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Compensation and Benefits Management Guide

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HRMS Glossary

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Preface

Intended Audience

Welcome to Release 12 of the *Oracle US Federal Human Resources Compensation and Benefits Management Guide.*

This guide assumes you have a working knowledge of the following:

- The principles and customary practices of your business area.
- Oracle HRMS.

  If you have never used Oracle HRMS, Oracle suggests you attend one or more of the Oracle HRMS training classes available through Oracle University
- Oracle Self-Service Web Applications.
- The Oracle Applications graphical user interface.

  To learn more about the Oracle Applications graphical user interface, read the *Oracle Applications User's Guide*.

See Related Information Sources on page xviii for more Oracle Applications product information.

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Structure

1 General Compensation Structures
2 Salary and Grade Related Pay and Progression
3 Compensation and Awards Management
4 Leave and Absence Management
5 Setup for Health and Welfare Management
6 Administration for Health and Welfare Management
HRMS Glossary

Related Information Sources

Oracle HRMS shares business and setup information with other Oracle Applications products. Therefore, you may want to refer to other user guides when you set up and use Oracle HRMS.

You can read the guides online by choosing Library from the expandable menu on your HTML help window, by reading from the Oracle Applications Document Library CD included in your media pack, or by using a Web browser with a URL that your system administrator provides.

If you require printed guides, you can purchase them from the Oracle store at http://oraclestore.oracle.com.

Guides Related to All Products

Oracle Applications User's Guide

This guide explains how to enter data, query, run reports, and navigate using the graphical user interface (GUI). This guide also includes information on setting user profiles, as well as running and reviewing reports and concurrent processes.

You can access this user's guide online by choosing Getting started with Oracle Applications from any Oracle Applications help file.

Guides Related to This Product

Oracle Daily Business Intelligence for HRMS User Guide

This guide describes the dashboards and reports available for HR Line Managers, Chief HR Officer, Budget Managers, and Benefits Managers using Daily Business Intelligence for HRMS. It includes information on using parameters, how DBI for HRMS derives values, and how to troubleshoot dashboards and reports.

Oracle Daily Business Intelligence for HRMS Implementation Guide

This guide provides basic setup procedures for implementing and maintaining HRMS-related dashboards.

Oracle Daily Business Intelligence Implementation Guide

This guide describes the common concepts for Daily Business Intelligence. It describes the product architecture and provides information on the common dimensions, security considerations, and data summarization flow. It includes a consolidated setup checklist by page and provides detailed information on how to set up, maintain, and troubleshoot Daily Business Intelligence pages and reports for the following functional areas: Financials, Interaction Center, iStore, Marketing, Product Lifecycle Management, Projects, Procurement, Sales, Service, Service Contracts, and Supply Chain.

Oracle Daily Business Intelligence User Guide

This guide describes the common concepts for Daily Business Intelligence. It describes the product architecture and provides information on the common dimensions, security considerations, and data summarization flow. It includes a consolidated setup checklist by page and provides detailed information on how to set up, maintain, and troubleshoot Daily Business Intelligence pages and reports for the following functional areas: Financials, Interaction Center, iStore, Marketing, Product Lifecycle Management, Projects, Procurement, Sales, Service, Service Contracts, and Supply Chain.

Oracle Human Resources Management Systems Enterprise and Workforce Management Guide

Learn how to use Oracle HRMS to represent your enterprise. This includes setting up your organization hierarchy, recording details about jobs and positions within your enterprise, defining person types to represent your workforce, and also how to manage your budgets and costs.

Oracle Human Resources Management Systems Workforce Sourcing, Deployment, and Talent Management Guide

Learn how to use Oracle HRMS to represent your workforce. This includes recruiting

new workers, recording and managing the workforce, processing Request for Personnel Actions and mass actions, and reporting on your workforce.

Oracle Human Resources Management Systems Payroll Processing Management Guide

Learn about wage attachments, taxes and social insurance, the payroll run, and other processes.

Oracle Human Resources Management Systems Compensation and Benefits Management Guide

Learn how to use Oracle HRMS to manage compensation. For example, read how to process compensation and awards, set up automated step increases, and federal benefits such as Federal Health Employee Benefits and Thrift Savings Plans. You can also learn about managing leave and absences, and reporting on compensation.

Oracle Human Resources Management Systems Configuring, Reporting, and System Administration Guide

Learn about extending and configuring Oracle HRMS, managing security, auditing, information access, and letter generation.

Oracle Human Resources Management Systems Implementation Guide

Learn about the setup procedures you need to carry out in order to implement Oracle HRMS successfully in your enterprise.

Oracle Human Resources Management Systems FastFormula User Guide

Learn about the different uses of Oracle FastFormula, and understand the rules and techniques you should employ when defining and amending formulas for use with Oracle applications.

Oracle Self-Service Human Resources Deploy Self-Service Capability Guide

Set up and use self-service human resources (SSHR) functions for managers, HR Professionals, and employees.

Oracle Human Resources Management Systems Deploy Strategic Reporting (HRMSi)

Implement and administer Oracle Human Resources Management Systems Intelligence (HRMSi) in your environment.

Oracle Human Resources Management Systems Strategic Reporting (HRMSi) User Guide

Learn about the workforce intelligence reports included in the HRMSi product, including Daily Business Intelligence reports, Discoverer workbooks, and Performance Management Framework reports.

Oracle Human Resources Management Systems Approvals Management Implementation Guide

Use Oracle Approvals Management (AME) to define the approval rules that determine the approval processes for Oracle applications.

Oracle Human Resources Management Systems Window Navigation and Reports

Guide

This guide lists the default navigation paths for all windows and the default reports and processes as they are supplied in Oracle HRMS.

Oracle iRecruitment Implementation and User Guide

Set up and use Oracle *i*Recruitment to manage all of your enterprise's recruitment needs.

Oracle Learning Management User Guide

Use Oracle Learning Management to accomplish your online and offline learning goals.

Oracle Learning Management Implementation Guide

Implement Oracle Learning Management to accommodate your specific business practices.

Oracle Time and Labor Implementation and User Guide

Learn how to capture work patterns, such as shift hours, so that this information can be used by other applications, such as General Ledger.

Installation and System Administration

Oracle Applications Concepts

This guide provides an introduction to the concepts, features, technology stack, architecture, and terminology for Oracle Applications Release 12. It provides a useful first book to read before an installation of Oracle Applications. This guide also introduces the concepts behind Applications-wide features such as Business Intelligence (BIS), languages and character sets, and Self-Service Web Applications.

Oracle Applications Installation Guide: Using Rapid Install

This guide provides instructions for managing the installation of Oracle Applications products. Oracle Rapid Install minimizes the time to install Oracle Applications and the Oracle technology stack by automating many of the required steps. This guide contains instructions for using Oracle Rapid Install and lists the tasks you need to perform to finish your installation. You should use this guide in conjunction with individual product user guides and implementation guides.

Oracle Applications Upgrade Guide: Release 11i to Release 12

Refer to this guide if you are upgrading your Oracle Applications Release 11*i* products to Release 12. This guide describes the upgrade process and lists database and product-specific upgrade tasks.

Oracle Applications Maintenance Procedures and Oracle Applications Maintenance Utilities

Use these guides to help you run the various AD utilities (such as AutoUpgrade, AutoPatch, AD Administration, AD Controller, AD Relink, and License Manager) and maintain the Oracle applications file system and database.

Oracle Applications System Administrator's Guides

These guides (Configuration, Maintenance, and Security) provide planning and reference information for the Oracle Applications System Administrator. They describe how to define security, customize menus and online help, and manage concurrent processing.

Oracle Alert User's Guide

This guide explains how to define periodic and event alerts to monitor the status of your Oracle Applications data.

Oracle Applications Developer's Guide

This guide contains the coding standards followed by the Oracle Applications development staff and describes the Oracle Application Object Library components that are needed to implement the Oracle Applications user interface described in the *Oracle Applications User Interface Standards for Forms-Based Products*. This manual also provides information to help you build your custom Oracle Forms Developer forms so that the forms integrate with Oracle Applications.

Oracle Applications User Interface Standards for Forms-Based Products

This guide contains the user interface (UI) standards followed by the Oracle Applications development staff. It describes the UI for the Oracle Applications products and how to apply this UI to the design of an application built by using Oracle Forms.

Other Implementation Documentation

Oracle Workflow Administrator's Guide

This guide explains how to complete the setup steps necessary for any Oracle Applications product that includes workflow-enabled processes, as well as how to monitor the progress of runtime workflow processes.

Oracle Workflow Developer's Guide

This guide explains how to define new workflow business processes and customize existing Oracle Applications-embedded workflow processes. It also describes how to define and customize business events and event subscriptions.

Oracle Workflow User's Guide

This guide describes how Oracle Applications users can view and respond to workflow notifications and monitor the progress of their workflow processes.

Oracle Workflow API Reference

This guide describes the APIs provided for developers and administrators to access Oracle Workflow.

Oracle Applications Flexfields Guide

This guide provides flexfields planning, setup, and reference information for the Oracle HRMS implementation team, as well as for users responsible for the ongoing maintenance of Oracle Applications product data. This guide also provides information on creating custom reports on flexfields data.

Oracle eTechnical Reference Manuals

Each eTechnical Reference Manual (eTRM) contains database diagrams and a detailed description of database tables, forms, reports, and programs for a specific Oracle Applications product. This information helps you convert data from your existing applications, integrate Oracle Applications data with non-Oracle applications, and write custom reports for Oracle Applications products. Oracle eTRM is available on Oracle *MetaLink*.

Integration Repository

The Oracle Integration Repository is a compilation of information about the service endpoints exposed by the Oracle E-Business Suite of applications. It provides a complete catalog of Oracle E-Business Suite's business service interfaces. The tool lets users easily discover and deploy the appropriate business service interface for integration with any system, application, or business partner.

The Oracle Integration Repository is shipped as part of the E-Business Suite. As your instance is patched, the repository is automatically updated with content appropriate for the precise revisions of interfaces in your environment.

Do Not Use Database Tools to Modify Oracle Applications Data

Oracle STRONGLY RECOMMENDS that you never use SQL*Plus, Oracle Data Browser, database triggers, or any other tool to modify Oracle Applications data unless otherwise instructed.

Oracle provides powerful tools you can use to create, store, change, retrieve, and maintain information in an Oracle database. But if you use Oracle tools such as SQL*Plus to modify Oracle Applications data, you risk destroying the integrity of your data and you lose the ability to audit changes to your data.

Because Oracle Applications tables are interrelated, any change you make using an Oracle Applications form can update many tables at once. But when you modify Oracle Applications data using anything other than Oracle Applications, you may change a row in one table without making corresponding changes in related tables. If your tables get out of synchronization with each other, you risk retrieving erroneous information and you risk unpredictable results throughout Oracle Applications.

When you use Oracle Applications to modify your data, Oracle Applications automatically checks that your changes are valid. Oracle Applications also keeps track of who changes information. If you enter information into database tables using database tools, you may store invalid information. You also lose the ability to track who has changed your information because SQL*Plus and other database tools do not keep a record of changes.

1

General Compensation Structures

General Compensation Structures Overview

Using Oracle HRMS, you have all the flexibility you need to model your compensation and benefit packages. You decide exactly what information you want to hold for compensation management and, if you require it, for payroll processing.

The product includes predefined standard and special rate pay tables and predefined elements. Calculation rules facilitate processing individual pay actions with a Request for Personnel Action such as Appointment and Promotion actions, mass actions such as Mass Salary, and automatic actions such as Within Grade Increases. The product also includes predefined benefits for enrolling employees in Federal Employee Health Benefits and Thrift Savings Plans.

This overview outlines the generic concepts for setting up agency-only compensation. In addition to considering these concepts about pay, you may also want to refer to the following information presented in other areas:

- Pay plans and pay tables, page 2-1
- Absences and PTO accruals, page 4-1
- Federal Employee Health Benefits, page 6-4
- Thrift Savings Plans, page 6-10

Elements: Define - Administer - Process

Element is an Oracle HRMS term for the components of a compensation and benefits package, such as salary, PTO accrual plan, and health plan. By defining elements, you can structure information relating to employees' compensation and benefits in a highly flexible way.

The product includes predefined elements that you assign with the Request for

Personnel Action (RPA). You can also define and assign elements for agency-specific compensation that does not require an RPA.

First, you define elements, then you administer and process them.

Define

Definition includes rules about valid compensation values, who can receive the elements, and how they are processed. You define elements, and associated rules and formulas, as part of your Oracle HRMS implementation. You can define new elements and make certain changes to existing definitions at any time.

Administer

When definition is complete, you administer compensation and benefits by making element entries for your employees. You can quickly record earnings, deductions, time worked and other information by entering elements in batches.

Process

You process earnings and deductions by running payrolls. The payroll run automatically uses the calculations you have written as formulas, and uses other rules (such as processing frequency) that you have defined.

Compensation Objects

For most benefits and some types of compensation, you define compensation objects as well as elements. You can define a hierarchy of compensation objects, optionally starting with *programs* at the highest level, to represent a package of benefits you offer, followed by plan types, plans, and options. A *plan type* is a category of plans, such as a medical plan type. A *plan* is a specific offering, such as a health benefits plan, and an *option* is an electable choice within a plan.

If you use SSHR, employees can use self-service to enter voluntary contributions, such as Thrift Savings Plans. They can also manage their own enrollments in benefit plans, while the back-office maintains control of the plan's administration.

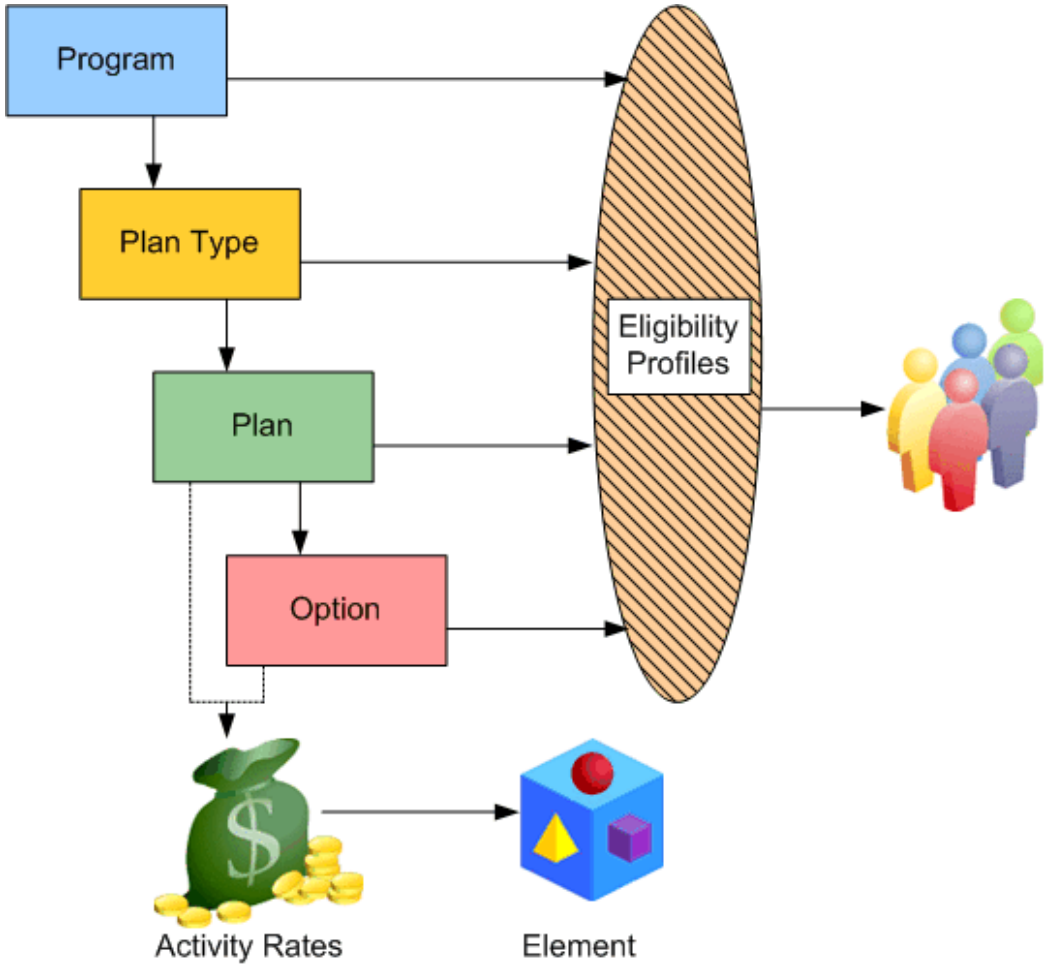
Eligibility Profiles

If you have defined compensation objects, you manage participation by defining eligibility profiles and attaching them to the appropriate level of the hierarchy. You can define several profiles for each object, and each profile can contain both required and optional criteria. For example, the profile could specify that eligible employees must work full time, and either have been employed for at least two years, or be assigned to a manager grade.

Activity Rates

You can attach any number of activity rates to a plan or option to specify the contributions made by employee and employer, or the distributions, such as compensation awards. When you define an activity rate, you can associate it with an element. Activity rates support a variety of calculation methods to determine how much a person pays or receives: flat amount, multiple of premium, multiple of elected coverage, and so on. When a participant enrolls in a plan, the enrollment process runs the calculation and enters the result on an element entry for the employee.

General Compensation Structures



Reporting on Compensation Data

Oracle HRMS includes a number of windows and reports for compensation data, such as the List Employees by Element window

Oracle HRMS also includes some Discoverer Workbooks to enable you to analyze

salary information by organization, supervisor, and job, comparing with grade rate values where appropriate.

See: General Compensation Structures -- Reports, *Oracle HRMS Compensation and Benefits Management Guide*.Using System Extract, you can define interfaces to extract compensation data for reporting or transfer to third parties. Oracle HRMS supplies predefined extracts that you can use or configure. See: HR/Payroll Extracts, page 1-36.

Key Concepts

To get the most out of the compensation and benefits functionality of Oracle HRMS, you need to understand the following key concepts

- Elements
- Input values
- Element links
- Element classifications
- Element entries
- Plan design
- Eligibility profiles
- Activity rates

General Compensation Structures

Can you monitor the costs of compensation policies?

Yes, you can allocate labor costs to particular departments, products, or projects. You can enter default cost centers for organizations and employees, then override these, if required, when you enter timecard data.

How can you review the effectiveness of compensation packages?

You can compare salaries and other compensation for any groups of employees, for example grouped by organization, position or grade. You can break down salary changes into components, such as Cost of Living, Location Adjustment, or Promotion, to identify any performance-related increases. You can also associate salary changes with performance reviews.

What does Oracle offer for benefits administration?

Federal government employees can elect, change, or cancel Federal Health Benefits (FEHB) and Thrift Savings Plan (TSP) contributions as well as TSP Catchup Contributions using self-service or the Standard Benefits professional interface. The application simplifies the process of determining health benefit eligibility through life events. With the exception of employees who waive the pre-tax deductions, federal employees can change their benefits selection only when a valid life event change occurs.

The Standard Benefits feature set lets you define your benefits offering in a hierarchical manner, so that requirements you specify at the program level are inherited by the plans and options in that program. You can use a variety of factors, such as length of service, to define eligibility requirements for participation in a plan. The system supports centralized enrollment by benefit administrators or web-based self-service enrollments. Standard benefits is best for organizations that outsource a significant portion of their benefits administration. System extract features let you export data to third party benefits administrators.

Basic Benefits is a limited feature set that supports administration of benefit plans for employees and their dependents, including COBRA coverage.

How do you record absence entitlement?

As with all benefits, you can decide the type of absences you want to track and the information you want to record. You can create Paid Time Off (PTO) accrual plans with your own rules defining how much time can be accrued, when it must be used, how much time can be carried forward to a new plan period, and so on. Oracle HRMS provides reports and windows for monitoring each type of absence for groups or individuals.

Can you enter weekly timecard data?

Yes, using Batch Element Entry, you can enter timecard information for a group of employees, using default values as appropriate. You can validate your entries against system rules and external control totals before uploading it to the database in time for the payroll run.

Can you be sure that compensation information remains confidential?

Yes, you can. Oracle HRMS security features enable you to choose which users can view compensation information, what types of compensation they need access to, which employees records they can see, and whether they are able to update them.

How does Oracle HRMS help me reduce data entry errors?

There are three ways:

- By removing the need to make entries at all, when compensation entries are standard for a group of employees and can be entered automatically.
- By reducing keystrokes when you use Batch Element Entry to enter batches of entries.
- By validating all entries using rules you define at setup time.

I'm entering compensation details for analysis but not for payroll processing. How do I reduce data entry work to a minimum?

If the same compensation entry applies to a group of employees, the system can enter it automatically. You need to set up the element with *standard links*. Use Batch Element Entry to start or update other entries in batches.

Can I see a history of all compensation values for an employee over time?

Yes, you can view all changes for one or more types of compensation. For salaries, you can also see new proposed salary changes.

Elements

Elements: Building Blocks of Pay and Benefits

With Oracle HRMS you define a working model of your own *types* of compensation and benefits, and the policies or business rules that govern the allocation of these to your employees. You define these types as elements. Elements are the building blocks of pay and benefits, both for HR analysis and payroll processing.

Elements can represent:

- Earnings, such as salary, wages, and bonuses
- Benefits, such as retirement plans
- Absences from work
- Non-payroll payments, such as expense reimbursements
- Tangible items distributed to employees, such as tools, uniforms, mobile phones, or computers
- Voluntary and involuntary deductions

There is no limit to the number of elements you can define and all your definitions are datetracked.

How Are Elements Created?

Some elements are supplied predefined with Oracle HRMS, others are generated by the application when you define certain types of compensation and benefits, and the remainder you can define to best meet the needs of your own agency. If necessary, you can also delete elements, as explained in Deleting an Elemen, page 1-28t.

Predefined Elements

The product includes predefined elements that you assign with the Request for Personnel Action (RPA). Do not delete or change these predefined elements. You can define agency-specific elements by following the procedure for Defining an Element to Hold Information, page 1-23.

Generated Elements

When you create PTO Accrual Plans, the application generates elements for you.

Input Values: Flexible Description of Compensation

To give an employee an earning or deduction, you make an element entry. An entry can contain up to 15 items of information, which you define when you create the element. For example, for a government car element, you might want to store car make, model, year, date of issue to the employee, and mileage when issued.

These items of information are called input values. You decide what validation to apply to these values, whether they are required or optional, and the type of information they can accept:

- Alphabetic characters or words
- Integers or numbers
- Money
- Hours and minutes
- Date, day or time

Processing Input Values

Input values are so called because they are the inputs to calculations. In a payroll run, formulas process the input values and other database information to produce *run results* . The input value receives entries of relevant data for employees who are eligible for the element.

For example, the element Annual Salary would likely have an input value Amount, for entries of employees' yearly salary amounts, while the element Wages would have the input value Hours Worked, for entry of employees' hours worked each period.

Rules for Allocating Compensation

You can determine which employees are eligible for an element with element links. When you define a link for a benefit, do not select any assignment components, so that all employees are eligible for the benefit. Instead use participation eligibility profiles to restrict eligibility for the benefit.

The elements predefined for Oracle US Federal Human Resources are linked to all payrolls. You cannot change the assignment components for these links.

If you are using Standard Benefits, when you define a link for a benefit, do not select any assignment components to restrict eligibility for the benefit. Instead use participation eligibility profiles.

Similarly, if you are using collective agreements, when you define a link for an element that you are going to select as an entitlement item for a collective agreement, do not

restrict eligibility using the link. You restrict eligibility using eligibility profiles.

Assignment Components

The assignment components to which you can link elements are:

- **Payroll**: If employees on all your payrolls are eligible for an element, you can link it to **all payrolls**.
- **Employment category**, for example, Full Time or Part Time
- **Organization,**for example department, in which employees work
- **Location**, thephysical site where your employees work
- **Job**, such as occupational series
- **Grade**
- **Groups**to which the employee belongs: You set up all the groups that are appropriate for your enterprise. For example, you could decide to group employees by company within a multi-company enterprise, and by union membership.
- **Position,** which is a class of job performed in a particular organization.

Qualifying Conditions: Minimum Age or Period of Service

An employee might be eligible for an element and yet not receive it because he or she does not meet other qualifying conditions.

Two common qualifying conditions are a minimum age or a minimum period of service in the current assignment. You can define these conditions when you define the element. You can enter or adjust these conditions when you define the element links so that you have different qualifying conditions for different groups of assignments.

These qualifying conditions are checked automatically when you try to enter an element for an employee.

Compensation Entry: Making It Fast and Reliable

To reduce the work of entering compensation information for employees and to reduce the risk of errors, you specify rules about entries when you define an element. For example:

- You can specify defaults, lookups, minimum and maximum values, or other validation to control what is entered in input values.
- You also specify the duration of entries, that is, whether they are valid for one pay

period only, or whether they persist until further action is taken to end the entry.

- For some elements, you can even set up automatic entry with default values so that no action is required to ensure that employees get the compensation for which they are eligible.

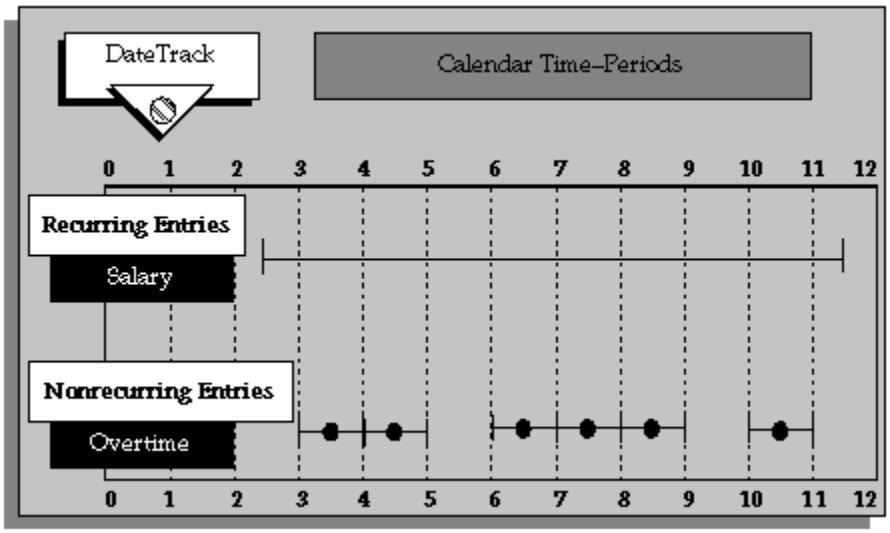
You can create customized versions of the Element Entries window. A customized version might restrict the elements a user can enter. This enhances speed, usability, and security for specific data entry scenarios. Users can also enter batches of entries using default values to reduce keystrokes and thus speed up data entry and reduce errors.

Duration of Element Entries

Some entries are valid for one pay period only. For example, to produce an employee's wages or overtime pay for a period you process the entries of regular hours worked or overtime hours. You define these elements with the processing type *nonrecurring*. Notice that pay periods are determined by the payroll to which an employee is assigned. Employees must be assigned to a payroll to receive nonrecurring elements, even if you are entering these for information only and not processing them.

Other entries, such as a government car, should persist until you change them, or they reach their end date, or the employee's assignment changes so that the employee is no longer eligible for the element. You define these elements with the processing type *recurring*.

Element Entry Validity Across Pay Periods



A recurring element entry is normally processed in every pay period, as determined by the employee's payroll. However, you can associate frequency rules with a recurring element to specify in which pay periods it should process.

For example, you might deduct a monthly subscription in the second week of each

month for weekly-paid employees.

Allowing Multiple Entries

Normally you can only give an employee one entry of an element. This is a useful safeguard against duplication errors. However, when you define an element, you can choose to allow multiple entries.

For example, you may grant an employee one or more Environmental Differential Pay (EDP) types, depending on the employee's duties. The EDP element is a multiple occurrences element. This means that an employee may be entitled to receive Hazardous Waste EDP and Separate Maintenance Allowance EDP simultaneously.

Automatic Entry

If you want all eligible employees to receive a recurring element automatically, you can define *standard* links to the element. With this link, the element and all its default input value entries go on record for all eligible employees, now and in the future.

For example, each new full-time law enforcement officer (LEO) employee within your agency is entitled to receive a minimum coverage of Administratively Uncontrollable Overtime (AUO). You can set up an employee group called LEO Employees and record members by assigning employees to the group based on their LEO Code. You can then link the AUO element to the LEO Employees group, mark this link as standard, and enter a default value or percentage.

Clearly, you will not choose to create standard links if there are any performance criteria (such as being located in a certain Duty Station) that employees must meet before they qualify for an element.

You can create a standard link if both the element is recurring and multiple entries are *not* allowed for the element

If you have not defined age or period of service criteria, the start date of the automatic entry is the date the assignment becomes eligible for the element. For example, this might be the employee's hire date, or the date of a promotion or transfer.

If you entered age or period of service criteria for the element, the start date of the automatic entry reflects the date on which the employee meets the qualifying conditions. For example, if a new hire is entitled to a company car after six months, an element entry is automatically created when the employee is entered on the system, and the start date of the entry is six months after the hire date.

If the employee's date of birth is altered on the system, this may change the date on which he or she qualifies for the element. In this case, the start date of the element entry changes automatically.

Default Values and Validation

When you define inputs for an element, you also define the validation for each input

value. The validation you define controls the values a user can enter. The options are to:

- Provide a default value (or several defaults - one for each eligibility group, defined by a link)
- Provide a minimum and maximum value range
- Provide a fixed value
- Provide a lookup list of valid values
- Validate the input value using a formula

Using the formula option you can model complex business rules for validating entries.

For example, for a Recruitment Bonus payment, you might want to set a maximum bonus value that depends on prior length of service and pervious salary (Previous Highest Rate). With Oracle's formula writing tool, Oracle FastFormula, you can include conditional logic to validate input using different criteria for different employees.

If you define a default value, you can specify that it is a *hot default*. This means that any changes to the default value not only affect future entries but will also update existing entries, provided that the default was not overridden when the entry was made.

Batch Entry

Using BEE (Batch Element Entry), you can enter earnings, deductions, timecard data, and other compensation and benefit information in batches. This is especially useful when the same values can be used for many employees. After entering a batch (for as many employees and elements as you require), you can validate it, make corrections, and validate again before transferring the information to the database.

Collective Agreements

If your employees are subject to collective agreements, you can define compensation elements as entitlement items, which form part of the collective agreement. You associate each entitlement item with one or more eligibility profiles to define who is eligible to receive the item and how much they should receive. Alternatively, you can write a formula to determine eligibility and how much eligible people should receive.

You must define, link, and enter the element before you apply a collective agreement to employee's assignments. This ensures that, when you apply collective agreement values, the application updates the element entry with the appropriate value (as defined in the Collective Agreement Entitlements window).

Configuring the Element Entries Window

You can create customized versions of the Element Entries window. A configured version restricts the elements a user can enter.

For example, one version could be restricted to the element name Within Grade Increase and accessed from the menu entry labeled WGI Maintenance.

Element entry can be restricted by:

- Element set (that is, a group of elements that you define)
- Element type (that is, recurring or nonrecurring)
- Element classification (such as, Earnings, or Direct Payment)

See: CustomForm, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

Non-Updateable Element Sets

You can prevent users updating the entry values of a set of elements on the Element Entries window. These will typically be elements that you update through legislation-specific forms. You must create a customization element set, and select it for the HR:Non-Updateable Element Set user profile option. You can set this profile option at any level: Site, Application, Responsibility, or User. You can edit the element set after selecting it in the user profile option.

Users will be able to view these elements in the Element Entries window, and they can edit fields such as Reason and Costing, but not the entry values. They cannot use the Update Override and Delete DateTrack modes, because these might remove entry values set elsewhere.

Element Classifications and Processing Sequence

Elements are grouped into primary classifications, such as Earnings and Voluntary Deductions. In a human resources department, you can use the primary classifications to identify groups of elements for information and analysis purposes. In a payroll department, the classifications control processing, including the sequence in which elements are processed and the balances they feed.

Oracle HRMS provides you with these primary classifications and some balances, mainly to reflect tax legislation. They are designed to meet the legislative requirements of your country, so you cannot change them. You can create additional balances to be fed by any of the primary classifications.

Processing Sequence in the Payroll Run

An element's primary classification provides a default processing priority for the element in payroll runs. Lower priority numbers process first.

Most classifications also have a priority range. When you define an element in these classifications, you can overwrite its default processing priority with another number from the range. This is useful if you need to establish the order in which the element processes with respect to other elements in the classification.

Sometimes you must prioritize the processing of certain element entries for an individual employee. For example, you may need to determine the precise order in which deductions taken for wage attachments process for an employee. You can enter a subpriority number for element entries in the Entry Values window.

Canada only: Processing sequence for wage attachments is not determined by subpriority. Instead you can specify Attachment Priority and Prorate Rules in the Further Information field on the Entry Values window.

Secondary Classifications

You can define secondary classifications to feed your own user defined balances. These secondary classifications are subsets of the primary classifications. In some legislations, secondary classifications have been predefined. As with primary classifications, you cannot remove or change any predefined secondary classifications, and you cannot disable any of the predefined balance feeds created for them.

> **Note:** Secondary classifications are not used in the United States, Canada, or Singapore versions of Oracle Payroll at this time.
>
> Mexican implementations use classifications and sub-classifications.

Categories - for US and Canadian Classifications

Most US and Canadian classifications are subdivided into several categories. Categories further define an element's purpose, and can help to determine applicable processing or tax rules. You can define additional categories.

Costing

On the Costing tab of the Element Classifications window, you can view whether elements of this classification are Costable and Distributable. If the classification is Costable, you can select any costing option for elements when you define the element links. If the classification is Distributable, you can create a distribution set from elements of this classification over which you can distribute costs (such as overheads).

You can also view the cost type for elements in the classification, that is, whether they debit or credit the accounts they feed.

Frequency Rules

On the Frequency Rules tab of the Element Classifications window, you can view whether you can define frequency rules for elements of this classification. The payroll run uses a frequency rule to determine in which pay periods it processes a recurring element. On this tab you can also see which date the payroll run uses, by default, to assess frequency rules in your localization. You can select a different date when you define a frequency rule.

Survey of the Classifications

This table contains the following information:

- The processing priority range and default priority for each classification.
- The predefined categories for each classification. You can add more categories, which are defined as Lookups.
- A description of the function of elements within each classification and category.

Classification	Priority	Default
Information	0 - 500	250
Non-payroll	501 - 1000	750
PTO Accruals	1001 - 1500	1250
Earnings	1501 - 2000	1750
Supplemental Earnings	2001 - 3000	2500
Imputed Earnings	3001 - 3500	3250
Pre-Tax Deductions	3501 - 4000	3750
Tax Deductions	(no range)	4250
Employer Taxes	(no range)	4250
Tax Credits	(no range)	4250
Involuntary Deductions	5001 - 5500	5250
Voluntary Deductions	5501 - 6000	5750
Employer Liabilities	6001 - 7000	6500

Classification	Categories
Earnings	Regular
Earnings	Overtime
Earnings	Shift Pay
Earnings	Student Earnings
Supplemental Earnings	Dismissal Payments
Supplemental Earnings	Educational Assistance
Supplemental Earnings	Deferred Compensation Plans
Supplemental Earnings	Jury Duty Pay
Supplemental Earnings	Moving Expense Reimbursement
Supplemental Earnings	Pensions/Annuities
Supplemental Earnings	Awards and Prizes
Supplemental Earnings	Bonuses
Supplemental Earnings	Commissions
Supplemental Earnings	Cafeteria Plans
Supplemental Earnings	Deceased Employee Wages
Supplemental Earnings	Sick Pay
Supplemental Earnings	Travel Expense Reimbursement
Supplemental Earnings	Vacation Pay
Imputed Earnings	Group Term Life Insurance
Imputed Earnings	Personal Use of Company Car

Classification	Categories
Imputed Earnings	Non-cash Awards
PTO Accruals	Vacation
PTO Accruals	Sick
Voluntary Deductions	[none]
Involuntary Deductions	Garnishments
Involuntary Deductions	Bankruptcy Order
Involuntary Deductions	Federal Tax Levy
Involuntary Deductions	State Tax Levy
Involuntary Deductions	Local Tax Levy
Involuntary Deductions	Child Support Order
Involuntary Deductions	Spousal Support Order
Involuntary Deductions	Alimony
Involuntary Deductions	School Loan
Involuntary Deductions	Credit Debt
Involuntary Deductions	Employee-Requested Payment
Tax Deductions	Federal
Tax Deductions	State
Tax Deductions	Local
Employer Taxes	Federal
Employer Taxes	State

Classification	Categories
Employer Taxes	Local
Employer Liabilities	Benefits
Employer Liabilities	Overhead
Tax Credit	[none]
Non-Payroll Payments	Expense Reimbursement
Information	Absence Hours
Information	Straight-Time Overtime Hours
Information	Tax Balance
Information	Labor Hours
Information	Regular Hours
Information	Within Grade Increases
Information	Retirement
Information	Reconciliation

Earnings, Supplemental Earnings, Imputed Earnings

There are three classifications of earnings types: Earnings, Supplemental Earnings and Imputed Earnings.

Earnings classification elements represent earnings for time worked, as for example salary and hourly wages. The Supplemental Earningsclassification includes a variety of special earnings paid in addition to earnings for time worked, as for example bonuses or sick pay.

Elements in the classification Imputed Earningsare for non-cash remuneration such as personal use of a government-provided car, or premiums for group term life insurance.

Paid Time Off (PTO) Accruals

Elements the system generates to represent plans for accrual of PTO for vacation or sick leave have the classification PTO Accruals, and categories such as Home Leave and Non Pay Days. The product has predefined PTO Accrual elements that you can use to enroll employees in the accrual plans. The system also generates elements (with the classification Information) to hold accrued time that employees can carry over to the new year, and accrued time they cannot carry over.

See: Defining a PTO Accrual Plan, page 4-47

For entry of amounts of accrued time employees take for vacation or sick leave, you define for each accrual plan an absence element with the classification Information.

See: Defining and Linking an Absence Element, page 4-12

Pre-Tax and After Tax Deductions

Elements for deductions taken before taxes, as for example deductions for Thrift Savings Plans (TSP) or for health care or dependent care reimbursement, fall into the classification Pre-Tax Deductions.

Other non-tax deduction elements fall into one of two classifications, either Voluntary Deductions or Involuntary Deductions. Loan repayments, credit union deductions, insurance premiums and Combined Federal Campaign (CFC) charitable contributions are examples of voluntary deductions. Deductions for court-ordered wage attachments, as for example for tax levies, child or spousal support, or bankruptcy orders, fall into the classification Involuntary Deductions.

Non-Payroll Payments

Elements in this classification produce payments made to employees through the payroll system that are not true earnings. For example, the Expense Reimbursement category of this classification covers non-taxable expense reimbursements.

Because payments in this classification are not earnings, they are never subject to taxes and never feed balances of taxable pay. Payments resulting from the processing of Non-Payroll Payments elements always appear separately from earnings in reports and balance totals.

Employer-paid Benefits and Employer Overhead

Elements producing non-tax payments employers make on behalf of their employees belong in the classification Employer Liabilities. The category Benefits within this classification covers employer payments toward employee benefits such as health insurance or CSRS or FERS pension plans.

The category Overhead covers charges employers incur for employees apart from benefits payments. For example, an element in this classification can represent the cost

of required employee safety equipment.

Information Elements

Many elements may not belong in any of the classifications described above, but nonetheless hold many different types of information you need. These elements belong in the classification Information.

This classification is especially useful for elements that do not process in Payroll. Such elements might, for example, hold information about tangible items issued to employees, such as cellular phones, identification badges, hold information about employee compensation and benefits.

See: Defining an Element to Hold Information, page 1-23

Absence Category

Elements in the Absence Hours category of the Information classification hold hours of time that employees are absent from work.

Labor Hours and Regular Hours Categories

The category Labor Hours exists for the predefined element Labor Recording, used to receive entries of salaried employees' hours worked on a project, when you require this information for transfer to a project accounting or labor distribution system.

The category Regular Hours exists for the predefined element Regular Hours Worked, which receives information on employees' hours worked during the payroll run, for use in reports.

Compensation Policy Changes

It is inevitable that your business rules for compensation and benefits will change over time. Element definitions, link definitions, and element entries are all datetracked. This lets you track the changes to your compensation and benefit policies without losing any of your historical employee information. The history of your definitions remains in place for validation and reporting, and for future calculations of back pay.

Maintaining Elements

After you have defined and used an element, you can make the following changes:

- Change a required input value to be not required.
- Alter the sequence in which input values appear in the Element Entries window.
- Change the input value validation rules for minimum, maximum, lookup, or formula.

- Change your specification of which input values create Database Items. Note, however, you cannot remove Database Items if they are used in any formulas or QuickPaint reports.

You cannot remove existing input values nor add new ones if you have created any entries for the element. To add an input value to an element before you create any entries, ensure that you set your effective date to the element's start date.

Maintaining Links

Link rules always control the entry of element values at the time of entry. Changes to link rules affect existing entries in different ways, depending on your use of standard links and hot defaults.

> **Note:** Changing element links that are linked to all payrolls, such as Basic Pay, can adversely affect the Request for Personnel Action (RPA) update to HR.

After you have used an element, you can make the following changes to the link rules:

- Change the input value defaults and validation.

  These changes affect all new entries. Changes to hot defaults affect existing entries. Changes to validation also affect existing entries when you update the entry.

- Date-effectively end all of the rules that apply to an element and define a new set of rules, which are effective from a later date. For example, suppose you have defined eligibility for a government car based on grade. Following a change of policy you must now define eligibility based on job.

  - You will not be allowed to end the link if any nonrecurring entries exist at the date you want to end the rule. You must delete existing entries before you end the link.

  - You can end the link if recurring entries exist. Any existing entries will be ended, automatically, when you end the link.

- Change the qualifying conditions of age and length of service that employees must meet to be eligible for the element.

Policy Development

With DateTrack you can also make future-dated changes to your information safe in the knowledge that these changes will not become effective in the system until the correct date.

In this way you can use your compensation and benefit information to plan changes

ahead of time; analyze the impact of these changes; adjust these changes and generally smooth out the workload that is often associated with major changes in compensation and benefits policy.

Setting Up Total Compensation Elements

Follow this process to set up elements for items in the compensation package you offer to employees. There are additional steps for setting up the following types of compensation and benefits:

- Absence elements and PTO accrual plans

  See: Setting Up Absence Management, page 4-10

  See: Setting Up PTO Accrual Plans, page 4-44

- Benefits; see: Total Compensation, page 5-2

Define Validations and Lookups

Define validation for entries of any new elements you are creating.

1. To restrict compensation entries to a list of valid values, define a new Lookup Type and add Lookup Values for this new lookup.

   See: Adding Lookup Types and Values, *Oracle HRMS Configuring, Reporting, and System Administration Guide*.

2. To validate compensation entries using formulas, write a formula of type Element Input Validation.

   See: Writing Formulas for Validation, *FastFormula User Guide*.

3. To create a matrix of values for use in formulas or QuickPaint reports, set up user tables.

   See: Setting Up User Tables, Columns, and Rows, *Oracle HRMS Configuring, Reporting, and System Administration Guide*.

Define Categories (US only)

4. If you need a new category within the Information classification for an element, add it in the application utilities Lookups window for the Lookup type US_INFORMATION.

   See: Adding Lookup Types and Values, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

Define Elements for Information and Benefits

5. Define elements and element input values to record information about employee

compensation, benefits, and equipment:

See: Defining an Element, page 1-23.

See: Defining an Element's Input Values, page 1-25.

See also: Defining and Linking an Element for Standard and Advanced Benefits, page 1-27

See also: Deleting an Element, page 1-28.

Define Links and Entries

6. Define element links to identify one or more groups of employees who are eligible to receive an element.

   See: Defining Element Links, page 1-29.

   See also: Running the Element Link Details Report, page 1-32.

7. For elements without Standard links, make entries of your elements for all employee who should receive them.

   See: Making Manual Element Entries, page 1-40.

Defining an Element

Use the Element window and the instructions provided in this procedure to define the elements that hold informationbut *do not process in payroll runs*.

Naming the Element and its Processing Rules

To identify and classify the element:

1. Set your effective date early enough to handle any historical element entries you want to make.

2. Enter a unique name, reporting name and description for the element. Start the names with a letter of the alphabet (not a number or symbol). The reporting name is a short name that appears on reports, and on the statement of earnings if the element processes in the payroll run.

3. Select Information as the primary classification for the element. Also select a benefits classification if this element represents a benefit.

To enter processing information:

1. Select Recurring as the processing type, so that entries to this element's input values will remain in effect until you end them. If you select Nonrecurring, entries to the element are effective only for the pay period in which you make them.

2. Select Actual Termination as the termination rule.

3. For the element to receive more than one entry at the same time, check the Multiple Entries Allowed box.

   Note: The rule Additional Entry Allowed is not applicable for US installations. It is available for use at non-US sites.

4. If at some time you need to prevent the element from accepting any new entries, either temporarily or permanently, check the Closed for Entry box. This does not affect any existing element entries.

   Important: Use this feature with caution. When you perform certain important tasks in Oracle HRMS, the application may automatically create or delete element entries. These tasks include hiring and terminating people, and updating assignments. Therefore, if you check Closed for Entry on an element, this might prevent users terminating employees and updating assignments. If there are standard links for the element, it will also prevent users hiring people who are eligible for the element.

To establish currencies and qualifying conditions:

1. The Input and Output Currencies appear as USD (US dollars) and you cannot change these defaults.

2. If there is a minimum age for employees to receive the element, enter it in the Age field.

3. If employees must complete a minimum length of service before receiving the element, enter a number in the Length of Service field and select a unit of measure (such as months or years) in the Units field.

4. For the application to automatically enter the element and its default values for all eligible employees, check the Standard box.

   You cannot check Standard if the element is nonrecurring or if Multiple Entries are allowed.

   Note: The qualifying conditions and Standard check box provide defaults for the element. You can override them for particular groups of assignments when you define the element's links.

5. Save the element definition.

To enter a category and benefits carrier:

1. Click in the Further Information field to open the Further Element Information window. In the Category field, select a category.

2. For an element representing a benefit, select the name of the carrier in the Benefits Carrier field.

3. Save these entries. You can now choose the Input Values button to set up the element's input values.

   See: Defining an Element's Input Values, page 1-25

Defining an Element's Input Values

Use the Input Values window to define the input values for the element. You can define up to 15 input values for an element.

Depending on the type of element you have defined, Oracle HRMS may have applied one or more default input values.

North America users: All elements must have the default Jurisdiction input value.

Payroll users: If you are creating balance feeds for individual elements, ensure you define an input value of the same unit of measure as the balance. Money units must be the same currency.

You can add new input values to a saved element only if you have not entered the element for any employees. To add an input value, you must set your effective date to the element's start date.

To define input values:

1. Set your effective date early enough to handle any historical element entries you want to make.

2. Enter or query the element in the Element or Element Link window and choose the Input Values button.

3. Enter the name of the first input value. Remember that if you want to define a *pay value* to hold run results, you must name it Pay Value.

4. Select the unit type of your input value (money, hours, character, date, number, or time). A Pay Value must have the unit type Money if the element is in a Payments type classification.

5. You can enter numbers in the Sequence field to change the order in which the input values appear in the Entry Values window.

6. Check the Required check box if all entries of the element must have a value for this input.

   Note: When you have saved an input value, you cannot change it to be Required. If you have saved it as Not Required by mistake (or you have generated an element that has an input value you want to make required), delete the input value and re-enter it with the correct values. If you are re-entering a generated input value, be careful to enter exactly the same name. You cannot delete the input value if you have made any entries of the element for employees.

7. Check the User Enterable check box if users can enter a value for this input. Uncheck it if you want to ensure that the default value is entered for all employees.

8. Check the Database Item check box if you want the value to be available to formulas or QuickPaint inquiries.

   Database Items are simple identifiers that the system uses to find specific items of information in the human resources database. Any spaces in the input value name are converted to underscores in the Database Item name.

Entering Element-Level Defaults

If you enter defaults at the element link level, these override the defaults at element level. If you update an element-level default, remember to check the values on the element links too.

To enter a default for an input value:

1. Enter the value in the Default field.

2. If you want existing entries to be updated whenever the default is changed, check the Hot Default check box. The input value must be required if you want to use this option.

   A hot default appears in the Entry Values window in quotation marks.

   Important: If a user overrides a hot default in the Entry Values window, subsequent changes to the default will *not* affect the entry. For this reason, you may prefer to use BEE to change defaults for large groups of employees, rather than the hot default feature.

Defining Entry Validation

To enter validation for an input value:

1. Do *one* of the following:

- Enter maximum and minimum values for the input.
- Select a Lookup Type to act as a lookup supplying a list of valid values.
- Select a formula to validate entries for this input value. Formulas can return messages to users about the success or failure of the validation.

2. Select Warning or Error to determine whether the system warns users that an entry is invalid or prevents them from saving an invalid entry. You cannot select a value if you chose a Lookup because a user cannot enter an invalid value for an input value validated by lookup.

Defining and Linking an Element for Standard and Advanced Benefits

You set up elements for Standard and Advanced Benefits as you would other elements, with certain restrictions noted below. Element setup is the same for Standard and Advanced Benefits.

In the US and Canada, use the Earnings or Deduction window to create an element if you process the element in a payroll run.

Outside the US and Canada--or if you are an HR-only customer in any legislation--use the Element window to create an element.

To define an element for Standard and Advanced Benefits:

1. Set your effective date early enough to handle any historical element entries you want to make.
2. Enter a unique element Name.

   When you define a standard activity rate, you select the element that corresponds to the rate you are defining.
3. Select the appropriate Classification for the earning or deduction.
4. For Payroll users in the US and Canada, select a Category on the Earnings or Deduction window.

   If you are using the Element window, you can select a Category in the Further Element Information flexfield.
5. In the US, optionally select a Benefit Classification.

   Note: For any element attached to a standard activity rate, **do not** select a Benefit Classification of Dental, Medical, or Vision.

6. Select a Termination Rule of Final Close for any element attached to an activity rate.

7. Do not check the Standard Link check box (Earnings and Deduction windows) or the Standard check box (Element and Element Link windows) since you use eligibility profiles to control benefits eligibility.

8. Complete the definition of the element according to your business rules.

9. Save your work.

10. Choose Input Values.

    You can define multiple input values for the element, but you can only link one input value to a standard activity rate.

11. Save your work.

Defining an Element Link for Standard and Advanced Benefits

After you define an element, open the Element Link window. Because you create eligibility profiles for Standard and Advanced Benefits, you should limit use of the Element Link window to creating an *open link* for elements you do not cost.

To define an element link for Standard and Advanced Benefits:

1. Set your effective date.

2. In the Element Name field, select the element for which you are defining a link.

3. Save the record without selecting any assignment links to create an *open link*.

> **Note:** If you define links for costing, your links must not conflict with any eligibility profiles you set up for Standard and Advanced Benefits. Your element must have a valid link at all times.

