DT | | Primary job. |
| BENEFIT_PROGRAM | | |
| COMPANY | | Primary job. |
| PAYGROUP | | Primary job. |
| CURRENCY_CD | | Currency code for the benefit program. |
| PAY_SYSTEM_FLG | | Primary job. |

BN_SNAP_PLAN

This table includes one row per employee-level enrollment and one row per dependent/beneficiary attachment to an enrollment.

| Column | Key | Notes |
|--------------------|------------|--|
| EMPLID | Yes | |
| DEPENDENT_BENEF | Yes | A blank entry indicates an employee level enrollment. A populated entry indicates a dependent enrollment or beneficiary allocation. |
| BENEFIT_RCD_NBR | Yes | This is the Empl_Rcd field from the enrollment pages. |
| COBRA_EVENT_ID | Yes | A non-zero entry indicates a COBRA event for this employee ID/benefit record number. |
| PLAN_TYPE | Yes | |
| COVERAGE_ELECT | Yes | Must be a key to allow for implied terminations. |
| EFFDT | No | The as of date specified by the user on the run control page. The value is the same for every row. Simplifies finding related displays and descriptions. |
| BENEFIT_PLAN | | Coverage_Elect = <i>E</i> indicates an enrollment. Coverage_Elect = <i>T</i> indicates that the plan is being terminated. If the field is blank and Coverage_Elect = <i>T</i> or <i>W</i> , this indicates that there was no prior enrollment. |
| SETID | | Comes from the benefit plan definition. It is blank for 7X plans. |
| VENDOR_ID | | Blank for 7X plans. |
| GROUP_NBR | | Blank for 7X plans. |
| COVRG_CD | | Applies only to 1X plan types. |
| LIFE_ADD_COVRG | | Applies only to 2X plan types. This is the code from the plan definition, not an employee enrollment. |
| COVERAGE_BEGIN_DT | | For enrollments, indicates the first day of coverage. For terminations, indicates the first day that coverage is no longer in effect. |
| COVERAGE_ELECT_DT | | Indicates the date that this enrollment/termination was entered into the system. |
| DEDUCTION_BEGIN_DT | | For enrollments, indicates the first day that deductions and credits are in effect. For terminations, it indicates the first day deductions and credits should stop. |

| Column | Key | Notes |
|--------------------|------------|---|
| ENROLLMENT_DT | | Original enrollment date (coverage begin date) for this plan. This is the earliest continuous coverage begin date for this same benefit plan, ignoring change of coverage code (1X) and coverage amount (2X). Populated only if the Include_Orig option is selected, and only for employee-level rows where Coverage_Elect = E. |
| ANNUAL_PLEDGE | | Applies only to 6X plan types. |
| FLAT_DED_AMT | | Applies only to 4X plan types. Zero if employee is not contributing on a before-tax basis or contributing a percent of earnings. |
| PCT_GROSS | | Applies only to 4X plan types. Zero if employee is not contributing on a before-tax basis or contributing a flat amount. |
| FLAT_DED_AMT_ATA | | Applies only to 4X plan types. Zero if employee is not contributing on an after-tax basis or contributing a percent of earnings. |
| PCT_GROSS_ATA | | Applies only to 4X plan types. Zero if employee is not contributing on an after-tax basis or contributing a flat amount. |
| VOLUNTARY_AMT | | Applies only to 8X plan types. Zero if employee is not contributing a voluntary flat amount or is contributing a voluntary percentage of earnings. |
| VOLUNTARY_PCT | | Applies only to 8X plan types. Zero if employee is not contributing a voluntary percentage of earnings or is contributing a voluntary flat amount. |
| VACN_HOURS | | Applies only to 9X plan types. |
| VACN_BUY_FLAT_AMT | | Applies only to 9X plan types. |
| VACN_SELL_FLAT_AMT | | Applies only to 9X plan types. |
| BENEF_PCT | | Applies only to beneficiary records in plan types 2X, 4X, or 8X. Zero if the beneficiary allocation is a flat amount. |
| FLAT_AMOUNT | | See the Flat Amount Field section following this table. |
| FACTOR_XSALARY | | Applies only to employee records for 2X plan types. This field contains the salary factor coverage defined at either the plan level or employee level. |
| EXCESS | | Applies only to 2X, non-dependent plans and 8X dependent records. A Y in the field indicates that this beneficiary is to receive any excess benefit distribution. |
| CONTINGENT | | Applies only to 2X, non-dependent plans and 8X dependent records. A Y in the field indicates that this beneficiary is a contingent beneficiary. |