For more help on element links and costing, see: Defining Element Links, *Oracle HRMS Compensation and Benenfits Management Guide*

Deleting an Element

Before you delete an element, you must first delete any entries of the element recorded for employees and then any links defined for the element.

Use the following process to delete any elements you defined in the Element window, Earnings or Deduction template, or Element Definition Wizard.

> **Important:** Do not delete any predefined elements.

To delete an element:

1. Use the List Employees by Element window to get a list of all employees with entries for the element.

2. For each employee, query the element entry in the Element Entries window, choose Delete Record, and save.

3. Query the element in the Element Link window and, for each link for this element, choose Delete Record, and save.

4. Perform one of the following:

   - If you created this element through the Element Definition Wizard, query this element from within the wizard.

   - If you created this element through the US and Canadian Earnings or Deductions templates, query this element from within the template.

   - If you created this element through the Element window, query this element from that window.

5. Delete the element and save.

   The system prompts you to either End Date the element or Purge it. Select End Date if you want the element to remain in the system but be effective through a certain date. Select Purge if you made a mistake defining the element and you want to delete it from the system altogether.

Defining Element Links

Use the Element Link window to define groups of assignments that are eligible for an element.

> **Note:** When you define a link for a benefit or for an entitlement item in a collective agreement, do not select any eligibility criteria. Instead use participation eligibility profiles to restrict eligibility for the benefit or entitlement item.

> **Note:** When querying data the Element Link window returns values for Payroll, Location and Position and Organizations, irrespective of the security profile restrictions set, enabling you to view the links already created. You cannot create links for data outside your security profile.

To define an element link:

1. Set your effective date to the date you want the eligibility criteria to come into effect.

2. In the Element Name field, select the Element for which you are defining a link.

3. Check the Standard check box if you want all employees who are made eligible by the link to receive the element automatically.

   You can only create a standard link if the element is recurring and multiple entries are *not* allowed by the element definition.

4. In the Eligibility Criteria region, select the assignment components that constitute this eligibility rule. If you want to link to all employees, do not enter any eligibility criteria.

   You can link to all payrolls or to a specific payroll. Do one of the following:

   - Leave the Payroll field blank and check the Link to all Payrolls check box if you want employees assigned to *any* payroll to be eligible. This rule excludes employees who are not assigned to a payroll.

   - Select the name of a specific payroll if you want only employees on that payroll to be eligible for the element. Do not check the Link to all Payrolls check box.

   - Leave both fields blank if assignment to a payroll is irrelevant to eligibility for the element.

Costing

To enter costing information for the link:

1. Select the Costable Type. The default is *Not Costed*, meaning that the system maintains no costing information for the element.

   - To allow entry of costing information at all levels, including the assignment and element entry levels, select *Costed* This is the appropriate selection for most elements representing earnings types.

   - If you do not need to cost the element at organization and assignment levels, select *Fixed Costed*. This is appropriate for some deductions, which are irrelevant to labor distribution analyses.

   - If you want to distribute overhead costs (such as employer contributions to a pension plan) over other elements, select *Distributed*.Then select a Distribution Set.

Note: Some element classifications for your legislation may be predefined as Not Costed and you cannot override this.

2. Check the Transfer to GL check box if the payroll run results from this link should be transferred to the general ledger.

3. Use the Costing field to select a GL account code and, if present, account codes of labor distribution or other systems in which to collect the run results of this element. Then use the Balancing field to select the GL account that balances this one.

   For deductions elements:

   - Select the code for the GL account to credit in the Costing field, and the code for the account to debit in the Balancing field.

   For elements in all other classifications:

   - Select the code for the GL account code to debit in the Costing field, and the code for the account to credit in the Balancing field.

     Note: Depending on your set up of the Cost Allocation flexfield, the Balancing field may not be enabled.

Qualifying Conditions

To enter qualifying conditions for the link:

1. Go to the Qualifying Conditions region. Here you can add or change age or length of service requirements for this particular eligibility rule.

   The system checks these conditions when you make an entry of the element. If the employee does not meet the qualifying conditions, you receive a warning.

Input Values

To adjust input values for the link:

1. Save your link definition and choose the Input Values button to display the Link Input Values window.

   Use this window to:

   - Enter a new default or change one entered at the element level

   - Check the Costed box to maintain costing information for an input value.

- Change the maximum, minimum or both for an input value. Logically, the new values should be within the range you defined for the element as a whole. However the system does not enforce this.

Running the Element Link Details Report

Use this report to check the eligibility criteria that have been defined for elements within a classification. You can report on links for the following categories:

- All elements within a classification
- Either recurring or nonrecurring elements in the classification
- Just a single element

You can choose to see only standard or non-standard links, and only active or inactive links. Further, you can choose to see links to a particular job, organization, payroll, or all payrolls.

You run reports from the Submit Requests window.

To run the Element Link Details report:

1. In the Name field, select Element Link Details Report.
2. Enter the Parameters field to open the Parameters window.
3. Enter the effective date for which you want to see the report.
4. Select the classification of elements you want to report on. Optionally select an element processing type (recurring or nonrecurring) or an individual element to report on.
5. To report only on standard links, select Yes in the Standard Link field. Select No to report only on non-standard links. Leave blank to report on all links.
6. Select a link status to report only on links that are either active or inactive as of the report's effective date.
7. To report on links to payrolls:
   - For links to one payroll only, select No in the All Payrolls field and select the payroll in the Payroll field.
   - For links to all payrolls, select Yes in the All Payrolls field and leave the Payroll field blank.

- To see links irrespective of their payroll criteria, select No in the All Payrolls field and leave the Payroll field blank.

8. You can also select a job or organization to report on links to these assignment components only.

9. If you want to produce this report in Portable Document Format (PDF), select a template.

10. Choose the Submit button.

Defining an Element or Distribution Set

In the Element and Distribution Set window, you can select element classifications or individual elements to define a set. There are three types of set:

- **Customization set**: You can use a Customization set to:
  - Restrict the elements that can be entered or viewed on a configured version of the Element Entries window
  - Specify the elements to be entered for assignments using BEE in the Batch Assignment Entry window.
  - Prevent users updating entry values in the Element Entries window for a group of elements. You select the element set in the HR:Non-Updateable Element Set user profile option.
  - Restrict the elements displayed in the Compensation Activity view in SSHR. You select this element set in the Element Set Name user profile option.

- **Run set**: You can use a Run set to:
  - Specify the elements that the application must process in a payroll run. This functionality is available only for Oracle Payroll users. If you are creating a Run set for US payroll, and you are using the Enhanced Tax Interface, you must include the US_TAX_VERTEX recurring element (see step 4). If you have not enabled the Enhanced Tax Interface, you must include the VERTEX recurring element.
  - Display accrual balances

- **Distribution set**: Oracle Payroll users can use a Distribution set to define the elements over which the costs of other elements are to be distributed.

To define an element or distribution set:

1. Enter a unique name for the set and select the type: Distribution, Run, or Customization.

2. Save your new set.

3. If you want to include all elements in a classification, choose the Classification Rules button.

   - In the Classification Rules window, select one or more classifications to include. Save the set and close this window.

     The elements in the classifications you choose are now listed in the Elements region.

   - If you want to exclude individual elements, place your cursor in the element's row and choose the Exclude Element button.

4. If you want to include particular elements from other classifications, choose the Include Element button.

5. Select the element you want to include in the Elements window, and choose the OK button.

   Note: After you include a particular element, you cannot go to the Classification Rules window and include the classification to which this element belongs.

6. Save your set.

7. If you want to see a list of the individual elements you have included or excluded from the set, choose the Element Rules button. The Element Rules window is view-only.

Compensation Entry and Reporting

Compensation Entry

To record any form of compensation, benefit, or deduction liability for an employee, you make an element entry. There are several ways to do this:

- You can use BEE (Batch Element Entry) to enter or update a batch of element entries for many employees, using defaults for fast entry. For example, you can use BEE to enter timecard data and to enroll employees in PTO accrual plans.
- You can enter absences or accrued time taken in the Absence Detail window.
- You can enroll employees in benefit plans and select the appropriate coverage for themselves and their dependents. There are different windows for enrolling in Federal Employee Health Benefits plans, Thrift Savings Plans, and retirement plans. Alternatively, employees can set up their own enrollments, using Self Service HR.
- You can make or update individual entries of other compensation elements for an employee using the Element Entries window.

Some elements are defined with standard links so that eligible employees receive an entry automatically. You don't need to do anything to record these forms of compensation for employees.

Dates for Compensation Entries

There are two types of element: recurring and nonrecurring.

Entries for recurring elements remain effective indefinitely, until you update them or the employee ceases to be eligible for the element, for example after a change of work assignment. You can start entries of a recurring element at any point in time. Use DateTrack to set the effective start date of new entry or update. This maintains a complete history of values and the dates they changed.

Entries for nonrecurring elements are one-time entries. They are effective only for the current pay period (defined by the payroll to which an employee is assigned). To make the entry, you set your effective date to *any* date in the appropriate pay period. Any changes you make to nonrecurring entries are always corrections. There can be no history of changes to these entries within a pay period. However, the entries for each period (if any) are stored as history for an employee.

Compensation Reporting

Oracle HRMS provides a range of reporting mechanisms to monitor and analyze the

compensation and benefits data in your enterprise. This topic explains the windows and reports that Oracle HRMS provides to meet your different compensation reporting requirements.

The View Element Entry History for Employees window enables you to view a history of different element entries for an employee assignment.

See: Viewing Element Entry History, page 1-43

The List Employees by Element window provides you with a list of employees with entries to an element in any period of time you choose.

See: Listing Employees by Element, page 1-42

Using the HR/Payroll Extracts you can extract employee and payroll data, such as the details of earnings, deductions, and information elements for internal reporting and for transfer to third-party providers. The extracts support both XML and ASCII formats, you can generate postscript reports, and export a file to Excel for reporting.

See: HR/Payroll Extracts, page 1-36

Using the Person Summary window, you can view frequently accessed information about an employee's compensation and review the list of NPAs that granted the employee compensation.

See: Summarizing Personnel Data, *Workforce Sourcing, Deployment, and Talent Management Guide*

HR/Payroll Extracts

The HR/Payroll Extracts feature enables you to extract employee and payroll data, such as the details of earnings, deductions, and information elements for reporting purposes. You can use the extract reports for internal reporting, such as listing all employees in receipt of a bonus, or for transfer to third-party providers, such as pension providers. For example, you can send details of new hires and terminations to a provider on a weekly basis.

You can also make copies of the seeded extracts and modify their layout or add different data elements to suit your reporting requirements. You can view and correct the extracted information before writing the data to a file.

The extracts support both XML and ASCII formats, you can generate postscript reports, and you can export a file to Excel for reporting.

Predefined System Extracts

Oracle HRMS supplies the following predefined system extract definitions:

- Global HR/Payroll Extract - (full-profile extract) extract the payroll data of your employees. This extract contains identification and demographic information of your employees and reports on payroll data such as earnings, deductions, and other

information elements.

- Global HR/Payroll Information Changes (Single Record) - (extract for changes) report on changes to employee personal and plan details, such as the name change of an employee. You can also report on new hires and terminated employees using this extract. This extract does not include payroll data. It includes only employees whose records have changed, and you can configure which changes trigger the extract. It displays all the changes for each employee as part of a single record, in the same row.

You can either use the predefined extracts or make copies of them and modify the copies to suit your reporting requirements.

The extracts include the assignment details of both the primary and secondary employee assignments.

Mexico Users: For reporting voluntary contributions to SUA, the Mexico HR/Payroll Outbound Interface uses the Global HR/Payroll Extract only as a template. Users must make legislative changes to this extract definition before they can perform these operations. Refer to the "Oracle HRMS for Mexico - Payroll System Extract for SUA - Voluntary Contributions" whitepaper (MetaLink ID #336495.1).

US Users: You can also use the following predefined US HR/Payroll extracts. To use these extracts you must create your elements using the Deduction window.

- US HR/Payroll Extract.
- US HR/Payroll Information Changes (Single Record). This extract displays all the changes for each employee as a single record.
- US HR/Payroll Information Changes (Multi-Record). This extract displays each change for each employee as a separate record.

When you are extracting pensions data, the US extracts the US extracts automatically extract data for the additional elements for pension plans, such as Catch-up, After-tax, and ER Match apart from the primary earnings and deduction elements.

Apart from the above generic US extracts you can also use the following preconfigured US extracts to report specifically on Pre-tax EE, Catch-Up, ER Match, Loan Re-Payment and deferred compensations:

- US HR/Payroll Pension EE Contribution
- US HR/Payroll Pension EE Def. Comp Pre-Tax Contribution
- US HR/Payroll Pension CatchUp
- US HR/Payroll Pension ER Match
- US HR/Payroll Loan Re-Payment

The following list shows the data elements typically used in the extract reports:

Employee Data	Extracted from
National Identifier	Social Security/National Identifier field on the People window
Name (First Name, Last Name, Middle Name, Prefix, and Suffix)	Last, First, Middle, Prefix and Suffix, fields in the Name region of the People window
Address (Line 1 - 3, Region 1-3, Town or City, Post Code, Country)	Primary address fields
Date of Birth	Birth Date field on the People window
Recent Hire Date	Latest Start Date field on the People window
Termination Date	Actual termination-date field on the Termination window
Marital Status	Status field on the People window
Sex	Gender field on the People window
Normal Hours	Working Hours field of the Assignment window
Employment Category	Assignment Category field on the Assignment window
Employment Status	Status field on the Assignment window
Projected Compensation	Person base salary
Actual Salary	Balance of the regular salary element
Payroll Date	Date of the payroll run
Employee Number	Person employee number
Plan Contr	Run result value of the of the pre-tax deduction element

Employee Data	Extracted from
Pay Value	Run result value of the selected element
Payroll Frequency	Person payroll period type
Sample Balance Value	Value of the balance specified in the formula
Sample Element Entry Value	Run result value of the payroll element specified in the formula

Typical data elements used in the header and footer regions of the extract reports are:

Header
Creation Date
Payroll Date
Pay Cycle or Payroll Frequency
Group ID
The parameters you specify when running the extract process
Total Participant Records

You can change the header and footer information to suit your reporting needs.

Use the Global Pension Change Events Extract to report on changes in:

- Employee name
- Employee address
- Employee status
- Employee category
- Employee movements (new hires and terminations)

Note: The Global HR/Payroll Information Changes report displays all

the data elements that the predefined extract contains, not just the elements for which you are reporting a change. To include only those data elements for which you are reporting a change, make a copy of the seeded extract and modify the layout accordingly.

Some of the elements have attached formulas. You can make copies of the extracts and modify these formulas to extract the appropriate data. The following table lists those data elements, the extracted values for those data elements and the attached formulas.

Data Element	Fetched Value	Formula to Edit
Sample Element Entry Value	The value of any payroll element's input value	PAY_GLOBAL_PEXT_GET_ELE_ENTRY_VALUE
Sample Balance Value	The value of any balance specified in the formula	PAY_GLOBAL_PEXT_GET_BALANCE_VALUE

US Users: If you are using the US extracts, you can update the following formulas to extract the balance or input values you want to extract:

- PAY_US_PEXT_GET_ELE_ETRY_VALUE
- PAY_US_PEXT_GET_BALANCE_VALUE

Related Topics

Configuring the HR/Payroll Extracts, page 1-44

Running the HR/Payroll Extracts, page 1-46

Making Manual Element Entries

You enter compensation and basic benefits for employee assignments in the Element Entries window. You can use the Element Entries window to make entries or to inquire on existing entries. Use the Period field, Classification field, and Processing Types option buttons to restrict the entries you see when making inquiries.

Several features, such as an RPA or Absence Management, create element entries automatically. You cannot update these element entries on the Element entries window. You must update the source record (such as the absence record) to change the element entry.

Note: Your system administrator may have created customized versions of this window to restrict the elements you can enter by

element set, classification or processing type.

To enter an element for an employee:

1. If necessary, change your effective date to:

   - The correct start date for a recurring element entry
   - Any date in the correct pay period for a nonrecurring element entry

   If the pay period is closed at your effective date, you cannot enter any nonrecurring elements that process in payroll runs. If a current or future pay period is closed, you cannot enter any recurring elements that process in payroll runs.

2. To reduce the list of elements to choose from, select a classification, a processing type, or both in the first region.

3. In the Element Name field, select an element.

   Note: Elements this employee is eligible for by means of a standard link appear automatically.

   The system displays a warning message if the employee fails to meet any qualifying conditions of age or length of service.

4. If the Costing field is enterable, you can enter cost codes, for example to indicate the cost center for the employee's time.

5. You can select a reason for an element entry you make or update. As part of your system setup, you can enter valid reasons for the Lookup Type ELE_ENTRY_REASON.

   Note: There is no use for the Override, Additional, or Show Adjustment check boxes at US installations.

6. Choose the Entry Values button to open the Entry Values window.

7. Make entries in the Entry Value fields. Notice that:

   - Some fields may not be enterable.
   - Some fields may be required.
   - Some fields may have a list of values; others may be validated as you leave the field. You receive a message if your entry is not valid.

- Some fields may contain default values. If the default value is in quotation marks, it is a "hot default".

  Important: You should consider carefully before overriding a hot default. If you override it, then any subsequent changes to the default value on the element or element link definition will *not* affect this element entry. However, you can clear your entry if you want the default value to come back into effect.

8. For a non-recurring element, optionally select a date within the current payroll period in the Date Earned field. The entry will not be processed until this date (that is, the Date Earned of the Payroll Run must be on or after this date). In the US, formula uses this date to select the appropriate hourly rate.

9. To enter information about a third party recipient of a payment resulting from a deduction element, select in the Payee Details field, the name of the third party payment method set up for this payment.

10. Save your work.

Listing Employees by Element

In the List Employees by Element window, you can view a list of the employees with entries to an element in any period of time you choose. You can also see the *last* entry value (in that time period) for each assignment.

Note: If your system administrator has customized this window, you may be restricted to selecting elements of a certain processing type or element set.

To view a list of employees receiving an element:

1. Select an element.

2. Select Current Employees, Ex-employees, or both.

3. You can also enter a date range. Both date fields default to your effective date.

4. Choose the Find button.

5. You can enter additional query criteria in the Element Entries region. For example, click in an Entry Value field, choose View > Query by Example > Enter, enter a value, and run the query.

The Element Entries region displays all entries of the element for employees of the type you selected in the chosen time period.

> **Note:** This window does not display datetracked updates to recurring element entries. You only see the *latest* value (within your chosen time period) of each element entry. The date of the last datetracked update may vary from employee to employee. The Start and End Date fields in the Element Entrues region show the dates of the last update.

Viewing Element Entry History

In the View Element Entry History for Employee window you can view, for a single employee assignment, a history of entries for:

- One element
- All recurring elements, all nonrecurring elements, or both
- Elements from a selected classification

> **Note:** If your system administrator has customized this window, you may be restricted to viewing elements of a certain processing type or element set.

To view element entry history for an employee:

1. Enter your selection criteria. You can:
   - Select a classification.
   - Select a processing type.
   - Enter a date range. The end date defaults to your effective date.
2. Place your cursor in the Element Name field and run the query.

   The window displays all entries of the types of element you selected within the time period, including datetracked updates to entries. New entries are shown in bold to contrast with datetracked updates, which are listed under the initial entry.
3. Select an entry and choose the Entry Values button to view the entry values.

Configuring the HR/Payroll Extracts

Oracle HRMS supplies the following seeded HR/Payroll extract definitions:

- Global HR/Payroll Extract
- Global HR/Payroll Information Changes (Single Record)

Mexico Users: For configuration instructions, refer to the "Oracle HRMS for Mexico - Payroll System Extract for SUA - Voluntary Contributions" whitepaper (MetaLink ID #336495.1).

US Users: You can also use the following predefined US HR/Payroll extracts:

- US HR/Payroll Extract
- US HR/Payroll Information Changes (Single Record)
- US HR/Payroll Information Changes (Multi-Record)
- US HR/Payroll Loan Re-Payment
- US HR/Payroll Pension CatchUp
- US HR/Payroll Pension EE Contribution
- US HR/Payroll Pension EE Def. Comp Pre-Tax Contribution
- US HR/Payroll Pension ER Match

To configure the extracts for your own reporting needs, copy and modify them as follows.

1. Use the copy function within the system extract to copy the predefined extract you want to modify. In the extract Definition window, query the seeded extract definition, enter a prefix in the New Extract Prefix field, and choose the Copy Extract button.

2. Edit the copies of the following sample formulas to perform the processing you require:

Data Element	Fetched Value	Formula to Edit
Sample Element Entry Value	The run result value of any payroll element's input value	PAY_GLOBAL_PEXT_GET_ELE_ETRY_VALUE

Data Element	Fetched Value	Formula to Edit
Sample Balance Value	The value of any balance specified in the formula	PAY_GLOBAL_PEXT_GET_BALANCE_VALUE

US Users: If you are using the US extracts, update the following formulas to extract the balance or input values you want to extract:

- PAY_US_PEXT_GET_ELE_ETRY_VALUE
- PAY_US_PEXT_GET_BALANCE_VALUE

3. Modify the extract layout definition to change the data elements that the extracts include and the format of the extract definitions.

   See: Defining an Extract Layout, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

4. Modify the extract criteria profile to change the extract criteria. The extract criteria you select determine the data that the application extracts to your reports.

   See: Defining an Extract Criteria Profile, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

   To define the extract criteria profile for the extract for changes, you must enable the change events in the Application Utilities Lookups window. Query the Lookup type BEN_EXT_CHG_EVT and select Enabled for the change event.

5. Create the extract definition to set the parameters for the extract.

   Your extract definition includes an extract criteria profile and an extract layout definition that you have already defined. It also includes other parameters needed for the extract batch process, such as the output directory and file name of the extract file.

   See: Defining a System Extract, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

6. If you have more than one element to report on, create an element set and specify the set name as one of the parameters of the extract process. For example, if you want to report on several pension plans together, create an element set.

   See: Defining an Element or Distribution Set, page 1-33.

   > **Note: US Users**: If you are configuring the US extracts for a pension plan, include only the primary pension elements in the element set. Do not include other pension elements such as Catchup, After-Tax,

or ER Match. You can include in the element set only those elements that you created using the Deduction window. The elements you include in the set must be of the same type. You cannot combine 401k, 403b, and 457 elements in the same set.

7. The Global Extracts concurrent programs are currently available for US and UK responsibilities only. To allow other users to run these programs from the Submit Request window, add the relevant programs to the request group for their responsibility.

Running the HR/Payroll Extracts

Using the HR/Payroll extracts you can extract employee and payroll data, such as the details of earnings, deductions, and information elements for reporting purposes.

Use the Submit Request window to run the HR/Payroll extract you require.

To run the Extracts:

Mexico Users: To run the extracts, refer to the "Oracle HRMS for Mexico - Payroll System Extract for SUA - Voluntary Contributions" whitepaper (MetaLink ID #336495.1).

1. Select Global HR/Payroll Outbound Interfaces in the Name field.

   US Users: To run a US HR/Payroll extract select US HR/Payroll Outbound Interfaces.

2. Click in the Parameters field to open the Parameters window.

3. Select the extract you require. You can choose from the following predefined extracts or from the copies of the extracts you have modified.

   - Global HR/Payroll Extract (full-profile extract)
   - Global HR/Payroll Information Changes (Single Record)

   US Users: To run a US HR/Payroll extract, choose from the following predefined extracts or from the copies of the extracts you have modified:

   - US HR/Payroll Extract
   - US HR/Payroll Information Changes (Multi-Record)
   - US HR/Payroll Information Changes (Single Record)
   - US HR/Payroll Loan Re-Payment

- US HR/Payroll Pension CatchUp
- US HR/Payroll Pension EE Contribution
- US HR/Payroll Pension EE Def. Comp Pre-Tax Contribution
- US HR/Payroll Pension ER Match

4. Select the appropriate reporting options.

   The reporting options available for the full-profile extract are:

   - Details - provides details of each assignment action for an assignment
   - Summary - provides a summary of all assignment actions for an assignment for a given period

   The reporting options for the extract for changes are:

   - All Employees - provides details of all employees in the organization
   - Employees Enrolled in Plan - provides details of only those employees who are enrolled in a specific plan

5. In the Selection Criteria field, select either Element Name or Element Set.

6. Do one of the following:

   - Select the element name.

     Note: US Users: If you are running US extracts, this should be one of the primary deduction elements you would have created for the 401(k), 403(b), and 457 plans.

   - Select the element set name.

7. Enter the dates for which you want to generate the report.

8. Select a value for one or more of the following parameters to restrict the employees included in the extract:

   - Payroll
   - Consolidation Set
   - Organization

- Person Type
- Location

9. Click OK then Submit.
10. View the output in the Extracts Results window.
11. View the change events that have occurred to a person or modify the change event log using the Change Event Log window.
12. Run the Extract Write Process to write the results of the extract to the file you specified in your extract definition.

Compensation Objects

Plan Design

Your plan design defines, categorizes, and helps you to manage the benefits that you offer to your employees and other eligible participants. The plan design is the domain of the benefits practitioner who uses the product to define the structure and elements of the benefits offering and the rules that administer these benefits.

At its core, the plan design determines the benefits that eligible participants may receive. Examples of such benefits include health and welfare plans, savings plans, and group term life insurance.

You structure your benefits offerings according to a hierarchy so that the rules and definitions that are set at the top level (the program) cascade to the benefits at the bottom level (the options in the program).

Your plan design also includes eligibility definitions and enrollment requirements, and the activity rates calculations that determine the contributions and distributions associated with a plan.

Compensation Objects

Central to benefits administration are the compensation objects that you use to define, categorize, and manage the benefits that you offer to eligible participants. The four compensation object types that you use to structure your benefits offerings are programs, plan types, plans, and options.

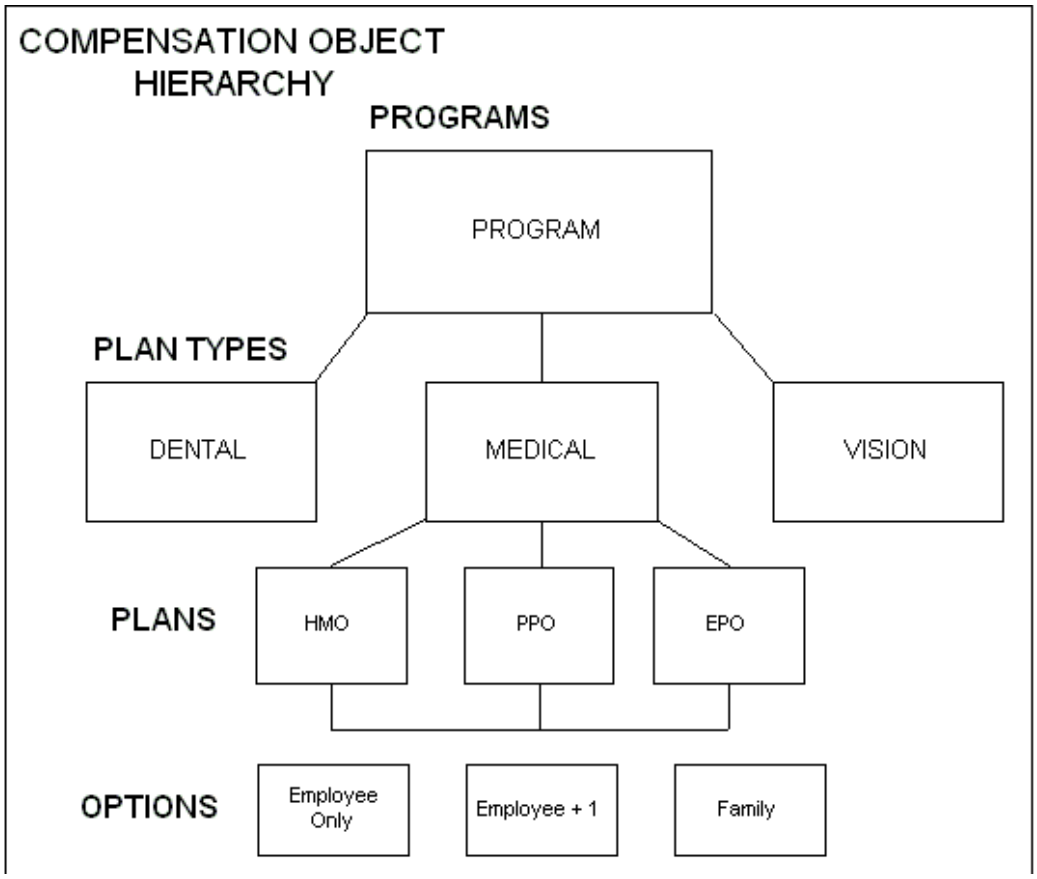
Defining compensation objects is a key part of your overall plan design that includes defining eligibility and enrollment requirements, plan year periods, activity rates, and other elements of benefits management.

- The hierarchical structure of compensation objects
- Viewing a program structure that you have defined

Hierarchical Structure of Compensation Objects

Compensation objects are designed hierarchically so benefits that share similar features can be defined in similar ways. You build this hierarchical structure by defining attributes of the different compensation objects and then linking the components into a hierarchy.

Compensation Object Hierarchy



A description of the four compensation objects follows:

Program: A package of benefits offerings. Programs are important because they set the boundaries for the benefits you offer. You define many administrative procedures and rules at the program level.

Plan Type: A grouping of similar benefits offerings to facilitate their management. Example plan types include medical, dental, employee group life insurance, and savings.

Plan: A formally defined benefits offering that a participant can elect, such as a medical plan.

Option: A level of coverage for a participant's election, such as Employee Only for a medical plan, or 2x Salary for a life insurance plan.

Attributes set at the program level are inherited by each level of the compensation object hierarchy. However, if these same attributes are set at a lower level in the hierarchy, the compensation object inherits those attributes set at the lowest level at or above its level. A compensation object never inherits attributes set at a lower level in the compensation object hierarchy.

Program Structure Terminology

Before you set up a benefits program, you should familiarize yourself with fundamental terms that refer to associations between the four compensation objects. Whether or not you choose to link compensation objects together depends on your eligibility rules and the breadth of benefits that you offer to your participants. The table below outlines the programme structure terminology:

Programme Structure Terminology

Terminology	Description
Program	Any program, regardless of whether that program has been associated with any other compensation objects.
Plan Type	Any plan type, regardless of whether that plan type has been associated with a program.
Plan Type in Program	A plan type that has been associated with a program.
Plan	Any plan, regardless of whether that plan has been associated with a program.
Plan in Program	A plan that has been associated with a program.
Not in Program Plan	A plan that has *not* been associated with a program.
Option	Any option, regardless of whether that option has been associated with a plan.
Option in Plan	An option that has been associated with a plan.

Compensation Object Definition

You define your compensation objects in the order below. As you define objects in the hierarchy, you associate objects together to form your program structure.

1. Define plan types.

2. Define options.

3. Associate options with plan types.

4. Define plans.

5. Associate options with plans.

6. Associate plans with plan types.

7. Identify which plans are not part of a program.

8. Define programs.

9. Associate plans and plan types with programs.

For example, let's say you want to define the medical plans offered by a benefits program you are administering. You first define the *plan type* of medical. Then, you define the coverage *options* available for the medical plan type, such as Family and Employee only.

Next, you define the medical *plans* in the plan type, such as an HMO or a PPO offering. Lastly, you associate the plans or plan type with a *program* that groups together a variety of plans and plan types into a single benefits offering.

Plan Types

You define plan types as categories of benefits grouped according to the type of benefit provided. Common plan types include medical, employee group life insurance, and savings.

Plan types are used to record administrative rules for all benefits of the same type. When you define a program that groups plans together, you specify parameters that control how plans of the same plan type behave.

Plan types are the most stable of the four compensation objects. Once you define the plan types that you need to support your benefits offerings, you rarely need to modify them.

Options

You can define options for many purposes, but commonly you do so to define coverage available under one or more plans.

Options are re-usable. Once defined, you can associate an option with one or more plans. When you associate an option type with a plan type, you make options of that type available for selection to all plans in that plan type.

For example, you could define the options Employee Only, Employee Plus Spouse, and Employee Plus Family and then associate each option with the plan types of Medical, Dental, and Vision.

Designation Requirements for Options

Some benefits plans require that dependents and beneficiaries covered by an option are a specific familial relation to the primary participant. You can limit the relationship types covered under an option by defining a relationship group that includes specific types of people. Group relationship types include:

- Children
- Domestic partner
- Family
- Nonpersonal

Within a group relationship, you define which relationship types apply to the group. For the group relationship of Children, you might include the relationship types:

- Adopted child
- Natural child
- Step child

You can also limit the number of dependents covered by an option. A designee that does not meet the designation requirements for an option is not eligible for coverage under that option.

Plans

You define a plan as a formal benefits offering. Your organization may define medical, dental, and savings plans among many others.

Your plan definition consists of:

- The kind of plan you are defining and its plan type
- The eligibility profile that controls who is eligible for the plan
- The plan's activity reference period
- The options in the plan
- The plan year

In addition to these definitions, there are a variety of other factors that you include when defining a plan. However, these are some of the most common.

Programs

You define programs in order to group benefits together as a package. Your program definition consists of:

- The plan types and plans in the program
- The eligibility profile that controls who is eligible for the program
- The program year period
- For Advanced Benefits customers, the life events that enable enrollment in the program

Programs are important because they set the boundaries for what benefits are offered to your employees and other eligible participants. Also, it is at the program level that you define many administrative procedures and rules, such as eligibility requirements that cascade to the plan types, plans, and options in the program.

You define currency types at the program level. A plan in program must inherit the program's currency definition. You cannot associate a plan with more than one program if those programs use different currency types.

For Advanced Benefits users, you can specify the valid reasons for waiving out of waivable plan types in a program. You can then define the waive certification that you accept for each valid waive reason.

Program Structure Display

You use the Hierarchy window to display the program structure that you have created. The program structure shows how plan types, plans and options are grouped hierarchically in your program.

You can display four views of a program's structure. Each view displays data by program year or plan year and by effective date.

Plans in Programs: Displays all programs, and under each program, its plan types, the plans in each of these plan types, and the options in each of these plans. This is the most comprehensive view.

All Plans: Displays all plan types, the plans in each of these plan types, and the options in each of these plans.

Plans Not In Programs: Displays those plans types that contain the not in program plans, the not in program plans in each of these plan types, and the options in these not in program plans.

Options In Plans: Displays all active options, the plans that use these options, and the programs that use these plans.

Program and Plan Year Periods

You define program and plan year periods--as well as fiscal years--using the calendar start and end dates through which programs or plans are in effect.

Once you define a year period, you associate it with the appropriate program or plan.

Integration with Authoria HR (US and UK)

You can establish context-sensitive information access between Oracle HRMS and the third party information product Authoria HR.

Authoria HR uses a common knowledge repository to manage and communicate HR and benefits information. Once you set up a total compensation plan, you can configure links between Oracle HRMS and Authoria HR. End users can click on links in Total Compensation windows and self-service pages to display context-sensitive Authoria HR documentation.

You can configure the following windows in the Professional User Interface for Authoria HR:

- View Enrollment Results window
- View Participation Information window
- Flex Program window
- Non-Flex Program window
- Savings Plan window
- Miscellaneous Plan window
- Person Life Events window

You can configure the following self-service pages for Authoria HR:

- Benefits Enrollment Overview page
- Current Benefits page
- Confirmation page
- Benefits Selection page

See Configuring Links Between Oracle Standard and Advanced Benefits and Authoria HR, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

Reimbursable Goods and Service Types

In addition to traditional benefits offerings, such as health and welfare and savings plans, you can define goods and services that your organization approves for reimbursement.

You can use this feature to define flexible spending account plans or to define other reimbursable goods and services, such as a medical insurance claim form, a monthly invoice from a registered dependent care provider, a cash award, or a wall plaque.

Reimbursement Plans

Flexible Spending Accounts (FSAs) and other plans that reimburse participants for certain incurred expenses have special plan design features. You define information that is specific to reimbursement plans after you perform basic plan set up tasks, such as defining a plan's eligibility requirements.

> **Note:** When you set up the coverage for a flexible spending account, select a coverage calculation method of *Same As Annualized Elected Activity Rate* so that the participant receives the amount of coverage they elected for the year.

Plan Design Copy

Plan Design Copy enables you to copy program and plan design data that you have already entered into an Oracle HRMS database. The copy process creates a new instance of the compensation object and its associated child records.

> **Note:** The Copy Process does not copy person related records, only plan design data.

You can use Plan Design Copy to save time during your implementation by avoiding repetitive data entry where plan design components are similar or identical. For example, you can copy a base plan, then makes changes to the new plan with the applications windows you used to create the base plan.

Plan Design Copy is available to all Oracle HRMS customers and does not require a license for Self-Service or Advanced Benefits. You can use Plan Copy for any plans that you administer using the Total Compensation data model, including:

- Standard and Advanced Benefits Programs and Plans
- Compensation Workbench Plans
- Individual Compensation Distributions Plans

- Absence Plans

When you copy a program or plan, the copy process copies the compensation object and plan design data associated with the object stored in benefits tables. For example, if you copy a program, the copy process also copies:

- Plan types in program
- Plans in program
- Options in plan
- Participant and dependent eligibility profiles
- Enrollment requirements
- Life events
- Standard and variable rate calculations
- Coverage and premium calculations
- Flex Credit calculations and benefit pools (Advanced Benefits)
- FastFormulas (however, the process does not verify the formula or copy any functions called by the formula)

For a list of items that the copy process does not copy, see: Exceptions to the Copy Process, page 1-60

Copy Target

You can copy a compensation object and its child records to the same business group or to a different business group.

You can also **export** a program or one or more plans into a flat file. Exporting a compensation object is useful if you want to transfer a plan design between database instances, for example, between a test and a production database. You export a plan design by selecting Export to File on the Select Target page.

You import the file into the database through a concurrent request and then complete the transaction using Plan Design Copy.

See: Importing a Plan Design From a File, page 1-103

Reuse of Existing Child Objects

Child objects are components of a plan design that you attach to a higher level object, such as a plan in a program or an activity rate attached to an option.

You can reuse child objects that exist in your target business group. For example, you may want to reuse a plan that is shared between two programs rather than maintaining two versions of the same plan.

You can choose how the copy process functions when duplicate objects exist in the target database. You can:

- Reuse existing objects if objects with the **current name**in the source business group exist in the target business group.
- Reuse existing objects if objects with the**new name**formed by adding a prefix or suffix to the current name exist in the target business group.
- Create new objects without reusing duplicate objects.

Application of these rules--along with certain exceptions required by the Total Compensation data model--are documented below.

Copy Within a Business Group

When you copy a plan design within a business group, a prefix or suffix is **mandatory**. Top level objects that you copy (such as a program or plan not in program) must be unique within the business group.

If you reuse objects with the **current name** in the business group, the copy process:

- Creates top level objects with a new name based on the prefix or suffix you supply.
- Generates an error if top level objects exist with the new name based on the prefix or suffix you supply.
- Reuses child objects with the current name or, if no objects are found, creates child objects with the current name.
- Creates activity rate objects with the new name.

If you reuse objects when the **new name** exists in the business group, the copy process:

- Creates top level objects with the new name.
- Generates an error if top level objects exist with the new name.
- Reuses child objects with the new name or, if no objects are found, creates child objects with the new name.
- Reuses life event reasons and FastFormulas with the new name. If the process does not find an object with the new name, it reuses an object with the current name. If it does not find an object with the current name, it creates an object with the new name.

If you **do not reuse** existing objects, the copy process:

- Creates top level and child objects with the new name.
- Generates an error if top level or child objects exist with the new name.
- Reuses life event reasons and FastFormulas with the current name, or, if no objects are found, creates objects with the new name.

Copy to a Different Business Group

When you copy a plan design to a different business group, a prefix or suffix is **optional** .

If you reuse objects with the **current name** in the different business group, and you do not enter the optional prefix or suffix, the copy process:

- Creates top level objects with the current name.
- Generates an error if top level objects exist with the current name.
- Reuses child objects with the current name or, if no objects are found, creates child objects with the current name.

> **Note:** If the copy process finds a child record with a different name, but the same sequence number (such as for eligibility profiles or options in plan), the process generates an error.

If you reuse objects with the **current name** in the different business group, and you enter a prefix or suffix, the copy process:

- Creates top level objects with the new name.
- Generates an error if top level objects exist with the new name.
- Reuses child objects with the new name or, if no objects are found, creates child objects with the new name.
- Creates activity rates with the current name if rates with the current name are not found. If rates with the current name are found, the process creates rates with the new name. If the process finds existing rates with the new name, the process generates an error since activity rate names must be unique.
- Reuses life event reasons and FastFormulas with the current name or creates objects with the new name.

If you reuse objects when the **new name** exists in the different business group, the copy process:

- Creates top level objects with the new name.
- Generates an error if top level objects exist with the new name.
- Reuses child objects with the new name or, if no objects are found, creates child objects with the new name.
- Reuses life event reasons and FastFormulas with the new name. If the process does not find an object with the new name, it reuses an object with the current name. If it does not find an object with the current name, it creates an object with the new name.

If you **do not reuse** existing objects in the different business group, and you do not enter the optional prefix or suffix, the copy process:

- Creates top level and child objects with the current name.
- Generates an error if top level or child objects exist with the current name.
- Reuses life event reasons and FastFormulas with the current name, or else creates objects with the current name.

If you **do not reuse** existing objects in the different business group, and you enter a prefix or suffix, the copy process:

- Creates top level and child objects with the new name.
- Generates an error if top level or child objects exist with the new name.
- Reuses life event reasons and FastFormulas with the new name. If the process does not find an object with the new name, it reuses an object with the current name. If it does not find an object with the current name, it creates an object with the new name.

Exceptions to the Copy Process

The copy process does not copy:

- Non-benefits data, such as HR and Payroll data referenced by your plan design. You must map this data to targets in the new business group as part of the copy process.
- Regulations
- Person changes and related person changes for life event reasons. The process copies the top level of your life event reason definition, but you must reselect the table and column names that define the data change.

- Eligibility and variable rate criteria based on enrollment in another plan, the People Group flexfield, or status as a COBRA Qualified Beneficiary (US).

- Functions called by FastFormulas you have written. Nor does the process verify the formula. The copy process does, however, copy the formula and its associated code.

> **Note:** If a Lookup Type used in your plan design changes from Extensible to System (due to an application upgrade), and you have added new codes to the Lookup Type, the process will not copy the plan design. In this case, you must remove any codes you have added to the Lookup Type before you can copy the plan design.

Activity Rates and Combination Plans

Because you link activity rates to compensation objects, activity rates must be unique to the compensation object. Therefore, whenever possible, the activity rate is copied with the prefix or suffix that you supply. Activity rates include:

- Standard rates
- Flex credits
- Benefit pools
- Coverage calculations
- Actual Premiums

Combinations always include a program (plans in program, plan types in program, or options in program) thus the program must have a unique name.

Special Requirements for Plan Design

Certain types of plans have special requirements that you should know about before you begin to record your plan design in the system. These special plans include flex credit plans, flexible spending accounts, life insurance plans, and imputed income plans.

Flex Credits Plans (Advanced Benefits)

If you are offering a flex credit plan, you must set up a flex credits program, even if there is only one plan for which you offer flex credits.

Flexible Spending Account Plans (Advanced Benefits)

If you want to identify reimbursable goods and services for FSAs, you must set up these

accounts as separate plans, rather than as separate options within an FSA plan. You cannot associate goods and services at the option level. Examples of FSAs include US health care and dependent care plans.

Imputed Income Plans (US)

When you administer a plan that is subject to imputed income there are certain requirements that you need to follow during your plan design.

You must create two plans, one that is subject to imputed income and a second plan, called a *placeholder plan*, that you use to record the imputed income calculation. You can have only one placeholder plan per program, or a placeholder plan can be linked to multiple programs.

- Select the person type that is Subject to Imputed Income in the General tabbed region of the Plans window. Choose participant, spouse, or dependent based on the person type covered by this plan.
- Select the person type for which you are recording imputed income in the placeholder plan using the Imputed Income Type field in the Restrictions tabbed region of the Plans window.
- Select an Age to Use code in the Age tabbed region of the Derived Factors window based on the person type covered by the plan when you define the derived factor.
- You can define only one imputed income plan in a program.
- You can associate an imputed income plan with more than one program.
- You cannot link an eligibility profile to the imputed income placeholder plan.

> **Note:** By default, the imputed income calculation assumes that the employer pays 100% of the benefit, and the benefits system does not subtract employee contributions from the calculation. However, you can set the BEN:Imputed Income Post Tax Deduction profile to Y so that the imputed income process deducts the sum of all standard rates defined as Subject to Imputed Income with a Tax Type of After Tax and an Activity Type of either Employee Payroll Contribution, Employee Individual Contribution, or Employee Plan Contribution.

Life Insurance Plans

If you offer dependent and spousal life insurance, and you limit the level of dependent or spousal coverage as a percentage of the employee's life insurance coverage, system processing requires that you set up three plans (Employee Life Insurance, Spousal Life Insurance, and Dependent Life Insurance) and associate them with corresponding plan

types (Employee Life Insurance, Spousal Life Insurance, and Dependent Life Insurance).

Considerations for Associating a Plan with a Program

When you define a benefits plan, it is not necessary that the plan be placed in a program. However, there are advantages to associating a plan with a program. In general, a plan belongs in a program when:

- Participants typically enroll in the plan at the same time they enroll in other plans in the program.
- Participation eligibility requirements defined for the program also apply to the plan.

In general, a plan does not belong in a program (termed a "not in program plan") when:

- Participants typically enroll in the plan at a different time than other plans in the program.
- Participation eligibility requirements defined for the program differ substantially from those defined for the plan.
- The benefits the plan provides differ substantially from the benefits provided by other plans in the program.

Currency Definition for Multinational Organizations

You define currency types at the program level. A plan in program must inherit the program's currency definition. You cannot associate a plan with more than one program if those programs use different currency types.

For example, let's say your organization defines two programs, a US Benefits Program and a Canadian Benefits Program. You must define different currency types for these two programs.

Accordingly, you must define two employee stock purchase plans: the US Employee Stock Purchase Plan and the Canadian Employee Stock Purchase Plan to accommodate the different currency types of the programs with which they are associated.

Reporting Groups

A reporting group is a collection of programs and plans that you group together for reporting purposes, such as for administrative use or to meet regulatory requirements.

At the plan level, you can define the regulatory bodies and regulations that govern a reporting group.

For each regulatory body that you link to a plan, you can define how the regulatory

body governs that plan. You can also record the date the plan was qualified by the regulatory body and the approved termination date if the regulatory body does not recognize a plan's qualifications after a certain date. An approved termination date is typically defined when a reporting group must be re-evaluated by the regulatory body on a periodic basis.

Since US benefit plans are subject to federal nondiscrimination testing requirements, you may define special FastFormula rules to help determine compliance with these regulations. You can define the following rules:

Contribution Nondiscrimination is used to identify those participants who cause the plan to be out of compliance with contribution nondiscrimination provisions.

Coverage Nondiscrimination is used to identify those participants who cause the plan to be out of compliance with coverage nondiscrimination provisions.

Five Percent Owner is used to determine those participants who are 5% owners of the business.

Highly Compensated Determination is used to determine those participants who are highly compensated in the context of the plan for nondiscrimination testing purposes.

Key Employee Determination is used to determine those participants who are key in the context of the plan for nondiscrimination testing purposes.

Defining a Benefits Program

You use the Programs window to date effectively create and maintain your program design. Many of the values that you set at the program level cascade to the plan types, plans, and options that you define and associate with this program.

To define general characteristics of a program:

1. Enter a unique Program Name starting with a letter of the alphabet (not a number or symbol).

2. Enter a Description of the program.

3. Select the Program Status.

   Pending: No participants are actively enrolled in plans in this program, but could be in the future if you change this program's status to Active. Select the Pending status when setting up a program that possibly may not become Active.

   Eligibility processes operate on pending programs in "evaluate-only" mode, and do not create active records.

   Active: Eligible persons currently may be enrolled in plans in this program.

   Inactive: Current participants can remain in plans in this program, but no new participants can enroll in plans in this program.

Closed: No participants are enrolled in any plans in this program, nor will any enroll in the future (unless you reactivate the program).

4. For Advanced Benefits users, enter the alphanumeric identifier in the IVR field that a participant uses to identify this program using interactive voice response or telephony technology.

5. Select a Program Type for this program.

6. Select an Activity Reference Period to specify the time period in which the system expresses activity rates for all plans in this program.

7. Select a Program Group to group this program with other programs for reporting purposes.

8. Select an Enrollment Rate/Frequency. This is the rate that is communicated to participants.

    - Select Estimated Per Pay Period to calculate the element entry based on a fixed number of pay periods, 52 for weekly and 26 for bi-weekly pay periods.

9. Select the standard monetary Currency for all plans in this program.

10. Enter a URL in the Web Address field to create a hypertext link from the program name on an Oracle Self-Service Human Resources benefits enrollment web page to a URL containing information about this program. This URL can reside on an intranet or the World Wide Web.

11. For US customers, select the level at which you are administering COBRA programs in the Determine Enrollment Period Level field.

    - Select Program if your COBRA administration rules are set at the program level and apply to all plan types and plans in the COBRA program.

    - Select Plan Type in Program if your COBRA administration rules vary between the plan types in the COBRA program.

12. Select a Family Member Code or rule to indicate the kind of family members that must be recorded in a participant's contact record in order for the participant to be eligible for this program.

Defining Eligibility and Override Parameters for a Program

You use the check boxes in the General tabbed region of the Programs window to set eligibility and override parameters for a program.

To define eligibility and override parameters for a program:

1. Check the Participation Eligibility Override Allowed field to enable an override using the Participation Override window.

   Checking this field is necessary if you want to allow plan participation under special circumstances, such as a negotiated benefits package for a new hire.

   Important: All plans and options in this program inherit this setting unless you specify differently at the plan or option in plan levels.

2. Check the Use All Assignments for Eligibility field to inform the system to consider all of an employee's active assignments (rather than just the primary assignment) when determining eligibility for this program.

3. For Advanced Benefits users, check the Track Ineligible Person field to cause the system to track persons who are found ineligible for participation in this program when the Participation process is run.

   Note: You use the View Participation Information window to view the compensation objects for which a participant is either eligible or ineligible.

   Note: You must check this field if you determine benefits eligibility based on temporal factors, such as age or length of service.

4. Check the Use All Assignments for Rates field to inform the system to consider all of an employee's active assignments (rather than just the primary assignment) when determining activity rates for the plans and options in this program.

5. Save your work.

Associating Plans and Plan Types with a Program

You use the Plan and Plan Type window to put one or more plans or plan types into a program.

To associate a plan or plan type with a program:

1. Enter or query the program to which you are adding a plan or plan type in the Programs window and choose the Plans and Plan Types button.

2. Choose the Plans tabbed region to add a plan to the program.

3. Choose the Plan Type tabbed region to add a plan type to the program.

   Note: When you link a plan type to a program, you must still link the plans in that plan type to the program using the Plans tabbed region.

4. Enter a Seq (sequence) number for a plan or plan type you are associating with this program.

   Note: You enter a sequence number to define the order in which the compensation object appears in an enrollment window. Advanced Benefits customers can use sequence numbers to control the interim coverage assigned when an election is suspended.