| Column | Key | Notes |
|------------------|------------|---|
| DED_CUR | | The amount of the last payroll deduction calculated for this enrollment. This field is populated only if Include_Ded is selected. |
| PAY_END_DT | | The pay end date of the last payroll deduction calculated for this enrollment. This field is populated only if Include_Ded is selected. |
| CALCULATED_BASE | | Applies only to 2X and 3X plans and only if Calculate Life/Disability Covg is selected on the Enrollment Reporting page. This field is zero for dependents and beneficiaries and for employees with Sum of Dependent Coverage elections for Dependent Life/AD&D plans. This field indicates the calculated benefit amount with respect to coverage minimum/maximum, multiple jobs, and rounding rules, for coverage purposes. |
| PREMIUM_BASE | | Applies only to 2X and 3X plans and only if Calculate Life/Disability Covg is selected on the Enrollment Reporting page. This field is zero for dependents and beneficiaries and for employees with Sum of Dependent Coverage elections for dependent life/AD&D plans. This field indicates the calculated benefit amount with respect to coverage minimum/maximum, multiple jobs, and rounding rules, for premium purposes. |
| HLTH_PROVIDER_ID | | Applies only to 1X plan types. This field indicates the primary care physician. |
| PREVIOUSLY_SEEN | | Applies only to 1X plan types. |
| DEPBEN_RIDER_FLG | | Applies only to dependents and beneficiaries. Y indicates that this coverage or allocation is court-ordered. |
| CALC_RULES_ID | | Applies only to 2X and 3X plans and only if Calculate Life/Disability/Covg is selected on the Enrollment Reporting page. Identifies the calculation rule to use when calculating Calculated_Base and Premium_Base. |

Flat Amount Field

The Flat Amount field has different meanings depending upon the plan type and the plan context. In general, this field represents a flat amount of Life/AD&D coverage defined at either the plan level or the employee level; the amount may be in addition to a factor of salary coverage. For dependent life and dependent AD&D plans, it may represent the amount of coverage elected for a particular dependent. For non-dependent life/AD&D plans and pension plans, it may represent a flat amount beneficiary allocation.

The following tables exhibit how this field is used in each context. For life/AD&D plans, each column represents the value of Life_ADD_Covrg, which defines how the coverage is calculated for a plan.

Non-Dependent Life/AD&D Plan Types

| Participant | Flat Amount | Flat + Factor | EE-Specified | Special Calc | Sum of Dependents |
|-----------------------|---|---|---|---|--------------------------|
| Employee | Flat amount of coverage | Flat amount portion of total coverage | Flat amount, or flat amount portion of total coverage | Zero (not applicable) | Zero (not applicable) |
| Dependent/Beneficiary | Beneficiary allocation (if flat amount) | Beneficiary allocation (if flat amount) | Beneficiary allocation (if flat amount) | Beneficiary allocation (if flat amount) | Zero (not applicable) |

Dependent Life and Dependent AD&D

| Participant | Flat Amount | Flat + Factor | EE-Specified | Special Calc | Sum of Dependents |
|-----------------------|--|--|--|-----------------------|---------------------------|
| Employee | Flat amount of coverage for each dependent | Flat amount portion of total coverage for each dependent | Flat amount, or flat amount portion of total coverage for each dependent | Zero (not applicable) | Zero |
| Dependent/Beneficiary | Zero (not applicable) | Zero (not applicable) | Zero (not applicable) | Zero (not applicable) | This dependent's coverage |