5. Select the Plan or Plan type that you are associating with this program.

6. For Advanced Benefits users, enter the alphanumeric identifier in the IVR field that participants use to identify this plan or plan type using interactive voice response or telephony technology.

7. Select the Status of this plan or plan type.

   Active: Participants can enroll in this plan or the plans in this plan type.

   Pending: No participants are actively enrolled in this plan or plan type, but could be in the future if you change its status to Active. Eligibility processes operate on this compensation object in "evaluate-only" mode, but do not create active records. Select the Pending status when setting up a plan or plan type that might not become Active.

   Inactive: Current participants can remain enrolled in this plan or the plans in the plan type, but no new participants can enroll.

   Closed: No participants are enrolled in this plan or the plans in this plan type, nor will any enroll in the future (unless you reactivate the program).

8. Enter a URL in the Web Address field to create a hypertext link from this plan or plan type name on an Oracle Self-Service Human Resources benefits enrollment web page to a URL containing information about this program. This URL can reside on an intranet or the World Wide Web.

9. Check the Waivable field in the Plan Types tabbed region if eligible persons can waive participation in all plans of this plan type.

10. For Advanced Benefits users, check the Track Ineligible Person field to cause the system to track persons who are found ineligible for participation in the plans and plan types in this program when the Participation Process is run. If you want to

track ineligibility, you must also check the Track Ineligible Person field for the program.

Note: You use the View Participation Information window to view the compensation objects for which a participant is either eligible or ineligible.

Note: You must check this field if you determine benefits eligibility based on temporal factors, such as age or length of service.

11. For Advanced Benefits users, check the Participation Eligibility Override Allowed field if you can override standard eligibility criteria for the plans and plan types in this program.

    Checking this field is necessary if you want to allow participation under special circumstances, such as a negotiated benefits package for a new hire.

12. Select a Family Member Code or rule to indicate the kind of family members that must be recorded in a participant's contact record in order for the participant to be eligible for the plans and plan types in this program.

13. Save your work.

Defining Waive Reasons for Plan Types in a Program (Advanced Benefits)

You use the Program Waive Reasons window to specify the valid reasons for waiving out of waivable plan types in a program.

To define waive reasons for a plan type in a program:

1. Enter or query the program for which you are defining plan type waive reasons in the Programs window.

2. Choose the Plan and Plan Type button then choose the Plan Type tabbed region.

3. Select a Plan Type and choose the Waive button.

4. Select a Waive Reason for waiving out of this plan type in this program.

5. Check the Default field if this waive reason is the default when an eligible person is waiving, but does not specify a reason.

6. Choose the Certification button to specify the waive certifications that you accept for a waive reason.

7. Select a Waive Participation Certification Type for this waive reason.

8. Check the Required field if this waive certification must be submitted for a participant to waive this plan type.

    - If special circumstances apply, select a Certification Required When Rule to specify when waive certification is required.

9. Check the Preferred field if this certification is preferred, but not required, for waiving out of this waivable plan type.

10. Check the Lack of Certification Suspends Enrollment field if failure to provide this certification results in a suspended election.

11. Save your work.

Defining Participation Eligibility Criteria for a Compensation Object

You link eligibility criteria profiles to a compensation object to restrict eligibility for that benefit. You can also define participation start and end dates and required waiting periods that control when an eligible person can enroll in a benefit.

You can link participation eligibility criteria to a compensation object at the following levels in the compensation object hierarchy:

- Program (Program Participation Eligibility window)
- Plan type in program (Plan Type Participation Eligibility window)
- Plan in program (Plan in Program Participation Eligibility window)
- Plan (Maintain Plan Eligibility window)
- Option in plan (Maintain Options Eligibility window)

Follow the steps below regardless of the level or levels in the compensation object hierarchy at which you define participation eligibility.

See: Compensation Objects, page 1-49

To define participation eligibility criteria for a compensation object:

1. Query or enter the compensation object for which you are defining participation eligibility requirements.

    Note: The window in which you query or enter the compensation object varies based on the level at which you define the

participation eligibility criteria.

2. Navigate to the appropriate Participation Eligibility window.

3. Select a Participation Start Date code or rule to define when a person becomes eligible for this compensation object.

4. Select a Participation End Date code or rule to define the date on which a person becomes ineligible for this compensation object.

5. Enter the period that an eligible participant must wait before enrolling in the Wait Period Value field.

   - Or, select a waiting period rule.

6. Select the unit of measure for the waiting period in the Wait Period UOM field.

7. Select a waiting period Date to Use Code or rule that defines the start date from which the waiting period is calculated.

   In the Maximum Enrollment block:

8. Enter a Value that represents the maximum length of time in which a participant can be enrolled in this compensation object.

9. Select the unit of measure of this value in the UOM field.

10. Select a rule if you use a formula to determine the maximum enrollment period for this compensation object.

11. Select a Determination Date Code or rule to indicate if the maximum enrollment period is determined from the participant's enrollment coverage start date or, for COBRA purposes, from the COBRA qualifying event date.

12. Select a value in the Applies To field if you want to limit the persons for whom the maximum enrollment period is applicable.

13. Save your work.

To link an eligibility profile to a compensation object:

1. Query or enter the compensation object for which you are defining participation eligibility requirements.

   Note: The window in which you query or enter the compensation

object varies based on the level at which you define the participation eligibility criteria.

2. Navigate to the Eligibility window based on the level in the compensation object hierarchy at which you are defining eligibility.

3. Choose the Profiles tab and select an Eligibility Profile that determines eligibility to participate in this compensation object.

4. Check the Required field if a person must meet all of the criteria in this profile in order to be eligible to participate.

   Note: If multiple eligibility profiles are defined, a person must satisfy all profiles marked as Required, and at least one that is not marked Required.

5. Check the Score field if you rank a participant's eligibility for this compensation object relative to the total evaluated population.

6. Check the Track Score for Ineligible Person field if you want to compute the person's score even if they do not meet all required eligibility criteria.

7. Choose the Rules tab if you want to use a rule to determine participation eligibility *instead* of an eligibility profile.

   - Enter a Seq (sequence) number specifying the order in which the system processes this eligibility rule relative to any other eligibility rules for this compensation object.
   - Select an eligibility rule in the Rule field.
   - Check the Derivable Factors Available field if this formula uses derived factors to determine eligibility.
   - Check the Required field if a person must meet all of the criteria in this rule in order to be eligible to participate in this compensation object.

8. Save your work.

Associating a Life Event Reason with a Compensation Object (Advanced Benefits)

You link a life event definition to a compensation object to restrict eligibility for that benefit to participants who experience that life event.

You can also define the participation start and end dates and required waiting periods that control when an eligible person can enroll in a benefit based on the occurrence of the life event.

You can link a life event definition to a compensation object at the following levels in the compensation object hierarchy:

- program (Life Event window)
- plan type in program (Life Event window)
- plan in program (Life event window)
- plan (Maintain Plan Related Details window, Life Events tabbed region)
- option in plan (Life Event Reason Impact on Eligibility window)

Follow the steps below regardless of the level or levels in the compensation object hierarchy at which you link a life event to a compensation object.

To associate a life event reason with a compensation object:

1. Query or enter the compensation object for which you are defining participation eligibility requirements based on a life event.

   Note: The window in which you query or enter the compensation object varies based on the level at which you define the participation eligibility criteria.

2. Navigate to the Life Event window based on the level in the compensation object hierarchy at which you are defining eligibility based on a life event.
3. Select a Life Event.
4. Select a Participation Start Date code or rule to define when a person becomes eligible for this compensation object based on this life event.
5. Select a Participation End Date code or rule to define the date on which a person becomes ineligible for this compensation object based on this life event.
6. Check the Ignore Participation Override field to specify that the system ignore previously overridden participation eligibility results for this life event and re-determine eligibility.
7. Check the Overridable field to allow manual overriding of the eligibility results that the system calculates following this life event.

   Checking this field is useful when you want to allow special circumstances for

participation, such as a negotiated benefits package for a new hire.

8. Enter the period that an eligible participant must wait after experiencing this life event before enrolling in the Wait Period Value field.

   - Or, select a waiting period rule.

9. Select the unit of measure for the waiting period in the Wait Period UOM field.

10. Select a waiting period Date to Use Code or rule that defines the start date from which the waiting period is calculated based on this life event.

    In the Maximum Enrollment block:

11. Enter a Value that represents the maximum length of time in which a participant can be enrolled in this compensation object based on the occurrence of this life event.

12. Select the unit of measure of this value in the UOM field.

13. Select a rule if you use a formula to determine the maximum enrollment period for this compensation object.

14. Select a Determination Date Code or rule to indicate if the maximum enrollment period is determined from the participant's enrollment coverage start date or, for COBRA purposes, from the COBRA qualifying event date.

15. Select a value in the Applies To field if you want to limit the persons for whom the maximum enrollment period is applicable based on this life event.

16. Select a Family Member Code or rule to indicate the kind of family members that must be recorded in a participant's contact record in order for the participant to be eligible for this compensation object based on this life event.

17. Choose a value in the Eligible/Ineligible field that indicates if the occurrence of this life event results in a person's being eligible or ineligible to participate in this compensation object.

18. Save your work.

Associating an Organization with a Benefits Program

You use the Organizations tabbed region of the Programs window to identify organizations, such as third party administrators or benefits suppliers, that provide services to your benefits program.

To associate an organization with this program:

1. Query or enter a program in the Programs window and choose the Organizations tabbed region.
2. Select an Organization that provides goods or services for this program.
3. Enter a customer identifier number for this organization in the Customer field.
4. Enter the Policy or Group identifier for this organization.
5. Enter a description of the roles and responsibilities of this organization in the Organization Roles field.
6. Save your work.

Associating Reporting Groups with a Program

You use the Report Groups tabbed region of the Programs window to associate a benefits reporting group with a program.

See: Defining a Reporting Group, page 1-105

To associate a benefits reporting group with a program:

1. Query or enter a program in the Programs window and choose the Report Groups tabbed region.
2. Select the Name of the reporting group you use to report on this program.
3. Add this program to more reporting groups by selecting additional groups, as needed.
4. Save your work.

Associating Program or Plan Year Periods with a Program

You use the Periods tabbed region of the Programs window to associate one or more year periods with a program. Year periods are defined using the Program/Plan Year Periods window.

See also: Defining a Program or Plan Year Period, page 1-95

To associate a year period with a program:

1. Query or enter a program in the Programs window and choose the Periods tabbed region.

2. Enter the Seq (sequence number) of the year period you are associating with this program.

3. Select a Start date for this year period.

   The End date for this program year period automatically displays.

4. Save your work.

Defining Plan Types

You use the Plan Types window to date effectively define, update, and delete or end-date plan types.

To define a plan type:

1. Enter a unique Name for the plan type you are defining.

2. Select an Option Type to classify the options you associate with this plan type.

3. For Advanced Benefits users, enter the alphanumeric identifier in the IVR field that participants use to identify this plan type using interactive voice response or telephony technology.

4. Select a Compensation Category that classifies the benefit provided by the plans and options in this plan type.

   Note: You can use this information in system extracts that you send to benefits carriers and other third party agents.

5. Select a Self Service Display format of horizontal or vertical to control how you display the plans and options in a self-service enrollment form.

   Note: The display format defaults to horizontal.

   In the Enrollment block:

6. Enter the Minimum number of plans in this plan type in which an eligible person can be enrolled simultaneously or check the No Minimum field if there is no minimum.

7. Enter the Maximum number of plans in this plan type in which an eligible person can be enrolled simultaneously or check the No Maximum field if there is no maximum.

8. Save your work.

Setting Up Spending Account Plans for Forfeitures (Advanced Benefits)

For spending account plans--or other plans that offer reimbursements or distributions--you can set up Oracle HRMS so that a participant's unspent contributions or credits are forfeited back to your enterprise.

At the end of a plan year (or similarly defined period), Oracle Advanced Benefits customers schedule the Process Forfeitures concurrent request to calculate and record the total forfeited amount for each participant in a spending account plan.

You set up benefits balances--maintained manually using the Benefits Balances window--or use defined balances maintained by Oracle Payroll to record participant contributions and distributions.

> **Note:** Depending on your plan design, the Process Forfeitures concurrent request calculates forfeitures based on either the participant's total contributions for the year or the participant's year to date contributions. The forfeitures process determines the forfeited amount based on the value stored by the balance.

Follow this process to set up a reimbursement plan for forfeiture processing. As a prerequisite, you should have already defined the plan using the Plans window.

To set up reimbursement plans for forfeitures:

1. Set up your contribution and distribution balances.

   To process forfeitures, each participant must have a separate contribution and distribution balance. Oracle Payroll customers can use defined balances to record totals automatically.

   If you do not use Oracle Payroll, you must manually maintain a contribution and distribution benefits balance for each participant.

   See: Defining a Benefit Balance, page 5-154 for information on setting up a benefits balance.

   See: Defining Person Benefit Balances, page 6-115 for information on recording benefits balances for a participant.

2. Define a derived compensation level factor for each contribution and distribution balance.

   You link the derived factors to the standard contribution and distribution rates you define in step 4.

   See: Defining Derived Factors: Compensation Level, page 1-124

3. Set up a spending account plan that enables forfeitures.

   Use the fields available on the Forfeiture tabbed region of the Plan Reimbursement window to define forfeiture requirements.

   See: Defining a Reimbursement Plan (Advanced Benefits), page 1-96

4. Define the standard contribution and distribution rates.

   - For contributions, select an activity type of Employee Payroll Contribution
     - In the Total Rate field of the Calculation Method tabbed region, select the derived compensation level factor for the contribution that you defined in step 2
   - For distributions, select one of the following activity types: Participant Expense Reimbursement, Participant Payroll Reimbursement, or Participant Reimbursement
     - In the Total Rate field of the Calculation Method tabbed region, select the derived compensation level factor for the distribution that you defined in step 2

   See: Defining Activity Rates for a Standard Contribution/Distribution, page 5-132

5. After the plan year has ended, run the Process Forfeitures concurrent request for a single plan to calculate participant forfeitures.

   Note: As a prerequisite, update the balances to make sure that contribution and distribution totals are current and accurate.

   See: Running the Process Forfeitures Concurrent Request (Advanced Benefits), page 6-118

6. View the results of the Process Forfeitures request.

   - View the Process Forfeitures Audit Log and the Process Forfeitures Summary Report for information about errors and process totals
   - Open the Plan Reimbursement window and choose the Forfeiture tab to see the total forfeitures for a plan
   - Open the View Enrollment Results window, query a person, and choose the Rates button to see forfeiture results for a participant

Defining a Benefits Plan

You use the Plans window to date effectively define the plans that you offer to

employees and other eligible participants.

To define a benefits plan:

1. Set the effective date to the date on which you want to create the plan.

   Note: You must create the plan with an effective date on or before the first day of the enrollment period in which it will be used.

2. Enter the Name of this plan starting with a letter of the alphabet (not a number or symbol).

   Note: By setting the profile option BEN: Compensation Objects Display Name Basis in the System Profile Values window, you can choose whether compensation object names display in application windows (both in the professional and Self-Service user interfaces) based on the life event occurred on date or the user's session date. The default option value is Session.

3. Select the plan Status.

   Pending: No participants are actively enrolled in this plan, but could be in the future if you change its status to Active. Eligibility processes operate on this plan in "evaluate-only" mode, but do not create active records. Select the Pending status when setting up a plan that possibly may not become Active.

   Active: Eligible persons currently may be enrolled in this plan.

   Inactive: Current participants may remain in this plan, but no new participants may enroll in this plan.

   Closed: No participants are enrolled in this plan, nor will any enroll in the future (unless you reactivate the plan).

4. Enter a Short Name if you also refer to this plan by an abbreviation.

5. Enter a Short Code if you also refer to this plan by a code.

   You can extract data for a compensation object based on its Short Name or Short Code.

6. Select the plan type for which you are defining a plan in the Type field.

7. For Advanced Benefits users, enter the alphanumeric identifier in the IVR field that participants use to identify this plan using interactive voice response or telephony technology.

8. Choose the Inception Date to specify the calendar date on which you first

introduced this plan.

9. Select if this plan must be in a program or may not be in a program in the Plan Usage field.

   Note: If you include this plan in a program, benefits eligibility is determined when eligibility is determined for the program. If you do not want to determine participant eligibility for this plan during a specific time period, you can link a required dummy eligibility profile to the plan (for example, a benefits group containing no people) so that no persons are found eligible for the plan.

10. Choose the General tabbed region.

11. Check the Savings Plan field if you are defining a savings plan.

12. Enter the COBRA Payment Day that corresponds to the day of the month on which COBRA payments are due for this plan.

    For example, 1 refers to the first day of each month.

13. Select the Primary Funding Method to specify the source of funds for this plan.

    Self Insured: You self-insure to fund this plan.

    Trust: A financial institution such as a bank maintains a trust to fund this plan.

    Split: You self-insure as well as use a trust to fund this plan.

    Fully Insured: You set up an annuity to fund this plan.

14. Select a Health Service code to describe the type of health service this plan provides.

15. Select the participant type whose coverage is subject to imputed income taxation in the Subject to Imputed Income field. Choose either participant, dependent, or spouse.

16. Enter a URL in the Web Address field to create a hypertext link from this plan name on an Oracle Self-Service Human Resources benefits enrollment web page to a URL containing information about this plan. This URL can reside on an intranet or the World Wide Web.

17. Select a Family Member Code or rule to indicate the kind of family members that must be recorded in a participant's contact record in order for the participant to be eligible for this plan.

18. Save your work.

Defining a Plan to Determine Eligibility for a Self-Service Action:

You can use Compensation and Benefits functionality as a generic engine to determine eligibility for self-service actions. You define a plan to represent a sub action, such as Promotion (Sales) or Promotion (Italy). After defining a plan type with the option type Personnel Action, use the Plans window to define a sub action and link it to a form function. When users choose the function from a menu, the application calculates each person's eligibility for the action.

See: Set Up Eligibility Processing, *Oracle HRMS Deploy Self-Service Capability Guide*

See: Overview of Self-Service Actions , *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

1. On the Miscellaneous tab, in the Personnel Action Function Name field, select the name of the form function from the LOV.

2. Make sure to activate the Plan Years Not Applicable check box. Plan years do not apply to self-service actions, and this step eliminates needless processing.

Defining Eligibility and Activity Rate Requirements for a Plan

Use the Eligibility Rates tabbed region of the Plans window to define participation eligibility requirements and activity rates for a plan.

To define eligibility requirements and activity rates for a plan:

1. Enter or query the plan in the Plans window for which you are defining eligibility and activity rate requirements and choose the Eligibility Rates tabbed region.

2. Check one or more of the following fields in the Eligibility to Participate Information block:

   Track Ineligible Person: For Advanced Benefits users, checking this field tracks people who are found ineligible for participation in this plan when the Participation batch process is run.

   > **Note:** You use the View Participation Information window to view the compensation objects for which a participant is either eligible or ineligible.

   > **Note:** You must check this field if you determine benefits eligibility based on temporal factors, such as age or length of service.

   Allows Override: For Advanced Benefits users, indicates that you may override eligibility requirements for this plan.

Checking this field is useful when you want to allow special circumstances for participation in this plan, such as a negotiated benefits package for a new hire.

Participation is Waivable: For Advanced Benefits users, indicates that an eligible participant may elect to waive this plan.

Use All Assignments for Eligibility: Informs the system to consider all of an employee's active assignments (rather than just the primary assignment) when determining participation eligibility for this plan.

3. Select if the participant's eligibility for this plan is based on dependent eligibility in the Eligibility Check field. Choose one:

   - **Participant:** The participant is eligible if he or she meets the participant eligibility requirements associated with the plan. Eligibility for the plan is not based on dependent eligibility.

   - **Participant and Dependent:** The participant is eligible only if he or she meets the participant eligibility requirements associated with the plan, and his or her dependents meet the dependent eligibility profiles and designation requirements associated with the plan.

   - **Dependent Only:** The participant is eligible if the participant's dependents meet the dependent eligibility profiles and designation requirements associated with the plan. If you select this value, the system does not check for participant eligibility.

4. Check the Use All Assignments for Rates field to inform the system to consider all of an employee's active assignments (rather than just the primary assignment) when determining activity rates for this plan.

5. Save your work.

Defining Plan Restrictions

You use the Restrictions tabbed region of the Plans window to specify whether a plan is subject to certain US federal regulations, such as Qualified Domestic Relations Orders. You also can also indicate if this plan is used to record flex credits or imputed income or if this is a waive plan.

To define plan restrictions:

1. Query or enter a plan in the Plans window and choose the Restrictions tabbed region.

2. Check the Flex Credits Plan field to identify this plan as the *placeholder* plan used to record the total flex credits for all plans in a program.

Note: This plan will not appear as an electable choice in the Flex Program enrollment form since a participant cannot elect this plan.

3. Check the Waive Plan field if a person's election of this plan represents the waiver of coverage.

4. Select the Imputed Income Type if this plan is a *placeholder* plan used to record imputed income totals for all participants, dependents, or spouses covered by a plan that is subject to imputed income.

5. Check the Highly Compensated Rule Applies field if this plan uses rules defined by the US Internal Revenue Service to identify highly compensated employees.

6. Check the Allow Qualified Domestic Relations Order field if this plan is subject to this US regulation.

   Thus, a court or similar body may issue an order requiring a participant to provide a portion of this plan's benefits to another person, typically a former spouse.

   Important: If you are defining plans outside the US, you can use this field when defining plans that behave similarly to US QDRO plans.

7. Check the Allow Qualified Medical Child Support Order field if this plan is subject to this US dependent coverage regulation.

   Thus, a court or similar body may issue an order requiring a participant to provide medical coverage for another person, typically a dependent child.

   Important: If you are defining plans outside the US, you can use this field when defining plans that behave similarly.

8. Check the Subject to Health Care Financing Administration field if this plan is subject to health care rate regulations.

9. If you use Oracle Self-Service Human Resources, check the Allow Temporary Identification field if benefits participants can print an enrollment identification card for this plan from their web browser.

10. Save your work.

Defining a Maximum Waiting Period Requirement for a Plan

You use the Participation tabbed region of the Plans window to define the maximum

required waiting period for a plan.

To define a maximum waiting period requirement for a plan:

1. Enter or query the plan in the Plans window for which you are defining a maximum waiting period requirement and choose the Participation tabbed region.

2. Enter the maximum waiting period for this plan in the Value field.

   Note: You define a maximum waiting period to override a waiting period that you define for a plan. For example, you could define a waiting period which required a participant to work 500 hours before becoming eligible for a plan. You could define a corresponding maximum waiting period of 6 months so that a participant who had worked 6 months, but had not worked 500 hours, would be eligible for the plan.

3. Select a unit of measure for the maximum waiting period in the UOM field.

4. Select a Rule to define the maximum waiting period for the plan, if necessary.

5. Select a code or rule to define the date from which the system calculates the maximum waiting period.

6. Save your work.

Defining a Plan Not in Program

Use the Not in Program tabbed region of the Plans window to define special requirements for plans that you do not associate with a program. Plans that are not in a program must have a plan usage code of May Not Be in Program.

To define special requirements for a plan not in program:

1. Enter a Sequence number for this plan.

2. Select the Currency in which activity rates for this plan are expressed.

3. Select the Enrollment Rate/Frequency. This is the activity rate that is communicated to participants on their payslip and in Self-Service.

   - Select Estimated Per Pay Period to calculate the element entry based on a fixed number of pay periods, 52 for weekly and 26 for bi-weekly pay periods.

4. Select an Activity Reference Period to specify the time period in which the system expresses activity rates for this plan.

Note: The Hourly activity reference period is only for plans used by Compensation Workbench. See: Defining a Compensation Workbench Plan, *Oracle HRMS Compensation and Benefits Management Guide*.

5. Save your work.

Associating Options with a Plan

You use the Maintain Plan Options window to associate an option with a plan.

Advanced Benefits users can define how life event reasons impact a person's participation eligibility for an option in a plan.

To associate an option with a plan:

1. Enter or query a plan in the Plans window.
2. Choose the Options button.
3. Enter a Seq (sequence) number for an option you are associating with this plan if you want the options to display in a particular order in the enrollment window.

   Note: Advanced Benefits customers can use sequence numbers to control the interim coverage assigned when an election is suspended.

4. Select an Option you are associating with this plan.
5. Select the Status of the option.

   Pending: No participants are actively enrolled in this option, but could be in the future if you change its status to Active. Eligibility processes operate on this option in "evaluate-only" mode, but do not create active records. Select the Pending status when setting up an option that possibly may not become Active.

   Inactive: No participants currently are enrolled in this option in this plan, but may be in the future.

   Active: Participants currently may be enrolled in this option in this plan.

   Closed: No participants are enrolled in this option in this plan, nor will any enroll in the future (unless you reactivate the plan).

6. For Advanced Benefits users, enter the numeric identifier in the IVR field that participants use to identify this option using interactive voice response or telephony

technology.

7. Enter the URL for this option in plan in the Web Address field if participants can enroll in this option by using the product's self-service web interface.

8. Enter a URL in the Web Address field to create a hypertext link from this option name on an Oracle Self-Service Human Resources benefits enrollment web page to a URL containing information about this plan. This URL can reside on an intranet or the World Wide Web.

9. Choose the Eligibility tab.

10. For Advanced Benefits users, check the Participation Eligibility Override Allowed field if the standard eligibility criteria that this option inherits from this plan can be overridden.

    Checking this field is useful when you want to allow special circumstances for participation in this option, such as a negotiated benefits package for a new hire.

11. For Advanced Benefits users, check the Track Ineligible Person field to cause the system to track persons who are found ineligible for participation in this plan when the Participation batch process is run.

    Note: You use the View Participation Information window to view the compensation objects for which a participant is either eligible or ineligible.

    Note: You must check this field if you determine benefits eligibility based on temporal factors, such as age or length of service.

12. Choose the Dependent Criteria tab.

13. Select a person type or person type combination in the Eligibility Check field to determine eligibility for this option for these person types.

14. Select if the participant's eligibility for this option is based on dependent eligibility in the Eligibility Check field. Choose one:

    - **Participant:** The participant is eligible if he or she meets the participant eligibility requirements associated with the option. Eligibility for the option is not based on dependent eligibility.

    - **Participant and Dependent:** The participant is eligible only if he or she meets the participant eligibility requirements associated with the option, and his or her dependents meet the dependent eligibility profiles and designation requirements associated with the option.

- **Dependent Only:** The participant is eligible if the participant's dependents meet the dependent eligibility profiles and designation requirements associated with the option. If you select this value, the system does not check for participant eligibility.

15. Select a Family Member Code or rule to indicate the kind of family members that must be recorded in a participant's contact record in order for that participant to be eligible for this option.

    Note: Family Members are recorded in the Contact window.

16. Save your work.

Maintaining Plan Related Details

You use the Maintain Plan Related Details window to:

- Associate a plan year period with a plan
- Associate a reporting group with a plan
- Associate reimbursable goods or services with a plan
- Associate regulations and reporting groups with a plan
- Associate an organization with a plan

Associating a Plan Year Period with a Plan

You associate a plan year period with a plan to define the period for which the plan is active.

To associate a plan year period with a plan:

1. Enter or query the plan in the Plans window to which you are associating a plan year period and choose the Details button.
2. Choose the Plan Year Periods tabbed region.
3. Enter a Seq (sequence) number to specify the order in which the system processes this plan year period relative to any other plan year period for this plan.
4. Select the plan year period Start date.

   The period end date displays based on the start date you select.

5. Save your work.

Associating a Reporting Group with a Plan

You can associate a plan to those reporting groups that you use to report on the plan.

To associate a reporting group with a plan:

1. Enter or query the plan in the Plans window to which you are associating a reporting group and choose the Details button.
2. Choose the Reporting Group tabbed region.
3. Select the Name of a reporting group that you use to report on this plan.
   - Select more reporting groups, as necessary.
4. Save your work.

Associating Goods or Services with a Plan

You can associate the goods or services that your enterprise provides as a benefit or has approved for reimbursement as part of a plan.

To associate a good or service with a plan:

1. Enter or query the plan in the Plans window to which you are associating goods or services and choose the Details button.
2. Choose the Goods or Services tabbed region.
3. Select the type of goods or services that you are associating with this plan in the Type field.
4. Save your work.

Associating Regulations with a Plan

You can associate regulations with a plan and the reporting groups that support these regulations.

To associate a regulation or a reporting group with a plan:

1. Enter or query the plan in the Plans window to which you are associating a regulation and choose the Details button.
2. Choose the Regulations tabbed region.
3. Select a Regulation.

4. Select a Reporting Group associated with this regulation.

5. Complete the following fields based on the regulations that govern this plan. These regulations support US non-discrimination legislation.

   - **Regulatory Plan Type** is used to define the type of regulation that governs this plan, such as Fringe benefit regulations or pension regulations.

   - **Contribution Nondiscrimination** is used to identify those participants who cause the plan to be out of compliance with contribution nondiscrimination provisions.

   - **Key Employee Determination** is used to determine those participants who are key in the context of the plan for nondiscrimination testing purposes.

   - **Highly Compensated Determination** is used to determine those participants who are highly compensated in the context of the plan for nondiscrimination testing purposes.

   - **Five Percent Owner** is used to determine those participants who are 5% owners of the business.

   - **Coverage Nondiscrimination** is used to identify those participants who cause the plan to be out of compliance with coverage nondiscrimination provisions.

6. Save your work.

Associating an Organization with a Plan

You can associate organizations with a plan, such as third party administrators and benefits suppliers. For example, you can link an organization to a plan when the organization is a benefits supplier to whom you owe a monthly premium.

To define an organization for a plan:

1. Enter or query the plan in the Plans window to which you are associating an organization and choose the Details button.

2. Choose the Organizations tabbed region.

3. Select the name of this Organization.

4. Enter the Customer Identifier this organization uses to identify this plan.

5. Enter the Policy or Group Number this organization uses to identify this plan.

6. Enter the Organization Role that describes the services this organization provides for this plan.

7. Save your work.

Defining Combinations of Plans and Plan Types

You use the Combinations window to define combinations of:

- Plans
- Plan Types
- Plan Type and Options

Combinations are useful for Advanced Benefits customers who want to calculate flex credits for a pool of compensation objects.

As a prerequisite, you must first define the plans, plan types, and options that you are including in your combination and associate these compensation objects with a program.

To define a combination:

1. Choose one of the following tabbed regions depending on the combination type you are defining.
   - Combination Plans
   - Combination Plan Types
   - Combination Plan Type and Options
2. Enter or query the Name of the plan or plan type combination.
3. Select the Program to which you have linked the plans or plan types that you are including in your combination.
4. Check the Applies To field next to each compensation object that you are including in your combination.

   Note: The Already Used field appears checked if this plan, plan type, or option is already included in another combination. You can only include a compensation object in one combination.

Defining Waive Reasons for a Plan (Advanced Benefits)

You use the Waiving window to define the conditions under which an eligible person can waive participation in a plan.

To define waive reasons for a plan:

1. Enter or query the plan for which you are defining plan waive reasons in the Plans window.
2. Choose the Waiving button.
3. Select the Waive Participation Reason that supports why a person can elect to waive participation in this plan.
4. Check the Default field if this waive reason is the default reason to use when a participant does not state their reason for waiving a plan.
5. Choose the Waive Certification button to specify the waive certifications that you accept for a waive reason.
6. Select a Certification Type that indicates the kind of certification associated with waiving participation in this plan.
7. Select a rule if you limit the conditions under which certification is associated with waiving a plan in the Certification Required When Rule field.
8. Check the Preferred field if this waive certification is preferred for this plan, but not required.
9. Check the Required field if this certification is required for an eligible participant to waive this plan.
10. Check the Lack of Certification Suspends Waiving field if failure to provide this certification results in the participant's inability to waive this plan.
11. Save your work.

Maintaining Primary Care Providers for a Plan

Based on your plan design, benefits participants may have the option, or be required, to select a Primary Care Provider (PCP) when electing a benefit plan.

You use the Maintain Plan Primary Care Providers window to define restrictions for the selection of a primary care provider. You also use this window to set high level configuration options for web-based PCP database searches that are performed through Oracle Self-Service Benefits.

To maintain primary care providers for a plan:

1. Select the Name of the plan for which you are maintaining primary care provider data.

2. Check the From Repository field if you are using Oracle Self-Service Benefits and the benefits participant selects a primary care provider through a searchable database of providers.

   Note: As a prerequisite, you must link an organization to this plan (using the Maintain Plan Related Details window) which has an Organization Role Type of Primary Care Provider Locator.

   Note: If you do not check the From Repository field, a participant cannot select a PCP from a list of valid PCPs. The participant must enter the PCP ID number or name in a free form text field.

3. **Note:** The Can Keep Provider field is reserved for future use.

4. Select a Designation Code to indicate if a participant who enrolls in this plan is required to select a PCP, or if PCP selection is optional.

5. Select a Dependent Designation Code to indicate if a participant who enrolls in this plan is required to select a PCP for each dependent covered by the plan, or if PCP selection is optional.

6. Select a Start Date Code that indicates when the selected provider becomes the participant's primary care provider.

7. Enter the number of times a participant is permitted to change primary care providers per month in the Number of Changes Allowed field.

8. For primary care provider searches, select the maximum Radius in miles which the PCP database should consider when returning the results of a search query.

9. Check the Radius warning field to issue a warning message to the participant indicating that the selected PCP is outside the range allowed by the plan. Checking this field lets a participant override the warning and select a PCP outside the prescribed range.

   Note: If you do not check this field, a participant cannot select a PCP outside the radius.

   Note: This warning only occurs in the professional forms user interface, not in Self-Service Benefits.

10. Save your work.

11. Choose the Option Restrictions button to open the Plan Primary Care Provider Restrictions window if the requirements for designating a primary care provider differ between the options in the plan.

    Note: For example, if a participant who elects *participant only* coverage is not required to select a PCP, but a participant who elects *employee plus spouse* coverage is required to select a PCP for dependent coverage, you would need to specify designation restrictions at the option level, instead of the plan level.

12. Select the option for which you are specifying PCP designation requirements in the Options field.

13. Select a Designation Code to indicate if a participant who enrolls in this option is required to select a PCP, or if PCP selection is optional.

14. Select a Dependent Designation Code to indicate if a participant who enrolls in this option is required to select a PCP for each dependent covered by the plan, or if PCP selection is optional.

15. Save your work and close the Plan Primary Care Provider Restrictions window.

16. Choose the Plan Restrictions button if the requirements for designating a primary care provider for this plan vary based on the primary care provider type (such as Gynecology or Pediatric Medicine) and the age or gender of the benefits participant.

    Note: The Plan Restrictions button is only activated if you check the From Repository field.

17. Select a primary care provider type for which you are specifying PCP designation requirements based on the age or gender of the benefits participant.

    You maintain primary care provider types using the Lookup Type BEN_PCP_SPCLTY if your primary care providers are stored in an external repository. Use the Lookup Type BEN_PRMRY_CARE_PRVDR_TYP if your PCPs are not stored in a repository.

18. Enter a Minimum Age if the participant must be of a minimum age or older to select this provider type, such as a geriatric care provider.

19. Enter a Maximum Age if the participant must be of a maximum age or younger to select this provider type, such as a pediatric care provider.

20. Select a Gender Allowed Code of Female or Male to restrict the selection of this provider type to one gender, such as female for a gynecology provider.

Defining Options

You use the Options window to date effectively define, maintain, and delete options.

To define an option:

1. Enter a unique Name for the option you are defining starting with a letter of the alphabet (not a number or symbol).

2. Enter a Short Name if you also refer to this option by an abbreviation.

3. Enter a Short Code if you also refer to this option by a code.

   You can extract data for a compensation object based on its Short Name or Short Code.

4. Check the Waive Option field if a person's election of this option represents the waiver of coverage.

5. If this option is for a Compensation Workbench plan, select a Salary Component if you want to link the option to a salary component.

   At the end of a salary review cycle, a system administrator runs the Compensation Workbench Post Process to update salary components with the new values stored by the compensation components.

   In the Required Period of Enrollment block:

6. Enter a Value that represents the length of time in which a person must be enrolled in this option.

7. Select the unit of measure of this value in the UOM field.

8. Select a rule if you use a formula to determine the required period of enrollment for this option.

9. Select one or more plan types you are associating with this option to indicate that plans of this plan type may provide this option.

   The option type displays in the Option Usage field to indicate the benefits category for this option.

10. Save your work.

Defining Designation Requirements for an Option

You use the Designation Requirements window to limit the personal relationship types that are covered by an option.

If you do not define designation requirements for an option, a participant can designate

a person of any relationship type as the designee for an option.

You can only have one designation profile per option, even if you associate the option with more than one plan.

> **Note:** Regardless of the designation requirements you define, you must check the Personal Relationship field in the Contacts window in order for a contact to display in a participant's list of eligible dependents.

To define designation requirements for an option:

1. Enter or query an option in the Options window and choose the Designation Requirements button.
2. Select a Group Relationship for which you are defining designation requirements.
3. Specify if this designation requirement applies to dependents or beneficiaries in the Type field.
4. Enter the minimum and maximum number of designees that can be covered under this option or indicate that there is no minimum or maximum number of designees by checking the appropriate field.

   > **Note:** Select a Group Relationship type of No Designees and enter the maximum number of designees as zero for an employee only coverage option.

5. Check the Cover All Eligible field if there is no minimum or maximum number of designees for this option and you want to provide coverage to all designees who meet your eligibility criteria.
6. Select one or more Relationship Types to include with this group relationship.
7. Save your work.

Navigating the Program Structure Hierarchy

You use the View Program Structure window to view the benefit programs that you have defined and the plan types, plans, and options that comprise these programs. Use this window after you have recorded your plan design in the system to make sure you have correctly defined the structure of your benefits programs.

In the hierarchy:

+ A plus symbol to the left of a compensation object indicates that there are lower levels that are not currently displayed.

- A minus symbol to the left of a compensation object indicates that you are viewing a collapsible list that you have expanded fully.

= An equals symbol indicates that you are viewing the lowest level within a collapsible list that you have expanded fully.

Go To modify the definition of a compensation object, select the compensation object and choose the Go (traffic light) button.

You can expand or contract the program hierarchy in the same way that you expand or contract the Oracle Applications Navigator.

1. To expand the view of a compensation object by one level, select the compensation object and choose the Plus (+) button (or double-click on that compensation object).

2. To contract the view of a compensation object by one level, select the compensation object and choose the Minus (-) button (or double-click on that compensation object).

3. To fully expand the view of a compensation object, select the compensation object and choose the Full Plus (+->) button.

4. To fully contract the view of a compensation object, select the compensation object and choose the Double Minus (- -) button.

Defining a Program or Plan Year Period

You use the Program/Plan Year window to record the dates through which programs or plans are in effect.

To define a program or plan year period:

1. Enter the Start and End dates in the Plan region through which this program or plan year period is valid.

   In the Limitation region:

2. Choose the Start and End dates that define the limitation year that acts as the reference period used to calculate a participant's yearly compensation.

   You typically define a limitation year to determine a participant's yearly contribution ceiling for a benefits plan such as a 401(k) plan in the US.

   In the Period region:

3. Select the period Type code that identifies the period type by which you divide the program or plan year, for example fiscal or calendar.

   Note: The period type must be Fiscal if you are defining a year

other than from 01-JAN to 31-DEC. When the year period is from 01-JAN to 31-DEC the period type must be Calendar.

In the Within Year Periods block:

4. Enter the first day and first month of the within year period and the last day and last month of the within year period in the following fields:
   - Start Day
   - Start Month
   - End Day
   - End Month.
5. Select the Unit of Measure by which you are dividing this period.
6. Save your work.

Defining a Reimbursement Plan (Advanced Benefits)

You use the Plan Reimbursement window to define special requirements for plans that offer reimbursable goods and services and to set up spending account plans.

> **Note:** As a prerequisite to defining reimbursement criteria, you must first create the plan using the Plans window. If you limit reimbursements to specific goods or services, you can define these in the Goods and Services window.

You can define the date through which you accept reimbursement requests for the plan and the last date in the plan year for which an expense will be reimbursed.

You can also define the certifications that are required or preferred for reimbursement of a good or service. You can limit the personal and familial relationship types, such as a spouse or a child, whose expenses are reimbursable under the terms of a plan.

To define a reimbursement plan:

1. Query the Plan for which you are defining reimbursement criteria.
2. In the Compare Claims field, select a code to indicate if the application validates a reimbursement request against the participant's current request balance or the coverage elected for the plan year. Choose either:

- Compare claims to balance accumulated (reserved for future use)
- Compare claims to coverage elected

3. Check the Allows Reimbursement field to indicate that you allow participants to submit reimbursement requests for the goods and services in this plan.

Timing Tab

4. Choose the Timing tab.

5. Select the Plan Year Start Date for the year period you are associating with this reimbursement plan.

   The End Date for this year period automatically displays based on the plan years you established during your implementation.

6. Select the date by which Expenses Must Be Incurred On Or Before.

   This is the last date in the plan year on which a participant can incur an expense and still have the expense reimbursed. Typically, this is the last day of the year period.

7. Select the date by which a Request Must Be Received On Or Before.

   This is the date through which you accept claim reimbursement requests for this year period. For example, your enterprise may accept reimbursement requests for two months after the end of the previous plan year.

Good or Service Tab

> **Note:** Goods and services are required for reimbursement request processing.

8. Choose the Good or Service tab.

9. Select a Good or Service that is reimbursable for this plan.

   Use the Goods and Services window to define those items you approve for reimbursement.

10. Check the Recurring Claims field if participants can instruct you to automatically make payments for recurring claims without submitting a reimbursement request for every incurred expense.

> **Note:** This field is reserved for future use.

11. Choose the Certification button to open the Reimbursement Certifications window.

You can define the certifications that you require or prefer to validate a reimbursement request for a good or service.

12. Select a certification Type--such as a paid invoice or a receipt--that you require or prefer to validate a reimbursement request.

    You can add to the list of certification types by using the Lookup Type BEN_REIMBMT_CTFN_TYP in the Application Utilities Lookups window.

13. Check the Required field if you deny a claim reimbursement when a participant fails to provide this certification type.

    - If special circumstances apply, select a Reimbursement Certification Rule to indicate those instances where you *allow* reimbursement when a participant has not submitted a required certification. Use the Lack Certification Allow Reimbursement formula type to write this rule.

14. Close the Certifications window.

Relationship Tab

15. Choose the Relationship tab.

16. Select the Relationship Type of the persons related to the primary participant who can also submit reimbursement requests.

17. Save your work.

Forfeiture Tab

18. Check the Forfeitures Apply field if the application forfeits a person's unspent credits for this plan at the end of the plan year.

    You run the Process Forfeitures concurrent request to determine a participant's forfeitures.

19. Select Provider as the Distribution Method to forfeit unspent contributions to the plan provider.

20. Select Use Compensation Level Factor as the Contribution Determination Code.

21. For the Distribution Determination Code, select:

    - Use Compensation Level Factor to calculate distributions based on a benefits balance or a defined balance in Oracle Payroll.

    - Use Approved Reimbursement Requests to calculate distributions based on the amount distributed to the participant using the Reimbursement Requests window.

22. Enter a GL Account for Debit and Credit to record the Oracle General Ledger accounts you use to track forfeiture totals for the plan.

23. Check Post to GL if you post forfeitures to the Oracle General Ledger credit account you entered in the previous step.

    Note: This feature is reserved for future use.

24. After you run the Process Forfeitures concurrent request, you can view forfeiture totals for the plan by clicking the Forfeiture Values button.

    - Open the View Enrollment Results window, query a person, and choose the Rates button to see forfeiture results for a participant.

Defining Reimbursable Goods and Service Types

You use the Goods and Services window to define those goods and services that you approve for reimbursement. You then associate one or more goods and services types with a plan.

To define a reimbursable good or service:

1. Enter a Name for the good or service.

2. Select the Type of the good or service.

   Use the Lookup Type BEN_GD_R_SVC_TYP in the Application Utilities Lookups window to add to the list of goods and service types.

3. Enter a text Description of the good or service.

4. Save your work.

Copying a Program or Plan

Follow this process to use Plan Design Copy to copy or export a program or a plan.

To copy a program or plan:

1. Log in to the Oracle HRMS professional user interface.

2. Choose the Plan Design Copy function from the Navigator.

   Home Page

3. Do one of the following:

- Click the Copy or Export Plan Design link to start a new copy process
- Click View Plan Design to select a program or plan for viewing. Use this read-only feature to review data before you copy a plan design.
- Choose an existing copy process from the Process History table and click Continue or Delete

  Note: The application displays processes initiated with the responsibility you used to log in to Oracle HRMS.

You can continue a process with a status of Saved for Later, Interrupted, Imported, or Completed.

Process Status	If you click Continue . . .
Saved for Later	The application displays the web page on which you saved the process.
Interrupted	The application displays the web page *before* the page you displayed when the process was interrupted.
Imported	The application displays the Target Details page that lets you select the Business Group into which you want to import the data.
Completed	The application displays the Select Target page where you select whether to copy or export the data.

Process Name and Effective Date

4. Enter a name for the copy process.

   You can select this copy process by name from the Home Page if you return to the transaction at a later date.

5. Select the effective date to limit the programs and plans available for copying.

Select Programs and Plans

6. Select one or more programs and plans to copy or export.

   You can search for a compensation object by program, plan, or program and plans not in program. The search limits results to compensation objects in the business

group of your responsibility.

To improve application performance, you should not select more than five programs at a time, depending on the size of your programs.

Select Target

7. Choose one of the following:

   - Copy the selected programs and plans to the same business group.

   - Copy the selected programs and plans to a different business group.

     Note: The application restricts the target business groups to those business groups attached to the user's responsibilities. A system administrator can prevent the copying of data between business groups by setting the system profile option BEN: CROSS BUSINESS GROUP FOR PLAN DESIGN COPY to 'N.' The default is 'Y.'

   - Export the selected programs and plans to a file.

   You can also export the data to a file by running the export process from the concurrent manager.

   See: Exporting a Plan Design to a File, page 1-103

Enter Target Details

8. Do one of the following:

   - If you are copying to a different business group, select the target business group.

   - Select the Effective Date to Copy. The copy process assigns the effective date to the new objects in the target business group. The date cannot be earlier than the effective date of the objects in the source business group. Objects with an effective start date after the date entered will retain the same effective start date they had in the source business group. Objects ended prior to the copy date are not copied. If you complete any mapping prior to entering the Effective Date to Copy, you should verify the mappings.

     Note: If you do not enter an Effective Date to Copy, the Copy Process uses the existing dates of any copied objects.

   - If you are copying to either the same business group or a different business group, indicate how the copy process treats instances where it finds an object

with the same name in the target business group. You can choose to use the existing object (without copying the duplicate object) or create a copy of the object with a prefix or a suffix that you supply.

> **Note:** When you copy a program and create a new program with a prefix or suffix, the copy process searches the target business group for child objects that contain the prefix or suffix, not for child objects with the same name as the original child objects that you copied.

- If you are exporting to a file, provide the absolute directory path in your applications environment and the file name of the exported file. If you do not enter a directory path, the application writes the export file to the location specified in the environment variables APPLCSF/APPLLOG.

Select Mapping

9. Use the Mapping page to select additional plan design components for copying or exporting that are not stored in the base plan design tables.

   For example, you must map elements and eligibility and variable rate profiles that use HR assignment criteria.

   > **Note:** If an object name matches exactly in the Source and Target business groups as of the Effective Date to Copy, the application automatically maps the object to the Target business group. You can override auto-mapped objects as necessary. The Target business group should have the same Lookup Codes as the Source business group. For example, you should add any Relationship Types to the Target business group that you have added to the Source.

Review

10. Use this page to review the compensation object that will be copied when you click Submit.

    You can deselect any program, plan in program, or plan not in program that you do not want to copy.

    Select the personalizations you want to copy for the plan you copy from the Task Personalization list.

    After you click Submit, the Concurrent Manager runs the copy process and returns a Request ID. You can monitor the process status on the View Request page or the Requests window in the professional user interface.

Confirmation

11. This web page indicates if the copy process was successful. For exports, the Confirmation page provides a concurrent request ID. You can use this ID to view the results of the process in the Concurrent Manager.

Exporting a Plan Design to a File

You can export a plan design to a file and then import the data into another database instance. Use this feature to transfer plan design data between your test and production environments.

Use the Submit Request window.

To export a plan design to a file:

1. Select Plan Design Copy - Export in the Name field.
2. Enter the Parameters field to open the parameters window.
3. In the Data File field, enter the absolute directory path and file name in your applications environment to which you want to export your plan design data.

   If you do not enter the full directory path, the application writes the export file to the location specified in the environment variables APPLCSF/APPLLOG.
4. Enter a Display Name for this plan design data.

   The display name appears in the list of processes when you import the plan design back into Oracle HRMS.
5. Enter the Effective Date of the plan design data that you want to export.
6. Choose the OK button.
7. Complete the batch process request and choose Submit.

   You can now run the import process to import the plan design data into a new database instance.

Importing a Plan Design From a File

After you export a program or plan to a flat file, you can import the file back to your Oracle HRMS database. Typically, you would use this feature to transfer plan design data between database instances.

Use the Submit Request window.

To import a plan design from a file:

1. Select Plan Design Copy - Import in the Name field.
2. Enter the Parameters field to open the parameters window.
3. In the Data File field, enter the absolute directory path and file name of the file that you want to import.

   If you do not enter the full directory path when you export the file, the application writes the file to the location specified in the environment variables APPLCSF/APPLLOG.
4. Choose the OK button.
5. Complete the request and click Submit.
6. Close the Submit Request window.
7. Open the Plan Design Copy page.
8. Select the imported file from the Copy History table and click Continue.
9. From the Target Details page, select the Business Group into which you are importing the plan design.
10. Complete the plan copy steps by entering target details, mapping to HR and Payroll data, and submitting the copy process.

    See: Copying a Program or Plan, page 1-99, steps 8-11 for more information.

Purging Plan Design Copy Data

When you copy a plan design, the application stores the data in transaction tables. If you have run multiple plan copy processes, and if your plan design is large, the volume of stored data may trigger performance issues.

Run the Purge Plan Design Copy Process to delete data from the Plan Copy transaction tables and improve copy performance. To verify the data that you want to delete, you can test the results of the purge process before committing your changes to the database.

Use the Submit Request window.

To purge Plan Design Copy data:

1. Select the Purge Plan Design Copy Process in the Name field.

2. Enter the Parameters field to open the Parameters window.

3. In the Process Name field, select the copy process that you want to purge.

   Note: If you do not select a specific process, the application purges data based on the other parameters you enter.

4. In the Mode field, select whether to Commit or Rollback the results of the purge process.

   Select Rollback if you want to review the results in the process log file without committing the changes to the database.

5. In the On or Prior to Effective Date field, enter the effective date of the purge.

   The application purges all data on or before this date that meet the parameters you select.

6. Select a Status (such as Completed or Saved for Later) to limit the purge to copy processes of that status.

7. Select Yes in the Retain Log field to prevent the purge process from deleting the log files of the copy processes that you want to delete.