Pension Plans

| Participant | Description |
|-----------------------|---|
| Employee | Zero (not applicable) |
| Dependent/Beneficiary | Beneficiary allocation (if flat amount allocation is elected) |

Sending Data to Benefit Providers

After the Enrollment Reporting Snapshot program is run, you are ready to send enrollment data to your plan providers. There are two ways to send this information:

- Run the appropriate SQR Provider Extract process to create a provider extract file.
- Use PeopleSoft's Carrier Reporting process in eBenefits.

See Also

PeopleSoft eBenefits PeopleBook, Integrating With eBenX

Creating SQR Provider Extracts

Provider requirements for enrollment data are seldom the same. PeopleSoft Human Resources Base Benefits business process includes a set of sample extract SQR programs that you can modify for your providers. Each sample SQR program:

- Includes a realistic set of data fields for the associated plan types.
- Records a history of each execution.
- Sends an enrollment termination to a provider only once.

After determining file layout requirements for your providers, clone the appropriate sample SQR program for each file layout you need and make any necessary changes using the database record layout information for BN_SNAP_PER, BN_SNAP_JOB, and BN_SNAP_PLAN.

There are four sample SQRs and two library files:

- BEN102.SQR: sample file extract for health (1X) plans.
- BEN103.SQR: sample file extract for life/AD&D (2X) plans.
- BEN104.SQR: sample file extract for disability (3X) plans.
- BEN105.SQR: sample file extract for savings (4X) plans.
- BENCRCFNC.SQC: library of useful functions for developing provider extracts.
- BENCRTBL.SQC: library of internal cache tables.

Running Carrier Extracts

Create a flat file that can be sent to your plan providers. Use the Health, Life/ADD, Disability, Savings Extract, or your own provider-specific pages to do this.

If you rerun an extract because of a problem and have set up the extract to send terminations only once, delete the run history record for this extract on the Run History page before running the extract again.

(USF) Sending FEHB Data to the OPM

Federal agencies must send quarterly reports to major FEHB providers. These reports allow the provider to compare their enrollment records with the agency's records.

To send FEHB data to the OPM:

1. Identify the employees and dependents that are enrolled in Medicare A, Medicare B, and Champus plans using the Benefits Person Data and the Federal Medicare Flags pages.

2. Run the FEHB Carrier Interface program to extract the data and write it to the extract file.
3. Send the data by running the Run Carrier Reporting Schedule.
4. Review the data using the Gvt Int Hist (Government Interface History) page or the FEHB Reconciliation report.

See Also

“Setting Up Dependent and Beneficiary Information”, (USF) Entering Medicare Flags

“Enrolling Participants”, (USF) Entering Medicare Flags for Employees

Pages Used Send and Review FEHB Data

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|---|--------------------|---|----------------------------------|
| Run FEHB Interface | GVT_RUN_FGBN001 | Compensate Employees, Administer Base Benefits, Process, FEHB Carrier Interface | Extract data to send to the OPM. |
| Run Carrier Interface Schedule | BN_M_RUN_CNTL | Compensate Employees, Administer Base Benefits, Process, Transmit Enrollments | Sends data to the OPM. |
| Gvt Int Hist (government interface history) | GVT_INT_HIST | Compensate Employees, Administer Base Benefits, Inquire, FEHB Interface History | Review data in the extract file. |

Setting Up and Managing Multiple Jobs

.This chapter provides an overview of multiple jobs and discusses how to:

- Set default rules for multiple jobs options.
- Change primary job data.
- Automatically build primary job data for multiple employees.