8. Click OK.

9. Complete the request and click Submit.

Defining a Reporting Group

You use the Reporting Groups window to define a reporting group and to associate programs and plans with the reporting group. You can also define which regulatory bodies and regulations govern the reporting group.

You can create reporting groups to represent:

- Groups of programs and plans that you report on as a set by entering the reporting group name as a report parameter.

- Self-service personnel actions, such as promotions or transfers, and to configure rules for these business processes.

  See: Overview of Self-Service Actions, *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

- Compensation plans for applicants on the Compensation page of iRecruitment.

To define a reporting group:

1. Enter a unique Name for the reporting group.

2. Select the Global check box to include plans in the reporting group from any business group.

3. Select the Purpose of the reports that will be generated for this reporting group.

   Select the Personnel Action purpose if you are defining a self-service action.

   Select the iRecruitment purpose if you are defining plans for iRecruitment applicant offers. The Compensation page displays only reporting groups defined with the purpose of iRecruitment.

4. Enter a Description for the reporting group. The description that you enter for iRecruitment reporting group appears as an instruction text on the Enter Compensation page of iRecruitment.

5. Select the first Program Name if the reporting group is to consist of one or more programs.

   Alternatively, select the first Plan Name in the reporting group.

   > **Note:** Ensure that you do not include the same plan in multiple reporting groups with the purpose iRecruitment.

   Any row (record) in this table can include a Program Name or a Plan Name, but not both simultaneously. While it is unlikely that you would want to use the same reporting group to report at the program and plan levels, you could do so by choosing a Program Name for one record, and then choosing a Plan Name for each subsequent record in the reporting group.

   > **Note:** When a plan is selected, the Regulatory Bodies and Regulations button is enabled, indicating that you can define regulatory bodies for, and associate regulations with, that plan.

6. Save your work.

Defining Regulatory Bodies for a Plan

You use the Regulatory Bodies and Regulations window to date effectively define the regulatory bodies that approve or govern this plan.

To define a regulatory body for a plan:

1. Choose the Plan Regulatory Bodies tab if it is not already selected.
2. Enter the Name of the regulatory body associated with this plan.

   In the Dates block:

3. Enter the Approved Termination date on which this regulatory body ceases to recognize this plan's validity.
4. Enter the date this regulatory body qualified this plan in the Qualified field.
5. Select one or more Regulatory Purpose Codes that describe how this regulatory body governs this plan.
6. Save your work.

Defining Regulations for a Plan

You use the Regulatory Bodies and Regulations window to date effectively define the regulations that approve or govern this plan.

To associate regulations with a plan:

1. Choose the Plan Regulations tab if it is not already selected.
2. Select a Regulatory Plan Type.
3. Select the name of the regulation that governs this plan in the Regulation field.
4. Select one or more rules to determine how plan regulations define:
   - Contribution Nondiscrimination
   - Coverage Nondiscrimination
   - Five Percent Owner
   - Highly Compensated Determination
   - Key Employee Determination

     Note: These rules reflect US non-discrimination legislation.

5. Save your work.

Benefits Eligibility

Eligibility Requirements for Total Compensation

You define eligibility requirements as part of your plan design to determine eligibility for compensation and benefits.

You group eligibility criteria into *participant eligibility profiles* for primary participants and *dependent coverage eligibility profiles* for dependents. Eligibility profiles are re-usable. After you create an eligibility profile, you can link it to a compensation object (such as a program, plan, or option), a collective agreement, a grade ladder, or a work schedule to restrict eligibility for these.

Eligibility is determined according to the order of the compensation object hierarchy:

- Program
- Plan Type in Program
- Plan in Program
- Plan
- Option in Plan

If a participant is eligible for a program, then the system checks for plan type in program eligibility, and so on down the hierarchy. This allows you to link different eligibility profiles to different benefits that you offer within a program.

Eligible participants are created when you run the Participation batch process (if you are an Advanced Benefits customer) or when you process a participant's election using an enrollment form (if you use Standard Benefits).

Participant Eligibility Profiles

The standard criteria that you can include in an eligibility profile are grouped into five factors:

- Personal Factors
- Employment Factors
- Derived Factors
- Related Coverages
- Other Factors

Each factor contains a variety of criteria from which you select one or more criteria values.

For example, let's say you administer a benefit plan with the eligibility requirement that all participants must work in California, Washington, or Indiana. You could define an eligibility profile using the Employment Factor criteria of Work Location. The values for the Work Location criteria would be California, Washington, and Indiana. (You need to define these work locations using the Locations form). A participant must meet one of the criteria values.

Apart from the above standard criteria that Oracle HRMS delivers, you can create your own criteria that meet the particular needs of your organization. For example, if your organization employs deep sea divers and varies benefits to the divers based on how deep they dive, you can create your own depth of diving criteria that you can use in your eligibility profiles.

See: User-defined Eligibility Criteria, page 1-118

See: Defining an Eligibility Profile, page 1-120

Dependent Coverage Eligibility Profiles

You define dependent coverage eligibility profiles to restrict the criteria that a dependent must meet in order to be covered by a benefit. Dependent coverage profiles are often used to *exclude* certain dependents from receiving coverage under a plan. For example, you can define a plan that excludes coverage for dependents age 21 and over.

Dependent eligibility factors include the dependent's:

- Relationship (to the primary participant)
- Age
- Status (disabled, marital, military, student)
- Postal zip
- Other

After you define a dependent coverage eligibility profile, you associate it with one or more programs, plans, or options to limit the dependents covered by that benefit.

Required and Optional Eligibility Criteria

When you select more than one value for an eligibility criterion, at least one of the values must be present in the participant's record for the participant to be eligible for the benefit. In our example above, the participant must have a Work Location of either California, Washington, or Indiana.

However, when you use multiple criteria in an eligibility profile (for example, a Work

Location and an Organization), the participant must meet at least one criteria value for *each* criterion.

> **Note:** If you use a FastFormula eligibility rule as part of your eligibility profile, the participant must meet the criteria of the rule and one value from any other criteria that you include in the eligibility profile. If you use more than one FastFormula rule, by default the participant must meet the criteria of all the rules. If you change the user profile option BEN:Eligible Profile Rule from AND to OR, the participant need only meet the criteria of one rule.

Eligibility Ranking for Grade/Step Progression

For situations where eligibility does not guarantee access to a personnel action or a compensation object (for example, due to limited vacancies or restricted budget), you can rank an employee's eligibility relative to the eligibility of other employees.

During implementation, you can define a score and weight for each criteria in a participant eligibility profile. The application totals the score for all criteria that the person satisfies and assigns the person a rank relative to the total evaluated population.

You enter a score as a flat value for an eligibility criteria. If a person satisfies the eligibility criteria, the application records the score for the person.

A weight is a value that the application multiplies with a criteria value to compute a total. You can only use weights with criteria that contain numeric values.

Scores and weights are independent of one another. You can specify a score for a criteria, a weight, or both a score and a weight.

Currently, this feature is only available for Grade/Step Progression.

See: Grade/Step Progression, *Oracle HRMS Compensation and Benefits Management Guide*

Linking an Eligibility Profile to an Object

Because eligibility profiles are re-usable, you define them separately from any object. You link a profile to a compensation object, collective agreement, grade ladder, or a work schedule that you have created, to restrict eligibility for these.

When you link the eligibility profile to the object, you specify if the profile is required. The participant must satisfy all profiles marked as Required and *at least one* profile that is not marked Required.

Minimum and Maximum Enrollment Periods

As part of your plan design, you can specify the minimum and maximum length of time that a participant is either required or allowed to remain enrolled in a compensation object.

Required Enrollment Periods

Define a minimum enrollment period for those compensation objects that require a participant to remain enrolled for a specified period.

For example, you could define a required enrollment period of two years for a dental plan.

Maximum Enrollment Periods

Define a maximum enrollment period for those compensation objects that place a time limit on length of coverage. Maximum enrollment periods are often used in the US for managing COBRA participation.

If you are an Advanced Benefits customer, the system automatically detects when a participant has reached a maximum enrollment period that you have defined. Standard customers are notified that a participant has reached a maximum enrollment period when an enrollment form is opened and that person's record is queried.

Benefits Groups

When eligibility for a plan varies for a group of persons, you can define a benefits group to explicitly group those persons together. Defining a benefits group is useful for grouping grandfathered participants, or administering highly complex participation eligibility involving a small number of people.

You use the Benefits Groups window to define a Benefits Group and you enter a person into a group using the Person form.

Important: You may assign a person to only one benefits group.

Postal Zip Ranges and Service Areas

You can define a range of postal zip codes that can be used to determine eligibility and activity rates for a benefit. Postal code ranges can be combined into *service areas* that you can also use as eligibility criteria.

Service areas are a useful means of defining eligibility for a particular geographical region when Work Location is not adequate.

Waiting Periods

You define a waiting period as the period of time that must elapse before a newly eligible person can enroll in a benefit. Waiting periods allow participants to make elections that will become effective at a later date.

You can define waiting periods at the following levels:

- Program
- Plan type in Program
- Plan in Program
- Plan
- Option in Plan

Waiting periods you define at a higher level in the compensation object hierarchy cascade to all other compensation objects in the same hierarchy.

When you define a waiting period, you specify the unit of measure in which the waiting period is determined, for example, length of service or hours worked. For waiting period that you define at the plan level, you can set a corresponding *maximum waiting period* that can be in a different unit of measure, if required.

For example, you could define a waiting period of 200 hours worked before an eligible employee can enroll in a medical plan. You could define a maximum waiting period for the plan of 180 days of service. A person with less than 200 hours worked but with 180 days of service would be eligible for this medical plan based on the maximum waiting period.

Waiting Period Determination Dates

As part of defining a waiting period, you select a *waiting period date to use code* that determines the *comparison date* from which the system calculates the *waiting period completion date*. The waiting period date to use code identifies an event from which the waiting period is calculated, such as a participant's date of hire.

Because waiting periods can also be applied to non-employees, you can select a waiting period date to use code that uses one comparison date for an employee and a second comparison date for a non-employee.

For example, for a medical plan, the system could determine the waiting period for employees based on hire date and for non-employees based on the life event that caused the participation eligibility to be determined. In this scenario, you would select a waiting period date to use code of "If Employee, Date of Hire; Not Employee, Life Event Date."

You can select from the following waiting period comparison dates:

- Date of Hire
- Adjusted Service Date
- Override Service Date
- Eligibility Begin Date

- Original Hire Date
- Life Event Date (Advanced Benefits)
- Later of the Life Event or Notification Date (Advanced Benefits)
- FastFormula Rule

Waiting Periods by Life Event

Advanced Benefits customers can vary the waiting period requirement for a benefit by life event reason. You can define one waiting period for the compensation object and another waiting period that applies only in the occurrence of a particular life event. You can define waiting periods by life event at the following levels:

- Program
- Plan
- Option in Plan

Waiting Period Processing

In Standard Benefits, waiting periods are calculated based on your waiting period definition when you open an enrollment form for a person.

For Advanced Benefits customers, waiting periods and eligibility are determined when you run the Participation batch process. The Participation process calculates the waiting period by adding the waiting period value (such as 60 days) to the waiting period comparison date (such as date of hire).

If the Participation process detects a potential life event between the effective date of the Participation process and the waiting period completion date, then no waiting period is determined for that participant. An error is written to the log file indicating that the waiting period must be re-determined after the intervening life event is processed.

The system also checks for temporal life events and does not create a waiting period if it detects a temporal event that will occur between the effective date of the Participation process and the waiting period completion date.

Continuing Eligibility: Benefits Assignments

Because you can use an employee's assignment to determine benefits eligibility, you must maintain assignment information for terminated or deceased employees and their qualified dependents for the purpose of providing continuing benefits.

A *benefits assignment* is a copy of an employee's primary assignment that is created when one of the following events occur:

- **The employee terminates:** when an administrator enters a termination date, the application creates a benefits assignment for the employee and any dependents with an effective date of the actual termination date plus one day.

- **The employee becomes divorced or legally separated:** when the status of the worker changes to Divorced, the application creates a benefits assignment for the ex-spouse. The person type usage of *former spouse* is created for the spouse on the day of the divorce.

- **The employee dies:**when an administrator terminates an employee with the Leaving Reason of Deceased, the application creates a benefits assignment for the surviving spouse and any surviving family members. Where appropriate, the action creates person type usage of *Surviving Spouse*, *Surviving Family Member, Surviving Domestic Partner, and Surviving Domestic Partner Child*.

  Note: The new benefits assignment does not appear until the date after the termination, so you may need to change the system date to view the new assignment.

- **Dependent loss of eligibility (Advanced Benefits):** the Maintain Designee Eligibility process checks the eligibility of dependents of the subject employee. The application creates a benefits assignment for the dependent who has lost eligibility.

- **Reduction in hours:** the application creates a benefits assignment for an employee and any personal contacts when the employee experiences any life event reason with a type of Reduction in Hours.

  Note: Creating a Full Time-to-Part Time life event does not automatically create a Reduction in Hours life event. You must first set up a formula function to evaluate the number of hours from the assignment process results.

You can also manually create a benefits assignment if the application fails to create one, and you can update a system-generated benefits assignment.

Note: You set up the auto-generation of benefits assignments when you define the default payroll for a business group.

You can manually add, purge, and end element entries for benefits assignments, provided these entries are not for elements attached to an activity base rate. (When you make an election change or enrollment override, the application updates the entries of elements attached to an activity base rate.)

Benefits Assignments and Payroll

For US and Canadian customers, benefits assignments must have a payroll with a monthly periodicity since continuing benefits for ex-employees and their dependents are typically administered on a monthly basis. When a benefits assignment is created for an employee, the benefits default payroll that you set up for the business group is automatically linked to the person's benefits assignment. You can change the benefits assignment payroll to another payroll using the Benefit Assignment window.

> **Note:** US and Canadian customers cannot process an employee termination unless the employee's business group has a default payroll.

Customers outside the US and Canada can maintain benefits assignments with a payroll of any periodicity; however, they must have a default payroll for benefits assignments.

See: Defining Benefits Defaults for a Business Group, *Oracle HRMS Enterprise and Workforce Management Guide*

Eligibility Profile Criteria

You can define from one to dozens of eligibility criteria for an eligibility profile. Criteria are divided into personal criteria, employment criteria, derived factors, and other criteria, as follows.

> **Note:** The criteria that you can select depends on whether you have accessed the Participation Eligibility Profiles window from the Total Compensation or Collective Agreements area of the application.

Personal Criteria

You select personal eligibility criteria from the Personal tab of the Eligibility Profiles window.

Competencies: Uses the first three enabled segments defined for the Competency Key Flexfield for the business group as criteria.

Disability: Uses an employee's disability category as eligibility criteria.

Gender: Uses an employee's gender as eligibility criteria.

Leaving Reason: Uses an employee's termination reason as eligibility criteria. This criteria are often used for continuing benefits eligibility, such as for COBRA in the US

Opted for Medicare: Uses whether or not an employee is enrolled in Medicare as eligibility criteria.

Person Type: Uses a person's person type(s) as eligibility criteria.

Postal Zip: Uses individual zip/postal codes or ranges of zip/postal codes as eligibility criteria.

Qualification Title: Uses a person's qualification title as eligibility criteria.

Service Area: Uses a person's service area, such as a city or other geographical area, as an eligibility criteria.

Tobacco Use: Uses whether or not a person uses tobacco as a variable factor to associate with an activity rate. In countries where it is illegal to hold information about a person's tobacco usage, for example, Italy, this personal factor is unavailable.

Employment Criteria

You select employment criteria from the Employment tab of the Eligibility Profiles window.

Assignment Set: Uses an employee's assignment or a set of assignments as eligibility criteria.

Assignment Status: Uses a person's state of employment (Active, Inactive, or On Leave) as an eligibility criteria.

Bargaining Unit: Uses an employee's bargaining unit (local union group) as eligibility criteria.

Full/Part Time: Uses whether an employee works full-time or part-time as eligibility criteria.

Grade: Uses an employee's grade as eligibility criteria.

Hourly/Salaried: Uses an employee's pay basis, either hourly or salaried, as eligibility criteria.

Job: Uses an employee's job classification as eligibility criteria.

Labor Union Member: Uses whether an employee is a union member as eligibility criteria.

Leave of Absence: Uses an employee's leave of absence reason as an eligibility criteria.

Legal Entity: Uses an employee's legal entity (GRE) as eligibility criteria for a benefit (US only).

Organization Unit: Uses an employee's organization as eligibility criteria.

Pay Basis: Uses an employee's pay basis as eligibility criteria.

Payroll: Uses the employee's payroll as eligibility criteria.

People Group: Uses a person's People group as eligibility criteria.

Performance Rating: Uses an employee's performance rating as criteria.

Position: Uses a person's position as eligibility criteria.

Quartile in Grade: Uses an employee's pay range for a grade, divided by four, to

determine the quarter into which the person's salary amount falls.

Range of Scheduled Hours: Uses the number of hours an employee is scheduled to work as eligibility criteria. This is taken from the Working Hours field on the assignment. For employees with more than one assignment, the hours are totaled across all assignments if you check the 'Use All Assignments for Eligibility' check box on either the Programs or Plans window. If you define multiple scheduled hours ranges, the Participation Process evaluates each range as an 'Or' condition.

Work Location: Uses an employee's work location as eligibility criteria.

Derived Factor Criteria

You select derived factor eligibility criteria from the Factors tab of the Eligibility Profiles window.

Age: Uses an employee's age as eligibility criteria.

Combination Age/LOS: Uses an employee's combination age and length of service factor as eligibility criteria.

Compensation Level: Uses an employee's compensation level as eligibility criteria.

Full-time Equivalent: Uses an employee's percent of full-time employment as eligibility criteria. The full-time equivalent source derives from the Assignment Budget Values window.

Hours Worked: Uses an employee's hours worked in a given period as eligibility criteria.

Length of Service: Uses an employee's length of service as eligibility criteria.

Other Criteria

You select miscellaneous eligibility criteria from the Other tab of the Eligibility Profiles window.

Benefits Group: Uses a person's benefits group as eligibility criteria.

COBRA Qualified Beneficiary: Uses whether a person is considered a qualified beneficiary under COBRA regulations to determine eligibility (US only).

Continuing Participation: Used to set the date on which an ex-employee's payment for a continuing benefit must be received.

Participant in Another Plan: Uses a person's participation in another plan as eligibility criteria.

Total Coverage Volume: Uses the total coverage elected for a plan or option in plan by all participants as a variable factor in determining the actual premium owed by a plan sponsor to the benefits supplier.

Total Participants: Uses the total number of participants covered by a plan or option in plan as a variable factor in determining the actual premium owed by a plan sponsor to

the benefits supplier.

User Defined Criteria: Displays the user-defined criteria that you created to meet the particular needs of your organization. These criteria are not part of the standard criteria that Oracle HRMS delivers, and you must create these on your own. See: User-defined Eligibility Criteria, page 1-118

Rule: Uses an eligibility rule, instead of an eligibility profile, to refine or augment eligibility criteria for a benefit or collective agreement entitlement.

Related Coverages

The criteria available under the Related Coverages tab are designed primarily for COBRA administration in the US but, you can use them for other purposes.

See: COBRA Eligibility Profiles, *Oracle HRMS Compensation and Benefits Management Guide*

User-defined Eligibility Criteria

You can create as many eligibility criteria as you need for use in your eligibility profiles, to meet the particular requirements of your organization. You can use these criteria to determine employee eligibility for compensation, benefits, entitlements in collective agreements, personal actions, and so on.

Oracle HRMS comes with numerous standard eligibility criteria that support common industry requirements for defining eligibility, see: Eligibility Profile Criteria, page 1-115.

You can also define various system-calculated eligibility factors, that change over time, as eligibility criteria, see: Derived Factors, page 1-119.

User-defined criteria thus give you the additional flexibility to create your own criteria to meet any specific needs of your enterprise that the standard and derived factor criteria do not meet.

For example, if your organization employs deep sea divers and varies benefits to the divers based on how deep they dive, you can create Depth of Diving as a new eligibility criterion.

You create these criteria using the Create Eligibility Criteria page or from the User Defined Eligibility Criteria window that you can access from the Participation Eligibility Profiles window, see: Creating your own Eligibility Criteria, page 1-123.

You can define eligibility criteria out of any piece of person information by specifying the table and column name where the application stores that information. In the above example, if the application stores the details of the depth to which a person can dive in the table PER_ALL_ASSIGNMENTS_F and column attribute 8, you specify these details in your criteria definition to create the Depth of Diving criteria.

Note: You can specify the table and column names that identify your

user-defined criteria values, only if you are using the tables PER_ALL_PEOPLE_F and PER_ALL_ASSIGNMENTS_F. If you want to use any other table, you must use a formula. To be able to choose the correct values, you must have a basic understanding of the structure of the application tables that hold the required information. For more details on these tables, please refer to Oracle HRMS electronic Technical Reference Manual (eTRM), available on MetaLink.

You can also define existing hierarchies such as an organization hierarchy or position hierarchy as criteria for use in your eligibility profiles.

Derived Factors

Derived Factors are system calculated eligibility factors that change over time. You define a derived eligibility factor to use as a criteria element in an eligibility profile for a benefit plan or a collective agreement, or a variable activity rate. You can use the derived factor of age in a dependent coverage eligibility profile.

The product supports the calculation of six derived factors:

- Compensation level
- Percent of full-time employment
- Hours worked in period
- Age
- Length of service
- Combination age and length of service

Compensation Level

You define a compensation level derived factor if you use a person's compensation amount as an eligibility criterion or as a factor in a variable rate profile.

You can select as a compensation source a person's stated compensation, a payroll balance type, or a benefits balance type that you define.

Percent of Full-time Employment

You define a percent of full-time employment derived factor if you determine eligibility or rates based on a person's percentage of full-time work.

You can choose to use a person's primary assignment only or the sum of all their assignments when determining their percent of full-time employment.

Hours Worked in Period

You define an hours worked in period factor if you determine eligibility or rates based on the number of hours a person works in a given period that you define.

You can choose to derive the number of hours worked from a balance type or a benefits balance type.

Age

You define an age factor if you determine eligibility for a person or a dependent based on age. You can define a minimum or a maximum age beyond which a person becomes eligible or no longer eligible for a particular benefit.

You can also define an age factor that derives the age of a participant's spouse.

> **Note:** If you calculate both a participant's age and a spouse's age to determine eligibility or a variable rate - and enrollment restrictions vary for the spouse and the dependent - you must duplicate the seeded Age Change life event reason. A system administrator must then write a Life Event Evaluation rule to determine which Age Change event to detect.

> **Note:** If you are defining a derived factor based on age for a collective agreement you can only use the person's age.

Length of Service

You define a length of service factor if you determine eligibility based on how long a person has worked for your enterprise.

You can choose to calculate length of service from a person's hire date, adjusted hire date, or override service date.

Combination Age and Length of Service

You create a combination age and length of service factor by linking an age factor and a length of service factor that you have defined into a new factor.

Defining an Eligibility Profile

You use the Participation Eligibility Profiles window to define an eligibility profile with an effective start date of your choice. Before defining the profile, define any derived factors (such as length of service or compensation level), or your own eligibility criteria, that you plan to use as eligibility criteria.

If you want to create your own criteria to include in the eligibility profile, click User Defined Eligibility Criteria and create new criteria, see: Creating your own Eligibility Criteria., page 1-123 To access these criteria, choose the Other tabbed region, and select User Defined Criteria from the list

You can use eligibility profiles to determine:

- employee eligibility for compensation and benefits plans
- entitlements in collective agreements
- eligibility for grade/step progression
- eligibility for various work schedules, and so on

The information you can enter differs slightly depending on whether you have accessed this window from the Total Compensation or Collective Agreements area of the application.

> **Note:** If you use the Total Compensation Setup Wizard to set up grade ladders, programs and plans, and Total Compensation Statements, you can create or update eligibility profiles while you are working in the Wizard.

To define an eligibility profile:

1. Enter the Name of the eligibility profile you are defining.
2. Enter a Description of this eligibility profile.
3. Select an Assignment Type to which this eligibility profile applies.

   For example, you can define an eligibility profile for employee assignments if this profile is only used for employees.

   > **Note:** You can only select Employee Assignment Only for profiles to be used with collective agreements.

4. Select the profile Status.

   Pending: This eligibility profile is currently proposed, but not active.

   Active: This eligibility profile is in use.

   Inactive: This eligibility profile is in use but cannot be associated with any new programs, plans, or options.

   Closed: This eligibility profile was once Active or Pending, but is no longer in use.

5. Select whether this eligibility profile applies to benefits or collective agreements. If you are defining an eligibility profile for work schedules or grade step progression, then select benefits.

6. Choose the tabbed region that contains a criteria element that you want to include in your eligibility profile. Choose from:

   - Personal
   - Employment
   - Derived Factors
   - Related Coverages (Not applicable to collective agreements)
   - Other

7. Select a criteria element.

   For example, you could choose Person Type as one of several eligibility criteria of the Personal type.

   > **Note:** When you define more than one value for a criterion, at least one of the values must be present in the person's record for them to be eligible. However, when you use multiple criteria in an eligibility profile (for example, a Work Location and an Organization), the person must meet at least one value for *each* criterion.

   If you use a FastFormula eligibility rule as part of your eligibility profile, the participant must meet the criteria of the rule and one value from any other criteria that you include in the eligibility profile. If you use more than one FastFormula rule, by default the participant must meet the criteria of all the rules. If you change the user profile option BEN:Eligible Profile Rule from AND to OR, the participant need only meet the criteria of one rule.

8. Enter a Seq (sequence) number specifying the order the system processes this criteria element relative to any other criteria in this eligibility profile.

   > **Note:** You must assign a sequence number of a higher priority to all criteria that are used to exclude eligibility.

9. Select one or more values for the criteria element you have selected.

10. Check the Exclude field if a person becomes ineligible to participate in the compensation object, or to receive the collective agreement entitlement you

associate with this eligibility profile if they meet this criterion.

You typically check the Exclude field when it is easier or faster to define which persons are excluded from eligibility, as opposed to defining which person are eligible.

11. If you are defining an eligibility profile for a grade ladder, and you want to rank your employees to determine the most eligible person to progress, enter an eligibility Score for this criteria.

    The application calculates the eligibility rank based on the total score for all criteria that the person satisfies.

12. For grade ladders, you can also enter an eligibility Weight for a criteria.

    The application multiplies the weight by the criteria value. You can only use weights with criteria that contain numeric values. If you enter a score and a weight for a criteria, the application adds the person's score to the weight to arrive at the final number.

13. Repeat steps 6, page 1-122 to 12, page 1-123 for each criteria element that you include in your eligibility profile.

14. Choose the Display All tabbed region to view the criteria elements in this eligibility profile.

15. Save your work.

Defining Your Own Eligibility Criteria

Oracle HRMS enables you to create as many eligibility profile criteria as you need, in addition to the existing standard eligibility and derived factor criteria, to meet the particular requirements of your organization. You can use these criteria to determine employee eligibility for compensation, benefits, entitlements in collective agreements, personal actions, and so on.

See: User-defined Eligibility Criteria, page 1-118

Use the User Defined Eligibility Criteria window, which you can access from the Participation Eligibility Profiles window, or the Create Eligibility Criteria page to create your own criteria. The information you can enter differs slightly depending on whether you are creating your criteria from the User Defined Eligibility Criteria window or from the Create Eligibility Criteria page.

On both page and window you can create subcriteria, enabling you to designate two sets of values for a single criteria. On the Create Eligibility Criteria page you can also mandate that the person's timecard override the values stored in the table or returned by the formula attached to the criteria. For more information, see the white paper Setting Up the RBC/OTL/Payroll Integration (Metalink Note ID 369044.1).

To create your own eligibility criteria:

1. Enter the Name, Short Name, and the Description for the new criteria.
2. Specify if the criteria accept a range of values.
3. Specify the Lookup Type or the Value Set that restrict the valid values for your criteria.
4. To use an existing hierarchy, such as an organization hierarchy or position hierarchy, to define the value for the criteria, select the appropriate hierarchy.
5. Specify a particular person information value as the value for your criteria by selecting the table and column names where this information is available or by using a formula.

   Note: You can specify the table and column names that identify your user-defined criteria values, only if you are using the tables PER_ALL_PEOPLE_F and PER_ALL_ASSIGNMENTS_F. If you want to use any other table, you must use a formula. To be able to choose the correct values, you must have a basic understanding of the structure of the application tables that hold the required information. For more details on these tables, please refer to Oracle HRMS electronic Technical Reference Manual (eTRM), available on Metalink.

6. To add a second subcriteria, click the Set 2 tab and repeat steps 2-5.
7. Save your work.

   To use these newly created user-defined criteria in your eligibility profiles, in the Participation Eligibility Profiles window, choose the Other tab and select User Defined Criteria from the list.

Defining Derived Factors: Compensation Level

You can define a compensation level factor as part of an eligibility profile (to be used in determining benefits participation or collective agreement entitlements) or a variable rate profile. A compensation level factor can be based on either stated salary, balance type, or benefits balance type.

You define compensation level factors in the Derived Factors window. The values you can select in some of the fields depend on whether you have accessed the Derived Factors window from the Total Compensation or Collective Agreements area of the application.

To define a compensation level factor:

1. Enter a Name for this compensation level factor.

2. Select the Unit Of Measure for this compensation level factor.

3. Select the Source of the compensation level factor.

   - Select the Defined Balance for this compensation level factor if you selected a source of balance type.

   - Select a Benefits Balance Type if you selected a source of benefits balance type.

   - Select the compensation periodicity in the Stated Comp Periodicity field if you selected a source of stated compensation.

     Note: If you have installed the Oracle Incentive Compensation patch 4409180 you can select either Oracle Incentive Compensation - Amount Earned or Oracle Incentive Compensation - Amount Paid as the source. If you select any of these sources, then the Incentive Compensation Information region displays, where you can enter the Start and End Dates, and select the Prorate if date range differs from OIC range check box

   In the Values block:

4. Enter the Minimum amount under which the system does not calculate this compensation level factor.

   - Check the No Minimum field if there is no minimum compensation amount under which the system excludes participants when determining participation eligibility and activity rates.

5. Enter the Maximum amount above which the system does not calculate this compensation level factor.

   - Check the No Maximum Compensation field if there is no maximum compensation amount above which the system excludes participants when determining participation eligibility and activity rates.

6. Select a Determination Code or Rule to define when the system determines a participant's compensation level.

7. Choose a Rounding Code or Rounding Rule to specify the level to which the system rounds the results of this compensation level factor.

8. Save your work.

Defining Derived Factors: Percent of Full Time Employment

A percent full time factor derives an employee's percent of full time employment. The application uses this information to calculate activity rates, coverage amounts, or to determine participation eligibility for either benefits or collective agreement entitlements.

For example, you could define the 100% percent full-time factor to identify those employees who work 100% full-time (40 hours per week) and thus qualify for most benefits or entitlements.

You define percent full time factors in the Derived Factors window. The values you can select in some of the fields depend on whether you have accessed the Derived Factors window from the Total Compensation or Collective Agreements area of the application.

To define a percent full time factor:

1. Enter a Name for this percent full time factor.

2. Check the No Minimum field if there is no minimum percentage of full-time employment under which the application excludes employees when determining participation eligibility and activity rates.

   - Or, enter a Minimum Percent Value to define the minimum percentage of full-time employment to be used in this calculation.

3. Check the No Maximum field if there is no maximum percent of full-time employment beyond which the application excludes employees when determining participation eligibility and activity rates.

   - Or, enter a Maximum Percent Value to define the maximum percent of full-time employment to be used in this calculation.

4. Check the Use Primary Assignment Only field to specify that the application considers only an employee's primary assignment when determining percent of full time employment.

5. Check the Use Sum of All Assignments field to specify that the application considers all active assignments when determining percent of full-time employment.

6. Select a Rounding Code or Rule to specify the level to which the application rounds the results of this calculation.

7. Save your work.

Defining Derived Factors: Hours Worked In Period

An hours worked in period factor derives the number of hours a given employee has worked over a given period of time. The application uses this information to determine participation eligibility for either benefits or collective agreement entitlements, activity rates, and coverage amounts.

You define hours worked in period factors in the Derived Factors window. The values you can select in some of the fields depend on whether you have accessed the Derived Factors window from the Total Compensation or Collective Agreements area of the application.

To define an hours worked in period factor:

1. Enter a Name for this hours worked in period factor.

2. Select the calculation source for this hours worked in period factor in the Source field.

   Balance Type: The application retrieves hours worked information from a balance.

   Benefits Balance Type: The application retrieves hours worked information from a benefits balance.

3. Specify when the application calculates this hours worked in period factor in the Once or Continuing field.

   Once: The application only calculates this hours worked in period factor following a life event or for open enrollment.

   Continuing: The application calculates this hours worked in period factor each time you run the Participation batch process.

4. Select the Defined Balance for this compensation level factor if you selected a calculation source of balance type.

5. Select a Benefits Balance Type if you selected a calculation source of benefits balance type.

6. Check the No Minimum field if there is no minimum number of hours worked in period under which the application excludes employees when determining participation eligibility and activity rates.

   - Or, enter the Minimum hours worked in period under which the application does not calculate this hours worked in period factor.

7. Check the No Maximum field if there is no maximum hours worked in period above which the application excludes employees when determining participation eligibility and activity rates.

- Or, enter the Maximum hours worked in period beyond which the application does not calculate this hours worked in period factor.

8. Select an hours worked Determination Code or Rule that defines how to calculate the hours worked in period.

9. Select a Rounding Code or Rule to specify the level to which the application rounds the results of this hours worked in period factor.

10. Save your work.

Defining Derived Factors: Age

An age factor derives a person's age in order to determine participation eligibility for either benefits or collective agreement entitlements, activity rates, and coverage amounts.

For example, you could define the Retire 65 age factor to identify those employees who are at least 65 years of age and thus qualify for a maximum benefit under your corporation's retirement plan. For collective agreements you could define the Age Less Than 21 age factor to identify those employees who are less than 21 and thus should be placed on a particular grade.

You define age factors in the Derived Factors window. The values you can select in some of the fields depend on whether you have accessed the Derived Factors window from the Total Compensation or Collective Agreements area of the application.

To define an age factor:

1. Enter a Name for this age factor.

2. Select the UOM to specify the unit of measure for this age factor.

3. Select an Age to Use code to indicate the kind of person, such as the participant or the participant's child, for whom you are defining a derived age factor.

   Note: Derived factors to be used with collective agreements can only use the employee's age.

4. Select an Age Determination Code or Rule to specify the date the application uses to calculate age.

5. Check the No Minimum Age field if there is no minimum age under which the application excludes employees when determining participation eligibility and activity rates.

- Or, enter the Minimum age beyond which the application does not calculate this age factor.

6. Check the No Maximum Age field if there is no maximum age beyond which the application excludes employees when determining participation eligibility and activity rates.
   - Or, enter the Maximum age beyond which the application does not calculate this age factor.

7. Select a Rounding Code or Rule to specify the level to which the application rounds the results of this age factor calculation.

8. Save your work.

Defining Derived Factors: Length of Service

A length of service factor derives the length of service for a given worker in order to determine participation eligibility for either benefits or collective agreement entitlements, activity rates, and coverage amounts.

You define length of service factors in the Derived Factors window. The values you can select in some of the fields depend on whether you have accessed the Derived Factors window from the Total Compensation or Collective Agreements area of the application.

To define a length of service factor:

1. Enter a Name for this length of service factor.

2. Select the unit of measure in the UOM field by which you are defining the length of service factor.

3. Select a Determination Code or Rule that defines how the system calculates an employee's length of service.

4. Check the No Minimum Applies field if there is no minimum length of service under which the system excludes employees when determining participation eligibility and activity rates.
   - Or, enter the Minimum length of service under which the system does not calculate this length of service factor.

5. Check the No Maximum Applies field if there is no maximum length of service above which the system excludes employees when determining participation eligibility and activity rates.

- Or, enter the Maximum length of service beyond which the system does not calculate this length of service factor.

6. Select a length of service Date to Use Code or Rule to specify the date from which the system calculates the employee's length of service.

   Hire Date: The system always uses the employee's hire date as the start date when calculating length of service.

   Adjusted Service Date: The system first uses the employee's adjusted service date if one exists. If there is no adjusted service date, the system uses the employee's hire date.

7. Check the Use Override Service Date field to indicate that the system should override the person's service date when determining eligibility.

   Note: You enter the Override Service Date for a person in the Participation Overrides window.

8. Select a Rounding Code or Rule to specify the level to which the system rounds the results of this length of service factor.

9. Save your work.

Defining Derived Factors: Combination Age and Length of Service

A combination age and length of service factor associates two factors you have already defined: an age factor and a length of service factor.

You define combination age and length of service factors in the Derived Factors window. The values you can select in some of the fields depend on whether you have accessed the Derived Factors window from the Total Compensation or Collective Agreements area of the application.

To define a combination age and length of service factor:

1. Enter a Name for the combination age and length of service factor you are defining.

2. Select an Age Factor.

3. Select a Length of Service Factor.

4. Enter the Minimum value for the combination of age and length of service that qualifies a person as eligible for the benefit, collective agreement entitlement, or activity rate with which this factor is associated.

5. Enter the Maximum value for the combination of age and length of service that qualifies a person as eligible for the benefit, collective agreement entitlement, or activity rate with which this factor is associated.

6. Enter an Order Number to specify the order in which the application processes and displays combined age and length of service records.

7. Save your work.

Defining a Dependent Coverage Eligibility Profile

You use the Dependent Coverage Eligibility Profiles window to define an eligibility profile that limits the conditions that enable a dependent to receive coverage under a benefit.

You link the dependent coverage eligibility profile to the compensation object using the Dependent Coverage tabbed region of the Program Enrollment Requirements window. Or, use the Designations tabbed region of the Plan Enrollment Requirements window if the profile is for a plan that is not in a program.

To define a dependent eligibility coverage profile:

1. Enter the Name of the dependent coverage eligibility profile you are defining.

2. Select the Status of this dependent coverage eligibility profile.

   Active: This eligibility profile is currently available to associate with a compensation object.

   Pending: This eligibility profile is currently proposed, but not yet available to associate with a compensation object.

   Inactive: This eligibility profile is in use but cannot be associated with any new compensation objects.

   Closed: This eligibility profile was once Active or Pending, but is no longer in use.

3. Select a Regulation to specify a statute or regulation that enables, defines, or restricts the eligibility criteria maintained in the profile.

4. Enter a Description of this profile.

5. Select a Rule to include in this profile if the standard dependent coverage eligibility profile criteria do not fully support your business requirements.

6. Choose the tabbed region that represents the factor by which you want to restrict dependent coverage. Choose from:

   - Relationship

- Age
- Status (includes disabled, marital, military, and student status)
- Postal Zip

7. Select the factor by which you are restricting dependent coverage in the Name field. Select one or more factors for each tabbed region, as required by your business rules.
8. Check the Exclude field for a factor in the Age region or the Postal Zip region if a dependent who meets this age or postal zip is excluded from receiving coverage.
9. Save your work.

Defining Benefits Groups

You use the Benefits Groups window to define the groups into which you place various categories of employees and other benefits participants for purposes of eligibility or activity rate restriction.

You assign a person to a benefits group using the Benefits Tabbed region of the People window.

Note: If necessary, you can add the Benefits Tab to the People window. As a system administrator, query the BEN_MANAGER menu in the Menus window and add the HR View Benefits function to the menu.

Note: You may assign a person to only one benefits group.

To define a benefits group:

1. Enter a unique name for this benefits group.
2. Enter a description of the benefits group.
3. Save your work.

Defining Regulations

You define regulations as discrete rules, policies, or requirements that a governmental or policy making body defines regarding the administration of one or more benefits.

To define a regulation:

1. Navigate to the Regulations window.
2. Enter a Regulation Name impacting the administration of one or more benefits.
3. Enter a Statutory Citation Name for this regulation.
4. Select a Regulatory Body such as a governmental or policy making body responsible for this regulation.
5. Select an Administrative Code indicating whether this regulation is issued by or enforced by this regulatory body.
6. Save your work.

Defining Postal Zip Ranges

You date effectively define postal zip ranges that can be used to determine participation eligibility and activity rates.

You also use this window prior to defining service areas. The postal codes populate the list of values of the Postal Zip within Service Area region of the Service Areas window.

See Defining Service Areas, page 1-133

The following parameters are on the Postal Zip Ranges window:

- From Value is the beginning of the zip code range you want to define, inclusive.
- To Value is the ending value of the zip code range you want to define, inclusive.

To define a postal zip range:

1. Enter a beginning and ending postal code, and save.

Defining Service Areas

You date effectively define service areas for a benefits carrier or third party agent. For instance, you might want to define a service area for a city or other geographical area, and list the service provided.

The following parameters are on the Service Areas window:

- Service Area region
    - Name is the name of the region you are defining, e.g., "Coastal."

- Product is the name of the service provided to the region, e.g., "Medical Plan 1"

  Note: Lookup values for this field are located in BEN_PRDCT.

- Postal Zip within Service Area region
  - Postal Zip Range is the postal range for the service area

    See Defining Postal Zip Ranges, page 1-133

To define a service area:

1. Enter or query the name of the service region.
2. Enter the appropriate service or product in the Product field.
3. Enter the zip code range for the service area.
4. Save your work.

2

Salary and Grade Related Pay and Progression

Grades and Their Relationship to Pay

You compensate an employee by processing an individual RPA action such as an Appointment or Promotion action, or when you process a mass action such as a Within-Grade-Increase or annual pay adjustment. Pay calculations references the employee's pay plan, grade, and step information as well as other factors, such as the pay rate determinant and duty station

See: Pay Calculations on an RPA, *Workforce Sourcing, Deployment, and Talent Management Guide*

Supported Pay Tables and Pay Plans

The pay system or pay schedule determines an employee's compensation and sets the employee's rate of basic pay. Oracle US Federal supplies standard and special rate tables commonly used by most federal agencies, including:

- GS and equivalent standard and special rate pay tables
- Senior Executive Service (ESSL) pay tables

See: Grades and Pay Structures, page 2-3

The application also supports FWS pay calculations and supplies FWS equivalent pay plan and grade combinations. You can define your own agency-specific pay tables and pay plans, and also extend the existing grade and step values.

See: Set up Pay Plans, Grades, and Compensation, page 2-3

Updating Employee and Position Records for Pay Table Changes

When the Office of Personnel Management (OPM) or an agency issues new pay tables,

you can move employees from their current pay table to the newly authorized pay table.

See: Moving Employees to New Pay Tables, page 3-32

For special rate tables or special rate pay plan, grade, and step combinations that terminate under the Federal Workforce Flexibility Act, you can process a mass action that updates the affected employee and position records.

See: Processing a Special Rate Pay Table Change, page 3-34

Key Concepts

To get the most out of the compensation and benefits functionality of Oracle HRMS, you need to understand the following key concepts.

- Pay plans and valid grade combinations, page 2-3
- Grades and pay tables, page 2-3

Grades and Pay Solutions

Grades and Pay Structures

When the application calculates the pay for a Request for Personnel Action (RPA), it references the pay plan, grade, and step information as well as other information, such as the pay rate determinant and duty station.

See: Pay Calculations on an RPA, *Workforce Sourcing, Deployment, and Talent Management Guide*

You specify grade and pay plan information when you create a position, and you specify the step information when you appoint someone using an RPA (Request for Personnel Action). The number of steps depends upon the pay plan; for example, Pay Plan GG has a step range of 01-10.

The application comes with predefined pay tables and pay plans, grades, and steps used by most federal agencies. The following list describes the standard and special rate tables supplied by Oracle US Federal HR:

- GS and equivalent standard and special rate pay tables

  The Oracle Federal Standard Pay Table (0000) contains the rates of pay for General Schedule (GS) and equivalent pay plans, including Administrative Law Judges (AL), Executive Service (ES), Executive Pay (EX,) and Grades Similar to General Schedule (GG)

- Senior Executive Service (ESSL) pay tables

  The ESSL Oracle Federal Standard Pay Table contains the rates of pay for Senior Executive Service (SES) and equivalent pay plans, including: Senior Executive Service (EP), Senior Executive Service (ES), Senior Foreign Service (FE), Senior Intelligence Executive Service (IE), Senior Intelligence Profession (IP), Senior Level (SL) or Scientific and Professional (ST), and Expert (EE).

The application also supports FWS pay calculations and supplies FWS equivalent pay plan and grade combinations.

You can define agency specific pay tables and pay plans, and indicate whether the application should process Within-Grade-Increases for your agency specific pay plans. You can also extend the grade and step values, if your agency uses other grades and steps.

See: Set up Pay Plans, Grades, and Compensation, page 2-3

Setting up Pay Plans, Grades, and Compensation

If you have agency-specific pay plans, you can add them to the application, and then

process RPA actions that use these pay plans for pay calculations.

To set up pay plans and valid grade combinations:

1. Add a Pay Plan, page 2-5
2. Add Grades, page 2-13
3. Add Steps, page 2-14
4. Associate Pay Plans and Grades, page 2-15
5. Set up Pay Tables, page 2-5
6. Enter Pay Values, page 2-9
7. Name Pay Tables, page 2-9

To associate grades with compensation:

1. Add the pay plan.

   See: Add a Pay Plan, page 2-5

2. Review the values for grades or levels. Add new ones if needed.

   See: Add Grades, page 2-13

3. Review the values for steps or rates. Add new ones if needed.

   See: Add Steps, page 2-14

4. Associate the pay plan and grade.

   See: Associate Pay Plans and Grades, page 2-15

5. Create a pay table using the Table Structure window.

   See: Set up Pay Tables, page 2-5, User Defined Tables, *Configuring, Reporting, and System Administration Guide*

6. Enter pay values using the Table Values window.

   See: Enter Pay Values, page 2-9

7. Name pay tables using the Table Values window.

   See: Name Pay Tables, page 2-9

Adding a Pay Plan

If you have agency specific pay plans, you can add them to the system. The Federal Maintenance Pay Plans form lists the predefined pay plans. You use this form to:

- Add other pay plans
- Indicate whether the pay plan is eligible for Within Grade Increases (WGIs).

To add a pay plan:

1. In the Pay Plan window, insert an empty row by creating a new record.
2. In the Pay Plan field, enter the pay plan code assigned to the pay plan by the approving agency.
3. In the Description field, enter the name of the pay plan.
4. In the Equivalent field, enter the equivalent OPM plan. You may only choose Federal Wage (FW) or General Schedule (GS).

   The Equivalent field is used for pay plans that include automatic WGIs. When you enter your pay plan and associate an equivalent pay plan, the automatic WGI process recognizes the pay plan and processes WGIs for eligible employees assigned to it.
5. In the Maximum Step field, enter the number of steps for that pay plan.

   The number of steps sets the ceiling for automatic WGIs.
6. Choose WGI Enabled to have the system include the pay plan in the automatic WGI process.

   Note: If you are adding a pay range pay plan, do not choose this option. You must manually process a 894 Pay Adjustment RPA for an employee assigned to pay-range positions when that person is entitled to a pay adjustment.
7. Save your work.

Setting up Pay Tables

A pay table can include one or more pay plans. For example, the Oracle Federal Standard Pay Table includes several pay plans.

You create your agency-specific basic and special rate tables in each business group that

requires the table. There are two types of table structures, one where you designate *matching* values for the steps for each pay plan and grade combination, and the other where you specify a *range* of pay for each pay plan and grade combination.

Step Tables

You set up user tables in the Table Structure window.

To build a pay table for pay plan, grade, and step values:

1. Set your effective date to the date from which you want the table's row labels to take effect.

2. In the Name field, enter the name of the pay table using the naming convention described in Naming Pay Tables, page 2-9.

   Note: Do not duplicate the predefined table names or change their values. The system uses these for pay calculations. Table names must start with the four-digit pay table ID number.

3. In the Match Type field, enter Match.

4. In the Key Units of Measure field, enter Number.

5. In the Row title field, enter Grades.

6. Save your work.

Column setup

7. Choose the Columns button. In the Names field, enter each step that applies to the pay plan. Step values must be two digits. (Insert a zero before the number for single-digit steps, such as 00, 01, 02.)

Row setup

8. Choose the Rows button. In the Exact field, enter the pay plan and grade combinations, such as AL-01, AL-02. Remember to:

   - Follow the exact format: pay plan hyphen grade
   - Do not insert spaces
   - Use the pay plan code you entered in the Pay Plan form
   - Use two digits for grades (Insert a zero before the number for single-digit grades, such as 00, 01, 02.)

Note: Make sure that you enter the combination correctly; otherwise the system won't find the pay table when performing pay calculations.

9. Enter a start date early enough to handle any historical information you want to enter.

10. Save your work.

11. Repeat these steps for each step in your pay plan.

12. Enter the pay values for the pay plan/grade combinations. See Entering Pay Values, page 2-9

Pay Banding Tables

The application provides a pay-for-performance system for Senior Executive Service (SES) pay tables. You can set up tables for your agency's pay banding plans in the Table Structure window.

To build a pay table for pay banding or pay range pay plans:

1. Set your effective date to the date from which you want the table's row labels to take effect.

2. In the Name field, enter the name of the pay table using the naming convention described in Naming Pay Tables, page 2-9.

   Note: Do not duplicate the predefined table names or change their values. The system uses these for pay calculations. Table names must start with the four digit pay table ID number.

3. In the Match Type field, enter Range.

4. The Key Units of Measure automatically becomes Number.

5. Enter the row label as the Row Title, such as Salary.

6. Save your work.

Column setup

7. Choose the Columns button. Enter the pay plan and grade combinations, such as AL-01, AL-02, for the table columns in the Name field. Remember to:

   - Follow the exact format: pay plan hyphen grade

- Do not insert spaces
- Use the pay plan code you entered in the Pay Plan form
- Use two-digits for grades (Insert a zero before the number for single digit grades, such as 00, 01, 02.)

> **Note:** Make sure that you enter the combination correctly; otherwise the application will not find the pay table when performing pay calculations.

Row setup

8. Choose the Rows button. In the Sequence field, you can optionally enter a number for each row label to determine the order in which it appears on a list in the Table Values window. Logical sequencing of row labels helps users enter table values rapidly and accurately.
9. In the Lower Bound row, enter the minimum amount for the pay range for that pay plan and grade level.
10. In the Upper Bound row, enter the maximum amount for the pay range for that pay plan and grade level.
11. Enter a start date early enough to handle any historical information you want to enter.
12. Save your work.
13. Repeat these steps to enter pay ranges for each pay plan/grade level combination in your pay plan.

Managing Overlapping Range Values

When entering row values, you cannot have overlapping values in different columns. To manage overlapping ranges, review the pay ranges for your grade levels and note where the amounts overlap. Subdivide the pay range into sequential ranges that you can enter on separate rows for each column.

For example, if you have three columns representing your pay plan and grade combinations (15800-23100, 18100-26399, and 20500-30799), you would first determine the values that overlap the first and second columns (18100-23100), and the second and third columns (20500-26399).