Understanding Multiple Jobs

Many organizations have employees that work in more than one job at the same time. Calculating benefit deductions and determining benefit eligibility requires special considerations. Concurrent jobs are entered using the Add Concurrent Jobs page in Administer Workforce. Each job is assigned an employee record number and a benefit record number. A benefit record number is used to group several jobs together for benefits purposes.

Each employee record number is unique. However, a benefit record number can be assigned to multiple employee record numbers.

- If the new job entitles the employee to a new set of concurrent benefits, use a new benefit record number.
- If the job does not entitle the employee to new benefits, use an existing benefit record number.

Each benefit record number must have a designated *primary job*. The primary job is used to process benefit information.

- Service and termination dates are pulled from the primary job and used by the deduction processes.
- During deduction processing, the primary job determines when a deduction should be taken from an employee's check.

For Benefits Administration the primary job is used to:

- Supply company and BAS group data to the processing schedule. If a schedule specifies a particular BAS group ID, then the BAS group ID of the primary job within a benefit record number determines whether that employee's benefit record number is processed by the schedule.

- Determine how credits (additional pay) for benefits are paid.

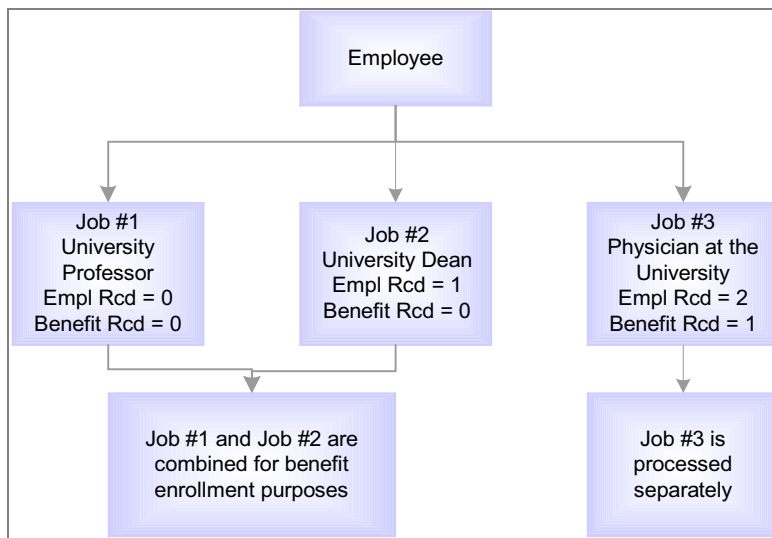
You need to determine how to group jobs for calculating benefit deductions or determining benefit eligibility. For example, suppose a professor has three jobs:

- A dean at a college.
- A faculty member at the college.
- A physician at a hospital associated with the college.

When the professor’s job data is entered in Administer Workforce, the system updates the Primary Jobs Table with the following information:

| Job Description | Employee Record # | Benefit Record # | Primary Job Indicator | Include for Eligibility | Include for Deductions |
|------------------------|--------------------------|-------------------------|------------------------------|--------------------------------|-------------------------------|
| Professor | 0 | 0 | Yes | Yes | Yes |
| Dean | 1 | 0 | No | Yes | Yes |
| Physician | 2 | 1 | Yes | Yes | Yes |

The following diagram shows the employee’s three jobs and two benefit records. Each benefit record corresponds to a set of benefits enrollments.



An employee with three jobs and two benefit records

You can set default rules on the Multiple-Jobs Options page to determine these options automatically for hires, rehires, and terminations.

See Also

PeopleSoft Human Resources PeopleBook: Administer Your Workforce

Setting Default Multiple Jobs Options

Changing Benefit Record Numbers

It is best not to change the benefit record number of an existing job. Doing so invalidates primary job indicators on the effective-dated Primary Jobs Table and can result in erroneous processing within PeopleSoft Benefits Administration and PeopleSoft Payroll for North America, which may lead to abnormal termination of some processes.