You would then subdivide the overlapping amounts into smaller ranges. For example, for the first column 15800-23100, you would enter row amounts of: 15800-18099, 18100-20499, and 20500-23100. For the next column 18100-26399, you would enter row amounts of 18100-20499 20500-23100, (repeating the same range as you had in the

previous column), 23101-23599, and 23600-26399. For the final column 20500-23100, you would enter row amounts of 20500-23100, 23101-23599, and 23600-26399 (repeating the ones from the previous column), and 26400-27099, 27100-30799.

Entering Pay Values

A pay table can include one or more pay plans. For example, the Oracle Federal Standard Pay Table includes several pay plans.

You create your agency-specific basic and special rate tables in the Table Structure window. You enter and maintain the pay values in the Table Values window.

To enter the pay values:

1. Open the Table Values window.
2. In the Table field, query the table you created.

   The application displays the Key Units of Measure and the Column values.
3. In the Column Name field, choose the step for which you want to enter the values.
4. In the Value region:
   - In the Exact field, choose the pay plan/grade.
   - In the Value field, enter the dollar amount.

     The values may be in whole dollars or dollars and cents. Do not include a dollar sign.
   - In the Date field, enter a start date early enough to handle any historical information you want to enter.

     Note: Enter the same effective date for all the values in the table so that the entire pay table has the same effective date.
5. Save your work.

Naming Pay Tables

The product includes the following pay tables:

- 0000 Oracle Federal Standard Pay Table (Al, ES, EX, GS, GG) No. 0000
- 0012 Oracle Federal Special Rate Pay Table (GS) No. 0012

- 0023 Oracle Federal Special Rate Pay Table (GS) No. 0023
- 0024 Oracle Federal Special Rate Pay Table (GS) No. 0024
- 0029 Oracle Federal Special Rate Pay Table (GS) No. 0029
- 0037 Oracle Federal Special Rate Pay Table (GS) No. 0037
- 0047 Oracle Federal Special Rate Pay Table (GS) No. 0047
- 0057 Oracle Federal Special Rate Pay Table (GS) No. 0057
- 0065 Oracle Federal Special Rate Pay Table (GS) No. 0065
- 0070 Oracle Federal Special Rate Pay Table (GS) No. 0070
- 0071 Oracle Federal Special Rate Pay Table (GS) No. 0071
- 0113 Oracle Federal Special Rate Pay Table (GS) No. 0113
- 0119 Oracle Federal Special Rate Pay Table (GS) No. 0119
- 0125 Oracle Federal Special Rate Pay Table (GS) No. 0125
- 0157 Oracle Federal Special Rate Pay Table (GS) No. 0157
- 0158 Oracle Federal Special Rate Pay Table (GS) No. 0158
- 0164 Oracle Federal Special Rate Pay Table (GS) No. 0164
- 0263 Oracle Federal Special Rate Pay Table (GS) No. 0263
- 0305 Oracle Federal Special Rate Pay Table (GS) No. 0305
- 0414 Oracle Federal Special Rate Pay Table (GS) No. 0414
- 0422 Oracle Federal Special Rate Pay Table (GS) No. 0422
- 0491 Oracle Federal Special Rate Pay Table (GS) No. 0491
- 999A Oracle Federal Special Rate Pay Table (GS) No. 999A
- 999B Oracle Federal Special Rate Pay Table (GS) No. 999B
- 999C Oracle Federal Special Rate Pay Table (GS) No. 999C
- 999D Oracle Federal Special Rate Pay Table (GS) No. 999D

- 999E Oracle Federal Special Rate Pay Table (GS) No. 999E
- 999F Oracle Federal Special Rate Pay Table (GS) No. 999F

1. **Naming a Pay Table**

   Enter a pay table name in the Table Structure window, making sure that the initial characters follow this naming convention:

   - Pay table ID

     The pay table identifier is the four digit number that references a specific pay table assigned by the OPM or Department of Defense. You choose the pay table ID in the US Federal Valid Grade Position Extra Information.

   - Space
   - Federal
   - Space
   - Agency
   - Pay table name

   Enter a name that makes the table more meaningful, such as the occupation series or job.

   > **Note:** If you are adding a Special Rate Pay Table, include the words 'Special Rate Pay Table'in the name. (The words are case sensitive.) Do not use Oracle as part of your pay table name, because it is reserved for the predefined pay tables.
   >
   > For example, if you have a Special Rate Pay Table 4444 that covers administrative employees, you would name the table: 4444 Federal Agency Administrative Special Rate Pay Table (GS) No. 4444.

Running the Federal Valid Combinations Process

The Create Federal HR Valid Combinations for the Grade KF is a Concurrent Manager process that supplies the predefined valid grade and pay plan combinations for the grade key flexfield. The system administrator runs this process during implementation.

Use the Submit Request window.

To run the Valid Combinations process:

1. Select Create Federal HR Valid Combinations for the Grade KF from the Name field

2. Position your cursor in the Parameters field. In the Parameters window, select the Business Group ID from the list of values.

3. Choose the Submit button.

Defining a Salary Basis

Use the Salary Basis window to define a *salary basis* for each salary element to be used for salary administration. This establishes the duration for which a salary is quoted, for example, hourly, monthly or annually.

> **Note:** In US Federal HR, the HR specialist administers salary through Request for Personnel Actions. The product comes with predefined salary bases of per annum and per hour.

To define a salary basis:

1. Enter an appropriate name for the salary basis.

2. Select a pay basis, such as Annual or Hourly. For example, select Monthly Salary if you are using the predefined Regular Salary element in the US.

   If you selected Annual or Monthly, Oracle HRMS identifies the number of payments and enters 1 or 12 in the Pay Annualization Factor field. You can change this value, if required.

   If you selected Hourly, the Pay Annualization Factor field is blank. Enter your own value, such as 2080 (40 hours * 52 weeks) to enable the Salary Administration window to display an annual salary from the hourly rate.

   If you select Period, leave the Pay Annualization Factor field blank, Oracle HRMS uses the payroll period of your employee as the annualization factor.

   > **Note:** The pay basis is for information only. For example, to enable you to compare salaries.

3. Select the name of the salary element and input value associated with this salary basis. For example, if you are using predefined elements in the US, select Regular Salary and the input value Monthly Salary, or Regular Wages and the input value Rate.

4. Select a grade rate to associate with the salary basis, if required.

   Oracle HRMS uses the grade rate to validate your salary proposals. You receive a warning if the salary you enter for an employee is not within the grade rate range defined for the employee's grade.

5. Select the grade rate basis (Hourly, Monthly, Annual, or Period) for the rate if you selected a grade rate. For example, if your grade rate specifies the valid *monthly* salary ranges for each grade, select Monthly Salary in the Grade Rate Basis field.

   If you selected Annual or Monthly, Oracle HRMS identifies the number of payments and enters 1 or 12 in the Grade Annualization Factor field. You can change this value, if required.

   If you selected Hourly, the Grade Annualization Factor field is blank. Enter your own values, if required.

   If you selected Period, leave the Grade Annualization Factor field blank, Oracle HRMS uses the payroll period of your employee as the annualization factor.

   > **Note:** This is for information only. For example, to enable you to compare salaries within grades.

6. Save your changes.

Adding Grades

The product comes with an extensive list of values for grades and steps. There are 66 grades (01-66) as well as several letter combinations (AA, BB, CA, CC, CM, DD, EE, MC, OC).

If your pay plan requires grade values other than the supplied ones, you can enter them using the Lookup Values window.

> **Note:** The pay plans for Administrative Law Judges (AL) and Executive Pay (EX) are set up with numeric step designations. However, when the system prints the Notification of Personnel Action, it replaces the numeric steps for AL pay plans with alphabetical steps (A-L), and the steps for EX pay plans with roman numerals.

To add grades or levels:

1. Open the Lookup Values window and query the Lookup Type GHR_US_GRADE_OR_LEVEL.

2. Insert a new record.

3. Enter the grade using two or more digits, such as 01, in the Code, Meaning, and Description columns.

4. Choose Enabled.

5. Enter a start date early enough to handle any historical information you want to enter.

    - In the Date field, enter a start date early enough to handle any historical information you want to enter.

        Warning: Enter the same effective date for all the values in the table so that the entire pay table has the same effective date.

6. Save your work.

Adding Steps

The product comes with an extensive list of values for grades and steps. There are 88 steps (01-88) as well as entries for designating no step (99-No Step) or not applicable (00-Not Applicable, No Step).

If your pay plan requires grade or step values other than the supplied ones, you can enter them using the Lookup Values window.

> **Note:** The pay plans for Administrative Law Judges (AL) and Executive Pay (EX) are set up with numeric step designations. However, when the system prints the Notification of Personnel Action, it replaces the numeric steps for AL pay plans with alphabetical steps (A-L), and the steps for EX pay plans with roman numerals.

To add steps or rates:

1. Open the Lookup Values window and query the Lookup Type GHR_US_STEP.
2. Insert a new record.
3. In the Code field, enter the Lookup using two or more digits, for example 01.
4. In the Meaning field, enter the step or rate name.
5. In the Description field, enter your descriptive text.
6. Choose Enabled.
7. Enter a start date early enough to handle any historical information you want to enter.
8. Save your work.

Note: Predefined grades and steps cannot be deleted. It is also recommended that you do not end date them. You can delete or end date new grades that you add to the system.

Associating Pay Plans and Grades

During implementation, your system administrator runs the Create Federal HR Valid Combinations concurrent manager process to install the predefined grades and pay plans.

To create new valid pay plan and grade combinations, for each pay plan you specify the associated grades or levels. These combinations are the values that appear in the Valid Grade and Target Grade segments of the US Federal Valid Grade Info Position Extra Information.

Use the Grade window.

To associate pay plans with grades:

1. Enter your grades in sequence number order.

   The sequence number can be any number from 1 upwards. The number indicates the rank order of the grade; 1 indicates the highest grade. This is the sequence in which the grades appear to users in lists of values.

2. Click in the Name field to display the US Federal Grade flexfield. Here you enter the pay plan, grade or level.

3. Enter a start date early enough to handle any historical information you want to enter.

4. Repeat the above steps until you have entered all the grades in the pay plan.

5. Save your work.

3

Compensation and Awards Management

Compensation and Awards Management Overview

As an HR manager, you compensate employees when you process individual RPA actions, such as an Appointment, Promotion, Change in Grade, bonus, award, and Other Pay actions.

When you have a group of employees affected by a pay change, such as an annual or semiannual pay adjustment or the issuance of a new pay table, you can process a mass salary actions to perform standard and percent pay adjustments as well as locality pay adjustments. For special rate tables deletions and terminations, you can process a mass action that updates the affected employee and position records

See: Compensation Actions, page 3-4

In addition to salary change actions, you can have the application automatically process pay actions that occur periodically, such as employee Within Grade Increases and Quality Step Increases.

See: Automatic Within Grade Increase (WGI), page 3-38

With either manually or automatically processed actions, the application automatically calculates an employee's pay based on regularly updated standard and special rate pay tables.

See: Grades and Their Relationship to Pay, page 2-1

You can view a summary of the compensation an individual receives by reviewing that person's consolidated records using the Managers Views in self-service.

See: Information Overview, *Deploy SSHR Capabilitity Guide*

In addition to individual RPA and mass actions, Oracle HRMS provides a vehicle repository in which you can store details of company vehicles and private vehicles used for government purposes. Storing this data in a repository removes the need for repetitive and error-prone data entry for each mileage claim.

See: Vehicle Repository, page 3-44

Key Concepts

To use compensation and awards to suit your agency's requirements, you need to understand the following key concepts and activities:

- Requests for Personnel Actions, *Oracle HRMS Configuring, Reporting, and System Administration Guide*
- Step Increases, page 3-38
- Mass Actions, page 3-24
- Grades and Pay Plans, page 2-1
- Compensation Actions, page 3-4
- Award Actions, page 3-6

Compensation and Awards Management Requirements

How does the application arrive at an employee's pay?

The application calculates an employee's pay when you manually process pay-related Request for Personnel Actions or when the application runs automatic actions such as Within-Grade Increases. The RPA automatically calculates the total salary. The application includes the following elements to determine the pay: Basic Pay, Locality Adjustment where applicable, Adjusted Basic Pay, and Other Pay such as Availability Pay, Retention Allowance, and Total Pay.

Does a change such as a change in Step produce a commensurate change in pay?

The application performs automatic pay calculations for salary change actions, actions that change the Pay Rate Determinant, Duty Station, position, step, or rate.

What type of award actions can you perform?

You can process standard Nature of Action awards. For example, you can process cash awards, suggestion and invention awards, time off awards, performance awards, and special act or service awards.

Is there an overview of an employee's compensation?

The Person Summary window summaries the employee's current compensation and gives you access to NPAs processed for that person.

Can I batch groups of employees who are entitled to receive salary increments?

Mass actions such as mass salary pay adjustment actions allow HR Specialists to compensate large numbers of employees at a time. You can process pay adjustments for employees on incremental salary tables (grade/step), and pay banded pay tables. When OPM issues changes in locality rates, you can respond in a timely way by processing mass locality pay adjustments. When OPM changes or deletes special rate tables for General Schedule and equivalent pay plans, you can process a mass action that updates the employee and position records to a different pay table.

How do you manage individual salary packages?

The product comes with predefined pay plans and valid grade combinations as well as the Office of Personnel Management basic and special pay tables. You can assign salaries using the Request for Personnel Action (RPA).

You can associate salary changes with the results of performance reviews. Using the RPA, you can enter proposed changes to take effect in the future.

What type of information can I record in the vehicle repository?

You can record the following information:

- Registration number
- Make and model
- Registration date
- Engine capacity
- List price and value of optional accessories fitted initially and added later
- Fiscal rating
- Status, and reason for Inactive status
- Whether the vehicle can be allocated to multiple users

Compensation and Awards

Compensation Actions

As an HR manager, you compensate employees by processing individual RPA actions or mass actions. For example, you compensate an individual when you appoint or promote that person, assign other pay such as Availability Pay, and grant an award. When the compensation covers a larger group of people, such as the employees at a specific personnel office, you can process a mass salary action, such as a pay adjustment.

You can also use compensation to recruit, retain, and reward employees by granting:

- Award actions to employees and groups of employees

  See: Award Actions, page 3-6

- Incentives such as Recruitment and Relocation incentives

  For example, you can process an incentive payment such as a Recruitment Incentive and specify recurring biweekly payments or nonrecurring installment payments, and record the payment dates and service obligation information.

  See: Incentive Pay Actions, page 3-9

- Pay increases

  See: Processing a Mass Salary Pay Adjustments, , page 3-24Health Care Provider Pay Actions, page 3-7

You can view a summary of the compensation an individual receives by reviewing that person's consolidated records using Manager Views in self-service.

See: Information Overview, *Deploy SSHR Capabilitity Guide*

Compensation Regulations

Federal regulation updates issued by the Office of Personnel Management (OPM) affect how you compensate your employees.

For example, the Federal Workforce Flexibility Act (FWFA) contains reforms that affect how you apply special rate schedules, locality pay, and pay retention when calculating an employee's pay. The RPA process captures the information required to calculate an employee's pay based on these regulations.

When you process a salary change action or an automatic Within Grade Increases (WGI) or Quality Step Increases (QSI) for GS and equivalent pay plans, the application automatically calculates the employee's pay based on the FWFA guidelines. For example, the application:

- Determines if the person's position or retained grade contains a special rate table
- Sets the Pay Rate Determinant based on whether the employee's Locality or Special Rate Supplement entitlements apply
- Calculates the Adjusted Basic Pay and applicable Locality or Special Rate Supplements, and

  The application calculates the pay increases and awards for retained grade employees assigned to special rate tables against the higher amount (special rate or locality rate) based on their duty station
- Assigns the employee and position a default pay table identifier when the special rate table no longer applies
- Stores the pay table identifier used to calculate the employee's current pay and PRD values in the US Federal Assignment RPA extra information

Compensating Multiple Employees

When you have a group of employees affected by a pay change, such as an annual or semiannual pay adjustment or the issuance of a new pay table, you can process an appropriate mass salary action to perform a pay adjustment for selected employees.

For employees on incremental salary schedules, you can process a standard pay adjustment and for those employees on pay banded pay tables, a percent increase. When OPM issues new locality rates, you can also process locality adjustments.

See: Processing a Standard Mass Salary Adjustment, , page 3-24Processing a Percent Pay Adjustment, , page 3-26Processing a Locality Adjustment, page 3-29

For General Schedule and equivalent special rate tables or special rate pay plan, grade, and step combinations that terminate under the Federal Workforce Flexibility Act, you can process a mass action that updates the affected employee and position records.

See: Processing a Pay Table Change Action, page 3-34

Pay and Performance Appraisal Certifications

The National Defense Authorization Act of 2004 requires Federal agencies to certify their SES and SL/ST performance appraisal systems. After receiving your certification, you can process actions to increase the salary of SES and SL/ST equivalent employees to a higher salary cap level. Business rules apply pay cap checks based upon your agency's level of certification: full, provisional, or none. System administrators can enter and maintain certification information in a table (GHR_PERF_CERT) using an SQL script.

If an employee's Adjusted Basic Salary or Total Salary is over Executive Level III or Executive Level 1 levels, and OPM withdraws your agency's performance appraisal certification, you can neither increase nor reduce the employee's pay until certification

again covers the positions occupied by these employees. When you process an individual or mass salary change action, you can identify employees who fall into this category by entering a PRD 2 in their records. The application prevents any increase or reduction to basic salary, and retains the same basic salary in the NPA.

Award Actions

As an HR manager, periodically, you grant awards to individual employees and groups of employees. For example you can process individual cash awards and lump sum performance payments. You can process manual RPAs for individual employees as well as process mass award actions to grant awards to several employees at a time.

To simplify data entry and provide greater consistency, you can enter a percent when you process awards. For example for NOACs 840 Individual Cash Award, you enter a percent and the application calculates the resulting amount, storing the percent and amount as well as the expiration date of the associated service agreement in the Assignment element.

The application includes business rules that ensure the amounts fall within the allowable percentage of the employee's basic pay. For example, for Presidential Rank Awards (NOAC 878) for Senior Executive and equivalent pay plans, you can grant lump-sum payment award of up to 35% of the Senior Executive's annual basic pay.

Performance Based Awards

The Federal Workforce Flexibility Act (FWFA) changes the way in which you calculate performance based awards. Instead of authorizing awards as a percent of basic pay amount, you include the employee's locality and special rate supplements when calculating the award for GS and equivalent pay plans.

The application calculates the award for employees on:

- Non-pay retention using the Adjusted Basic Pay
- Pay retention using the amount for the top step of the employee's assigned grade plus the applicable locality or special rate supplement

  (The application compares the locality and special rate supplement and then uses the higher amount in the calculation.)

For retroactive actions, you enter an award amount to ensure proper calculation.

Mass Award Actions

You can process a mass action to grant an award to several employees. Unlike other mass actions such as Mass Transfers that restrict an employee's eligibility for selection to one action, you can select and process multiple awards for the same employee with the same effective date.

When the application updates a Mass Award action to the HR database, you see a summary of the results, including the number of:

- Actions successfully updated
- Actions where the application could not find a Personnel Office groupbox for the employee's personnelist

  The application deselects the record for processing and enters a comment in the Preview/Final window reporting that no groupbox was found. You can then set up the necessary routing and POI groupbox information. As long as you keep the same Mass Award Details, you can resubmit the Mass Award.

- Actions where the application encountered as error, such as incomplete information

  The application routes the RPAs to the Personnel Office groupbox where the Personnel Office can manually correct and process them.

Health Care Providers Pay Actions

You manage the pay for health care providers by processing the same Nature of Action Code (NOACs) that cover standard employees. In addition to these NOACs, to better recruit and retain qualified staff, you can process special pay for health care providers with two NOACs:

- NOAC 850 MD/DDS Special Pay grants special pay amounts to doctors and dentists
- NOAC 855 Head Nurse Pay grants special pay (step) increases to nurses

NOACs 850 and 855 do not require customary CPDF processing. The application bypasses the CPDF edits, and the CPDF Dynamics report does not include NOAC 850 and 855 Notification of Personnel (NPA) records.

NOAC 850 MD/DDS Special Pay

When you process a NOAC 850, you complete the US Fed MD/DDS Special Pay RPA Extra Information. Considered as non-RPA pay, the application does not change the Basic Pay, Locality Pay, Adjusted Basic Pay, Other Pay, or Total Pay. When you update the RPA, the application stores the special pay information in the MD/DDS Special Pay element.

The NPA reports the To Total Salary as the amount entered in the MD/DDS Total Special Pay Amount of the US Fed MD/DDS Special Pay RPA Extra Information.

NOAC 855 Head Nurse Pay

NOAC 855 increases a head nurse's pay by one to two steps above the pay plan's current step. If the nurse is at or near the top step of the pay plan, you may have to

change the pay plan in the position record. For example, if a nurse's current step in a GS pay plan is 9 and you increase it by two steps, you would need to change the pay plan from GS to GG in the position record

You can also process a NOAC 855 to decrease the pay by one to two steps below the current step. If the decrease in steps returns the head nurse to the standard nurse position and pay table, you must change the pay plan in the position record. For example, if a nurse's current step in a GG pay plan is 11 and you decrease it by one step to 10, you would need to reset the pay plan from GG to GS in the position record.

The application changes the WGI Due Date based on the To Step entered in the RPA. If you process a NOAC 855 that places the employee in a To Step less than 10, the application adjusts the WGI Due Date and WGI Pay Date based on the new waiting periods. If you place the employee in a To Step of 10, 11, or 12, the application updates the WGI Due Date and WGI Pay Date to null (zero).

Pay Table Changes

When the Office of Personnel Management (OPM) authorizes deletions and modifications to pay table, you can address these changes by processing a Mass Salary Pay Table Change Identifier mass action.

See: Processing a Pay Table Change Action, page 3-34

> **Note:** For *pay adjustments* based on special rate table changes, you process a standard or percent pay adjustment mass action. See: Processing a Mass Standard Pay Adjustment, page 3-24

The Pay Table Change mass action generates RPAs that document the updates to the records, including:

- NOAC 800 Change in Data Element action if the PRD changed but not the basic pay values
- NOAC 894 Pay Adjustment if the basic pay values changed

The RPA includes the appropriate Legal Authorities and Remarks, but you can modify this information prior to updating the mass action.

On the effective date, the application updates the pay table, pay rate determinant, and the salary fields in the applicable position and employee records:

- Position's US Federal Valid Grade extra information
- Person's Retained Grade extra information, where applicable
- Locality or SR Supplement element with the calculated locality or special supplement amounts

US Federal Process Log

The US Federal Process Log records the results of the mass action. The log lists:

- Positions where a default pay table identifier replaces the special rate table identifier that no longer applies
- Person records affected by the pay table change and the RPA generated as a result of the mass action
- Positions and person records that failed and includes an error message explaining the problem

Incentive Payments

US Federal HR supports the Federal Wage Flexibility Act (FWFA) reforms that govern how you authorize and administer Recruitment, Relocation, Retention, and Separation Incentive actions. You can grant incentive payments as recurring biweekly payments or nonrecurring installment payments, and also specify payment dates. After updating the actions, managers and employees can view the resulting incentive payments as supplementary earnings in self-service.

Recruitment, Relocation, Retention Incentives

The RPA simplifies the process of establishing Recruitment (NOAC 815), Relocation (NOAC 816), and Retention (NOAC 827) incentive grants. An entry window captures the payment options, payment types, and payment dates. The Total Salary field displays the amount of the incentive or, for Retention Incentives, the percent of earned pay. The Remarks section includes details about the payments.

For incentives based on service agreements, you can record the service terms in the US Federal Service Obligation RPA EIT. For biweekly Retention Incentives that require annual review, you can enter the date for that review in the RPA EIT US Federal Retention Incentive.

After updating the RPA, you can correct the resulting NPA and change the incentive amount or percent, but not the payment type or dates. For these you must cancel the original RPA action and process a new action.

See: Processing Recruitment, Relocation, and Retention Incentives, page 3-15

Some agencies require that employees who leave prior to completing their service obligation agreement refund their incentive payments. When you process a separation action, if the employee has pending Recruitment, Relocation, or Retention incentive payments, the application sends a notification to the worklist inbox. You can then review the incentive actions and if required take further steps, such as cancelling the incentive payment action and notifying payroll about the refund owed to the agency.

Separation Incentives

When you terminate an employee, you can grant a Separation Incentive as a secondary nature of action to the termination action. For example, you can process a dual action that includes a Retirement (NOA 302) and a Separation Incentive (NOA 825). You complete the RPA incentive information using the same Incentive window as the other incentive actions. The Total Salary field displays the amount of the incentive and the Remarks section includes details about the payments.

After updating the RPA, you can correct the resulting NPA and change the incentive amount or payment dates, but not the payment type. To change the payment type, you must cancel the original RPA action and process a new action.

See: Processing Separation Incentive Actions, page 3-18

Effective Dates

If you authorize multiple payments or multiple payment types (biweekly and installment or lump sum amounts) with the same RPA action, the application creates multiple assignment elements: recurring elements for the biweekly payments and nonrecurring for the installment and lump sum payments.

The effective dates depend on the type of payment. For recurring payments such as biweekly incentives, the From and To Dates are the dates that you enter in the payment date field and the end date field. For nonrecurring payments such as installment payments, the From Date is the start date of the pay period and the To Date is the end of the pay period in which the authorization is effective.

For example, if you authorize a Retention Incentive with payment option of Installments plus Final Lump Sum and enter percent amounts for two installments with effective dates of 1-May-2005 and 2-October-2005 and a final lump sum for 30 April 2006, the application creates the Retention Incentive non-recurring elements with the following start and end dates:

- 1-May-2005 to 13-May-2005
- 2-October-2005 to 15-October-2005
- 30-April-2006 to 14-May-2006

Processing Mass Award Actions

When a group of employees qualifies for the same type of reward, you can process a mass award action for those employees, instead of processing an award action for each individual.

To process a Mass Award:

1. Set up a groupbox, associate that groupbox to a Personnel Office ID, and assign an approving officer.

   This setup enables the application to enter the appropriate approval information on the NPA, and route errors and rejected actions to the Personnel Office groupbox responsible for correcting the action.

   See: Maintaining Personnel Office ID Information, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

2. Display the Mass Awards window.

3. Complete the Mass Award information, by entering a unique name, a NOA Code, and an effective date for the action.

4. Complete the Selection Criteria.

   - Column: Choose the first Criteria on which to base the selection criteria.

     Note: The pay plan and Grade or Level used in the selection criteria are taken from the Positions' valid grade. (A Retained Grade record is not used as the selection criteria.)

   - Choose a Relational Operator to broaden or narrow the search.

     For example, for a criteria of Pay Plan that does not equal WG, or a Rating of Record that contains Excellent, or an Agency/Subelement Code that contains GS00.

   - Choose the appropriate Code.

     The List of Values includes OPM-mandated codes, for example for the Agency/Subelement Code, as well as those codes defined by your agency. When you enter the Code, the application completes the description field.

5. Repeat the previous step to specify additional criteria.

   Specify additional criteria to further customize the selection of eligible employees. For example, you might specify the employee's Personnel Office ID is 1102, and the Organization they belong to contains Human Resources.

6. Choose the Award Details button and complete the information.

   - For cash awards, you can specify a flat amount or percent.

     The application calculates the percentage using the Adjusted Basic Pay unless the employee is on pay retention. For pay retention employees, the application

bases the pay calculation on the top step of the employee's assigned grade plus any applicable locality or special rate supplement.

- For time off awards, you can specify the number of hours granted an employee in the Amount field.

7. Choose the LACs/Remarks button and choose the applicable Legal Authority Codes and Remarks from the List of Values and enter insertion data, if required.

   You can also add Remarks by choosing the ZZZ code. See: Entering Remarks and Legal Authority Codes, *Workforce Sourcing, Deployment, and Talent Management Guide*

8. Save your results.

9. Choose the Preview button to view the run results.

   The Preview window lists all employees who meet the selection criteria. Where necessary, you can change the data items for individual employees.

10. Deselect the employees or vacant position (realignment) to exclude from the mass action.

    You can select and deselect multiple records at a time.

    - To select all the employee records, choose All from the Selection list. You can then manually deselect the records that you do not want the application to process.

    - To deselect all the employee records, choose None from the Selection list. You can then manually select the records that you want the application to process.

    - To have the application select a few records from the list of retrieved employee records, deselect the records you want processed. Choose Invert from the Selection list. The application selects the previously deselected records, and deselects the remaining records.

    The application displays the comments field where you can enter a reason for excluding that person or position. See: Deselecting Employees from Mass Actions, *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

11. Save your results.

12. When you are ready to run the final results, choose the Execute button on the Final Mass Awards window.

    The application immediately updates Mass Awards that have a current or retroactive effective date, and updates Mass Awards that have a future effective date when the effective date is reached.

Upon update to the HR database, the application enters the appropriate information in the employee's Assignment Element Entries window. You can also view the award information using the Person Summary window.

See: Running the Final Mass Action, *Workforce Sourcing, Deployment, and Talent Management Guide*

13. Print the required reports.

    You can print a list form of all employees or individual NPAs in either list or standard form.

    See: Printing Mass Action Reports, *Workforce Sourcing, Deployment, and Talent Management Guide*

    As with all mass actions, after the Mass Award is updated to the HR database, you can process a Cancellation or Correction for individual employees, but you cannot cancel or correct the Mass Award action itself.

Processing Awards for Ex-Employees

You can process an Award action for those ex-employees who earned an award for services performed prior to their separation date.

Use the RPA window.

To process an award:

1. Initiate an Award/One Time Payment RPA.
2. Date track to a date equal to or earlier than the ex-employee's date of separation.

   You can only process RPA actions for active employes, so to locate the employee record, you must date track the RPA to the separation date or an earlier date.
3. In the Last Name field, enter the ex-employee's name.
4. An effective date equal to or earlier than the ex-employee's date of separation.
5. Continue to complete the RPA, entering the NOAC, Legal Authority on the Requesting Info region.

   See: Processing a Request for Personnel Action, *Workforce Sourcing, Deployment, and Talent Management Guide*
6. Choose the Positions Data tab to display that region, and click the Award field to open the Award dialog box.

   See: Entering Other Pay and Awards, page 3-14

7. Enter a dollar amount or a percentage.

   Note: When you enter the data, make sure that your Unit of Measure (UM) is M.

8. Save your work.

9. Choose the Extra Information button to display the Extra PA Information Request window.

10. Select the US Fed Award and Bonus Information. Click in the Details field to display the segments.

11. Enter the appropriate data for the segments.

    Note: The date for the Date Ex-Employee Award Paid must be equal to or greater than the ex-employee's separation date.

12. Save your work and continue to process the RPA as you would normally, obtaining approvals and updating the completed RPA to the HR database.

Printing the NPA

When you print the NPA, the application uses the date you entered in the Date Ex-Employee Award Paid field for the printed NPA's effective date. If you did not enter a value for this field, the application uses the RPA's effective date for the printed NPA.

Entering Other Pay and Awards

You process an RPA to grant employees awards and bonuses and other pay, such as Availability Pay (AP), Administratively Uncontrollable Overtime (AUO), and Supervisory Differential. After you update these pay actions, the application lists the separate other pay elements and the Other Pay element (the sum of the separate elements) in the employee's Assignment Element Entries window.

To enter an Other Pay amount in an RPA:

1. Click the Other Pay field.

2. In the Other Pay window, enter the appropriate pay information:

   - For Supervisory Differential, enter a dollar amount or a percentage.

     Supervisory Differential is subject to maximum earning pay caps.

     See: Pay Calculations on an RPA, *Workforce Sourcing, Deployment, and Talent*

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- For AUO or Availability pay, enter the Premium Pay Indicator and the application calculates the appropriate amount.

To enter an Award amount in an RPA:

1. Click the Award field.
2. In the Award window, enter a dollar amount or a percentage.

   When you enter the data, choose M for the Unit of Measure (UM).

   For information about processing award actions for ex-employees, see Processing Awards for Ex-Employees, page 3-13

To terminate Other Pay for Supervisory Differential:

1. Process a NOAC 810 Chng in Allowance/Differential.
2. In the Other Pay window, enter a zero for the amount or remove the existing amount, and click OK.
3. Continue routing, approving, and updating the RPA according to your agency's practices.

To terminate AUO or Availability Pay:

1. For AUO or Availability Pay, process a NOAC 818 or 819 action.
2. In the Other Pay window, remove the Premium Pay Indicator, and click OK.
3. Continue routing, approving, and updating the RPA according to your agency's practices.

Processing Recruitment, Relocation, and Retention Incentive Actions

You can authorize Recruitment (NOAC 815), Relocation (NOAC 816), or Retention (NOAC 827) incentive grants for employees and capture information such as:

- Payment options, payment types, and payment dates
- Service obligation dates
- Annual review dates for Retention incentives

If an employee separates, you determine whether to authorize any part of the incentive

already paid or pending, and then cancel or reprocess the action accordingly.

See: Incentive Payment Actions, page 3-9

Use the RPA window.

To process a Recruitment, Relocation, or Retention Incentive:

1. Initiate an incentive RPA: Recruitment (NOAC 815), Relocation (NOAC 816), or Retention (827).
2. On the Requesting Info tab, enter the effective date, employee's name, the nature of action code, and the legal authority code.
3. On the Position Data tab, click the Total Salary field to display the Incentive window.
4. Select a Payment Option.
5. In the Incentive region, select a payment category.

   The payment option you selected previously determines the choice of payment categories.
6. For Relocation and Recruitment incentives, enter an amount and payment date.

   If you are processing a biweekly payment, enter the date the last payment occurs.
7. For Retention Incentives, enter a percentage of the earned pay and the payment date.

   If you are processing a biweekly payment, with a service obligation, enter the date the last payment occurs. Biweekly payments without a service obligation do not require an end date because they are on-going payments.
8. For Relocation and Recruitment incentives, add the total of all the biweekly payments to the Total Amount field.

   The application does not automatically calculate the biweekly payments, but does automatically calculate the total for the lump sum and installment amounts. Enter the total for the biweekly payments or revise the existing total to include the biweekly total.
9. Save your work.

   You must complete the information in the Incentives window before you can save or route the RPA.
10. Click Extra Information and complete the RPA EIT information:
    - For incentives that involve a service agreement, complete the RPA EIT US

Federal Service Obligation.

- For ongoing biweekly Retention Incentives (no payment end date entered in the Incentives window), enter an annual review date in the RPA EIT US Federal Retention Incentive.

11. Complete, route, approve, and update the action according to your agency's practices.

    After you update the RPA, the NPA displays the Recruitment or Relocation amount or the Retention percent in the Total Salary field. The Remarks section includes details about the payments, such as the payment amounts and payment dates. The application creates recurring and non-recurring assignment elements based on the type of payment categories you authorized.

    The resulting incentive payments are listed as supplementary earnings in self-service. Managers and employees with access to self-service can view these earnings.

You can correct the NPA, but only the incentive amount or percentage, not the payment type or dates. (You must cancel the original RPA action and process a new action.) The NPA does not include service obligation information, so you can correct that information directly in the Person US Federal Service Obligation EIT.

To terminate a Retention Incentive:

1. Initiate a Retention NOAC 827 action for the employee.
2. On the RPA Requesting Info tab, enter the effective date, the employee's name, the 827 nature of action code, and the Legal Authority Code.
3. On the Position Data tab, place your cursor in the Total Salary (block 20) field to open the Incentives window.
4. Select Payment Option B, Biweekly Payments.

    The application automatically populates 0 (zero) in the Total Amount field of the Incentives window.
5. Save your work.
6. Complete, approve, and update the action according to your agency's practices.

    The existing Retention Incentive Assignment Element is end-dated with the effective date of the RPA.

Processing Separation Incentive Actions

When you terminate an employee, you can process a dual action and grant a Separation incentive as the second nature of action. You can grant Separation incentives as recurring biweekly or nonrecurring installment payments and specify the payment dates.

See: Incentive Payments, page 3-9

Use the RPA window.

To process a Separation incentive:

1. Initiate an RPA action that terminates the employee's assignment.
2. On the Requesting Info tab, enter the effective date and the employee's name.
3. Enter the first nature of action code for the termination action and its legal authority code.
4. Enter the second nature of action code for the Separation incentive (NOA 825) and its legal authority code.
5. On the Position Data tab, click the Total Salary field to display the Incentive window.
6. Select a Payment Option.

   The application automatically enters the incentive category and start date, which you can change.
7. For a lump sum payment, enter an amount.

   The application automatically enters this amount in the Total Amount field.
8. For installment payments:
   - Enter the first amount.
   - Click the next row to have the application automatically enter the second installment category and payment date. Enter the second installment amount.

     The application automatically calculates the two installment payments and enters the total in the Total Amount field.
9. For biweekly payments:
   - Enter the amount distributed for each biweekly payment.

     The application automatically enters the payment date for the first biweekly

payment (start date of the next pay period).

- In the End Date field, enter the last day of the pay period for the last biweekly period.
- Calculate the total for of all biweekly payments and enter that result in the Total Amount field.

10. Save your work.

    You must complete the information in the Incentives window before you can save or route the RPA.

11. Complete, route, approve, and update the action according to your agency's practices.

    After you update the RPA, the NPA displays the Separation Incentive amount in the Total Salary field. The Remarks section includes details about the payments, such as the payment amounts and payment dates. The application creates recurring and non-recurring assignment elements based on the type of payment categories you authorized. The element start date is the RPA effective date. The input values for the element entries capture the payment start and payment end dates.

    Note: You can correct the NPA, but only the incentive amount and payment dates, not the payment type. (You must cancel the original RPA action and process a new action.)

Processing Pay for Doctors and Dentists

You can process special pay amounts for doctors and dentists who are eligible for the premium pay by processing a NOAC 850 MD/DDS Special Pay RPA. Upon update, the application stores the information in the MD/DDS Special Pay element.

Use the RPA window to process premium pay for doctors and dentists.

To process a NOAC 850:

1. Choose Request for Personnel Action Salary Change MD/DDS Nurse Pay.
2. Follow the usual steps for entering the employee's name and effective date.

   See: Processing an RPA, *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

3. In the NOA Code field Choose 850 from list of values.

   The application enters the appropriate Legal Authority and Remark codes.

See: Processing an RPA, *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

4. Choose the Extra Information button to save your work and display the list of flexfields. Select US Fed MD/DDS Special Pay Extra Information type and click in the Details field to display the flexfield.

5. Enter the amounts in each of the fields. The application displays the total in the MD/DDS Total Special Pay field.

6. In the MD/DDS Special Pay NTE date field, enter the not-to-exceed date.

7. In the Premium Pay Indicator field, select the appropriate value. Choose the OK button to save your work and close the extra information flexfield window to return to t he RPA window.

8. Follow the usual steps for saving, routing, approving, and updating the RPA.

   See: Processing an RPA, *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

To update the pay amount:

1. Process a NOAC 850 for the employee.

2. Navigate to the US Fed MD/DDS Special Pay RPA Extra Information and in the appropriate fields overwrite the current amount with the revised amount.

   The application displays the recalculated MD/DDS Total Special Pay.

3. Complete, approve, and update the RPA.

   Upon update to the HR database, the application updates the MD/DDS Special Pay element with the new value.

To stop the pay amount:

1. Process a NOAC 850 for the employee.

2. Navigate to the US Fed MD/DDS Special Pay RPA Extra Information and overwrite the current amount with a null (zero) amount.

3. Complete, approve, and update the RPA.

   Upon update to the HR database, the application terminates the MD/DDS Special Pay element as of the RPA effective date.

Processing Pay Increases for Nurses

You can process NOAC 855 Head Nurse Pay to grant special pay to nurses (up to two steps) or to return a head nurse to a standard nurse position and pay table.

When you update a NOAC 855, the application changes the WGI Due Date based on the To Step entered in the RPA. If you process a NOAC 855 that places the employee in a To Step less than 10, the application adjusts the WGI Due Date and WGI Pay Date based on the new waiting period. If you place the employee in a To Step of 10, 11, or 12, the application updates the WGI Due Date and WGI Pay Date to null (zero).

If you process a NOAC 855 and the step increase exceeds the tenth step of the GS pay plan schedule, the application automatically populates the correct change of pay plan GG. When you update the RPA, the application changes the pay plan for you in the Position US Federal Valid Grade extra information. Conversely, if the step drops to 10 or below, upon update, the application updates the US Federal Valid Grade extra information with the correct GS pay plan.

Use the RPA window.

To process a NOAC 855:

1. Choose Request for Personnel Action Salary Change MD/DDS Nurse Pay.
2. Follow the usual steps for entering the employee's name and effective date.

   See: Processing an RPA, *Workforce Sourcing, Deployment, and Talent Management Guide*
3. In the NOA Code field choose 855 from list of values.

   The application enters the appropriate Legal Authority and Remark codes.

   See: Processing an RPA, *Workforce Sourcing, Deployment, and Talent Management Guide*
4. Choose the Extra Information button to save your work and display the list of flexfields. Select US Fed Benefit Premium Pay Ind and click the Details field to display the flexfield.
5. Select the appropriate Premim Pay Indicator from the list of values and choose the OK button.
6. Navigate to the Position tab and enter the To Step.
7. If the step places the employee on a step that exceeds the maximum step of the current grade and pay plan, change the pay plan.
8. Follow the usual steps for authorizing, routing, approving, and updating the RPA.

If the step increase or decrease results in a pay plan change, upon update, the application updates the Position Valid Grade extra information with the appropriate pay plan and step information and validates the position.

See: Processing an RPA, *Workforce Sourcing, Deployment, and Talent Management Guide*

Processing Student Loan Repayments

The Office of Personnel Management (OPM) established the Nature of Action Code (NOAC) 817 Student Loan Repayment action so that agencies could repay Federally insured student loans as a recruitment or retention incentive for highly qualified candidates and employees. Using an RPA, you can process a NOAC 817 as an annual lump sum net payment or recurring payroll payment. The application includes the NOAC 817 NPAs in the Central Personnel Data File (CPDF) Dynamics report that you produce and submit to the OPM.

Use the RPA window to process Student Loan Repayment actions.

To process a Student Loan Repayment:

1. Choose Student Loan Repayment from the list of RPA actions in the Navigator.

   The application populates the NOA Code 817. This NOAC has no associated Legal Authority Codes, but you can enter use the Remarks ZZZ to enter agency Remarks that accompany the action.

2. Choose a Routing Group, if necessary.

3. Select the last name of the person from the list of values.

4. Enter an Effective Date and complete the remainder of Part A-Requesting Office according to your agency's practices.

5. Navigate to the Position Data tab and click the Award field to display the Award dialog. Enter a whole dollar amount and choose the OK button.

6. Choose the Extra Information button to save the information you have entered so far and display the list of flexfields. Select the Student Loan Repayment flexfield.

7. In the Repayment Schedule field, select Lump Sum or Recurring.

8. In the Review Date field, enter the date on which the agency reviews the authorization and choose the OK button.

9. Continue to process the RPA as usual, authorizing, approving, and updating the action.

See: Processing an RPA, *Workforce Sourcing, Deployment, and Talent Management Guide*

Upon update to HR, the application creates and updates the Student Loan Repayment Lump Sum or Recurring element based on the type of payment you selected.

If later you want to change the *type* of payment, you must cancel the original action and process a new action. If you change the amount through a Correction action, and the amount is less than the amount already paid to the employee, then you may need to make an appropriate pay adjustment. If the corrected amount is greater than the amount paid, then the payments continue until the newly authorized amount is met.

To change the Review Date, you can process a new NOAC 817 or change the Review Date segment of the Student Loan element in the Assignment Element Entries window.

These authorization are only good for one calendar year. They automatically expire each December 31st. A new authorization must be entered each year for continuing payment. A

Finding a Mass Salary Action

When you navigate to any of the Mass Salary Preview or Final windows, the Find window automatically displays in front of it. You can start a new action by clicking the New button or query an existing action by entering criteria.

Use the Find Mass Salary window to query an existing mass salary action.

To query a mass salary action:

1. Do one or a combination of the following. Enter:
   - A full or partial query on the mass salary name
   - Pay Table ID
   - Effective Date
2. Click the Find button.

   Note: If you choose Find without entering any search criteria, the Mass Salary window is displayed with the first record shown. You can use the Down Arrow key to display the next record.

   If one action meets the criteria, the application displays this record immediately; otherwise, you see a window that lists the results.
3. Select the mass salary action from the list and click OK.

Processing a Mass Standard Pay Adjustment

When you have a group of employees affected by a pay change such as an annual or semiannual pay adjustment or the issuance of a new pay table, you can process a Mass Standard Pay Adjustment action for employees on incremental salary schedules (match pay tables). For employees on pay banding schedules, you process a Mass Percentage Pay Adjustment.

See: Processing a Mass Percentage Pay Adjustment, page 3-26

Use the Mass Salary Standard Pay Adjustment window to process a pay adjustment action.

To process a Mass Standard Pay Adjustment action:

1. In the Find Mass Salary window, choose New to start a Mass Salary action, or query an existing action.

   See: Finding a Mass Salary Action, page 3-23

2. Enter the criteria: a unique name, the Pay Table ID, the Effective Date, and the Order or Directive and date that authorized the Mass Salary action.

   > **Note:** You can run only one mass salary action for a given employee on the same effective date.

   You can choose a pay table that came with the product or one defined by your agency.

   See: Setting Up Pay Tables, page 2-5

3. As Additional Criteria, choose the Organization, Agency Code, Subelement Code, Personnel Office ID, and Duty Station from the list of values for each field.

   > **Note:** The volume of records affects the amount of time it takes to display the Preview run results. You can shorten this time by processing employees in batches. Enter Additional Criteria to restrict the selection.

4. Enter the Pay Plans and Pay Rate Determinant codes (PRDs) that apply to the pay table and the salary adjustment.

5. Save your results.

   The Status field indicates the phase of the process. The status is Unprocessed until you execute the action (Submitted) and the application creates an RPA (Processed). If there is an error in executing the action, the Status field changes to Error.

See: Error Handling, *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

6. If you require additional LACs/Remarks, other than those specified by OPM for annual pay adjustment actions, click LACs/Remarks. Select the applicable Legal Authority Codes and Remarks from the list of values.

   You can also insert Remarks by choosing the ZZZ code.

   See: Entering Remarks and Legal Authority Codes, *Oracle HRMS Workforce Sourcing, Deplomen*t, *and Talent Management Guide*

7. Choose Preview to view the run results.

   The Preview window lists all employees who meet the criteria as of the effective date, displaying old and new pay information, including the pay table identifier used for the pay calculation.

   The application also lists employees on Retained Grade, determining their eligibility based on the PRD and Retained Grade Pay Plan.

   > **Note:** If an employee's retained grade pay table corresponds to the selected pay table, but the employee's retained grade expires before the effective date of the pay adjustment, the US federal process log lists the record. After reviewing the entry, if appropriate, terminate the employee's grade retention and establish the pay retention or other entitlement, and then manually process an RPA pay adjustment for that person.

   If the amount that the employee is entitled to receive exceeds the salary pay cap, the application sets the Total New Salary at the capped limit and displays a message in the Comments field.

   See: Maximum Earning Calculations, *Workforce Sourcing, Deployment, and Talent Management Guide*

8. Deselect the employees to exclude from the mass action.

   You can select and deselect multiple records at a time:

   - To select all the employee records, choose All from the Selection list. You can then manually deselect the records that you do not want the application to process.

   - To deselect all the employee records, choose None from the Selection list. You can then manually select the records that you want the application to process.

   - To have the application select a few records from the list of retrieved employee records, deselect the records you want processed, and choose Invert from the

Selection list. The application selects the previously deselected records, and deselects the remaining records.

The application displays the comments field where you can enter a reason for excluding that person or position.

See: Deselecting Employees from Mass Actions, *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

9. Save your results.

10. When you are ready to run the final results, click Execute from the Final Mass Salary window.

> **Note:** Alternatively, you can execute the actions from the Concurrent Manager, as described in Running the Final Action, *Workforce Sourcing, Deployment, and Talent Management Guide*

On the effective date, the application updates the database with the new pay information. If more than one salary action occurs on the same effective date for an employee, the application processes the NOAC with the highest priority and returns the other NOACs to the person who submitted the RPA for update to the database.

See: Order of Processing, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

For current and retroactive actions, you may wish to update the RPAs to the database before your normally scheduled Process Future Dated RPA concurrent manager process runs, so that users can begin processing actions based on the new values in the employee records.

See: Scheduling Future Dated RPA Actions, *Oracle HRMS Enterprise and Workforce Management Guide*

11. Print the required reports.

You can print a list form of all employees or individual Notifications of Personnel Action in either list or standard form.

See: Printing Mass Action Reports, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

Processing a Mass Percent Pay Adjustment

Increasingly HR administrators pay federal employees based on pay for performance systems and not on incremental salary schedules based on pay plan, grade and step. To further support pay adjustments for these employees and for employees paid by the Senior Executive Service (SES) Performance Based Pay System, agencies can grant

percentage increases as a mass pay adjustment. Where there is more than one grade for a given pay plan, HR administrators can specify different percentages for each grade.

Use the Mass Salary Percent Pay Adjustment window to process a percent pay adjustment action.

To process a Mass Percent Pay Adjustment:

1. In the Find Mass Salary window, choose New to start a Mass Salary action, or query an existing action.

   See: Finding a Mass Salary Action, page 3-23

2. Enter the criteria: a unique Name, the Pay Table ID, the Effective Date, and the Order or Directive and date that authorized the Mass Salary action.

   You can choose a pay table that came with the product or one defined by your agency.

   See: Setting Up Pay Tables, page 2-5

3. As Additional Criteria, choose the Organization, Agency Code, Subelement Code, Personnel Office ID, and Duty Station from the list of values for each field.

   > **Note:** The volume of records affects the amount of time it takes to display the Preview run results. You can shorten this time by processing employees in batches. Enter Additional Criteria to restrict the selection.

4. Enter the Pay Plans, Pay Rate Determinant codes (PRDs), and the Percent increase that applies to the pay table and the salary adjustment.

To specify different percentages for each grade

If the overall percent does not apply to each grade for the Pay Plan/Pay Rate Determinant, you can enter separate percent increases for each grade.

5. Click Grade/Percent to display the grade percent details for the pay plan.

6. Enter a different percent for the applicable grades, and click OK.

   After you display the Grade/Percent dialog, you can no longer change the value in the Increase Percent field.

7. Save your results.

8. Click LACs/Remarks and select the applicable Legal Authority Codes and Remarks from the list of values.

   You can also insert Remarks by choosing the ZZZ code.

See: Entering Remarks and Legal Authority Codes, *Oracle HRMS Workforce Sourcing, Deplomen, and Talent Management Guide*

9. Click Preview to view the run results.

   The Preview window lists all employees who meet the criteria as of the effective date, displaying old and new pay information, and the pay table identifier used to calculate the pay.

   The application also lists employees on Retained Grade, determining their eligibility based on the PRD and Retained Grade Pay Plan.

   > **Note:** If an employee's retained grade pay table corresponds to the selected pay table, but the employee's retained grade expires before the effective date of the pay adjustment, the US federal process log lists the record. After reviewing the entry, if appropriate, terminate the employee's grade retention and establish the pay retention or other entitlement, and then manually process an RPA pay adjustment for that person.