Whenever changes are made through the Job Data, Add Concurrent Job, or Current Job components, the system checks that only one job within a given benefit record is designated as the primary job. If the system finds a problem, such as no primary job or multiple primary jobs, a worklist entry tells the benefits administrator to run the report, *Generating the Primary Jobs Audit Report*.

See Also

PeopleSoft Application Fundamentals for HRMS PeopleBook, “Appendix: PeopleSoft Application Fundamentals for HRMS Reports”

Understanding Multiple Jobs Data and Calculating Deductions

To calculate deductions for multiple jobs, the system needs to know:

- The job or jobs that contribute salary information for calculating the deduction or coverage amount for salary-based plans.

To keep track of this information, the system uses the:

- Primary Jobs Table, which is automatically created whenever a job is added using the Add Concurrent Job pages and updated whenever a job is terminated, based upon rules that you define in the BAS MJ Options Table. This table indicates whether a job is:
 - Included for Benefits Administration eligibility processing.
 - Included in the deduction calculation.
 - The primary job.
- BAS MJ Options Table, which holds the rules that are used to automatically set the flags in the Primary Jobs Table. You can override these flags on the Primary Jobs Maintenance page.
- Calculation rules, which specify how to add the employee’s jobs together during the deduction calculation process.

Even if Multiple Jobs processing is not enabled, the system populates the Primary Jobs Table whenever employees are hired; you then have a base of primary job data if you later decide to enable Multiple Jobs.

Understanding Calculation Rules

The calculation rules specify how to group jobs when calculating deductions based on an employee's salary. The following fields determine deduction or coverage amounts for salary-based plans:

- Combine Salaries check box on the Calculation Rules Table.
- Grouping Method on the Calculation Rules Table.
- Deductions check box on the Primary Jobs Table.

The primary job indicator controls the frequency of benefit deductions. Benefit deductions are taken only when the primary job for the enrollment's benefit record is part of the payroll calculation.

Benefit deductions that are based upon actual employee earnings, such as savings, retirement, or pension plans, are taken according to how the those plans are set up, or in some cases, according to the contribution method—either percentage of earnings or a flat amount—that the employee selects upon enrollment.

- If the contribution is based on a percentage, the deduction is taken on every check that the employee receives for all jobs for the benefit record associated with the enrollment.
- If the contribution is based on a flat amount, the deduction is taken only when the primary job for the enrollment benefit record is paid.

Summary of Calculating Deductions by Plan Type

Here's how these fields are used to calculate coverage and deductions for each plan type series:

| Plan Type | Basis/Type | Usage |
|------------------|--|---|
| Health (1X) | Flat amount or compensation rate based | To calculate the premium if a Salary Rate Table is specified, salaries are combined using the Include flag for each job along with the combination parameters on the Calculation Rule Table. |
| Life/AD&D (2X) | Flat amount or compensation rate based | If the coverage is based upon a factor of salary, salaries are combined using the Include flag for each job along with the combination parameters on the Calculation Rule Table. If a Salary Rate table is specified, salaries are combined using the "Include Flag" along with the combination parameters on the calculation rule, in order to calculate the premium. |

| Plan Type | Basis/Type | Usage |
|------------------------|--|--|
| Disability (3X) | Flat amount or compensation rate based | To determine coverage, salaries are combined using the Include flag for each job along with the combination parameters on the Calculation Rule Table. To calculate the premium if a Salary Rate table is specified, salaries are combined using the Include flag for each job along with the combination parameters on the Calculation Rule Table. |
| Savings (4X) | Flat amount or earnings-based | The combination parameters on the Calculation Rules Table, as well as the Include for Deductions flag, are ignored: all jobs within the benefit record contribute earnings to the deduction and limits. Savings plans contributions can be expressed as either a flat amount or a percentage of eligible earnings (controlled by special accumulators). Contributions expressed as a percentage of eligible earnings are calculated based upon the earnings from all jobs in the enrollment's benefit record number in the current check, without regard to the setting of the Include flag for each job. Limits are determined using year-to-date deductions across all benefit record numbers. |
| Leave (5X) | N/A | Not applicable—there is no coverage amount and no deduction with these plans. |
| FSA (6X) | Flat amount | Not applicable—there is no coverage amount, and deductions are not based upon salary or earnings. |
| Retirement (7X) | Earnings-based | The combination parameters on the Calculation Rules Table, as well as the Include for Deductions flag, are ignored: all jobs within the benefit record contribute earnings to the deduction. Contributions are expressed as a percentage of eligible earnings (controlled by a special accumulator), and are calculated based upon the earnings from all jobs in the enrollment's benefit record number, in the current check. Limits (if any) are determined using year-to-date deductions across all benefit record numbers. |
| Pension (8X) | Earnings-based | The combination parameters on the Calculation Rules Table, as well as the Include for Deductions flag, are ignored: all jobs within the benefit record contribute earnings to the deduction. Contributions expressed as a percentage of eligible earnings are calculated based upon the earnings from all jobs in the enrollment's benefit record number, in the current check. Limits (if any) are determined using year-to-date deductions across all benefit record numbers. |
| Vacation Buy/Sell (9X) | CompRate-based | Calculation rules are not used for these plans, and the Include flag is ignored. The cost is calculated by adding compensation rates across all active jobs in the enrollment's benefit record number. |

See Also

“Setting Up Benefit Support Tables”, Setting Up Rates and Premium Limits and Setting Up Calculation Rules

Setting the Default Rules for Multiple Jobs Options

You can set default multiple-job rules for the following common events:

- Hires.
- Rehires.
- Terminations.

Page Used to Set Default Rules for Multiple Jobs Options

| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|--|--------------------|---|--|
| Multiple-Job Optns (multiple job options) | BAS_MJ_OPTIONS | <ul style="list-style-type: none"> • Define Business Rules, Define Automated Benefits, Setup, Multiple Jobs Options, Multiple-Job Options Table • Define Business Rules, Define Base Benefits, Setup, Multiple Jobs Options, Multiple-Job Options Table | Define employee-level multiple jobs options used automatically whenever a new job is entered into the system, or whenever an existing job is rehired or terminated through the Administer Workforce pages. |

Setting Default Multiple Jobs Options

Access the Multiple-Job Optns page.

Multiple-Job Optns

When a Job is Hired, Re-Hired or Added

Eligibility and Deductions

*Eligibility: Include this Job ▼

*Deductions: Include this Job ▼

If assigned to an existing Benefit Record

*Assign Primary Job: No Change to Primary Job ▼

When a Job Terminates

Eligibility and Deductions

*Eligibility: Include this Job ▼

*Deductions: Exclude this Job ▼

If the Primary Job terminates

*Re-Assign Primary Job: Lowest Active Job ▼

Explode activity triggers to all Benefit Records

Job Triggers Passive Service Triggers Multi-Job Triggers

Workflow for Job Actions Find | View All First ◀ 1-2 of 194 ▶ Last

| Action | Reason Code | Effective Date | Description | Notify Benefits Administrator |
|--------|-------------|----------------|----------------------|-------------------------------|
| ADD | CON | 01/01/1900 | Consultant | <input type="checkbox"/> |
| ADD | EBM | 01/01/1900 | Elected Board Member | <input type="checkbox"/> |

Multiple-Jobs Optns page

**When a Job is Hired:
Eligibility and Deductions**

Set default rules for whether new concurrent jobs are included or excluded during deduction processing and for Benefits Administration users to determine benefit eligibility.

**If assigned to an existing
Benefit Record**

If an employee is hired into a concurrent job and the job is linked to an existing benefit record number, indicate if the new job should be designated as the primary job.