   If an employee qualifies for a different percent increase, you can override the default percent entered in the criteria with the appropriate percent in the Preview window.

   If the amount that the employee is entitled to receive exceeds the salary pay cap, the application sets the Total New Salary at the capped limit and displays a message in the Comments field.

   See: Maximum Earning Calculations, *Workforce Sourcing, Deployment, and Talent Management Guide*

10. Deselect the employees to exclude from the mass action.

    You can select and deselect multiple records at a time:

    - To select all the employee records, choose All from the Selection list. You can then manually deselect the records that you do not want the application to process.

    - To deselect all the employee records, choose None from the Selection list. You can then manually select the records that you want the application to process.

    - To have the application select a few records from the list of retrieved employee records, deselect the records you want processed, and choose Invert from the Selection list. The application selects the previously deselected records, and deselects the remaining records.

    The application displays the comments field where you can enter a reason for excluding that person or position.

See: Deselecting Employees from Mass Actions, *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

11. Save your results.

    The Status field indicates the phase of the process. The status is Unprocessed until you execute the action (Submitted) and the application creates an RPA (Processed). If there is an error in executing the action, the Status field changes to Error.

    See: Error Handling, *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*.

12. When you are ready to run the final results, click Execute from the Final Mass Salary - Percent Pay Adjustment window.

    Note: Alternatively, you can execute the actions from the Concurrent Manager. See: Running the Final Action, *Workforce Sourcing, Deployment, and Talent Management Guide*

    On the effective date, the application updates the database with the new pay information. If more than one salary action occurs on the same effective date for an employee, the application processes the NOAC with the highest priority and returns the other NOACs to the person who submitted the RPA for update to the database.

    See: Order of Processing, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

    For current and retroactive actions, you may wish to update the RPAs to the database before your normally scheduled Process Future Dated RPA concurrent manager process runs, so that users can begin processing actions based on the new values in the employee records.

    See: Scheduling Future Dated RPA Actions, *Oracle HRMS Enterprise and Workforce Management Guide*

13. Print the required reports.

    You can print a list form of all employees or individual Notifications of Personnel Action in either list or standard form.

    See: Printing Mass Action Reports, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

Processing a Mass Locality Adjustment

When the Office of Personnel Management issues changes to locality rates, you can process a Mass Locality Adjustment for employees who occupy positions located in affected locality pay areas and whose basic salary remains unchanged. When you

process a locality adjustment, the pay calculation applies the new locality percentage using the existing basic salary value to calculate the locality amount. The Senior Executive Service members are ineligible for Locality Pay and the Preview window does not list these employees.

Use the Mass Salary Locality Adjustment window to process a locality adjustment action.

To process a Mass Locality Adjustment:

1. In the Find Mass Salary window, click New to start a Mass Salary action, or query an existing mass salary action.

   See: Finding a Mass Salary Action, page 3-23

2. Enter the criteria: a unique Name, Effective Date, and applicable Locality Area.

   The list of values for Locality Pay Area Code contains the Locality Pay Areas available as of the effective date. You can select a locality pay area code between 02 and 98.

3. As Additional Criteria, choose the Organization, Agency Code, Subelement Code, Personnel Office ID, and Duty Station from the list of values for each field.

   > **Note:** The volume of records affects the amount of time it takes to display the Preview run results. You can shorten this time by processing employees in batches. Enter Additional Criteria to restrict the selection.

4. Save your results.

   The Status field indicates the phase of the process. The status remains Unprocessed until you execute the action (Submitted) and the application creates an RPA (Processed). If there is an error in executing the action, the Status field changes to Error.

   See: Error Handling, *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*.

5. Click LACs/Remarks and select the applicable Legal Authority Codes and Remarks from the list of values.

   You can also insert Remarks by choosing the ZZZ code.

   See: Entering Remarks and Legal Authority Codes, *Oracle HRMS Workforce Sourcing, Deplomeent, and Talent Management Guide*

6. Click Preview to view the run results.

   The Preview window lists all employees who meet the criteria as of the effective

date, displaying old and new pay information for them and the pay table identifier used to calculate the pay. The application also lists employees on Retained Grade, determining their eligibility based on the PRD and Retained Grade Pay Plan.

If the amount that the employee is entitled to receive exceeds the salary pay cap, the application sets the Total New Salary at the capped limit and displays a message in the Comments field.

See: Maximum Earning Calculations, *Workforce Sourcing, Deployment, and Talent Management Guide*

7. Deselect the employees to exclude from the mass action.

   You can select and deselect multiple records at a time:

   - To select all the employee records, choose All from the Selection list. You can then manually deselect the records that you do not want the application to process.
   - To deselect all the employee records, choose None from the Selection list. You can then manually select the records that you want the application to process.
   - To have the application select a few records from the list of retrieved employee records, deselect the records you want processed, and choose Invert from the Selection list. The application selects the previously deselected records, and deselects the remaining records.

   The application displays the Comments field where you can enter a reason for excluding that person or position.

   See: Deselecting Employees from Mass Actions, *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

8. Save your results.

9. When you are ready to run the final results, click Execute button the Final Mass Salary window.

   > **Note:** Alternatively, you can execute the actions from the Concurrent Manager, as described in Running the Final Action, *Workforce Sourcing, Deployment, and Talent Management Guide*

   On the effective date, the application updates the database with the new pay information. If more than one salary action occurs on the same effective date for an employee, the application processes the NOAC with the highest priority and returns the other NOACs to the person who submitted the RPA for update to the database.

   See: Order of Processing, *Oracle HRMS Configuring, Reporting, and System*

Administration Guide

For current and retroactive actions, you may wish to update the RPAs to the database before your normally scheduled Process Future Dated RPA concurrent manager process runs, so that users can begin processing actions based on the new values in the employee records.

See: Scheduling Future Dated RPA Actions, *Oracle HRMS Enterprise and Workforce Management Guide*

10. Print the required reports.

    You can print a list form of all employees or individual Notifications of Personnel Action in either list or standard form.

    See: Printing Mass Action Reports, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

Pay Conversions

To move Senior Executive Service employees from a matching pay plan to a pay range pay table, you run the Proces SES Pay Table Conversion concurrent manager process. The process moves employees from the Oracle US Federal Standard Pay Table (0000) to the Senior Executive Service (ESSL) pay table, and then automatically initiates a pay adjustment NOAC 894 for each affected employee.

See: Compensation Actions, page 3-4

To convert positions to a different pay table:

1. In the Submit Requests window, choose Process SES Pay Table Conversion from the Name field.
2. Click Submit.
3. Repeat these steps to convert the positions for each of your business groups.

Moving Employees to New Pay Tables

Periodically OPM issues new pay tables, such as a Federal Wage System regional pay schedules. In response, HR administrators must move affected employees from the current pay table to the new one. The process involves:

- Updating the position records and where applicable retained grade records
- Processing a NOAC 894 Pay Adjustment action for each employee or a Mass Salary action to convert several employees at once

Note: To ensure that the pay table changes occur on the same date, use the same effective date when updating the position records, retained grade records, and pay adjustment action

To move multiple employees to a new pay table:

Update the Position record

1. Display the Position window, query the position, and set your effective date to the date the new pay table begins.
2. Click Extra Information, and select US Federal Valid Grade Info.
3. In the Valid Grade field, select the appropriate grade and step from the list of values.
4. In the Pay Table ID field, select the new pay table from the list of values.
5. Click OK.
6. In the Extra Position Information window, click Validate.
7. Save your Position record.
8. Repeat these steps for each position that you need to convert to the new pay table.

Update the Person's Retained Grade record

9. Display the Person window, query the employee, and set your effective date to the date the new pay table begins.
10. Click Extra Information and select US Federal Retained Grade Record.
11. In the Retained Pay Table ID field, select the new pay table from the list of values.
12. Click OK.
13. Save the person record.
14. Repeat these steps for each person whose retained grade record you need to convert.

    See: Retained Grade Actions, *Oracle HRMS Enterprise and Workforce Management Guide*

Process a Mass Salary pay adjustment

15. In the Mass Salary window, enter an effective date that corresponds to the start date

of the new pay plan.

16. In the Pay Table ID field, enter the new pay table.

17. Complete the Mass Salary action following the usual steps.

    See: Processing a Mass Salary Action, page 3-24

    When you execute the Mass Salary, the NPA displays the From pay table values one day prior to the effective date of the pay adjustment action, and the To pay values based on the new pay table information.

To move individual employees to a new pay table:

1. Select a Salary Change Pay Adjustment action from the Navigator.
2. In the RPA window, query the employee whose pay table is changing.
3. Enter an effective date that corresponds to the start of the new pay table.
4. Click Others and select Position Extra Information. Click OK.
5. In the Extra Position Information window, select US Federal Valid Grade Info.
6. In the Valid Grade field, select the appropriate grade and step from the list of values.
7. In the Pay Table ID field, select the new pay table from the list of values.
8. Click OK.
9. In the Extra Position Information window, click the Validate button.
10. Save your Position record.
11. Return to the RPA and click Refresh to update the To Information.
12. If necessary, change the To Step information.
13. Complete the RPA and route it following your agency's practices.

    See: Processing an RPA, *Workforce Sourcing, Deployment, and Talent Management Guide*

Processing a Pay Table Change Action

When a pay table ends or no longer covers the employee's pay plan, grade, step, and Duty Station location, you can update the pay table, pay rate determinant, and the

salary fields of the affected position and employee records using a mass process. The mass process generates RPAs that document the resulting changes to the person records.

Use the Mass Salary Pay Table Identifier Change window to update employee and vacant position records from the deleted or changed special rate table to a default Oracle US Federal pay table.

To process a Pay Table Identifier Change action:

1. In the Find Mass Salary window, choose New to start a Mass Salary Pay Table Identifier Change action, or query an existing action.

   See: Finding a Mass Salary Action, page 3-23

2. Enter the criteria: a unique name, the Pay Table ID, the Effective Date, and the Locality Area.

   The first time that you process the pay table identifier change, set the effective date of the action to May 1, 2005 to ensure that you update all applicable employees and retained grade employee records.

3. As Additional Criteria, choose the Organization, Agency Code, Personnel Office ID, and Duty Station from the list of values for each field.

   Note: The volume of records affects the amount of time it takes to display the Preview run results. You can shorten this time by processing employees in batches. Enter Additional Criteria to restrict the selection.

4. Enter the Pay Plans and Pay Rate Determinant codes (PRDs) that apply to the pay table and the salary adjustment.

   If you are terminating the special rate table, to process all affect PRD records, choose All from the PRD list.

5. If the termination or change does not apply to each grade for the Pay Plan/Pay Rate Determinant, you can specify the applicable grade. Click Grade/Level to display the grade details, and enter a different grade.

6. Save your results.

   The Status field indicates the phase of the process. The status is Unprocessed until you execute the action (Submitted) and the application creates an RPA (Processed). If there is an error in executing the action, the Status field changes to Error.

   See: Error Handling, *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

7. If you require additional LACs/Remarks, other than those specified, click LACs/Remarks, and select the applicable Legal Authority Codes and Remarks from the list of values.

   See: Entering Remarks and Legal Authority Codes, *Oracle HRMS Workforce Sourcing, Deplomen*t, *and Talent Management Guide*

8. Choose Preview to view the run results.

   The Preview window lists all employees who meet the criteria as of the effective date, displaying old and new pay information for them. The application also lists employees on Retained Grade, determining their eligibility based on the PRD and Retained Grade Pay Plan.

9. Deselect the employees to exclude from the mass action.

   You can select and deselect multiple records at a time:

   - To select all the employee records, choose All from the Selection list. You can then manually deselect the records that you do not want the application to process.

   - To deselect all the employee records, choose None from the Selection list. You can then manually select the records that you want the application to process.

   - To have the application select a few records from the list of retrieved employee records, deselect the records you want processed. Choose Invert from the Selection list. The application selects the previously deselected records, and deselects the remaining records.

   The application displays the comments field where you can enter a reason for excluding that person or position.

   See: Deselecting Employees from Mass Actions, *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

10. Save your results.

11. When you are ready to run the final results, click Execute from the Final Pay Table Change window.

    The mass process initiates a:

    - NOAC 800 Change in Data Element action if the PRD changed but not the basic pay values

    - NOAC 894 Pay Adjustment if the basic pay values changed

    The mass process updates the:

    - Position's US Federal Valid Grade

- Person's Retained Grade extra information
- Locality or SR Supplement element with the applicable locality or special supplement amounts

If more than one salary action occurs on the same effective date for an employee, the application processes the NOAC with the highest priority and returns the other NOACs to the person who submitted the RPA for update to the database.

See: Order of Processing, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

For current and retroactive actions, you may wish to update the RPAs to the database before your normally scheduled Process Future Dated RPA concurrent manager process runs, so that users can begin processing actions based on the new values in the employee records.

See: Scheduling Future Dated RPA Actions, *Oracle HRMS Enterprise and Workforce Management Guide*

Within Grade Increases

Automatic Within Grade Increases (WGIs)

The application automates Within Grade Increase (WGI) actions. The only setup required is to create a Personnel Office Groupbox and link it to the Personnel Office ID.

You can schedule the Within Grade Increases (WGI) process from the Concurrent Manager, setting the frequency with which the application processes automatic WGIs.

The default WGI process automatically notifies the Personnel Office of the WGI approval and requires no response.

Default WGI Process

The application processes automatic WGIs as follows. The application:

- Runs the automatic WGI process based on the frequency you set in the Concurrent Manager.
- Identifies eligible employees 90 days before the WGI Pay Date.

  When the employee meets the WGI eligibility criteria, an automatic pay calculation determines the next step based on the pay plan's step increases.
- Generates a future effective WGI RPA.

  If the employee's pay plan is GM (Employees Covered by Performance Management and Recognition System termination provisions), the application processes an 891 NOAC (GM Within Grade Increase); otherwise, an 893 NOAC (Within Grade Increase).
- Processes the WGI action and applies the standard CPDF edits.

  If the CPDF edits pass, the WGI RPA is held until the effective date. If the edits fail, the application routes the WGI RPA to the employee's POI groupbox. If no POI groupbox is found, the application routes the RPA to the workflow administrator's groupbox.
- Reapplies the CPDF edits when the effective date is reached to take into account any intervening actions such as promotions.

  If the CPDF edits fail, the application routes the WGI RPA to the employee's POI groupbox. If no POI groupbox is found, the application routes the RPA to the workflow administrator's groupbox.
- Calculates the pay and updates the person's element record with the next WGI Due Date and Pay Date. When an employee reaches the maximum step increase, the

application automatically clears (nulls) the WGI Due Date and Pay Date segments.

WGI Eligibility

The application determines WGI eligibility by identifying employee's who have:

- a primary assignment
- a Pay Rate Determinant (PRD) of 0, 5, 6, 7, or M and whose Pay Plan is eligible for WGI

Or

- a PRD of A, B, E, or F and whose retained Pay Plan is eligible for WGI, and
- a WGI Pay Date that falls within the WGI notification period.

The application also takes into account the Office of Personnel Management (OPM) requirements, such as recent salary increases and excludes employees who have reached the maximum step in their pay plan.

Date WGI Due

When a Personnelist processes actions that affect WGI due dates, the application calculates and updates the Date WGI Due and WGI Pay Date for approved RPAs that involve base salary changes. The application does not perform this calculation and update for NOACs 888 (Denial of Within Grade Increase), 892 (Quality Step Increase), 894 (Pay Adjustment), 895 (Locality Payment).

For actions that do not involve base salary changes, such as an Appointment action, you must manually enter the Date WGI Due. Once you enter the due date, the application calculates and updates the WGI Pay Date.

> **Note:** The automatic WGI process uses the WGI Pay Date when it determines the employee's eligibility for a Within Grade Increase. Using the pay date ensures that the pay increase takes effect at the appropriate time.

Quality Step Increase (QSI) Personnel Actions

When you process a QSI personnel action (NOAC 892), the application updates to the HR database the Date WGI Due Date (Within Grade Increase) and WGI Pay Date. When the application updates the action, it only updates the WGI Pay Date waiting period if the employee receives a step increase that extends the eligible waiting period.

When processing a QSI, the Date WGI Due and the resulting WGI Pay Date are not recalculated unless the step adjustment moves the employee from a Step 3 to Step 4 or

from a Step 6 to Step 7. When an employee moves to Step 4 or Step 7, the employee shifts to a longer waiting period, and the application recalculates the Date WGI Due and WGI Pay Date to correspond to the next appropriate interval.

For example, if the employee moves to a Step 4, the product adds 52 weeks to the existing Date WGI Due and recalculates a new WGI Pay Date, so that the employee is eligible for a step adjustment in 104 weeks. If the employee moves to a Step 7, the application adds 52 weeks to the existing due and pay dates, so that the employee is eligible for a step adjustment is 156 weeks.

Administrator's Groupbox

If during the WGI process, the application does not find a Personnel Office groupbox or supervisor, it sends the notification to the Administrator's groupbox.

The notification contains information including the RPA request ID, the supervisor name, and other details which the Administrator can use to determine the Personnel Office Groupbox and enter it as appropriate. Once the Administrator corrects the problem, he or she can resubmit the notification (or abort it). When the notification is resubmitted, the application sends it to the Personnel Office or to the supervisor, depending on the preference set at implementation.

Within Grade Increase (WGI) Workflow Decisions

The default Within Grade Increase (WGI) process automatically determines eligible employees, creates an RPA, and updates a WGI when the employee's WGI Pay Date is reached. Your application administrator can configure the process during implementation to require a response from the Personnel Office or the Supervisor:

- Personnel Office receives a notification and no response is required
- Personnel Office receives a notification and a response is required
- Supervisor receives a notification and a response is required. The application then sends the notification to the Personnel Office.

See: Copying the Original Workflow Item Type, *Oracle HRMS Configuring, Reporting, and System Administration Guide*, Changing a Workflow Attribute, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

WGI with Personnel Office Approval

The application processes automatic WGIs that require the approval of the Personnel Office as follows. The application:

- Follows the default procedure for identifying employees and generating a WGI RPA.

- Routes the WGI Certification to the Personnel Office groupbox for approval.
- Processes the WGI action and applies the standard CPDF edits. If the edits pass, the WGI RPA is held until the effective date.

  Note: If it is not approved, the application cancels the automatic WGI, marks the action closed in the Workflow worklist, automatically generates an 888 NOAC (Denial of Within Grade Increase), and routes this action to the Personnel Office groupbox for manual processing.

- Follows the default procedure for when the effective date is reached, calculating the pay and updating the person's element record with the next WGI Due Date and WGI Pay Date.

WGI with Supervisory Approval

The application processes automatic WGIs that require a supervisory notification as follows. The application:

- Follows the default procedure for identifying employees and generating a WGI RPA.
- Routes a WGI Certification for each eligible employee to the employee's supervisor who approves or disapproves it.

  Note: If you didn't designate the supervisor in the employee's assignment record, the workflow functionality routes the Certification to the Administrator's groupbox.

- Routes the WGI Certification to the Personnel Office groupbox.
- Processes the WGI action and applies the standard CPDF edits. If the edits pass, the WGI RPA is held until the effective date.

  Note: If it's not approved, the application cancels the automatic WGI and routes the WGI Certification to the Personnel Office groupbox. The application marks the action closed in the Workflow worklist, automatically generates an 888 NOAC (Denial of Within Grade Increase), and routes this action to the Personnel Office for manual processing.

- Follows the default procedure for when the effective date is reached, calculating the pay and updating the person's element record with the next WGI Due Date and WGI Pay Date.

Processing Automatic Within Grade Increases (WGIs)

The system automates Within Grade Increase (WGI) actions. The only setup required is to create a Personnel Office Groupbox and link it to the Personnel Office ID.

To set up the Automatic WGI:

1. Set up the Administrator's groupbox and assign at least one user to maintain Within Grade Increases (WGI) notifications.

   See: Administrator's Groupbox, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

2. Set up a groupbox for the Personnel Office ID (POI) servicing the position so that the system can route within grade increases to the Personnel Office. A POI groupbox must be established for each POI that the agency uses to process actions.

   See: Maintaining Personnel Office ID Information, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

3. If supervisor approval is required, enter the employee's supervisor in the Assignment window.

   Note: Instead of entering the supervisor for each person, you can customize the workflow to route WGIs to the Personnel Office.

   See: Changing a Workflow Attribute, *Oracle HRMS Configuring, Reporting, and System Administration Guide*.

4. Confirm that the supervisor has been entered in the system as a user.

5. Set up a date for running the automatic WGI process in the Concurrent Manager.

   See Scheduling the Automatic WGI Process, page 3-43

Denying a WGI

The default WGI process is set up to *automatically* approve WGI actions. However, you can customize the WGI workflow so that the supervisor and Personnel Office can approve or deny an automatic WGI action. When the supervisor denies the increase, the application cancels the automatic WGI and routes the WGI Certification to the groupbox that you set up for the Personnel Office. The application marks the action closed in the Workflow Inbox and automatically generates a Denial of Within Grade Increase.

If circumstances arise where you need to manually intervene and cancel an employee's pending WGI, you can do so, and then process a Denial of WGI.

To deny a default WGI before the effective date:

Before you manually process a Denial of WGI, you cancel any pending default WGI for that person.

1. Initiate a Cancellation action to view the list of pending actions.
2. Locate the future WGI action and reroute it to your Workflow worklist.
3. Open the action and delete it.

   After you delete the pending action, you can then manually process a Denial of WGI action.

To manually process a Denial of WGI:

1. Open the Personnel Office groupbox worklist. Locate and open the WGI RPA that you want to deny.

   The RPA displays the same salary on the From and To parts of the form.
2. For the effective date, enter the date on which the WGI would have been given.
3. Continue to complete and route the RPA following your agency's procedures.

   See: Processing an RPA, *Workforce Sourcing, Deployment, and Talent Management Guide*
4. After the RPA has been approved and updated to the database, manually enter the next WGI Due Date. (The application calculates the WGI Pay Date for you.)

Scheduling the Automatic WGI Process

You can schedule the Within Grade Increases (WGI) process from the Concurrent Manager. Use the Submit Requests window to set the frequency with which the system processes automatic WGIs.

To set the run option for the WGI Certification process:

1. Display the Submit Requests window.
2. In the Name field, select Start Automatic WGI Process.
3. Set the Run Options.
4. Choose the Submit button.

Vehicle and Mileage Processing

Vehicle Repository

In the vehicle repository, you can store details of company vehicles and private vehicles used for business purposes. This information is datetracked so that you can record changes to the vehicle - such as its status (active or inactive) - over time. Storing this data in a repository removes the need for repetitive and error-prone data entry.

Use Oracle SSHR to record vehicle repository information in the Vehicle Repository Page. The vehicle repository information includes:

- Registration number
- Make and model
- Registration date
- Engine capacity
- List price and value of optional accessories fitted initially and added later
- Fiscal rating
- Status, and reason for Inactive status
- Whether the vehicle can be allocated to multiple users
- **For Russian users only:**Vehicle Category, mileage/fuel limits, usage schedule, and lease details.
- **For Russian users only:**Extra information about vehicle insurance details

  Note: You can enter multiple insurance details for the same vehicle.

- **For Polish users only:** Vehicle-card identification number, engine number, inspection dates, and additional, user-defined technical information about the vehicle

You can import company vehicle information from a car fleet management system, storing a fleet identifier and date transferred on each vehicle record.

Vehicle Allocation

Use Oracle SSHR to allocate vehicles to your employees so they can be used in

employee mileage claims (UK and Poland) or Benefit in Kind processing (Ireland). You can allocate two types of vehicles : company and private.

- You can allocate one primary company vehicle to each employee, and as many additional company vehicles as your business rules allow.
- You can allocate as many private vehicles as your business rules allow. You mark one vehicle as the default.

Business rules are held in the PQP_CONFIGURATION_VALUES table. See: Configuration Settings for Vehicle Repository and Mileage Claims, page 3-46

When you allocate a vehicle, you can override some of the configuration settings for your business group.

You can record a vehicle against a single assignment, or against all of an employee's assignments.

You can allocate vehicles from the Vehicle Repository page.

Vehicle Repository Menu and Function Names

The Vehicle and Mileage Processing module enables managers to add vehicles to the repository in Oracle SSHR. You can add details of company and private cars, and allocate vehicles to employees.

UK users can use this module to enter their mileage claims in Oracle SSHR.

Menu and Function Names

You can access this module from the following menus and functions:

User Menu Name	Function Name
Vehicle Repository	Vehicle Repository
Vehicle Mileage Claims	Vehicle Mileage Claims

Workflow

The workflow details for this module are listed below:

Workflow Process Display Name:

Private Vehicle Allocation

Configurable Workflow Attributes:

Not applicable

Workflow Process Display Name:

Vehicle Mileage Expense

Configurable Workflow Attributes:

Not applicable

Configuration Settings for Vehicle Repository and Mileage Claims

Global and localized configuration settings provide the appropriate defaults for your business groups. You can add this information using the Configuration Values Page. Select the Vehicle Mileage module and the Configuration Type Vehicle Mileage Generic Information to view, update or delete data for your business group.

Global and Localization Settings

This table displays the localization settings available.

Column	Segment	Meaning	Global	UK	Ireland
LEGISLATION_CODE	Legislation Code	-	--	GB	IE
PCV_INFORMATION_CATEGORY	Vehicle and Mileage Settings	-	PQP_VEHICLE_MILEAGE	PQP_VEHICLE_MILEAGE	PQP_VEHICLE_MILEAGE
PCV_INFORMATION1	Calculation Method	Proration or Exhaustive--determines how you apply mileage band limits across payroll periods. You can override this default when you allocate vehicles or enter claims.	--	Exhaustive	Null

Column	Segment	Meaning	Global	UK	Ireland
PCV_INFORMATION2	Maximum Company Vehicles Allowed	Limit on the number of company vehicles that can be allocated to an assignment	--	2	Null
PCV_INFORMATION3	Maximum Private Vehicles Allowed	Limit on the number of private vehicles that can be allocated to an assignment	--	--	Null
PCV_INFORMATION4	Share Company Vehicle	Yes means that the vehicle can be shared by several employees. No means the vehicle cannot be shared.	Y	N	Y
PCV_INFORMATION5	Share Private Vehicle	Yes means that the vehicle can be shared by several employees. No means the vehicle cannot be shared.	Y	Y	Y

Column	Segment	Meaning	Global	UK	Ireland
PCV_INFORMATION6	Previous Tax Year Claim Valid Until	All claims for previous tax year must be submitted before the date entered. The year in the date is ignored.	--	5 July	Null
PCV_INFORMATION7	Allow Both Company and Private Vehicles Claims	No means that you cannot allocate both company and private vehicles to an employee at the same time, nor submit mixed claims.	Y	N	N
PCV_INFORMATION8	Search Criteria for Rates Table	The default (%) means that the Rates Table list of values displays all user defined tables. To restrict the list, use a naming convention for mileage rate tables. For example, include the word "car" in all names and enter %car% in this field.	%	%	%

Column	Segment	Meaning	Global	UK	Ireland
PCV_INFORMATION9	Validate Private Vehicle Claims in Repository	Yes means that you can only enter claims against a vehicle already assigned to the employee in the repository. No means that you can enter a claim against a vehicle that is not in the repository.	Y	N	N
PCV_INFORMATION10	Vehicle Claims Correction Period in Days	An input of 30 would mean that only those claims that have a claim date within the last 30 days could be corrected.	--	--	Null
PCV_INFORMATION11	Use Sliding Rates	Yes means you use the sliding rates table for additional passengers. No means you use the rates table instead of the sliding rates table.	--	PQP_VEHICLE_MILEAGE	--

Column	Segment	Meaning	Global	UK	Ireland
PCV_INFORMATION12	Combine Taxable and NonTaxable Claims	Yes means you combine taxable and non-taxable balances to calculate rates. No means you do not combine taxable and non-taxable balances to calculate rates.	--	PQP_VEHICLE_MILEAGE	--

4

Leave and Absence Management

Leave and Absence Management Overview

Employees take paid or unpaid time off from work for a variety of purposes, such as illness or injury, vacation, medical appointments, childbirth, death of a close relative, jury duty, labor representation and professional activities. Maintaining information on employee absences for reporting and analysis is an important aspect of human resource management.

The product has predefined absence management accrual elements that define many of the absence types that the HR specialist maintains. These predefined accrual elements can accept reverse payroll data from your agency if you set up an absence type and link these elements to it.

You can also maintain leave information, such as service computation dates for annual leave, and leave authorized for prior service such as creditable service for annual leave.

PTO Accrual Plans

Many organizations permit employees to accrue hours or days of paid time off (PTO) as they work, to use for sick or vacation leave. In such organizations, setting up and maintaining PTO plans is another part of absence management.

In Oracle HRMS you can define as many absence types as you need to track employee time off, and you can group these types into categories and define absence reasons to provide further information for absence reporting. Oracle HRMS supplies the Absences Report and a number of Discoverer Worksheets to report on absences. With HRMSi, you get additional worksheets to analyze absence trends throughout your enterprise. See: Leave and Absence Management -- Reports, *Oracle HRMS Compensation and Benefits Management Guide*.

Key Concepts

To enable you to get the most out of the Absence Management and PTO Accruals

functionality, you need to understand the following key concepts:

- Absence Categories and Types, page 4-5
- Absence Elements, page 4-7
- Absence Recording, page 4-52
- Accrual Plan Administration, page 4-54
- Accrual Plan Structure, page 4-23, including elements, formulas, and the net accrual calculation rules
- Accrual Start Date for New Hires, page 4-39, and ineligibility period rules
- Accrual Bands, page 4-41, for determining accrual amounts and ceilings
- PTO Carry Over Process, page 4-42

Leave and Absence Management

Flexibility is the keynote of Oracle's approach to absence management and PTO accrual plans. You set up the rules that define how you record absences, who is entitled to paid leave of each type, and how much time can be taken.

Can I define which types of absence I want to track and the units of time in which they are recorded?

Yes, you can define as many types of absence as you require, and assign them to categories for ease of reporting. You can also define reasons for absence, to provide additional reporting information. For example, the category might be "family leave," the type might be "maternity," and the reason might be "birth." Each absence type can be recorded in days or hours.

What about study leave and other absence types that are not available to all employees?

You can control which groups of staff are eligible to take absences of each type. Absences are recorded on element entries. By linking the element to organizations, jobs, grades, employment categories, or other assignment components, you control who can take each absence type.

How do I record absences?

You can use Batch Element Entry (BEE) to make entries of absence elements, and other timecard data. You can record the number of days or hours absent, and any other information you have designed the element to hold (such as absence reasons). If you

use Oracle Time & Labor, or another time entry application, you can send timecards to BEE using the API.

Alternatively, employees can enter their own absences through self-service, or their line managers can do this for them. These absence records can be submitted for approval before they are recorded in Oracle HRMS.

You can also use the Absence Detail window to enter proposed or actual absences, and to see the effect of the absence on any corresponding PTO accrual plan.

How do absence types relate to PTO accrual plans?

Each accrual plan is associated with one absence element (and hence one absence type). Each entry of time off reduces the net accrual on the plan. You can also associate any number of other elements with a plan and determine how entries to these element affect the accrual calculation. This is useful for recording time bought or sold, or unused PTO brought into a new plan on enrollment.

What rules govern PTO accrual plans in Oracle HRMS?

A few types of accrual plan are seeded with the system. However, accrual plan rules vary from enterprise to enterprise, and country to country. Oracle HRMS provides you with the flexibility to define your own plan rules. Here is just a selection of the rules you can set up:

- The length of the accrual term (often one year), and the start date, which may be fixed (such as 1 January) or vary by employee (such as the anniversary of the employee's hire date). Some plans have no start date, but always calculate accruals for the previous 12 months (or other length of time).
- The frequency of accrual, such as monthly, or once each pay period. In other plans, employees receive their full entitlement up front, at the beginning of the accrual term.
- The amount of accrual and any ceiling on the amount that can be held. These figures may be fixed or vary by length of service, grade, time worked, or other factors.
- What happens to unused PTO at the end of the accrual term.
- Rules for part time employees, and for employees with suspended assignments
- Rules for new hires, including when they can begin accruing PTO and when they can begin to use it.

How do we track and analyze absences and net accrual entitlement?

When you enter an absence you can see, at the employee level, how much absent time

of the same type has already been recorded for the employee. If the absence affects net entitlement in a PTO accrual plan, you can see current and projected entitlement figures for the plan. In another window, you can view a full absence history for an employee.

Across all employees, you can view absences of a certain type or category, within a specified time period. Using the Absences Report, you can track absences of one or more types for employees in each organization.

Employees can view their own absence history on the web using Self Service, and line managers can do the same for all the employees they manage.

Absence Management Setup

Absence Categories and Types

Oracle HRMS provides a convenient way to maintain information about the various absence types your enterprise recognizes. To facilitate reporting and analysis of employee absences, you can distinguish between *absence types* and *absence categories*. An absence category is a group of related absence types.

Some absence categories may be predefined for your legislation. The table below contains examples of absence categories and types, for illustration purposes only. You can extend the list of predefined categories and define your own absence types, as required.

Example Absence Categories and Types:

Absence Category	Absence Type
Medical Leave	Illness or Injury
	Work-related Injury
	Work-related Illness
	Medical Appointment
Family Leave	Paid Maternity/Paternity
	Unpaid Maternity/Paternity
	Dependent Care
Personal Leave	Compassionate Leave
	Personal Business
Professional Leave	Certification Classes
	Meeting Attendance

Also, to assist with absence reporting and analysis, you can provide *reasons*to select from when recording employees' time taken for an absence type. For example, if you

need information to analyze the particular family-related responsibilities that cause employees to miss work, you can define reasons for absence types as follows:

Example Absence Category, Types and Reasons:

Absence Category	Absence Type	Absence Reasons
Family Leave	Paid Maternity/Paternity	Birth of a child
		Adoption of a child
	Dependent Care	Child Care
		Elder Care
		Disabled Care

Setup of Absence Types

Setting up each absence type is essentially a two-step process. One step involves defining the type, that is, entering its name, and optionally selecting a category and reasons for it. The other step involves defining an element to associate with the type. This element serves two important purposes:

- It provides a way to *maintain a running total* of time taken for the absence type. The Absence Detail window shows the running total of absences with an end date before the effective date, and with an absence duration on record. Each absence can add to, or subtract from, the running total, depending on how you define the absence type.

- It provides a way to *restrict employee eligibility* for the absence type. The links you build for the element establish which employees are eligible to use the type.

  For example, if the absence type compassionate leave is available only to full time employees, you link its element to the assignment category Full Time.

To hold a single running total of time taken for two or more absence types, you associate all the types with the same absence element. For example, your absence category Personal Leave may include two absence types you need for certain reporting purposes, Compassionate Leave and Personal Business. However, you require just one running total to be kept of employees' time taken for both types of personal leave. In this case you simply associate both absence types with the same absence element.

> **Note:** If you want to use absence types without recording accrued totals or eligibility rules, you can define the type with no associated element.

Absence Elements

You can associate each absence type with a recurring or nonrecurring absence element. Each element has an input value with either hours or days as its unit of measure.

Using a Nonrecurring Element

Nonrecurring element entries are valid for one payroll period. When you enter an absence of a type associated with a nonrecurring element, the application creates an element entry for the period in which the absence start date falls. For example, if you enter an absence that starts on 4 May for someone on a monthly payroll, the entry is dated 01 May to 31 May.

The entry is only created when you enter the absence end date, and you must enter the absence duration at the same time. The duration can be defaulted if you set up an absence duration formula. The full value of the absence duration is recorded in the absence element entry, even if the end date falls outside of the payroll period.

Using a Recurring Element

Important: This option is only available if you use Oracle Payroll and the Proration functionality is enabled in your localization.

UK Users: If you use the Statutory Absence Payments feature you must continue to use nonrecurring elements to record long term sick leave.

Use this approach if you want to begin processing absences before end dates are recorded. You do not enter absence duration on the recurring element entry. Instead, you use a payroll formula to calculate the absence duration to be processed in each payroll period. Use the absence duration formula to calculate the duration displayed on the Absence Detail window. This value is deducted from the current PTO accrual when you enter an end date for an absence type that is associated with a PTO accrual plan.

Recurring element entries start on the absence start date and end on the absence end date (if there is an end date). If the absence ends in the middle of a payroll period, the payroll run detects and processes the absence using the proration functionality.

Absence Balance Information

When you define an absence type, you specify whether the application should maintain an increasing balance, a decreasing balance, or no balance of time off. The balance isa running total of the hours or days an employee has taken for the absence type, as recorded in the Duration field.

Increasing Balances of Time Taken

As you would expect, an increasing balance for an absence type starts with no time entered, and increases as you enter employees' hours or days absent. For example, if the absence type Compassionate Leave has an increasing balance, the balance starts from zero for each employee and increases by the number of hours entered for each absence of this type.

Increasing balances are appropriate for most absence types. For absence types for which your enterprise sets a maximum time allowed, the system issues a message when an entry of time absent exceeds this maximum, or Oracle Alert can notify you when an employee reaches the maximum time or takes excess time.

See: *Oracle Alert User's Guide*

When defining an absence type for a PTO accrual plan, you give it an increasing balance that shows the employee's accrued time taken. When you record an absence using the Absence Detail window, you can see the amount of accrued time a plan participant has available for use as vacation or sick leave.

Decreasing Balances of Time Remaining

If your enterprise sets a maximum time allowed for an absence type, you have the option of setting up a *decreasing balance* for this type, instead of an increasing balance. (If the absence type is used for a PTO accrual plan, it is simpler to use an increasing balance and an accrual formula that records an up-front accrual amount.)

For example, suppose your enterprise allows certain employees 32 hours leave per year for professional development. The Professional Leave absence type can have a decreasing balance, and an initial entry of 32 hours.

If you record an employee absence of 4 hours for this absence type, the decreasing balance shows 28 hours still available to be taken.

Decreasing absence balances require more maintenance than increasing balances. They need a prorated initial balance entry for all eligible new hires throughout the year, and require resetting each year for all eligible employees.

Notice that an absence type cannot have both a decreasing and an increasing balance; it has one or the other.

Initializing an Absence Balance

You can initialize or adjust an absence balance using the Element Entries window, or the Element Entry API. You can also initialize a decreasing balance by entering a negative value using BEE. For example, if you enter -16 hours using BEE, a decreasing balance starts at 16 hours. However, be aware that using BEE creates an absence record that will show on employees' absence history.

Referencing Absent Time in Payroll Runs

You can define an absence element as an Information element or an Earnings element.

Using an Information Absence Element

If you define an Information absence element, you can use a recurring Earnings element to manage the calculation and payment of vacation and sick pay. When you define the absence element, you check the Database Item box for the input value that holds the absence balance. Entries to this input value then become database items that formulas for payroll calculations can access.

US Users: You will typically set up your absence elements in the Information classification for employees who do not submit timecards (Timecard Required = No on the Statutory Information tab of the Assignment window). If you are using the seeded Regular Salary or Regular Wages elements, the payroll run creates indirect results for the seeded Vacation Pay or Sick Pay elements when it finds absence entries in the Vacation or Sickness categories. These elements appear on the Statement of Earnings, but the Information elements do not. You do not need to set up any additional absence Earnings elements for these employees.

Other localizations: Typically, you define an Earnings element to have a skip rule that triggers processing when it finds an entry for the absence element. The element's payroll formula uses the database item for the entry value so that it automatically gets the sum of all the entries in the pay period. Then, using the salary database item to get the salary or hourly rate, it calculates the total absence pay for the period. You can also use the formula to reduce regular earnings for the period so employees do not get paid twice.

The advantage of this approach is that it simplifies the processing of absence payments into one calculation.

Using an Earnings Absence Element

Select the Earnings classification for absence elements if you want to process absences individually in each payroll period. You can use these elements with Oracle Time and Labor. This approach creates a one-line entry on the statement of earnings for each absence type. Typically, you would create nonrecurring Sick and Vacation Pay earnings elements. You can also create different absence elements for each rate or multiple of pay if the element must appear on the statement of earnings as a different line item.

US Users: For employees who *do* submit timecards (making entries in BEE to the Time Entry Wages element), you can create your absence elements as Earnings. This also applies if you do not use the seeded Regular Salary and Regular Wages elements, and you want your absence payment to show on the Statement of Earnings. Use the Earnings window to initiate the element. Select the Category *Regular* and check the Reduce Regular box.

Retrospective Entries and Adjustments

Oracle Payroll users: If you enter or update an absence retrospectively, or you delete an absence that started in the past, these changes are listed in the Retro Notification report the next time you run this report. This enables you to use RetroPay to correct any payroll processing.

Setting Up Absence Management

Use the following steps to set up absence management.

1. If you want to associate recurring elements with absence types, you must set up proration and retro notifications. This ensures that absences that end in the middle of a payroll period are detected and processed by the payroll run, and that retrospective changes to absences are recorded in the Retro Notifications report.

   Note: Proration is available to Oracle Payroll users in selected localizations only.

   To set up proration and retro notifications, you must:

   - Find all the dynamically generated triggers for the table PAY_ELEMENT_ENTRIES_F in the Dynamic Trigger Definition window. (You must deselect the Insert triggering action so that all the triggers are returned by the Find.) Make sure the Generated and Enabled check boxes are checked for all the continuous calculation triggers.

   - Query the Incident Register functional area in the Functional Area Maintenance window, and enter the business groups for which you want to enable proration on the Business Group tab. Optionally, you can further secure the proration functionality by selecting payrolls on the Payroll tab.

   - Use the Table Event Group window to group the two events that you need to detect to prorate absences - datetracked updates to absence start date and absence end date. Select Proration for the event group type, and Payroll Period for the proration period. In the Datetracked Events region, select DateTrack Update as the update type, PAY_ELEMENT_ENTRIES_F as the table, and EFFECTIVE_START_DATE and EFFECTIVE_END_DATE as the columns.

   - Use the Table Event Group window to group the datetracked events on the PAY_ELEMENT_ENTRIES_F table you want to track in the Retro Notifications report. The event group type is Retro.

   See: Setting Up Proration and Retro Notifications, *Oracle HRMS Payroll Management Guide*

2. Define an absence element, with at least one input value, for each absence type. Link this element to define who is eligible.

   See: Defining and Linking an Absence Element, page 4-12

   > **Note:** Omit this step if you are setting up an absence type for which you do not need to maintain a running total of time taken or remaining, and you do not need eligibility rules.
   >
   > **US and Canada Payroll only**: If you want to process the absence element in the payroll run, generate it using the Earnings window.
   >
   > **Mexico only**: If you want to process the absence element in the payroll run, generate it using the Element Design Wizard.

3. Define categories of absence types as values for the Lookup Type ABSENCE_CATEGORY, and your absence reasons as values for the Lookup Type ABSENCE_REASON. In some legislations there are predefined categories and reasons.

   You can select the same reason for different absence types.

   See: Adding Lookup Types and Values, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

4. Define each absence type, and associate it with an absence element.

   See: Defining an Absence Type, page 4-14

   > **Note:** To keep a single record of employees' time taken for two or more different absence types, you can associate the same element with several types.

5. For an absence type with a decreasing balance, use BEE or the Absence Detail window to initialize the absence balances for employees eligible for the type.

   If you want to make batch entries, see Making Batch Element Entries Using BEE, *Oracle HRMS Configuring, Reporting, and System Administration Guide*.

6. If you defined a recurring element, create a payroll formula that handles proration to process the element and calculate the appropriate absence duration in each pay period (taking into account the number of days or hours in a month, working and shift patterns, public holidays, and so on).

   Sample Proration Formulas, *Oracle HRMS FastFormula User Guide*

7. If you want to set up the application to calculate the duration of an absence automatically, you have two options:

- Set the HR: Schedule Based Absence Calculation profile option to Yes, if you want the application to use the worker's schedule and calendar events from their primary assignment to calculate absence durations. To use this option, you must first define schedules and calendar events that are relevant to your enterprise and assign them to various levels in your work structures.

  See: Setting Up Availability , *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

- To calculate absence duration from the absence start and end dates without using the schedules and calendar events information of an employee, create a basic formula. If you want the absence duration calculation to update automatically each time you change the absence dates, you must set the profile option HR: Absence Duration Auto Overwrite to Yes.

  See: Writing Formulas to Calculate Absence Duration, *Oracle HRMS FastFormula User Guide*

Defining and Linking an Absence Element

Define an absence element in the Element window.

US and Canada Payroll only: If you want to process the absence element in the payroll run, initiate it on the Earnings window instead of using the Element window.

Mexico only: If you want to process the absence element in the payroll run, initiate it with the Element Design Wizard instead of using the Element window.

Spain only: If you want to compute the social security earnings you must use the predefined elements for Sickness Details, Maternity Details, Part-time Maternity Details, Pregnancy-at-Risk Details and Adoption Details.

To define an absence element:

1. Set your effective date to a day on or before the start of the first payroll period for which you want to enter absences.

2. Enter a name for the element, and select the classification Information or Earnings.

   Tip: Give the absence element and its absence type the same name, or coordinate the element name with the type name. For example, for the absence type Compassionate Leave, name the element Compassionate Leave or Compassionate Leave Absence.

3. Enter a reporting name, for display on reports.

4. If you are creating a recurring absence element, select your absence element event

group in the Proration Group field. This field is only available to Oracle Payroll users in certain localizations.

5. Select the processing type.

   - Select Recurring if you want to be able to process absences that do not have an end date and you want to apportion absence time correctly across payroll periods.

     Note: You can only select Recurring if you use Oracle Payroll and the Proration functionality is enabled for your localization. (In this case, you should see the Proration Group field on the Element window)

   - Select Nonrecurring if it is acceptable to record the full duration of the absence in the payroll period in which the absence starts.

6. Select the termination rule. This is normally Actual Termination.

7. Check the Multiple Entries Allowed box if you want to enable employees to have:

   - (Nonrecurring) More than one instance of the absence type within a pay period.

   - (Recurring) Overlapping entries of the absence.

8. If this is an absence element for a PTO accrual plan, do not select Process in Run. Uncheck this box if necessary.

   If the element is recurring, ensure that the Process in Run box is checked so that the absence duration can be calculated by the payroll run.

9. If employees must be a certain age or have served for a certain number of years to be allowed this absence, enter this information in the Qualifying Conditions region.

   Note: If this is an absence element for a PTO accrual plan, the plan setup relates length of service to accrued time off. Do not make an entry here for length of service.

10. Save the element, then choose the Input Values button.

11. In the Input Values window, create an input value to hold the amount of time taken. Select units of Day, Hours in HH format, or Hours in Decimal Format (to one, two, or three decimal places).

    If you are defining an absence element for a PTO accrual plan, give the input value the name Hours or Days, to accord with the unit of measure of the plan. When you

define the plan using the Accrual Plan window, this input value name appears in the Units field of the Absence Information region.

> **Important:** If you select Required for an input value, you must select this input value on the Absence Attendance Type window. Do not select Required for more than one input value.

New Zealand users only: You must also create the following input values:

- Seasonal Shutdown - for Annual Leave and Annual Leave Termination elements
- Number of complete weeks - for the Special Leave and Protected Voluntary Service Leave elements.

12. You can define minimum and maximum days or hours that can be entered in an absence record. If you do this, select what happens if these limits are breached:
    - Select Warning for the system to warn users but allow them to breach the limits.
    - Select Error for the system to issue an error message and prevent users from saving an entry that breaches the limits.
13. Save your work.

To link the absence element:

1. Set your effective date to a day on or before the start of the first payroll period for which you want to enter absences.
2. In the Element Link window, select the absence element you defined.
3. Select eligibility criteria for this absence element, if appropriate. If you want to make the element available to all employees, do not select any criteria.
4. Save the link. Then define the absence type associated with this absence element.

See: Defining an Absence Type, page 4-14

Defining an Absence Type

Use the Absence Attendance Type window to define an absence type and associate it with an element.

To define an absence type:

1. Enter a name and category for the absence type.

   Tip: Give the absence type and its associated element the same name, or coordinate the type name with its element name. For example, name the absence type for a PTO accrual plan Salaried Sick PTO Plan, and its associated element, Salaried Sick PTO Absence.

2. Select Allow Absence Overlaps if absences of this type can overlap other absences. If you deselect this option, the application warns you if you enter an absence that overlaps another absence of any type.

3. In the Associated Element region, select the element defined for this absence type. Select the element's input value that holds days or hours. The unit of measure for the input value appears in the Units region.

4. In the Balance region, select *Increasing* if you want each absence entry to add to a running total of time taken to date. The running total covers all absence types associated with the selected element. Select increasing balances for absence types for PTO accrual plans, and for most other absence types.

   For absence types that have a set maximum amount of hours or days allowed, you may select *Decreasing*. In this case, each absence recorded reduces an initial balance to show time remaining to be taken for the type.

   Note: Decreasing balances require more maintenance. You must enter an initial balance amount for each new hire eligible for the absence type, and must initialize the balance for all eligible employees at the start of each year.

5. Optionally, select reasons that are valid for entries of this type of absence.

6. Save the absence type.

Setting Up an Absence Benefit Plan

You can set up absence benefit plans so that the Participation process checks employee eligibility for the plans when it processes absence life events. You set up participant eligibility profiles to determine which absence categories or types are valid for each plan. Both Standard and Advanced Benefits users can set up absence benefit plans.

Tip: Use the same effective date, such as 01 Jan 1951, for all your definitions

UK Users only: There are **sample plans** provided for Occupational Sick Pay and Occupational Maternity Pay, called PQP OSP Plan and PQP OMP Plan. You can copy these plans using Plan Design Copy and configure them to meet your needs. If you are not using the sample plans, see: Creating Your Own Absence Plan, page 4-18.

Using the Sample Plans

To set up an absence benefit plan using a sample plan:

1. Set the BEN:Enable Absence Plans Functionality profile option to Yes for the users or responsibilities who will enter absences for absence benefit plans, if you want them to run the Participation Process to process the absence life events. This displays the Enroll Absences button on the Absence Detail window.

   See: System Profile Values Window, *Oracle Applications System Administrators Guide*

2. In the Submit Requests window, select the process *Plan Design Copy - Import*In the Data File parameter, enter the file **pqgbgapl.ldt**, which is located at patch/115/import/us in Product Top: PQP.

   See: Importing a Plan Design From a File, page 1-103

3. Use Plan Design Copy to copy the imported plan. In the Process Name field, enter PQP GB OSP/OMP Absence Plan.

   See: Copying a Program or Plan, page 1-99.

   Tip: First make a copy of the seeded plan in your business group without entering any prefix or suffix for your copy. Select the first option on the Enter Target Details page, which is "Reuse existing objects if current name exists in the target." Then you can make further copies of this copy to configure your plans. When you make further copies, you can select the same option if you want plans to share objects, such as eligibility profiles, or you can select the option "Reuse existing objects if new name exists in target".

4. Write or configure any formula rules you require, such as the following:

   Important: The formulas attached to the sample plans are for UK users only. In other legislations, you must create your own formulas.