**When a Job is Terminated:
Eligibility and Deductions**

Set default rules for whether terminated jobs should continue to contribute information during deduction processing and for Benefits Administration users to determine benefit eligibility.

**If the Primary Job
terminates**

Indicate how to reassign the primary job designation if the terminating job is the primary job.

No Change: Don't reassign the primary job designation.

Lowest Active Job: Reassign the primary job designation to the lowest active employee record number. If no jobs are active, the job with the lowest employee record number is designated as the primary job.

Highest Active Job: Reassign the primary job designation to the highest active employee record number. If no jobs are active, the job with the highest employee record number is designated as the primary job.

Explode activity triggers to all Benefit Records

For Benefits Administration Users only:

Select these options when you have an eligibility rule that applies to all benefit programs and that crosses benefit record numbers.

For example, suppose that an employee holds four jobs, is enrolled in two benefit programs, and has two benefit records.

If the employee experiences a job data change for one job, and eligibility rules cross benefit records, an event must be created for all benefit records. A change to a job in benefit record A might affect the employee's eligibility for benefits in benefit record B if any eligibility rule in the benefit program for benefit record B contains a Grouping Method of *All Flagged*.

Workflow for Job Actions

While the multiple jobs rules are automatically applied for hires, rehires and terminations, you can automatically notify a benefits administrator to review the situation for any job action.

For example, a change to the full-time/part-time status of a concurrent job might affect the determination of the primary job.

To configure this function:

1. Locate the action/action reason combinations that should generate a workflow notification,
2. Select the *Notify Benefits Administrator* check box.

Whenever a job action is entered into the system for one of these combinations, a worklist entry is generated for the benefits administrator.

Selecting the worklist entry accesses the Administrator to the Primary Jobs Maintenance page for that employee.

Note. In some instances, the Primary Jobs Maintenance page does not automatically appear. Instead, the Search dialog box appears with the Employee ID and the Effective Date fields completed. This indicates that the system could not find any information in the Primary Jobs Table for this effective date.

When this happens, clear the Effective Date from the dialog box and select OK. This brings up a list of all of the effective dates in existence for this employee's Primary Job data. Select the effective date closest to, but not past, the effective date of the job action from the worklist entry.

Changing Primary Job Data

Changing an employee's Primary Job Indicator, Include for Eligibility flag, or Include for Deductions flag can affect deduction calculation and processing, and benefit eligibility in Benefits Administration. This section describes how to:

- Change primary job data.
- View job details.

Page Used to Maintain Primary Job Data


| <i>Page Name</i> | <i>Object Name</i> | <i>Navigation</i> | <i>Usage</i> |
|--------------------|--------------------|---|---|
| Primary Jobs Flags | BN_PRIJOBS_MAINT | <ul style="list-style-type: none"> • Compensate Employees, Administer Automated Benefits, Use, Primary Job Flags Maintenance, Primary Jobs Flags Maintenance • Compensate Employees, Administer Base Benefits, Use, Primary Job Flags Maintenance, Primary Jobs Flags Maintenance | Manually change an employee's Primary Job Indicator, the Include for Eligibility flag, and the Include for Deductions flag. |
| Job Data | BN_ADDL_DATA_INQ | <ul style="list-style-type: none"> • Compensate Employees, Administer Automated Benefits, Use, Primary Job Flags Maintenance, Primary Jobs Flags Maintenance, click Details • Compensate Employees, Administer Base Benefits, Use, Primary Job Flags Maintenance, Primary Jobs Flags Maintenance, click Details | View job details. |




Changing Primary Job Data

Access the Primary Jobs Flags page.

Primary Jobs Flags

EmpID: KU0010 Santos, Antonio

Effective Date: 09/12/1997

 [Insert New Effdt](#)

| Primary Job Flags Maintenance | | | | | | | Find View All | First  1 of 1  Last |
|-------------------------------|------------------|----------------|-----------------------|-------------------------------------|-------------------------------------|-------------------------------------|---|---|
| Job Data | Employee Rcd Nbr | Effective Date | Benefit Record Number | Primary Job | Include Eligibility | Include Deductions | | |
| Detail | 0 | 09/12/1997 | 0 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |  | |

Primary Jobs Flags page

Because the settings on this page are critical to the proper operation of PeopleSoft Benefits Administration and PeopleSoft Payroll for North America, PeopleCode handles most of the data manipulation in the database.

Use the forward and reverse buttons to navigate through the different effective dates where changes to the primary jobs data have occurred. Add a new row to change the primary job designation. When you save the page, PeopleCode turns off the primary job designation of the previously designated job and ensures that all of the rules for data integrity are maintained.

Job DataDetail

Click **Detail** to enter additional job information in the Job Data page.

Primary Job

Select this check box if you want this job to be flagged as the primary job for this benefit record number.

Include Eligibility

For Benefits Administration only.

Select this check box if you want this job to be included by the system determining the employee’s benefit eligibility.

Include Deductions

Select this checkbox if you want this job to be included when the calculates the employee’s benefit deduction and coverage.

Note. If you change the Primary Job Indicator or the Include for Deductions flag and Retro Deductions is activated, the system creates a retro/deduction trigger.

Viewing Job Details

Access the Job Data page.

| Job Data | | |
|-------------------------|-------------------------|-----------------------------------|
| Additional Job Data | | |
| EmplID: | KU0010 | Santos, Antonio |
| Empl Rcd#: | 0 | Effective Date: 09/12/1997 |
| Employee Status: | Active | |
| Position: | 19000018 | Administrative Assistant |
| Department: | KU001 | |
| Location Code: | KUNY00 | |
| Job Code: | KU051 | |
| Standard Hours: | 40.00 | FTE: |
| Ben Status: | Active | |
| Benefits System: | Benefits Administration | |

Job Data page

The system displays the job information in effect as of the effective date of the selected Primary Jobs entry.

Automatically Building Primary Job Data for Multiple Employees

Once you've established your employee population in the database (Personal Data, Employment, and Job tables have been loaded), use the Primary Job Utility to automatically build Primary Job data for one or more employees. Run the Primary Job Utility process whenever you add a new employee population to the database through an external interface or database load (such as when implementing employee groups in phases or acquiring another company).

Note. When you upgrade your PeopleSoft database from a previous release, the Primary Jobs information is automatically built as part of the upgrade process. There is no need to run this utility after an upgrade unless you've added more employees to the database through an external interface after performing the upgrade.

Page Used to Automatically Build Primary Job Data for Multiple Employees

| Page Name | Object Name | Navigation | Usage |
|--|---------------|---|---|
| Primary Job Maint (primary job maintenance) | RUNCTL_BEN500 | Compensate Employees, Administer Base Benefits, Process, Primary Job Utility, Primary Job Maintenance | Automatically build primary job information for multiple employees. |

Running the Primary Job Utility

Access the Primary Job Maint page.

Primary Job Maint page

When the utility runs, all existing data for the indicated employee population (if any) in the Primary Jobs Table is deleted. For each employee, a new effective-dated entry is made, assigning the primary job designation to the lowest active employee record within a benefit record number. Primary Job information is created for a time span bounded by the earliest and latest job effective dates for all jobs within a benefit record. If all jobs within a benefit record are terminated, the job with the lowest employee record is designated as the primary job.

Warning! All changes made through the Primary Jobs Flags page for the selected employee population are lost.

Run Option

Specify which employees to process:

Employees Specified in List: Enter one or more employee IDs in the **Employee List** group box.

All Employees in the Database: All employees in the Personal Data Table are processed.

Employees in a PS Table: Enter the name of any PeopleSoft table that is defined in the Application Designer and contains an Employee ID field.

Employees in a non-PS Table: Enter a non-PeopleSoft table name that contains an Employee ID field.

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