Rule	Formula Type	Supplied Examples (UK Only)
Eligibility rule	Participation Eligibility	PQP_OSP_PARTICIPATIO N_ ELIGIBILITY_PROFILE_OT HER_RULE PQP_OMP_PARTICIPATIO N_ ELIGIBILITY_PROFILE_OT HER_RULE
Person Change	Person Change Causes Life Event	PQP_GB_BEN_ABSENCE_S TART_LER_ PERSON_CHANGE_RULE, PQP_GB_BEN_ABSENCE_E ND_LER_ PERSON_CHANGE_RULE, PQP_GB_BEN_ABSENCE_ DELETE_LER_ PERSON_CHANGE_RULE
Extra Input Rule	Extra Inputs	PQP_OSP_STANDARD_RA TES _GENERAL_EXTRA_INPU T_RULE PQP_OMP_STANDARD_R ATES _GENERAL_EXTRA_INPU T_RULE
Length of service rate	Length of Service Calculation	PQP_OSP_STANDARD_RA TES _CALCULATION_METHO D_VALUE_RULE PQP_OMP_STANDARD_R ATES _CALCULATION_METHO D_VALUE_RULE

See: Total Compensation Formula Types, *Oracle HRMS FastFormula User Guide*

5. Ensure you have Program/Plan years set up.

   See: Defining a Program or Plan Year Period, page 1-95

6. Select the appropriate Person Changes for the three absence life event reasons,

created by the Plan Design Copy process. There is one life event reason for each Life Event Operation Code: Start Event, End Event, Delete Event.

> **Note:** You only perform this step once. You use the same life event reasons for all your absence plans.

- The Start Absence life event reason must detect changes to any columns except the end date. Use the Person Change formula rule you created in step 4 to define the columns you want to use to trigger this life event.

  UK users: You must attach the PQP_GB_BEN_ABSENCE_START_LER_PERSON_CHANGE_RULE formula to the absence start life event

- You can also use formula rules to define the person changes that trigger the End Absence and Delete Absence life events too.

See: Life Event Definition, page 5-48

7. Query the absence plan in the Plans window, and change the status from Pending to Active. Choose the Details button and select your plan periods.

   See: Defining a Benefits Plan, page 1-77

You have completed the plan setup based on a seeded plan, but make sure you complete the Next Steps, page 4-22.

Creating Your Own Absence Plan

To set up an absence benefit plan without using the sample plans:

1. Set the BEN:Enable Absence Plans Functionality profile option to Yes for the users or responsibilities who will enter absences for absence benefit plans, if you want them to run the Participation Process to process the absence life events. This displays the Enroll Absences button on the Absence Detail window.

   See: System Profile Values Window, *Oracle Applications System Administrators Guide*

2. Write or configure any formula rules you require, such as the ones shown in the following table.

   > **Note:** UK users: If you want to use the supplied formulas, you must run the following scripts:
   >
   > - PQPGBLER.SQL script to create the life event formulas
   > - PQPGBOSP.SQL script to create the OSP formulas
   > - PQPGBOMP.SQL script to create the OMP formulas

Rule	Formula Type	Supplied Examples (UK Only)
Eligibility rule	Participation Eligibility	<base name>_OSP_PARTICIPATION_ ELIGIBILITY_PROFILE_OTHER_RULE <base name>_OMP_PARTICIPATION_ ELIGIBILITY_PROFILE_OTHER_RULE
Person Change	Person Change Causes Life Event	PQP_GB_BEN_ABSENCE_START_LER_ PERSON_CHANGE_RULE, PQP_GB_BEN_ABSENCE_END_LER_ PERSON_CHANGE_RULE, PQP_GB_BEN_ABSENCE_ DELETE_LER_ PERSON_CHANGE_RULE
Extra Input Rule	Extra Inputs	<base name>_OSP_STANDARD_RATES _GENERAL_EXTRA_INPUT_RULE <base name>_OMP_STANDARD_ RATES _GENERAL_EXTRA_INPUT_RULE
Length of service rate	Length of Service Calculation	<base name>_PQP_OSP_STANDARD_RATES _CALCULATION_METHOD_VALUE_RULE <base name>_PQP_OMP_STANDARD_RATES _CALCULATION_METHOD_VALUE_RULE

See: Total Compensation Formula Types, *Oracle HRMS FastFormula User Guide*

3. Define a new plan type, selecting Absences as the Option Type.

   See: Defining Plan Types, page 1-75

4. Ensure you have Program/Plan years set up.

   See: Defining a Program or Plan Year Period, page 1-95

Eligibility Profiles

5. Create a participant eligibility profile for each absence benefit plan.

   Important: Ensure that these profiles are exclusive: participants must only be eligible for one plan at a time.

   - Ensure that your eligibility profile checks that the absence is for the appropriate absence category, such as sickness. You can further restrict eligibility to one or more absence types.

   - **UK users:** Choose the Others tab and select Rule. Select the supplied rule <base name>_OSP_PARTICIPATION_ ELIGIBILITY_PROFILE_OTHER_RULE for an OSP scheme, or <base name>_OMP_PARTICIPATION_ELIGIBILITY_PROFILE_ OTHER_RULE for an OMP scheme, or another formula that you have created.

   See: Defining an Eligibility Profile, page 1-120

Life Event Reasons

6. Create three life event reasons, all of type Absence, and one for each Life Event Operation Code: Start Event, End Event, Delete Event.

   Note: You only perform this step once. You use the same life event reasons for all your absence plans.

   - Select the Person Changes that trigger these life events. The table is PER_ABSENCE_ATTENDANCES. Select columns and values as follows:

Life Event	Column	Old Value	New Value
Start Absence	DATE_START	any value	any value
End Absence	DATE_END	any value	any value
Delete Absence	DATE_START	any value	no value

   - The Start Absence life event reason must detect changes to any columns except the end date. Use the Person Change formula rule you created in step 2 to

define the columns you want to use to trigger this life event.

UK users: You must attach the PQP_GB_BEN_ABSENCE_START_LER_PERSON_CHANGE_RULE formula to the absence start life event

- You can also use formula rules to define the person changes that trigger the End Absence and Delete Absence life events too.

See: Life Event Definition, page 5-48

Plan

7. Define the absence plan.
   - Select your plan type.
   - Select May Not Be In Program for the Plan Usage.

     See: Defining a Benefits Plan, page 1-77
   - On the Eligibility Rates tab, check all the check boxes. Select Participant in the Eligibility Check field.

     See: Defining Eligibility and Activity Rate Requirements for a Plan, page 1-80
   - On the Not in Program tab, enter a Sequence number and the activity rate details.

     UK users: Select Per Pay Period for the Enrolment Rate/Frequency and select a value, such as Monthly, for the Activity Reference Period.

     See: Defining a Plan Not in a Program, page 1-83
   - Choose the Details button and select your plan periods. Return to the Plans window.

     See: Maintaining Plan Related Details, page 1-86
   - Choose the Plan Eligibility button then the Eligibility button. Select your eligibility profile on the Profile tab. Close this window.

     See: Defining Participant Eligibility Criteria for a Compensation Object, page 1-69
   - Choose the Life Event button. Select your End Absence life event and select Ineligible in the Eligible/Ineligible field.

     See: Associating a Life Event Reason With a Compensation Object, page 1-71

Enrollment Requirements

8. Define the plan enrollment requirements.

- Choose the General tab, the Plan tab, then Enrollment. Select Automatic in the Method field.
- Select Current Can Keep or Choose; New Can Choose as the Enrollment Code.

  See: Defining an Enrollment Method for a Plan, page 5-86
- Choose Coverage. Select Event as the Enrollment Coverage Start Date Code and End Date Code.

  See: Defining Enrollment Coverage Requirements for a Plan , page 5-87
- Choose Rates. Select Event as the Rate Start Date Code and End of Pay Period as the Rate End Date Code.
- Choose the Timing tab and the Life Event tab. Select Life Event as the Enrollment Type. Select your Start Absence life event in the Life Event column and select *When Elections are Made* as the Close Enrollments Date to Use.

  See: Defining Requirements for a Life Event Enrollment for a Plan, page 5-97
- Click on General and choose the Periods region. Select *As of Event Date* for the Enrollment Period Start Date, and *End of Pay Period* for the Enrollment Period End Date.

Next Steps

Define or generate the elements required for the plan, then define a standard rate for the plan to calculate values for the absence element entry.

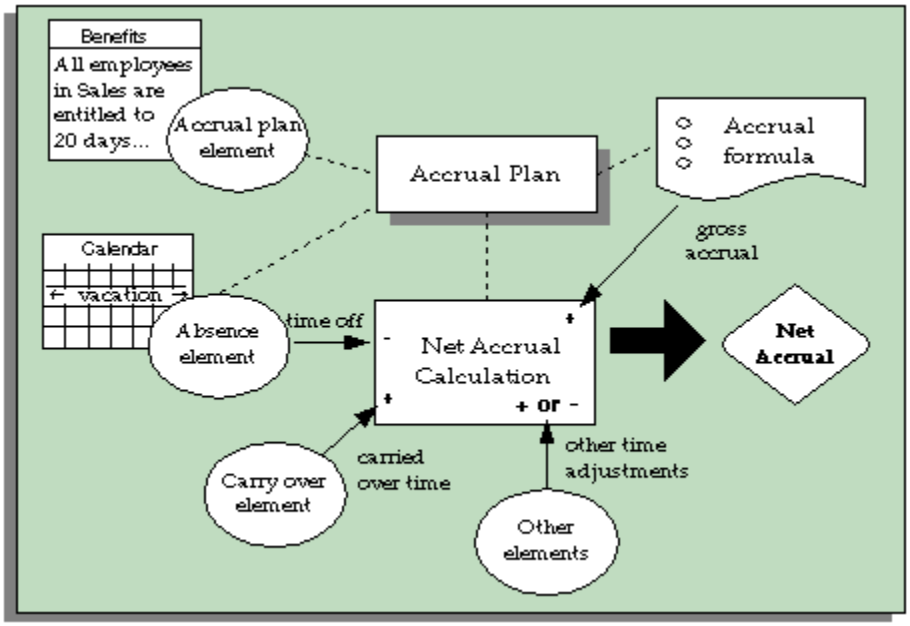
UK Users: Use the Absence Scheme Creation template, then set up the generated user-defined tables, and define a standard rate for the absence plan (or configure the copied rate if you are using a copy of the seeded plans).

PTO Accruals Setup

Accrual Plan Structure

In Oracle HRMS, accrual plans are based on elements, formulas, and a net accrual calculation. All of these are available for you to configure so you have complete control over the rules underlying your plans.

Oracle HRMS does not store net accrual totals. It calculates gross accruals dynamically by calling the Accrual formula. The net accrual calculation specifies the element entries that should add to or subtract from this figure to create the net entitlement.



If you use Oracle Payroll, you can set up your accrual plan so that gross accruals are stored in a payroll balance. Each payroll run retrieves the latest balance and calls the accrual formula to calculate new accruals since the end of the last payroll period. This approach - using a payroll balance - is optional but provides performance enhancements if you need to calculate accruals in a batch process. See: Accrual Balances Maintained By the Payroll Run, page 4-28.

The table below further explains the role of the elements, formulas, and net accrual calculation.

This aspect of an accrual plan ...	Is for...	Generated Automatically?
Absence element	Storing entries of days or hours absent.	No
Accrual plan element	Enrolling employees in the accrual plan.	Yes
Carry Over element	Storing unused time at end of plan term; Carry Over process makes entry.	Yes
Residual element	Storing unused time that cannot be carried over at end of plan term; Carry Over process makes entry.	Yes
Payroll balance element	Feeding the payroll balance that stores gross accruals; payroll run makes entry.	Yes
Tagging element	Identifying absences and other element entries that have been entered retrospectively and not yet included in the gross accrual calculation. The payroll run creates a tagging element entry and updates accrual accordingly.	Yes
Other elements	Storing other amounts of time to be included in the net accrual calculation (such as time bought and sold); you create any other elements your plan requires.	No
Accrual formula	Calculating gross accrual to date	No, but predefined examples

This aspect of an accrual plan ...	Is for...	Generated Automatically?
Carry Over formula	Returning the maximum permitted time an employee can carry over, and the effective date and expiry date of the carry over; called by the Carry Over process.	No, but predefined examples
Ineligibility formula	Checking whether an employee is eligible to use accrued PTO on the effective date of an absence entry made by BEE (Batch Element Entry); called by BEE validation. NOTE: This formula is not required if you enter the plan's ineligibility period in the Accrual Plan window.	No, but predefined examples
Payroll formula	Calling the accrual formula during a payroll run and returning the gross accrual to the payroll balance element, which feeds the payroll balance.	Yes
Net accrual calculation	Defining which element entries add to or subtract from the gross accrual to create net.	Yes, but you can update
Payroll balance	Storing the gross accrual so that batch processes do not have to recalculate the accrual from the beginning of the accrual term each time they are run.	Yes

Accrual Elements

For each accrual plan, you define and link an absence element and then define a plan using this absence element. The system generates elements for the plan.

Generated Elements

The system generates the following elements when you save a new accrual plan:

- An element representing the plan and which has the same name as the plan. You use this element to enroll participants in the plan.
- An element to hold participants' unused PTO that is available for carry over to the next year.
- An element to hold *residual PTO*, that is, unused PTO not available for carry over under plan rules.

If you use Oracle Payroll and have elected to store gross accruals in a payroll balance, the system also generates:

- An element to feed a payroll balance. This element receives an entry from the accrual formula during a payroll run.
- A tagging element, which the payroll run uses to keep track of retrospective absences (and other element entries included in the net accrual calculation) that need to be included in the gross accrual calculation.

The Carried Over and Residual elements have input values that automatically receive entries when you run the PTO Carry Over process:

- Hours or Days (depending on the plan's units)
- Effective Date
- Expiry Date (on the Carry Over element), which is the date by which the employee must use the carried over time.

Oracle HRMS automatically links these elements using the same link criteria that you created for the absence element associated with the plan. If you change the links for the absence element, you should also update the links for the other plan elements.

Other Elements

Your enterprise may require other elements to reflect individual plan policies. For example:

- Employees may be permitted to sell back PTO they have accrued but not used.
- Employees may also be permitted to purchase additional PTO in certain circumstances.
- You may need to store time in a special balance after running the Carry Over

process, such as a balance of time that can be carried over for several plan terms and is not subject to the usual expiry date

- You may need an element for entering unused PTO from another plan that is being transferred to this plan on enrollment.

These policies are not standard across enterprises. So, in Oracle Human Resources you can define elements, configured to your own requirements, for entering or storing these accrual amounts.

Accrual Formulas

Most accrual plan rules are incorporated in two formulas:

- An Accrual formula, which calculates the amount of PTO accrued at any given time, and

- A Carry Over formula, which returns the maximum amount of accrued time that a plan participant can carry over to the next plan period, the date on which this carry over is effective (normally the first day of the new accrual term), and any expiry date by which the carried over PTO must be used, or forfeited.

When the Formulas Are Run

The Carry Over formula is called by the Carry Over process. When the Accrual formula is run, it always receives a calculation date as input, as shown in the following table.

Accrual formula is run when you:	Calculation date is:
Enter an absence associated with an accrual plan and open the Associated Accrual Plans window. Accrual formula is run three times to calculate the time accrued before and after the current absence, and at the end of the plan term	Start date of the absence, or Day before the start date of the absence, or End of plan term
View PTO entitlement in the Accruals window	Effective date entered in Change Effective Date window
Run the Carry Over process	Entered as a parameter
Run your payroll and some other batch processes (Oracle Payroll users only)	The date paid, or date earned, of the current payroll run - determined by the PTO Balance Type selected for your business group

Examples of Plan Rules

These formulas can access certain data that is available as database items. For example, they can use hire date, plan enrollment date, grade, job, assignment status, assignment category (full time/part time), hours worked, or pay elements to determine:

- The employee's entitlement each accrual period
- Any accrual ceiling beyond which the employee will accrue no more time
- The maximum amount that can be carried over to the next accrual term

These values can be embedded in the formulas, or entered in a user table. If they vary with length of service, which is a common criterion for accrual bands, they can be entered in the Accrual Bands window when you define the accrual plan.

Some accrual plans allow new hires to accrue time from the date of their hire. Others allow accrual to begin at the start of the next accrual term, or six months after hire, or some other start date. Some plan rules incorporate a period of ineligibility, when a new employee can accrue time but not use it. Start rules such as these can be incorporated in your Accrual formulas.

> **Note:** Depending on how you define the ineligibility period, you may have to associate an Ineligibility formula with your plan, if you want to make absence entries using BEE (Batch Element Entry). See: Period of Ineligibility, page 4-39.

Adding Your Own Plan Rules

Some formulas are seeded. You can use these, as supplied, or use them as models to create your own, incorporating the rules required for your accrual plans.

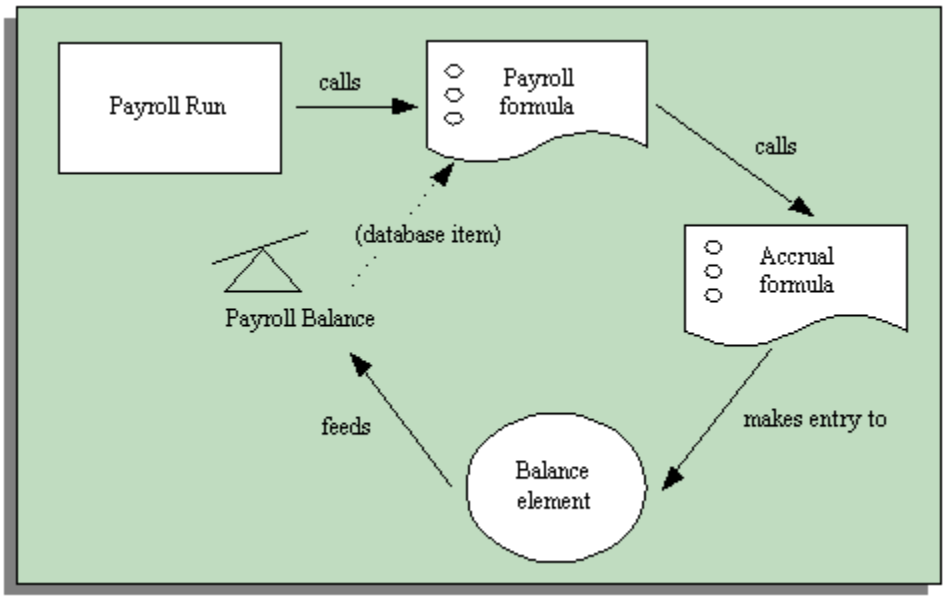
Accrual Balances Maintained By the Payroll Run

If you use Oracle Payroll, you can choose to use a payroll balance to store gross accruals for an accrual plan. You do this by selecting a balance dimension (such as calendar year to date) when you define the accrual plan. The system then automatically generates the balance and other components you require.

Why Use a Payroll Balance?

Some batch processes, such as the US Check Writer, call the accrual formula to calculate PTO accruals for each assignment. If you use such processes, you will benefit from faster batch processing if you set up your accrual plan to use a payroll balance. This reduces the number of calculations the formula has to perform.

How The Balance Is Maintained



The payroll balance is maintained by the payroll run. When the payroll run processes an accrual plan element entry, it calls an Oracle Payroll formula associated with the accrual plan element. This formula calls your accrual formula to calculate the gross accrual, passing in the following information:

- The name of the database item for the payroll balance, so the accrual formula can retrieve the number of days or hours currently in the payroll balance
- Date to begin calculating new accruals, which is the day after either the Date Earned or the Date Paid of the last payroll period in which the assignment was processed

  You can choose whether the formula uses Date Paid or Date Earned by selecting the Payroll Balance Type for your business group in the Organization window.

  Date Earned is the date the payroll run uses to determine which element entries to process. In North America (and typically elsewhere too) it is the last day of the payroll period being processed. **Date Paid** is the date that appears on pay advices. The payroll run uses this date to select taxation rules, and store balances. In some legislations, these dates are always the same.
- Calculation date, which is either the date earned or the date paid of the payroll run

The accrual formula returns the new gross accrual to an element that feeds the balance.

So normally the formula only has to calculate accruals since the last payroll run, and add this value to the existing payroll balance. However, if the accrual formula finds retrospective absences or other assignment changes that affect entitlement, it

recalculates accruals for the whole accrual term. This processing ensures that the employee receives their full accrual entitlement.

> **Note:** You can also force the payroll run to recalculate accruals for the full accrual term by setting the action parameter Reset PTO Accruals to "Y" before running a payroll for a set of assignments. Update the parameter to "N" after processing these assignments to ensure faster processing in your normal run.

Example

Supposing an accrual plan has a ceiling of 10 days, and two days accrual per month. An employee has a net accrual of 10 at the end of May. The June payroll run does not award any new accrual to this employee because the net accrual must not exceed the ceiling. However, in July the employee's manager enters five days vacation in May, retrospectively. The July payroll run recalculates the accrual and updates the gross accrual balance to 14. The net accrual is now nine (14 minus 5).

How To Set Up An Accrual Plan To Use a Balance

If you want the payroll run to maintain an accrual balance, you must use a formula that supports balances. This means that the system can pass the latest accrual balance to the formula, along with the date to start calculating new accruals to add to the balance.

You can use or configure one of the following seeded formulas:

- PTO_HD_ANNIVERSARY_BALANCE
- PTO_PAYROLL_BALANCE_CALCULATION
- PTO_SIMPLE_BALANCE_MULTIPLIER

You must also select a balance dimension when you define the accrual plan. The balance dimension controls the period of time over which the balance accumulates before it is reset to zero. Three types of dimension are predefined:

> **Note:** For each type, there are two dimensions. Use the Date Earned dimension (such as _ASG_PTO_**DE**_YTD) if you selected Date Earned as the PTO Balance Type for your business group. Otherwise use the Date Paid dimension (such as _ASG_PTO_YTD).
>
> See: Business Groups: Selecting a PTO Balance Type, *Oracle HRMS Enterprise and Workforce Management Guide*

- _ASG_PTO_YTD and _ASG_PTO_DE_YTD

  The balance accumulates over a calendar year, resetting on 01 January. Select one of

these dimensions if you are using the PTO_PAYROLL_BALANCE_CALCULATION formula.

- _ASG_PTO_SM_YTD and _ASG_PTO_DE_SM_YTD

  The balance accumulates over a year, resetting on 01 June, or at the end of the payroll period that contains this date. Select one of these dimensions if you are using the PTO_SIMPLE_BALANCE_MULTIPLIER formula.

- _ASG_PTO_HD_YTD and _ASG_PTO_DE_HD_YTD

  The balance accumulates over a year, resetting on the anniversary of the employee's hire date, or at the end of the payroll period that contains this date. Select one of these dimensions if you are using the PTO_HD_ANNIVERSARY_BALANCE formula.

For further information on balance dimensions, see the technical essay: Balances in Oracle Payroll, *Oracle HRMS Implementation Guide*.

Notice that the Oracle Payroll formula, payroll balance, element that feeds the balance, element link, and formula processing and result rules are all generated by the system when you save your accrual plan.

If you want Oracle Payroll to recalculate the accrual balance from the beginning of the accrual term when there are retrospective assignment changes that affect entitlement, you must ensure your accrual formula can track these changes. You enable a trigger for assignment updates, define an event group for the assignment changes you want to track, and ensure your PTO accrual formula references this event group. See: Setting Up PTO Accrual Plans, page 4-44.

> **Note:** The predefined PTO_PAYROLL_BALANCE_CALCULATION formula handles retrospective changes to assignment status.

Net Accrual Calculation

Oracle HRMS uses the following calculation for an employee's net accrual:

Net PTO accrual = (Accrued PTO + PTO carried over) - PTO taken to date

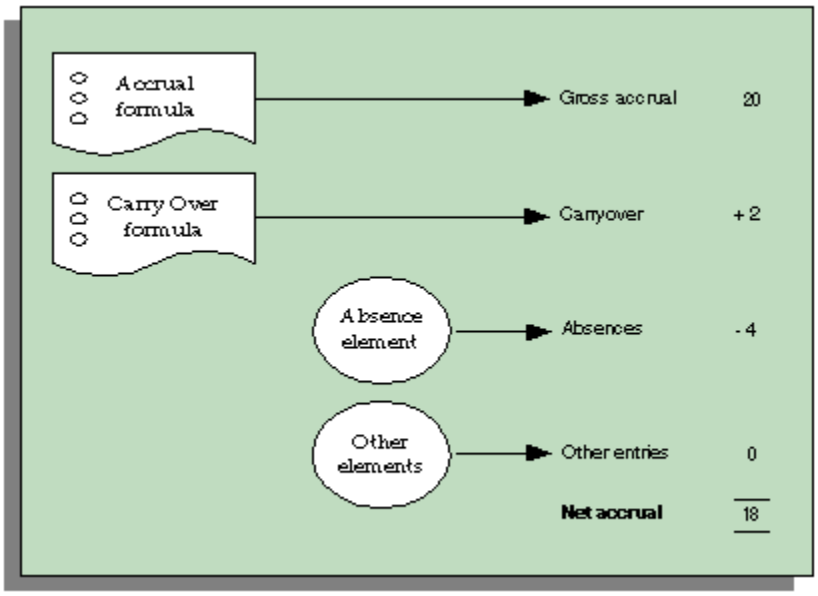
Accrued PTO is the sum of regular accruals to date in this accrual term, calculated by your Accrual formula.

PTO Carried Over is the hours or days carried over from the previous accrual term, obtained from the plan's Carried Over element.

PTO Taken To Date is all PTO taken in this accrual term, obtained from the entries to the plan's absence element.

You may require a more complex calculation of net accruals, perhaps to take some account of time stored in the residual PTO element, or to take account of time entered

on other elements that you have created. You cannot change the predefined rules for PTO taken to date (the absence element) and PTO carried over, but you can add your own rules in the Net Calculation Rules window.



Notice that the system does no automatic processing of the entries of employees' residual PTO. Your enterprise may want to use these entries to inform employees of accrued but unused time they may forfeit, or to make payments for part or all of this time.

Seeded Accrual Type Formulas

There are four seeded formulas (of formula type Accrual) for calculating accruals. Each repeatedly calls another formula (of type Accrual Subformula), in a loop, to calculate the accrual for each accrual period. There is a Carry Over formula supplied to use with each Accrual formula. The top level seeded Accrual formulas are:

- PTO_PAYROLL_BALANCE_CALCULATION
- PTO_SIMPLE_BALANCE_ MULTIPLIER
- PTO_ROLLING_ACCRUAL
- PTO_HD_ANNIVERSARY_BALANCE

The formulas with "Balance" in their names can be called from the payroll run to maintain a balance of gross accruals. See: Accrual Balances Maintained By the Payroll Run, page 4-28.

Note: There are also two seeded formulas called PTO_PAYROLL_CALCULATION and PTO_SIMPLE_MULTIPLIER. These incorporate the same rules as PTO_PAYROLL_BALANCE_CALCULATION and PTO_SIMPLE_BALANCE_ MULTIPLIER, except that they cannot be called from the payroll run to maintain a balance of gross accruals. We recommend that you use the formulas that support balances so you can use balances now or in the future.

Ineligibility Formula

There is also a seeded Ineligibility formula:

- PTO_INELIGIBILITY_CALCULATION

You may require an Ineligibility formula if you use BEE (Batch Element Entry) to enter absences against an accrual plan. BEE validation must ascertain whether an employee is eligible to use accrued PTO on the effective date of an absence entry in a batch line. First it checks the Accrual Plan table, so if you enter the period of ineligibility in the Accrual Plan window, you do not need to create an Ineligibility formula.

If there is no ineligibility information in this table, BEE validation checks whether there is an Ineligibility formula to call. You need an Ineligibility formula if you use BEE *and* you calculate the period of ineligibility within your Accrual formula, rather than entering it in the Accrual Plan window. This formula is only used by BEE.

Note: If you use the seeded formulas, you do not need an Ineligibility formula, because these formulas take the ineligibility period from the Accrual Plan table.

Description of Seeded Accrual Formulas

This section describes the main features of each of the seeded formulas. The rules are summarized, later, in tables.

PTO_PAYROLL_BALANCE_CALCULATION

This formula calculates accruals in the same way as the accrual function in earlier releases of Oracle HRMS. It calls another formula which is called PTO_PAYROLL_PERIOD_ACCRUAL. It is designed to be used with the Carry Over formula PTO_PAYROLL_CARRYOVER.

These formulas are based on the following rules:

- An accrual term of one calendar year, starting 1 Jan. So, accrual calculations restart at the beginning of each calendar year.

- An accrual frequency based on the participant's pay periods. So, employees on a monthly payroll accrue time each month, employees on semi-monthly payrolls accrue time twice each month, and so on. PTO accrual occurs automatically for each eligible plan participant on the last day of his or her pay period, independently of any payroll run.
- Accrual amounts and ceiling are determined by length of service.
- Accruals are prorated for suspended assignments.
- Carry over is always effective on 31 Dec of the plan year being processed. So, if you run the Carry Over process and specify the parameters '15 January 2000' and 'Previous' (plan year), the formula calculates the carry over for the year 1 Jan to 31 Dec 1999 and the result has the effective date 31 Dec 1999.
- Carry over expires at the end of the plan year. So carried over time with the effective date 31 Dec 1999 must be used before 31 Dec 2000.
- Maximum carryover depends on length of service bands.

PTO_SIMPLE_BALANCE_MULTIPLIER

This is a simple formula to provide a useful starting point for your own accrual plans. It calls another formula, called PTO_SIMPLE_PERIOD_ACCRUAL. It is designed to be used with the Carry Over formula PTO_SIMPLE_CARRYOVER.

These formulas are based on the following rules:

- An accrual term of one calendar year, starting 1 June. So, accrual calculations restart at the beginning of each June.
- An accrual frequency of one month.
- Accrual amounts and ceiling are fixed within the formula.
- Carry over is always effective on 31 May of the plan year being processed.
- Carry over expires at the end of the plan year. So carried over time with the effective date 31 May 1999 must be used before 31 May 2000.
- Maximum carry over is fixed within the formula.

PTO_HD_ANNIVERSARY_BALANCE

This formula is very similar to PTO_SIMPLE_BALANCE_MULTIPLIER, but the accrual start date is the anniversary of the employee assignment's hire date.

Note: Notice that the accrual term starts on the anniversary of the hire date. It is not affected by the entry of a continuous service date for an employee on enrollment in the plan. The continuous service date affects length of service calculations (for accrual bands and calculation of period of ineligibility), but it does not affect the accrual term.

PTO_ROLLING_ACCRUAL

This is an example formula for an accrual plan that does not have a fixed term start date. It calls the formula PTO_ROLLING_PERIOD_ACCRUAL. It is designed to be used with the Carry Over formula PTO_ROLLING_CARRYOVER. (Although carry over is not relevant to rolling accrual plans, you must select this formula for your accrual plan. It returns an effective date to the Absence Detail window.)

These formulas are based on the following rules:

- An accrual term of one calendar year, with no fixed start date. Accruals are calculated for the previous 12 months.
- An accrual frequency of one month.
- Accrual amounts and ceiling are fixed within the formula.
- Carry over is not relevant, since the accrual term never ends, but rolls forward. Time is lost if it is not used within 12 months.

Summary of Rules in Seeded Formulas

The following tables summarize the rules incorporated in the seeded Accrual formulas.

Length of Accrual Term

All Seeded Formulas
One year

Accrual Term Start Date

PTO_PAYROLL_BALANCE _CALCULATION	PTO_SIMPLE_BALANCE_M ULTIPLIER and PTO_HD_ANNIVERSARY_B ALANCE	PTO_ROLLING _ACCRUAL
1 January	1 June (PTO_SIMPLE_BALANCE_M ULTIPLIER) Anniversary of hire date (PTO_HD _ANNIVERSARY _BALANCE)	No fixed date; accruals calculated for preceding 12 months

Accrual Frequency

PTO_PAYROLL_BALANCE _CALCULATION	PTO_SIMPLE_BALANCE_MULTIPLIER, PTO_HD_ANNIVERSARY_BALANCE, and PTO_ROLLING_ACCRUAL
Payroll period	Monthly

Accrual Amount

PTO_PAYROLL_BALANCE _CALCULATION	PTO_SIMPLE_BALANCE _MULTIPLIER, PTO_HD_ANNIVERSARY_BALANCE, and PTO_ROLLING _ACCRUAL
Depends on length of service accrual bands	A fixed amount per month (2 days)

Accrual Ceiling

Note: For all the formulas, the accrual ceiling is a limit at which the employee will accrue no more time. However, net accrual can exceed the ceiling if you have made an entry of the Carry Over element, or another adjustment element affecting net calculation rules. If you have adjusted net accrual so that it exceeds the ceiling, the employee will accrue no time until net accrual falls below the ceiling.

PTO_PAYROLL_BALANCE _CALCULATION	PTO_SIMPLE_BALANCE _MULTIPLIER, PTO_HD_ANNIVERSARY_BALANCE, and PTO_ROLLING _ACCRUAL
Depends on length of service accrual bands	Set within the formula to 20 days

Length of Service

All Seeded Formulas
Uses continuous service date (if present) or hire date. **Note**: continuous service date is entered using an input value on the accrual plan element.

Accrual Start Date for New Hires

PTO_PAYROLL_BALANCE _CALCULATION	PTO_SIMPLE_BALANCE _MULTIPLIER, PTO_HD_ANNIVERSARY_BALANCE, and PTO_ROLLING _ACCRUAL
Choice of start rules on Accrual Plan form: hire date, or six months after hire date, or 01 Jan after hire date Accrual starts in the first accrual period after the chosen date (or plan enrollment date if this is later).	Accrual starts in the first accrual period after hire date or plan enrollment date, whichever is later.

Period of Ineligibility

All Seeded Formulas
Accrued amounts are not credited until end of period of ineligibility (entered on Accrual Plan form), which is calculated from the hire date (or continuous service date if this was entered). Note that accrued amounts are not carried forward if the end of the accrual term falls within the ineligibility period.

Calculation of Gross Accrual

PTO_PAYROLL_BALANCE _CALCULATION	PTO_SIMPLE_BALANCE _MULTIPLIER and PTO_HD_ANNIVERSARY_B ALANCE	PTO_ROLLING _ACCRUAL
Sums accruals in all full pay periods of the year ending on or before the calculation date;	Sums accruals in all full months of the year ending on or before the calculation date;	Sums accruals in the 12 months ending on or before the calculation date;
takes account of any employee termination date, accrual start rules, ineligibility period, assignment status, and accrual ceiling.	takes account of any employee termination date, ineligibility period, and accrual ceiling.	takes account of any employee termination date, ineligibility period, and accrual ceiling.

Suspended Assignments

PTO_PAYROLL_BALANCE _CALCULATION	PTO_SIMPLE_BALANCE _MULTIPLIER and PTO_HD_ANNIVERSARY_B ALANCE	PTO_ROLLING _ACCRUAL
Calculates the number of working days (Monday to Friday) in the payroll period and checks assignment status for each day. Multiplies normal accrual rate by active days divided by working days, to prorate the accrual.	No processing of assignment status.	No processing of assignment status.

Changing and Adding Rules in Formulas

If you write your own formulas (perhaps using the simple multiplier or rolling accrual formula as a basis) you can change any of these rules and add new rules as required. However, your formulas must return certain values and must check for certain conditions (such as employee termination) to avoid errors.

For information about required formula content, see: Writing Formulas for Accrual Plans, *Oracle HRMS FastFormula User Guide*.

For a sample accrual formula and suggestions on how to edit it to incorporate a whole range of plan rules, see: Sample Accrual Formula, *Oracle HRMS FastFormula User Guide*.

Accrual Start Date for New Hires

Using the seeded PTO_PAYROLL_BALANCE_CALCULATION formula, accrual of PTO begins on a fixed date each year (01 January). For each plan that uses this formula, you can select a value in the Accrual Start field of the Accrual Plan window. This specifies when newly hired employees start to accrue PTO. The seeded choices are:

- Hire Date
- Beginning of Calendar Year after their hire date
- Six Months after Hire Date

If you need additional start rules, you can define them as values for the Lookup Type US_ACCRUAL_START_TYPE. You must add a line to the seeded formula to calculate the accrual start date using your new start rule.

The other seeded formulas (PTO_SIMPLE_BALANCE_MULTIPLIER, PTO_HD_ANNIVERSARY_BALANCE, and PTO_ROLLING_ACCRUAL) do not use values in the Accrual Start field. For plans using these formulas, new hires begin accruing on their hire date or plan enrollment date, whichever is later.

If you are writing your own accrual formulas, you can choose whether to use the Accrual Start field on the Accrual Plan form to specify start rules for new hires. This is only useful if you are using the same formula for several accrual plans with different start rules. Otherwise you can specify the start rule within the formula.

Period of Ineligibility

Some accrual plans require participants to work for a period of time, perhaps three or six months, before they are eligible to use accrued PTO. They accrue time at the usual rate during this time, but it is not registered on the system until the Period of Ineligibility expires. If plan participants take vacation or sick leave during this period, the system displays a negative value for accrued time. Many enterprises set up an absence type for "approved but unpaid leave" to use for absences taken during periods of ineligibility.

You can enter the period of ineligibility on the Accrual Plan form. The seeded Accrual formulas illustrate how a formula should use the entered values. They calculate the period of ineligibility from the continuous service date (if it was entered) or the employee's hire date.

Alternatively, you can define the period of ineligibility within your Accrual formula.

> **Note:** If you use the seeded formulas, time accrued during the ineligibility period is not carried over if the end of the accrual term falls within the ineligibility period.

Batch Element Entry and the Ineligibility Period

If you want to use Batch Element Entry (BEE) to make absence entries against the accrual plan, the BEE validation process must be able to check when the ineligibility period expires.

- If you record the ineligibility period for the plan on the Accrual Plan form, BEE retrieves the ineligibility period directly from the table. It interprets it as a period of time from the employee's continuous service date or hire date.

- If the period of ineligibility is defined within your Accrual formula, you must associate an Ineligibility formula with the plan. BEE calls the formula, which returns Y or N to indicate whether the employee is eligible to use accrued PTO on the date supplied by BEE. This formula should calculate the end of the ineligibility period in the same way as the Accrual formula for the plan.

If the employee is not eligible, the BEE validation process creates a warning on the batch line for the absence entry.

> **Note:** If you use a custom method of entering timecard data, calling the Element Entry API, you can add logic to call the Ineligibility formula.

How the Seeded PTO_PAYROLL_BALANCE_CALCULATION Formula Interprets the Start Rules

The formula calculates the start date from hire date and compares it with the employee's plan enrollment date. Accrual begins on whichever of these two dates is later.

Start Rule: Hire Date

For plans with this rule, participants' accruals begin from the first full period following their hire date. For example, if the hire date of a participant on a semi-monthly payroll falls on the first day of either the first or second period in the month, PTO accrual starts as of that date.

If the hire date falls sometime after the first of the month but before the end of the first period, accruals start in the second period of the month. If the hire date falls after the first day of the second period but before its end, accruals start with the first period in the next month.

Start Rule: Beginning of Calendar Year

With this start rule, participants' accruals begin from the start of the year following the year in which they are hired. This means that a participant with a hire date of 1 January 1999 and another with a hire date of 31 December 1999 both start to accrue time as of 1 January 2000.

Notice that the amount of PTO each accrues may not be the same, as accrual amounts often depend on employees' length of service.

Start Rule: Six Months After Hire

For plans with this start rule, participants' accruals do not begin until the first full pay period after the six-month anniversary of their hire date. For example, someone on a semi-monthly payroll who is hired on 5 February 1996, completes six months of service on 5 August 1996, and starts to accrue PTO in the second period in August.

Notice that if people are hired on the first day of a period, their accruals begin with the pay period of the six-month anniversary of their hire date. For example, someone on a semi-monthly payroll who is hired on 1 February 1996 completes six months of service on 1 August 1996, and hence starts to accrue PTO in the first period in August.

The period of ineligibility is not applicable to plans with the start rule Six Months After Hire.

Accrual Bands

For many accrual plans, the time off that plan participants can accrue increases with their length of service, or varies by job, grade, or number of hours worked. That is, *accrual bands* determine accrual amounts. In addition, these bands can determine *ceiling* and *maximum carry over* amounts.

Ceiling rules, found in some vacation accrual plans, set a maximum amount of PTO an employee can hold at any time. When a participant's accrued PTO reaches the ceiling, no additional time accrues. Accruals begin again only after the participant uses some accrued time.

In the PTO_PAYROLL_BALANCE_CALCULATION seeded formula, the accrual amount, ceiling and maximum permitted carry over depend on length of service bands. Alternatively, you can use bands based on other factors, such as grade, or a combination of factors, to determine the accrual amounts for your plans.

Length of Service Bands

You set up length of service bands using the Accrual Bands window. For each band (such as 0 to 5 years of service), you can enter the accrual amount for the whole accrual term (such as an annual amount), an accrual ceiling, and the maximum permitted carry over.

Length of Service Override

In Oracle HRMS, the **first day of the month of an employee's hire date** is the default date from which his or her length of service is calculated for accrual purposes. For example, someone hired on 18 January 1997 completes one year of service on 1 January 1998, and someone hired on 31 December 1996 completes one year of service on 1

December 1997.

For individual accrual plan participants, you can override the default date from which a plan starts its length of service calculations. This is useful for managing exceptional cases that arise when, for example, employees who already have accumulated periods of service in your enterprise transfer from one place to another. You enter the date override when enrolling a participant in a plan.

> **Note:** The default length of service start date (or the overriding continuous service date) determines the length of service for accrual bands and for the calculating the end of the ineligibility period. However it is ***not*** the same as the accrual start date. This is determined by the accrual start rules selected in the Accrual Plan window or set within the accrual formula.

Other Banding Criteria

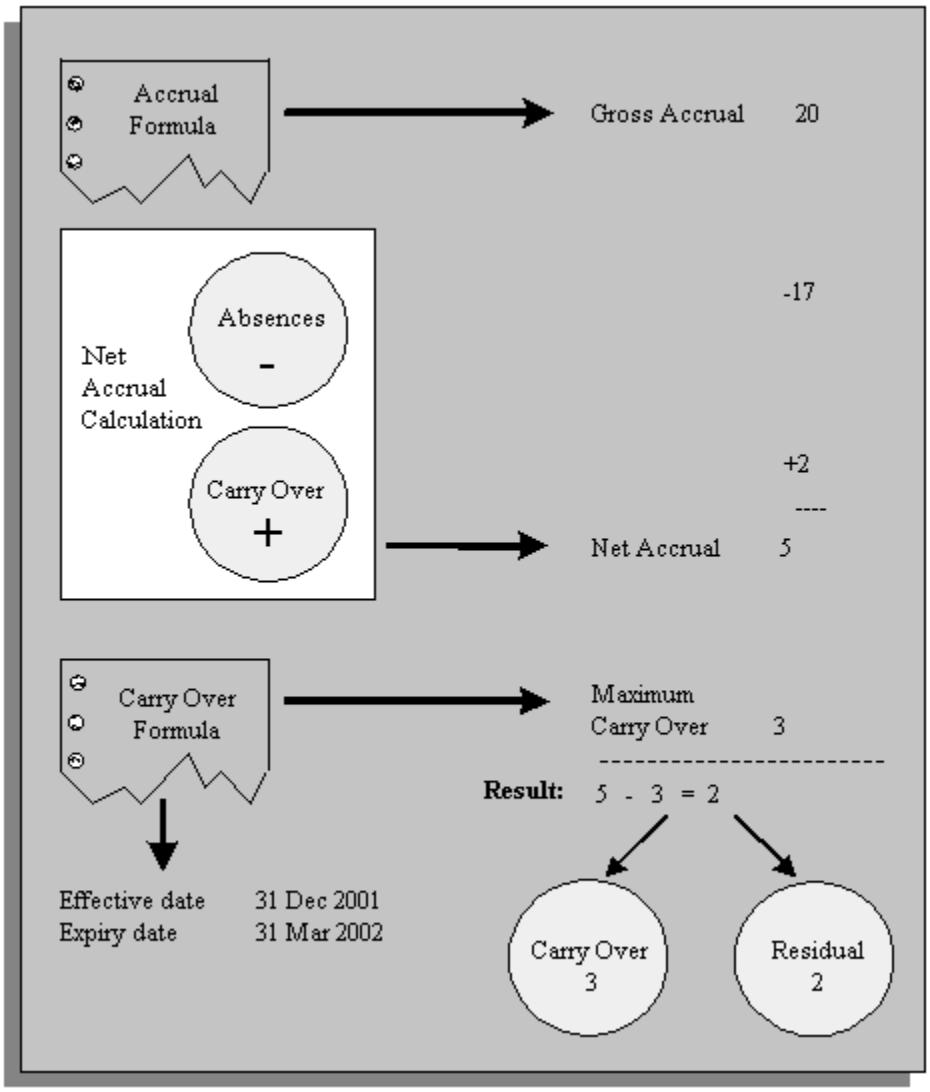
For some accrual plans, the amount of time accrued may vary by other criteria, such as job or grade. You can create a user table to hold time accrued, ceiling rules, maximum carryover rules, and any other information you require for each job or grade. See: User-Defined Tables, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

Include the GET_TABLE_VALUE function in your accrual and carry over formulas for the plan to access the information held in the user table. For an example of using a user table to store banding criteria, see: Sample Accrual Formula, *Oracle HRMS FastFormula User Guide*.

PTO Carry Over Process

To manage the carry over of employees' unused PTO to a new accrual term, you run the PTO Carry Over process from the Submit Requests window:

- For accrual plans with a *fixed term start date* (such as 1 April), you run the process at the end of each accrual term.
- For accrual plans with a *variable term start date* (such as hire date or seniority date), you should run the process every night to update plan information for any employees whose term has ended that day.
- For accrual plans based on a *rolling plan term* (such as those using the seeded PTO_ROLLING_ACCRUAL formula), this process is not relevant.



For each participant in an accrual plan, the PTO Carry Over process first uses the Accrual formula to calculate the participant's accrued PTO as of the last day of the plan's accrual term. The process then uses the Carry Over formula to get:

- the maximum amount of time this employee can carry forward to the next accrual term
- the effective date for the carry over, and
- any expiry date by which the employee must use the time carried over, or lose it.

The process calculates the net accrual using time off recorded on the Absence element and any other elements associated with the plan. Finally, it compares the net accrual with the maximum carry over. permitted to determine both the amount to carry over, and the amount of any residual PTOthat cannot be carried over.

For employees with unused, accrued time to carry over, Oracle HRMS enters this time on the plan's <plan name> Carried Over element. Similarly, for employees with unused, accrued time they cannot carry over, Oracle HRMS enters this time on the plan's Residual <plan name> element.

Setting Up PTO Accrual Plans

1. Define and link an element for the plan's absence type.

   See: Defining and Linking an Absence Element, page 4-12

   Important: It is important that you link the absence element before you define the accrual plan since Oracle HRMS automatically creates links for the accrual plan elements based on your absence element links. If you define criteria on the link so that employees lose eligibility for the accrual plan as their assignments change, you must manually transfer accrual balances to the employee's new accrual plan. For simplicity, consider using open element links (that is, links with no assignment criteria).

2. Define an absence type for the plan, associating its absence element with this type.

   See: Defining an Absence Type, page 4-14

3. Optionally, define new accrual start rules as values for the Lookup Type US_ACCRUAL_START_TYPE. There are three seeded categories: Hire Date, Beginning of Calendar Year and Six Months after Hire Date.

   See: Adding Lookup Types and Values, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

4. Decide which Accrual and Carry Over formulas to use. You can use the seeded formulas, configure them, or write your own.

   See: Writing Formulas for Accrual Plans, *Oracle HRMS FastFormula User Guide*

5. If your Accrual formula defines a period of ineligibility and you want to use BEE to enter absences against the accrual plan, define an Ineligibility formula. BEE calls this formula to check whether an employee is eligible to use accrued PTO.

   See: Period of Ineligibility, page 4-39

   Note: If you use the seeded Accrual formulas, you do not need to define an Ineligibility formula. They use a period of ineligibility entered in the Accrual Plan window, and BEE validation can use the same value.

This does not apply to the New Zealand seeded formulas. If you are using these formulas, do not define an Ineligibility formula *or* enter a period of ineligibility in the Accrual Plan window.

6. Optionally, define new accrual categories as values for the Lookup Type US_PTO_ACCRUAL. There are predefined categories for some legislations.

   See: Adding Lookup Types and Values, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

7. **Oracle Payroll users:**

   The following three steps are for Oracle Payroll users only. Skip these steps if you do not want to use a payroll balance to store gross accruals.

   Decide whether the payroll run should update accruals as of the run's *date earned* (the date the payroll run uses to determine which element entries to process) or *date paid* (the date that appears on pay advices). Select your choice for the business group.

   See: Business Groups: Selecting a PTO Balance Type, *Oracle HRMS Enterprise and Workforce Management Guide*

8. Consider which balance dimension to use. Dimensions are predefined that reset the balance each year on 1 January, 1 June, or hire date anniversary. UK users: If you require your balance to accumulate over a different period of time, or reset at a different date, you can create your own balance dimension.

   See: Balances in Oracle Payroll, *Oracle HRMS Implementation Guide*

9. If you want Oracle Payroll to recalculate the accrual balance from the beginning of the accrual term when there are retrospective assignment changes that affect entitlement, you must perform this setup:

   1. Navigate to the Dynamic Trigger Generation window. In the Find Triggers window, enter the following values then click Find:

      - Dynamically Generated Triggers: selected
      - Application: Oracle Human Resources
      - Trigger Name: PER_ALL_ASSIGNMENTS_F_ARU
      - Triggering Actions: Update selected

      Ensure that this trigger is generated and enabled. On the Components tab, ensure that the module pay_continuous_calc.PER_ALL_ASSIGNMENTS_F_ARU is enabled.

   2. In the Functional Area Maintenance window, query the seeded functional area called PTO Events. Check that the trigger PER_ALL_ASSIGNMENTS_F_ARU

is listed in the Details region. Select the Business Group tab in the Details region and select the business groups that are to track the assignment changes.

3. In the Table Event Group window, query the seeded PTO Event Group. This group includes the following datetracked events; you can add others that you want to track:

   - Date Track Update: Table - per_all_assignments_f, Column - assignment_status_type_id
   - Date Track Correction: Table - per_all_assignments_f, Column - assignment_status_type_id
   - Date Track Delete Future: Table - per_all_assignments_f, Column - blank

4. Ensure that your accrual formula uses the Get_Earliest_AsgChange_Date function to handle the events you want to track. Refer to the PTO_PAYROLL_BALANCE_CALCULATION formula as an example of how to use this function.

10. Define the accrual plan, selecting the formulas and absence element it is to use.

    See: Defining a PTO Accrual Plan, page 4-47

11. Optionally, set up length of service bands for the plan.

    See: Setting Up Length of Service Bands, page 4-49

12. **Oracle Payroll users**: If you want the payroll run to calculate employer liability for PTO, define an employer liability element and balance, link the element, and edit the generated payroll formula and result rules.

    See: Costing Liability for PTO Accruals, page 4-50

13. Review the net calculation rules for the plan. If necessary, create additional elements and associate them with the plan by selecting them in the Net Calculation Rules window.

    See: Changing Net Accrual Calculations, page 4-49

14. **SSHR users**: If you want to view employee accrual balances using SSHR, create an element set that include elements that correspond to the appropriate accrual plans, and attach the element set to the profile HR: Accrual Plan Element Set Displayed to User at the appropriate levels.

    See: Viewing Accrual Balances in SSHR, *Oracle HRMS Deploy Self-Service Capability Guide*.

Defining a PTO Accrual Plan

Use the Accrual Plans window to define an accrual plan.

To define a PTO accrual plan:

1. Enter the plan name, and select an accrual category for it.

   Tip: Coordinate the names of the accrual plan, the plan's absence type if any, and the element used to record absences taken under the plan. For example, for the Hrly Vacation PTO Plan for your hourly workers, you could name the absence type and its element Hrly Vacation PTO Absence.

2. Optionally, select a start rule for the plan in the Accrual Start field. This rule determines the date on which newly hired employees begin to accrue PTO.

   Note: Some plans do not use this value; it depends which Accrual formula you select.

3. Select Days or Hours in the Accrual Units field. The units selected here must be the same as the units for the input value you select in the Absence Information region.

4. You can enter a description, summarizing the purpose and rules of the plan.

5. Select the Accrual formula and Carry Over formula to associate with the plan.

   For a description of the seeded formulas, see Seeded Accrual Type Formulas, page 4-32.

6. In the Name field of the Absence Information region, select the element associated with the plan's absence type. In the Units field, select the element's input value that holds the entries of hours or days absent.

Selecting a Payroll Balance

7. **Oracle Payroll users**: If you want to use a payroll balance to store gross accruals for the plan, select the date when the balance should reset to zero.

   Note: The balance may not reset on the exact date you select, since it depends on the payroll period dates. For example, if you select a Reset Date of 1 January, the balance may in fact reset on 22 December if that is the start date of the first payroll period in the new year.

If you select 1 June, 1 January, or Hire Date Anniversary, a value appears automatically in the Dimension Name field. If you select Other, you must select a balance dimension that you have created for this purpose.

> **Important:** Select a date in this field *only* if you are using a formula that supports payroll balances. US users: The Check writer process and Deposit Advices do not display the correct accrual balances if you enter a balance reset date but do not use a formula that supports payroll balances.

Setting a Period of Ineligibility

8. If the start rule for this plan is Hire Date or Beginning of Year you can enter a period of ineligibility, during which a plan participant can accrue PTO but cannot use accrued PTO. For example, enter 3 in the Length field and select Calendar Month in the Units field.

9. Optionally select an Ineligibility formula. This formula is called by the BEE validation process for a batch line that enters an absence against the accrual plan. It checks whether the employee is eligible to use accrued time on that date.

   > **Note:** If you enter the period of ineligibility in the Length field, you do not need to select a formula. The BEE validation process gets this value and interprets it as a period of time from the employee's continuous service date.

10. Save your work.

    When you do this, the application generates three new elements for the plan - one to represent the plan, and one each to hold carried over and residual amounts of accrued, unused PTO. The application creates links for these elements to match the links you defined for the plan's absence element.

    If you selected a date in the Payroll Balance Reset Date region, the application also generates a payroll balance, an element to feed the balance, a tagging element, formula processing and result rules, and a payroll formula to call the accrual formula from the payroll run.

11. Choose the Accrual Bands button to set up length of service bands for the plan. This is optional, but may be required by your accrual formula.

12. If the Further Accrual Information is configured for your localization, enter the relevant information.

    Australian users: Select the leave balance type as either Entitlement or Entitlement and Accrual for display in the Leave of Absence screen in Self-Service.

13. Choose the Net Calculation Rules button to view or change the rules for calculating employees' net PTO.

Setting Up Length of Service Bands

Use the Accrual Bands window to define length of service bands for an accrual plan.

To set up length of service bands for a PTO plan:

1. For each length of service band applicable to this plan, establish the band's duration by making an entry in the To field. The first band starts from zero years of service. If it extends for five years, enter 5 in the To field. The system then sets the From field for the second band at 5, as the second band starts after five years of service.

   For the last band you enter, in order to cover all participants with any length of service beyond the band's From entry, enter 99 in the To field. For example, if your bands cover service of 0-5 years, 5-10 years and 10+ years, the third band's From and To entries should be 10 and 99.

2. For each band, enter in the Term Accrual field the number of hours or days that participants whose length of service falls into this band can accrue each accrual term. For example, if plan participants accrue 80 hours of vacation per year during their first five years of service (band 0 - 5), enter 80 in the Term Accrual field.

3. If a band does not permit participants to carry unused accrued time over to the next accrual term, leave the Maximum Carryover field blank. Otherwise, enter in this field the maximum number of accrued, unused hours or days that participants at this band may carry forward.

4. If a band has no ceiling that limits the total number of hours or days participants at this band can accrue at any one time, leave the Ceiling field blank. Otherwise, enter the ceiling number for the band.

5. Save your work.

Changing Net Accrual Calculations

The rules for automatic calculation of employees' net PTO appear in the Net Calculation Rules window. You enter this window by choosing the Net Calculation Rules button in the Accrual Plan window.

The default net accrual calculation takes account of absences (entered on the Absence element) and time carried over from the previous accrual term (entered by the Carry Over process on the plan's Carried Over element). You cannot change these rules. However, if your plan's calculation needs to take account of other values (such as time bought or sold), you can add new rules in this window.

To change the net accrual calculation:

1. Create and link any additional elements you need for the plan. For example, you might need an element to store the amount of PTO an employee has bought or sold. Use the Information classification for these elements, define them as nonrecurring, and give them at least two input values:
   - An input value with the same units (days or hours) as you selected for the accrual plan, and
   - An input value with the units Date (to hold the effective date).

     Tip: Use names for these elements that clearly link them to the appropriate accrual plan. For example, if the accrual plan is called Standard Vacation, you could name the element Standard Vacation Bought or Sold.

2. Query the new elements in the Net Calculation Rules window.
3. Select the input value that hold the days or hours you want to use in the net accrual calculation.
4. Select the date input value that holds the effective date for the accrual calculation.

   Note: The predefined rule for the absence element does not include a date input value because the application uses the absence start date as the effective date for subtracting the time taken from the gross accrual.

5. For each input value, select Add or Subtract to determine whether the value should increase or decrease the net accrual available to an employee.
6. Save your work.

Costing Liability For PTO Accruals

Follow these setup steps if you use Oracle Payroll and you want the payroll run to calculate the change in employer liability for PTO, as well as the gross accrual.

For example, the payroll run might calculate the following changes to employer liability, using this calculation:

Current Liability Increment = (((YTD accrual + Current net accrual) * Current Rate of Pay) - ITD PTO liability)

Payroll Run	ITD Liability	YTD Accrual	Current Pay Rate	Current Accrual	Absence	Current Net Accrual	Liability Increment
Run 1	0	0	10	4	0	4	40
Run 2	40	4	10	4	5	-1	-10
Run 3	30	3	12	4	0	4	54

To set up costing of PTO accrual liability:

1. In the Element window, define an employer liability element. The only required input value is the pay value.

2. In the Balance window, create a liability balance fed by the pay value of the element you created in the previous step.

3. In the Formula window, edit the payroll formula that was generated for your accrual plan so that it calculates changes in employer liability. The formula has the name <accrual plan name>_ORACLE_PAYROLL. It contains a sample liability calculation, which you can edit to meet your requirements.

   The formula must return the Current Liability Increment.

4. In the Formula Result Rules window, query the accrual plan element. You will see a processing rule associating this element with the payroll formula you edited in the previous step, and a result rule passing the accrual to the element that maintains the accrual balance. Create another result rule to pass the Current Liability Increment formula result to the pay value of the employer liability element.

5. Use the Element Link window to link the employer liability element and to cost it appropriately.

Absence and Accrual Plan Administration

Absence Recording

When you record an absence for an employee using the Absence Detail window or self-service, you must always select an absence type.

Dates and Times

In the Absence Detail window you can conveniently record start and end dates and times of a particular type of absence, as well as the date you receive notification of the absence.

You can enter either projected or actual dates and times. When an actual absence occurs in accordance with projected absence information already entered, you record this by simply clicking a button.

Oracle HRMS records an employee's absences using the employee's payroll calendar, so all employees for whom you record absence information must have a payroll component in their primary assignment.

Some absence types are associated with nonrecurring elements. For these types, the absence is not recorded on the employee's element entries until you enter the absence end date. You cannot change the absence start date so that it is outside the original payroll period--you must delete the absence and create a new one.

> **Note:** For Oracle Payroll users in some localizations: some absence types may be associated with recurring elements. For these types, the absence is recorded in element entries when you enter an actual start date. If you change the start date, the element entry is deleted and a new one created. When you enter or change the end date, the element entry's end date is date effectively updated.

Absence Duration

To calculate the duration of an absence automatically, you can either use the schedule and calendar event features from Oracle HRMS and Common Application Components (CAC), or use a formula that calculates absence duration from the absence start and end dates.

For the first method, the application calculates the duration of the absence based on the worker's schedule and applicable calendar events for their primary assignment. To use these features, set the HR: Schedule Based Absence Calculation profile option to Yes.

You set up availability information such as shifts, schedules, and calendar events, and

assign them to various levels in your work structures.

See: Setting Up Availability, *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

For the second method, you write a formula to calculate absence duration from the start and end dates and times entered for an absence. Your localization team may have written a formula that the application uses by default.

See: Writing Formulas To Calculate Absence Duration, *Oracle HRMS FastFormula User Guide*

To control whether the formula automatically recalculates and overwrites the absence duration when a user updates the end date or time, set the user profile option HR:Absence Duration Auto Overwrite to Yes or No. For example, if you do want the duration to be updated when the end date changes, set the profile option to Yes.

When you enter an absence, the application warns you if:

- Duration is greater than the person's net entitlement recorded in a PTO accrual plan
- A decreasing absence balance becomes negative
- Duration is not equal to the value calculated by the absence duration formula. Or, if there is no absence duration formula, duration is not equal to <end date/time - start date/time>. Here, the application calculates the hours using the standard hours recorded for the assignment (or for the business group if the assignment contains no record).

Authorization and Replacement

When recording a projected or actual absence in the Absence Detail window, you can select both the name of an employee authorizing the absence, and of an employee replacing the absent worker.

Absence Cases

If an employee has multiple absences that result from the same cause or are associated in another way that you want to record in Oracle HRMS, you can enter an *absence case* for the employee. For example, if an employee takes two periods of sick leave due to a back injury sustained at work, you can create an absence case, associate the two absences with the case, and link the case to the work incident.

Batch Entry of Accrued Time Taken

For fast batch entry, you can use BEE, instead of the Absence Detail window, to enter sick or vacation time recorded together with other timecard data. You can enter the absence start and end dates, as well as any input values defined for the element. If you leave the date fields blank, they both default to the effective date for a nonrecurring

absence element; only the start date defaults for recurring elements. Note that the batch line produces an error if you enter a duration but no end date for a recurring element.

Self-Service Entry of Absences

If you have licensed Oracle SSHR, you can delegate the responsibility for recording absences to individual employees or their line managers. They can enter proposed or actual absences and submit them for approval by their supervisors (or any other approvers in a workflow).

Viewing and Reporting on Absence Information

For monitoring and analyzing recorded employee absences, use the:

- View Absence History window, page 4-66
- List Employees by Absence Type window, page 4-66
- Absences Report, page 4-67

For reviewing PTO plan participants' accrued time earned and taken, use the Accruals window, page 4-65.

Accrual Plan Administration

Just as elements constitute the underlying structure of absence types, so they provide the structure of accrual plans. Each accrual plan is associated with an absence element, which holds information about absences taken under the plan. There is also an element for the plan itself, which you use to enroll participants in the plan.

Enrollment

You enroll an employee in an accrual plan by entering the accrual plan element. You can only enroll employees who are eligible for the plan (that is, their assignments match the element's links). When you do the enrollment you can override the default date for calculating length of service (which is used in many accrual plans to determine the appropriate accrual amount and the start date of accruals for new hires). For example, you might override the length of service if an employee is a transfer with prior Federal service.

> **Note:** You enter the accrual plan element for the employee's primary assignment. If another assignment becomes the primary one, you must re-enter the accrual plan element for the new primary assignment. You can transfer the accrual balance to the new assignment using a balance adjustment element entry, if your implementation team has added a

balance adjustment element to the net calculation rules for this accrual plan.

Recording Accrued Time Taken

You record time taken under the accrual plan by making entries of the absence element associated with the plan.

Normally you make these entries using the Absence Detail window so you can record additional information, such as an absence reason, the name of the employee authorizing the absence, and the name of the employee replacing the absent worker. The window shows the participant's net accrual at the start of the absence and the projected accrual at the end of the accrual term.

You can also use BEE to make batch entries of hours of accrued sick or vacation time that employees have taken and noted on their timecards. Any entries you make to absence elements using BEE for an employee's primary assignment can then be viewed in the Absence Detail window. Entries made using BEE can include a reason, but the list of absence reasons available in the Absence Detail window is not automatically available here.

Viewing Accruals

You can use the Accruals window to see, at any time, how much time an employee has accrued and used under an accrual plan. You cannot change the amount accrued using this window. The gross accrual is calculated by a formula that may, for example, vary the accrual according to length of service, grade, overtime or other factors.

Creditable Service for Annual Leave

When you appoint an employee as part of the recruitment incentive, you can accelerate employee leave accrual by applying the time the employee earned in military or private sector service to the service compensation date for annual leave. The service time that you apply must closely relate to the current assignment.

See: Authorizing Creditable Service for Annual Leave, page 4-64

Recording PTO Sold or Purchased

If your enterprise pays employees for time they have accrued but not used, or if you permit employees to buy additional time, you may decide to define your own PTO-related elements to record information about these transactions. You then use the Element Entry window to enter these elements for the appropriate employees.

Running the Carry Over Process

Once each year (or other plan term), an employee's balance of unused accrued time must be cleared down ready for the new plan term. You run the PTO Carry Over process to clear down these balances and record both unused time available for carryover, and residual time unavailable for carryover. For accrual plans with a variable term start date (such as hire date or seniority date), you should run the process every night to update plan information for any employees whose term has ended that day.

> **Note:** This process only applies to those PTO accruals your agency sets up, not to the predefined federal PTO accruals. The product's predefined accrual elements can accept reverse payroll data from an agency. However, you need to set up an absence type and link these elements to it.

Some accrual plans are based on a rolling plan term. The Carry Over Process is not relevant to this type of plan.

Entering Absences

Enter projected or actual absences for an employee using the Absence Detail window.

Because the calendar holding absence records for an employee is the same as that of the employee's payroll, the primary assignments of employees for whom you enter absence information must include an assignment to a payroll. For absence types based on nonrecurring elements, the effective start date of this assignment must be no later than the start of the current payroll period.

To enter absences for an employee:

1. Select the absence type.

   The following information appears:

   - The category of the type.
   - The occurrence of the new absence record you are entering. For example, if the employee has already incurred two absences of this type, the occurrence of the new record is 3.
   - The running total of hours or days absent for all the absence types associated with the element. For absence types with increasing balances, this is the number of days or hours absent with an end date on or before your effective date. For any types with decreasing balances, this is the number of hours or days remaining to be taken.

- The number of days absence recorded for the absence type in the current calendar year.

- The name of the element that maintains each employee's time taken or time remaining for this absence type.

  Note: For Finland and Denmark users only: When you create an absence, Oracle HRMS enters the absence element for all the employee's assignments including the primary assignment. You can decide whether each assignment requires the element entry and better track absences for multiple assignments. You can also edit element entries to change the absence details for a specific assignment.

  Note: For Denmark users only: You can override the holiday or sickness absence details in the Absence Details window by entering the DK_OVERRIDE_HOLIDAY_DURATION or DK_OVERRIDE_SICKNESS_DURATION element in the Element Entries window. Use the same start and end dates for the override element that you use in the Absence Details window.

  See: Making Manual Element Entries, *Oracle HRMS Compensation and Benefits Management Guide*

2. If the Further Information field is visible for your localization, click in the field and select a context value relevant to your localization.

   - **Canada HRMS**: Specify the ROE Reason and ROE Comments. You enter a ROE Reason and ROE Comments for an employee in the Additional Absence Detail Information window. The ROE Reason appears in Block 16 of the ROE. The ROE Comments appear in Block 18 of the ROE.

   - **Dutch HRMS**: If you have a category of sickness selected, you can enter a percentage sick by selecting the NL_S context value.

     Select No in the Non SI/Pension Absence field to count an absence as a real social insurance day. Selecting Yes excludes the absence from counting as a real social insurance day.

   - **Hungary HRMS**: If your absence category is Maternity, enter the expected and actual birth dates (and other dates if applicable). If your absence category is Paternity, enter the child's birth date.

   - **Mexico HRMS**: Specify your type of disability:

- General Disease
- Maternity
- Risk Incident

The list of available Disability IDs depend on if you have assigned this disability with a Causal Incident (in the case of Risk Incident disabilities) or no Causal Incident (in the case of Maternity or General Disease disabilities).

- **Russia HRMS**: If your absence category is Maternity Leave, enter the number of children and the new born child's date of birth. If the absence category is Child Rearing Leave, enter the new born child's date of birth. If you select the absence type as Temporary Disability with Sickness Allowance Payment, then select the disability details.

- **Finland HRMS**: If your absence category is Annual Holiday, Layoff, Labour Dispute, or Unauthorized, enter the details of a similar absence taken by the employee. For the absence category Sickness, select the doctor's certificate and contract details. For the Accident category, select the work incident and doctor's certificate details. If your absence category is Family Leave, enter the child and maternity leave details.

- **UK HRMS**: For an OSP or OMP scheme and an absence that is, or contains, a part of a day, select a unit of measure - days or hours - for measuring part days. For a days-based scheme, select Day and select full or half day . For an hours based scheme, select Hours and select the number of hours absent. Select the appropriate value for the start date, end date, or both. If the entire absence is less that a full day, select the value in the Start Date field.

3. Do one of the following:
   - Enter *projected* dates for the absence. You can copy these later to the Actual Date fields by choosing Confirm Projected Dates.
   - Enter *actual* dates and duration as days or hours, according to the units of the balance. If you enter an end date, you must also enter the duration.

     If you want the application to automatically calculate the duration of the absence, then you can either use the schedules and calendar events features from Oracle HRMS and Common Application Components (CAC) or use a formula.

     See: Absence Duration, page 4-52

4. You can also select:
   - Reasons for the absence

- The employee authorizing the absence
- The employee who replaces the absent employee for the duration of the absence

5. Save your work.

   Note: If this absence is related to another absence (for example, they both result from the same cause), you can associate the absences using the Absence Case page.

6. If you entered an absence type that is eligible under an absence benefit plan, you can choose Enroll Absences to run the Participation Process in Absence mode. This process assesses the person's eligibility for the absence plan. If they are eligible, the process changes the status of the potential absence life event to Processed, and evaluates any standard rates linked to the plan.

   Alternatively, you can run this process for a group of employees from the Submit Requests window. See: Running the Participation Process: Absence, page 4-61.

   Note: UK Users: The Evidence and Statutory Payments buttons display, if you opened this window from an SSP menu. Please note that these buttons are only relevant to statutory absence types (sickness, maternity, paternity, and adoption).

Viewing Accruals for Plans Associated with the Absence Type

If the employee is enrolled in an accrual plan, the Accruals button is available. Choose this button to display the Associated Accrual Plans window, where you can see information about any accrual plans associated with the type of absence you are entering.

To view accruals:

1. Enter or query an absence in the Absence Detail window, and choose Accruals.
2. If nothing is displayed, run a query in the Associated Accrual Plans window to display the name and category of any accrual plans associated with the absence type.

   For each plan, three net accrual amounts are displayed:

   The **Net Entitlement** figures on the This Absence tab show the effect of the absence displayed in the Absence Detail window.

   - The **Before Absence** figure is the net accrual calculated on the day before the absence.

- The **After Absence** figure is calculated on the start date of the absence.

In most cases these figures will differ by the length of the absence you are entering. However, if the absence happens to start on the day that this period's PTO entitlement is accrued, the new accrual is also shown in the After figure. Similarly, if any other time (such as time bought or sold) is debited or credited to the accrual on that day, it is reflected in the After figure.

Projected Entitlement on the End of Plan tab shows the projected net accrual at the end of the current accrual plan term, taking account of any future absences already entered on the system. If the employee has future-dated assignment changes that affect his or her accrual entitlement, these are taken account of in the calculation.

> **Note:** This figure does not take account of absences with a *projected* start date. It only includes absences that have an actual start date.

Example

Suppose Ms. Shah is enrolled on a vacation plan that runs each calendar year starting 1 January, with a gross accrual of 2 days per month. Ms. Shah did not carry over any entitlement from last year and has taken no absences before May.

Net entitlement is calculated for the last complete accrual period (that is, the period that ends on or before the start of the absence being entered). This absence is only included in the calculation if it starts on the last day of an accrual period.

The following table shows the accrual amounts (net entitlement) that would display if you enter four absences in the sequence shown.

Absences:	2 - 4 May	31 May - 3 June	12 - 15 Aug	15 June
Before absence	8	5	7	3
After absence	5	3	3	2
End of plan term	21	17	13	12

Enrolling Employees in PTO Accrual Plans

Enroll individual participants in an accrual plan by entering for them the element generated to represent the plan.

To enroll participants in a PTO accrual plan:

1. Do one of the following:

   - For enrollment of an individual employee, perhaps as a part of the hiring process, enter the element representing the plan for him or her using the Element Entries window.

     See: Making Manual Element Entries, *Oracle HRMS Compensation and Benefits Management Guide*

   - For enrollment of a batch of employees in a plan, perhaps a newly-developed plan, use BEE.

     See: Making Batch Element Entries Using BEE, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

Overriding Length of Service

The default date for calculating length of service is the first day of the month of an employee's hire date. You can override this by entering another date when you enroll the participant in the plan. This is relevant to plans that have accrual bands based on length of service.

If you enter a date here, it is also used, instead of the employee's hire date, when the seeded formulas calculate the appropriate accrual start date for the employee. For example, if the plan's start date rule is Six Months After Hire Date, accrual will begin six months after the continuous service date you enter.

To override the default date for calculating length of service:

1. When enrolling the participant, enter the override date in the Continuous Service Date entry value of the element representing the plan.

Running the Participation Process: Absence

You can run the Participation Process: Absence to process any absence-type life events for an individual person or a group of people. The process assesses the person's eligibility for the absence plan. If they are eligible, the process changes the status of the potential life event to Processed, and evaluates any standard rates linked to the plan.

You run processes from the Submit Requests window.

To run the Participation Process: Absence

1. Select Participation Process: Absence in the Name field.

2. Enter the Parameters field to open the Parameters window.

3. Set the effective date of the process.

4. Select Commit or Rollback in the Validate field.

   Select Rollback to check your results before committing them to the database. It is easier to correct errors before you commit the results.

5. If you want to restrict the process to one person, select them in the Person Name field.

6. If you have not selected one person, you can limit the persons evaluated by the process by selecting from one or more of the following parameters.

   - Person Type
   - Organization
   - Benefits Group
   - Location
   - Postal Zip Range (US only)
   - Reporting Group
   - Legal Entity (US only)
   - Payroll

7. Select Yes in the Audit Log to create a file that lists the eligibility results for each person evaluated by the process.

   If you select Yes, you should periodically run the Participation Audit Activity Purge process to purge the audit log tables.

8. Select Yes or No in the Limit by Person's Organization field. If you select Yes, the process only handles compensation objects that have the person's organization attached.

9. Choose the OK button.

10. Complete the batch process request and choose Submit.

Running the PTO Carry Over Process

The net accrual calculation for PTO includes carried over PTO in determining an employee's accrued PTO to date. To set the net calculation rules, use the Net Calculation Rules window. To review an employee's carryover of accrued time, use the Accruals

window.

Run the PTO Carry Over Process at the end of the accrual term using the Submit Requests window. For accrual plans with a variable term start date (such as hire date), you should run the process every night to update plan information for any employees whose term has ended that day.

> **Note:** Use this procedure with the PTO accruals that your agency defines. It does not apply to the federal predefined PTO accruals.

For troubleshooting, refer to the concurrent request log that contains a summary of the accrual plans and assignments processed.

The Payroll Action Parameter *Max Errors Allowed* determines the behavior of the process when it encounters an error. If it encounters fewer than the maximum number of errors, the process completes with a warning, commits the successful assignments, and writes details to the concurrent request log of the assignments that did not process due to an error. If the process encounters the maximum number of errors, it stops processing, rolls back any processed assignments, and writes details of the errors to the log.

To help Oracle's Support organization debug an issue, you can use the Payroll Action Parameter *Logging.* If the parameter value includes a 'G' (General), all debug information is written to the log. Logging significantly reduces performance and generates large log files so it should be switched off in normal circumstances and only used for debugging purposes.

To run the PTO Carry Over process:

1. Select PTO Carry Over in the Name field. If the Parameters window does not open automatically, click in the Parameters field.

2. Enter a date in the PTO Calculation Date field and Current or Previous in the Accrual Term field. These are used by the plan's Carry Over formula to determine the effective date of the carried over PTO.

   Typically you will use the following values if you are using seeded formulas:

   - PTO_PAYROLL_CARRYOVER formula--use a calculation date of 31 December with Accrual Term = Current, or a calculation date of 1 January with Accrual Term = Previous. The effective date of the carry over is always 31 December (of current or previous year).

   - PTO_SIMPLE_CARRYOVER--use a calculation date of 31 May with Accrual Term = Current, or a calculation date of 1 June with Accrual Term = Previous. The effective date of the carry over is always 31 May (of current or previous year).

- PTO_HD_ANNIVERSARY_CARRYOVER--set calculation date to the effective date and use Accrual Term = Previous.

  Important: If you select Current for the Accrual Term and enter a calculation date that is not the end of the accrual term, this process creates future-dated carry over and residual element entries.

3. Select the name of one accrual plan to process, or select a category to process all plans in the category.

4. The Reprocess All Participants field defaults to No, so that the process affects only those plan participants not previously processed for this accrual term. To process all participants regardless of any previous processing, select Yes in this field.

   Important: Select Yes if any employees have retrospective absences or other entries that might affect net entitlement.

5. When the entry of parameters is complete, choose OK. Choose Submit to submit the request.

   The Carry Over process enters the Carried Over and Residual elements for all employee assignments included in the process.

Authorizing Creditable Service for Annual Leave

You can grant creditable service for annual leave as a retention incentive when you appoint an employee. When you update the Appointment action to the database, the application records the creditable service for annual leave in the person extra information.

If you need to change the authorized amount of creditable service, you can process a Change in Service Computation Date action or a Correction to the original Appointment action.

Use the RPA window to process an action granting the leave.

To authorize Creditable Service for Annual Leave:

1. Process an Appointment RPA action.

   See: Processing an RPA, *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

2. Click Extra Information and select US Fed Appointment Info:

> **Note:** Transfer Appointment actions do not authorize creditable service for annual leave. If you process a US Fed Appointment with Transfer, you can use the extra information to record previous authorizations.

3. In the Creditable Service for Annual Leave, enter the number of years and months.

   You must enter all four numbers, so use a zero when the year or month is less than 10. For example, to record 6 years and 4 months of creditable service, enter 0604.

4. In the SCD Leave field, recalculate the date to include the additional time.

5. Complete the Appointment action, save the action, and then route it according to your agency's practices to obtain the necessary approvals. Update the RPA.

   Upon update to HR, the application stores the creditable service for annual leave in the Person US Federal SCD extra information.

Reviewing Employees' PTO Accruals

To view information on employees' accrued PTO, use the Accruals window.

To view an employee's net PTO accrual:

1. Set your effective date to the day for which you want to calculate PTO entitlement.

2. In the Assignments Folder, query the employee's name. Choose the Accruals button to go to the Accruals window.

3. Query the accrual plan in the Name window.

   The **Dates** region shows the dates that the accrual formula uses for the entitlement calculation. These are typically from the start of the accrual term to your effective date. The **Net Entitlement** field displays the net accrued days or hours between these dates. The **Last Accrual** date is the end of the last complete accrual period, if the formula does not calculate accrual for partial periods.

   If you allow maintenance of negative balances of accrued time at your installation and an employee's time absent exceeds time accrued, the net entitlement appears as a negative number.

   > **Note:** Net Entitlement can exceed the accrual ceiling if you have increased entitlement using an adjustment element or the Carry Over element. If you have adjusted net accrual so that it exceeds the ceiling, the employee will accrue no time until net accrual falls below the ceiling.

The Entitlement Details region shows the values used in the calculation of the net entitlement:

- The <plan name> element stores current accrued time.
- The <plan name> Carried Over element stores accrued time carried over from the previous accrual term. If the plan has an expiry date for carried over time, the value shown after the expiry date is the amount of accrued time that was used. Any remaining time was lost.
- The absence element stores accrued time taken.
- Any other elements created at your site to hold values used for calculating net entitlement, such as elements to store bought or sold PTO.

If the accrual plan uses the seeded formulas, note that an absence is included in the accrued time taken figure if it starts on or before your effective date.

> **Important:** When reviewing employee accruals at the end of an accrual term, remember that carried over and residual PTO appear only after the PTO Carry Over process is run.

Viewing Absence History

Use the View Absence History window to view all absences for an employee.

To view absences for an employee:

1. Select an employee then choose the Find button.

   The absences appear in the lower part of the window. Use the standard Folder features to select a subset of these absence records, and to choose the fields to see.

Listing Employees by Absence Type

Use the List Employees by Absence Type window to see all the absence records for a particular absence type, or category of types.

To list employees by absence type:

1. Enter any combination of absence type, category, and start and end dates to define the absences to view. Choose the Find button.

   The absences appear in the lower part of the window. Use the standard Folder features to select a subset of these absence records, and to choose the fields to see.

Running the Absences Report

The Absences Report shows information about employee absences during a specified period. It can show absences:

- For an individual employee, or for all the employees in an organization
- For all types of absence, or for selected types

The report summarizes the information as totals for each absence type since the employee was first hired.

You run reports in the Submit Requests window.

To run the Absences Report:

1. In the Name field, select Absences Report.
2. Enter the Parameters field to open the Parameters window.
3. Enter the effective date for which you want to see the report.
4. Select either an organization or an employee.
5. Enter the start and end dates of the period for which you want to report absences.
6. You can choose up to 10 absence types for the report. To report on all types, leave the absence type fields blank. Choose OK.
7. Choose the Submit button.

Workforce Intelligence Key Concepts for Leave and Absence Management

Workforce Intelligence Key Concepts for Leave and Absence Management

To enable you to get the most out of Leave and Absence Management intelligence reports, you need to understand the following key concepts:

- Absence Hours, page 4-68
- Working Hours, page 4-68

Absence Hours

The Absence Hours reports use the element information created when you enter either an absence against the absence element, or an absence in the Absence Details window.

The report plots the absence hours for the date earned. This is entered for the element. If a date earned has not been entered, then the element's effective start date is taken as the date earned.

> **Note:** If you have entered your absences using the Absence Details window, a date earned is not set up; therefore the report uses the effective start date of the element.

Regardless of the length of time an employee has been absent, the report always plots his or her absence hours on the date earned, or the effective start date of an element. It is possible, because of the frequency and time period you select, that an absence may fall into two different time periods. The absence hours are always shown in the first time period, rather than pro-rata across two time periods.

A pre-defined formula, TEMPLATE_BIS_DAYS_TO_HOURS, calculates the absence hours. You can configure this formula to meet your requirements.

See: Discoverer Workbooks Implementation Steps, *Oracle HRMS Strategic Reporting (HRMSi) User Guide*

Working Hours

Within Oracle HRMS, you record the number of regular and overtime hours worked using elements. The Hours Worked reports process information for the hours worked through formulas, which you must provide using Oracle FastFormula.

See: Setting Up and Customizing Working Hours, *Oracle HRMS Strategic Reporting (HRMSi) User Guide*

The Hours Worked reports calculate the hours worked for each payroll time period using employee assignments. For the assignment to be included it must:

- Be active or suspended.
- Fit the criteria you enter. For example, if you enter a grade name, the assignment must have that grade entered against it.

> **Note:** You can only run the Hours Worked reports if you previously set up Oracle FastFormula to calculate your employees' regular hours and overtime hours.

The Hours Worked reports display information about the payroll periods that most closely match the start and end dates that you enter for the report. For example, if the first date you enter is 05-Jan-2001, and the payroll begins on 01-Jan-2001, the report includes information from 01-Jan-2001.

Workforce Intelligence for Leave and Absence Management

Employee on Leave Detail Workbook

This workbook enables you to report on employees who are on a leave of absence on a particular effective date. The workbook shows the following employee primary assignment details:

- Employee number
- Organization
- Supervisor
- Location
- Hire date
- Absence details, including date start and date end

Worksheets

This workbook has the following worksheets:

- Organization Hierarchy
- Supervisor Hierarchy

Organization Hierarchy Worksheet

This worksheet enables you to report on employees who are on leave on the effective date chosen. Employees are listed for a given organization and its subordinate organizations. The additional parameter, Absence Types to Exclude, enables you to exclude absence types that are not of interest, for example, Unpaid Leave.

Business Questions

When are my employees in an organization hierarchy on leave?

Parameters

You must specify values for the following parameters:

- Organization Hierarchy

- Top Organization
- Effective Date

Supervisor Hierarchy Worksheet

This worksheet enables you to report on employees who are on leave on the effective date chosen. Employees are listed for a given supervisor and his/her subordinates. The additional parameter, Absence Types to Exclude, enables you to exclude absence types that are not of interest, for example, Unpaid Leave.

Business Questions

When are employees, reporting directly or indirectly to a specific supervisor, on leave?

Parameters

You must specify values for the following parameters:

- Supervisor
- Effective Date

5

Setup for Health and Welfare Management

Set up for Health and Welfare Management Overview

Oracle US Federal HR includes predefined US Federal Employee Health Benefits (FEHB) and Thrift Savings Plan (TSP) plans and options that you can administer through the benefits self-service or user interface.

To design benefit programs that you offer to your employees and other eligible participants, you can use the implementation features of Standard and Advanced Benefits. You can define eligibility and enrollment requirements for programs and plans, set up activity rate calculations, and define reporting groups and system extracts. Use the administration features of Standard and Advanced Benefits to manage benefits enrollments and to maintain your benefit programs.

See: Administration for Health and Welfare Management Overview, page 6-1

Features Common to Standard and Advanced Benefits

Standard and Advanced Benefits share a number of common setup features:

- **Eligibility Profiles:** You set up participant eligibility profiles and dependent coverage eligibility profiles to restrict who is able to participate in a benefit plan.
- **Enrollment Requirements:** You define enrollment requirements to determine *when* an eligible person can enroll in a benefit plan.
- **Activity Rates:** You define an activity rate calculation to determine the standard or variable contribution or distribution for a benefit. Activity rates also control the calculation of coverage amounts, monthly premiums, and imputed income taxation.
- **System Extract:** The system extract feature lets you manage the extract and format of person benefits data for delivery to organizations such as third party benefits administrators.

- **Plan Design Copy:** Use this feature to save time during your implementation. You can set up your plan design in a test database, for example, then use Plan Design Copy to transfer the finalized design into your production database without repeating data entry. For plans that share components, you can define a plan once, then modify copies of the base plan as necessary.

Managing Benefits Using SSHR

US Federal employees can use self-service to enroll and manage their Federal Employee Health Benefits and Thrift Savings Plans elections. Employees can review their current, past, and future benefit elections from their My Information self-service page, as well as other employment-related information. You can administer benefits for employees as well using the benefit user interface.

See: US Federal Self Service Benefits, page 5-4

Key Concepts

To broaden your understanding of Standard Benefits, and features common to both Standard and Advanced Benefits, see:

Plan Design, page 1-49

Plan Design Copy, page 1-56

Eligibility Requirements for Total Compensation, page 1-108

Activity Rates, page 5-109

Benefits System Extract, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

Self-Service Benefits Enrollments, *Oracle HRMS Deploy Self-Service Capability Guide*

Standard and Advanced Benefits Implementation

Oracle HRMS provides a complete solution for Total Compensation management. Your Oracle Human Resources license includes the Standard Benefits feature set that enables you to manage your enterprise's benefits offerings.

Standard Benefits provides the functionality you need to administer benefit programs that do not offer flex credit based benefits. Use standard benefits to administer health benefit plans, savings plans, and retirement plans.

Basic Benefits provides the functionality you need to administer additional employee benefits, such as flexible spending accounts.

What kinds of benefit plans are supported by Oracle HRMS?

You can use the product to manage the most typical plan types, including:

- Federal Employee Health Benefit plans
- Savings plans (such as Thrift Savings Plans)

When you process an Appointment RPA action, if the employee is enrolled in a retirement plan such as the Federal Employee Group Life Insurance, the application automatically creates an Assignment element for that life insurance. In addition, you can accommodate other forms of benefits such as uniforms or other goods or services for which your agency offers employee reimbursement.

Are there benefits for specific federal plans?

The product comes with predefined plans and options for Federal Employee Health Benefits and Thrift Savings Plans. It also comes with elements for standard benefits, such as the Federal Employees Group Life Insurance.

Can you restrict who is eligible to receive a benefit?

You use *eligibility profiles* to restrict which participants may enroll in a given benefit. You create an eligibility profile by grouping together your eligibility criteria, such as work and personal factors.

You create a *dependent coverage eligibility profile* when you want to restrict the criteria that must be met for a dependent to be covered by a benefit.

Does the product automatically qualify events?

Database changes to a person's record may function as a *life event reason* that enables an enrollment action. An *enrollment action* is an enrollment, de-enrollment, change in election, or change in contribution rate that the application implements either automatically, by default, or at the explicit request of the participant.

When a life event occurs to a participant, the application evaluates the life event to determine benefits eligibility and electable enrollment choices.

If you reassign an employee to a different duty station location, the application initiates a life event that permits the employee to select a health plan available in that location.

Can I record coverage for dependents?

Yes, for benefits classified as Medical, you can establish coverage for the employee's dependents.

US Federal Self-Service Benefits Setup

US Federal Self Service Benefits

US Federal employees can use self-service to enroll and manage their Federal Employee Health Benefits and Thrift Savings Plans elections. Employees can review their current elections using self-service benefits. They can also review their current, past, and future benefit elections from their My Information self-service page, as well as other employment-related information.

See: Information Overview , *Oracle HRMS Deploy Self-Service Capability Guide*

Federal Employee Health Benefits

Federal government employees can elect, change, or cancel Federal Employee Health Benefits (FEHB). You can enroll employees when you process an Appointment, Conversion to Appointment, or Extension RPA. Employees enroll and manage their FEHB benefits using self-service. As an HR specialist, you can also enroll and administer benefits for employees using the professional user interface.

See: Federal Employee Health Benefits Overview, page 6-4

Thrift Savings Plans

Federal government employees covered by the Federal Employee's Retirement System (FERS) and the Civil Service Retirement System (CSRS) can participate in Thrift Savings Plans (TSP) and, where eligible, contribute to Thrift Savings Catch-up plans.

You can enroll employees when you process an Appointment, conversion to Appointment, or Extension RPA. Employees enroll and manage their TSP benefits using Oracle Self-Service Human Resources (SSHR). As an HR specialist, you can also enroll and administer benefits for employees using the professional user interface.

See: Thrift Savings Plan Overview, page 6-10

Appointment, Conversion, and Extension Enrolments

When you process an Appointment or Conversion to Appointment RPA action, you can enter employee benefits, and upon update to HR, the application establishes the Health Benefits elements, Federal Employee Group Life Insurance, and Thrift Savings Plan (TSP) elements. Similarly, for Extension actions, you can enter new employee benefits and change existing health benefits. (OPM does not authorize changes to these benefits for Extension actions.)

When you update the RPA action, the application initiates appropriate potential life events, such as an Initial Opportunity. The employee can then modify the choices

during the life event period using self-service, or you can enter the elections for the employee using the professional user interface.

See: Appointment, Conversion, and Extension Enrolments, page 6-4

Benefits Enrollments

This topic provides reference information you need to configure your Self-Service Benefits web pages using the Personalization Framework.

For **instruction text**, the tables below list--by web page region--the communication short name and the valid communication usages that are required when you define a communication type to display instruction text for a particular program, plan type, plan, or life event.

See: Defining Self-Service Instruction Text, *Oracle HRMS Compensation and Benefits Management Guide*

Hidden Fields: This topic also lists--by web page region--all fields the application delivers as hidden which you can display using the Personalization Framework.

For example, by default all person name fields in Self-Service Benefits display names in the format 'First Last Suffix' (without commas between the parts of the name.) You can add the Full Name field to a web page and remove the delivered Name field. In the US, the Full Name field uses the format 'Prefix Last, First Middle Suffix'.

Menu and Function Names

This module can be accessed from the following menus and functions:

User Menu Name	Function Name
Employee Self-Service	Self-Service Benefits Enrollment - Employee
Employee Self-Service	Self-Service Benefits Enrollment - Federal

Configurable Pages and Shared Regions

The following definitions can be configured using the Personalization Framework:

Family Members and Others, and Family Members and Others Detail Page

The Family Members and Others page enables a participant to view a record of their family members and other persons enrolled as dependents or beneficiaries of their benefits. Benefits participants can add another person to the Family Members and Others table by choosing the Add Another Person button, which opens the Family

Members and Others Details page.

This page only displays when a person has either:

- An enrollment opportunity
- Eligibility for an unrestricted program
- A detected or unprocessed potential life event as of the system date

If one of these conditions does not exist, the application opens the Current Benefits page.

The seeded life event reason of *Added During Enrollment* prevents a life event from occurring when you create a family member or update a family member's details. If you define a life event reason of the type Personal, that you make Selectable for Self Service, you can trigger a life event when a person enters or deletes a contact on the Self-Service Human Resources Contacts page and selects a relationship start or end reason.

> **Note:** It is recommended that you provide instruction text indicating that eligibility for benefits may be based on family members. However, you cannot use communication usages to restrict the display of instruction text to a compensation object or a life event for the Family Members page.

Hidden Field: Use the BEN_FAMILY_MBRS_TABLE region to add the hidden Full Name field to the page and to remove the Name field if necessary.

Family Members and Others

Region	Tip Type	Message Name	Required Communication Short Name	Valid Communication Usages
Members Content	Instruction		FML.FAMILY_MBRS_CONTENT	Program, Life Event
Family Members Content	Help Tip			

Family Members and Others Detail Page

Region	Tip Type	Message Name	Required Communication Short Name	Valid Communication Usages
Add or Update Family Members	Instruction		FML.FAM_ADD_CONTENT	Program, Life Event
Name and Relationship	Instruction		FML.FAM_ADD_NAME	Program, Life Event
Address	Instruction		FML.FAM_ADD_ADDRESS	Program, Life Event
Miscellaneous Information	Instruction		FML.FAM_ADD_OTHER	Program, Life Event
Second Medical Coverage	Instruction		FML.FAM_ADD_SECOND_MEDICAL	Program, Life Event
Address	Help Tip			
Name and Relationship	Hint (Suffix)	92638	__	__
Address	Hint (Postal Code)	92639	__	__
Miscellaneous Information	Hint (National Identifier)	92640	__	__
Miscellaneous Information	Hint (Date of Birth)	92637	__	__
	Message (Required Field Missing)	92601	__	__
	Message (Invalid Birth Date)	92598	__	__

Configurable FlexFields

Family Members and Others Page

Region	Flex Name	Flex Code
Add or Update Family Members	Further Person Information	hrpersondevdfflex
Miscellaneous Information	Additional Contact Relationship Details	Add Cont Details D Flexfield

See: Configuring Flexfields, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

Benefits Enrollment Overview Page

The Benefits Enrollment Overview web page enables a participant to view a record of their current benefits and to enroll into a new set of benefits.

Hidden Fields: You can use the following regions to add the hidden Full Name field to the page and to remove the Name field if necessary.

- BEN_OVW_SELECTIONS_TABLE
- BEN_OVW_CVRD_DEPS_TABLE
- BEN_OVW_BENEF_TABLE
- BEN_OVW_PCP_TABLE

You can use the BEN_OVW_SELECTIONS_TABLE region to display a column for the taxable cost of a benefit. This column corresponds to a standard rate with an activity type of Self-Service Display, or--if you are displaying multiple rates for the compensation object--to the rate you have defined with 3 in the Self Service Display Order field. If you are displaying multiple rates, you can also display the Cost 2 (After Tax Cost) and Cost 4 (Miscellaneous) columns to show the rates you have defined with 2 and 4 in the Self Service Display Order field.

You can also use the BEN_OVW_SELECTIONS_TABLE region to display Coverage Start and End Date columns. These columns show the coverage start and end dates for each election.

Benefits Enrollment Overview Page

Region	Tip Type	Message Name	Required Communication Short Name	Valid Communication Usages
Enrollment Overview Content	Instruction		BEO.ENRL_OVERVIEW_CONTENT	Program, Life Event
Flex Credits	Instruction		BEO.FLEX_CREDITS	Program, Life Event
Flex Credit Summary	Instruction		BEO.OVERVIEW_FC_SUMMARY	Program, Life Event
Flex Credit Rollovers	Instruction		BEO.FLEX_CREDIT_ROLLOVERS	Program, Life Event
Benefit Selections	Instruction		BEO.OVERVIEW_SELECTIONS	Program, Life Event
Covered Dependents	Instruction		BEO.OVERVIEW_CVRD_DEPS	Program, Life Event
Beneficiary Enrollment Overview	Instruction		BEO.ENRL_OVERVIEW_BENEF	Program, Life Event
Primary Care Providers Enrollment Overview	Instruction		BEO.ENRL_OVERVIEW_PCP	Program, Life Event
Enrollment Overview Content	Message (No Enrollment Opportunity, Brief Message)	92570	--	--

Region	Tip Type	Message Name	Required Communication Short Name	Valid Communication Usages
Enrollment Overview Content	Message (No Enrollment Opportunity, Detail Message)	92571	--	--

Current Benefits Overview Page

The Current Benefits Overview web page enables a participant to see a record of their current benefits.

Hidden Fields: You can use the following regions to add the hidden Full Name field to the page and to remove the Name field if necessary.

- BEN_OVW_CVRD_DEPS_TABLE
- BEN_OVW_BENEF_TABLE
- BEN_OVW_PCP_TABLE

You can also use the BEN_OVW_SELECTIONS_TABLE region to display Coverage Start and End Date columns. These columns show the coverage start and end dates for each election.

Current Benefits Overview Page

Region	Tip Type	Message Name	Required Communication Short Name	Valid Communication Usages
Current Benefits Overview Content	Instruction		CBO.CURRENT_OVERVIEW_CONTENT	Program
Flex Credits	Instruction		CBO.FLEX_CREDITS	Program
Flex Credit Summary	Instruction		CBO.OVERVIEW_FC_SUMMARY	Program

Region	Tip Type	Message Name	Required Communication Short Name	Valid Communication Usages
Flex Credit Rollovers	Instruction		CBO.FLEX_CREDIT_ROLLOVERS	Program
Benefit Selections	Instruction		CBO.OVERVIEW_SELECTIONS	Program
Covered Dependents	Instruction		CBO.OVERVIEW_CVRD_DEPS	Program
Beneficiary Overview	Instruction		CBO.OVERVIEW_BENEF	Program
Primary Care Providers Overview	Instruction		CBO.OVERVIEW_PCP	Program
Current Benefits Overview Content	Message (No Current Enrollment, Brief Message)	92572	—	—
Current Benefits Overview Content	Message (No Current Enrollment, Detail Message)	92573	—	—

Benefits Selection Page

The Benefits Selection page enables a participant to select one or more plans in which to enroll.

Region	Tip Type	Message Name	Required Communication Short Name	Valid Communication Usages
Enrollment Selection Content	Instruction		BNS.ENRT_SELECTION_CONTENT	Program, Life Event

Region	Tip Type	Message Name	Required Communication Short Name	Valid Communication Usages
Top Flex Credit Region	Instruction		BNS.ENRT_SELECTION_CR_TOP	Program, Life Event
Bottom Flex Credit Region	Instruction		BNS.ENRT_SELECTION_CR_BOTTOM	Program, Life Event
Selection Area	Instruction		BNS.ENRT_SELECTION_SELECT_AREA	Program, Plan Type, Life Event
Selection Area	Help Tip (Certification Legend)			
Selection Area	Help Tip (Enter Annual Rate Input Box, Long Tip)			
Selection Area	Help Tip (Enter Rate Input Box, Long Tip)			
Selection Area	Help Tip (Enter Benefit Amount Input Box, Long Tip)			
Selection Area	Message (Enter Annual Rate, Long Tip)	BEN_ENRT_ANN_RTVAL_TIP		
Selection Area	Message (Enter Rate, Long Tip)	BEN_ENRT_BNFTAMT_TIP		
Selection Area	Message (Enter Benefit Amount Tip)	BEN_ENRT_RTVAL_TIP		

Region	Tip Type	Message Name	Required Communication Short Name	Valid Communication Usages
Selection Area	Message (Tokens for above messages)	BEN_ENRT_SLECT_TIP_ANY_AMOUNT		
Selection Area	Message (Tokens for above messages)	BEN_ENRT_SLECT_TIP_ANY_VALUE		

Dependents Selection Page

The Dependents Selection page enables a participant to add their dependents to a plan.

> **Note:** For Advanced Benefits customers: if participant dependents are not displaying in this page, verify that you have linked the appropriate life events to the program or plan enrollment requirements in the Dependent Change of Life Event window.

Hidden Field: Use the BEN_ENRL_DEPEN_SELECTION_TABLE region to add the hidden Full Name field to the page and to remove the Name field if necessary.

Dependents Selection Page

Region	Tip Type	Message Name	Required Communication Short Name	Valid Communication Usages
Dependents Selection	Instruction		--	--
Dependents Selection	Instruction		DPS.ENRL_DEPENDENTS_CONTENT	Program, Life Event
Dependents Selection	Hint (Dependent Table)		DPS.ENRL_DEPENDENTS_CONTENT_PL	Program, Plan Type, Plan, Life Event

Region	Tip Type	Message Name	Required Communication Short Name	Valid Communication Usages
Dependents Selection	Message (Can't Designate)	92588	__	__

Beneficiary Selection Page

The Beneficiary Selection page enables a participant to add their beneficiaries to a plan.

Hidden Field: Use the BEN_BENEF_SELECTION_TABLE region to add the hidden Full Name field to the page and to remove the Name field if necessary.

Region	Tip Type	Message Name	Required Communication Short Name	Valid Communication Usages
Beneficiary Selection	Instruction (Page)		BFS.BENEFICIARY_CONTENT	Program, Life Event
Beneficiary Selection	Instruction (Plan Level Table)		BFS.BENEFICIARY_CONTENT_PLAN	Program, Plan Type, Plan, Life Event
Family Members and Others	Instruction		BFS.BENEFICIARY_CONTENT_FAMILY	Program, Plan Type, Plan, Life Event
Organizations	Instruction		BFS.BENEFICIARY_CONTENT_ORGS	Program, Plan Type, Plan, Life Event
Beneficiary Totals Table	Hint			
Beneficiary Selection	Message (Can't Designate)	92587	__	__

Primary Care Provider Page

The Primary Care Provider page enables a participant to select a care provider. If your enterprise partners with a third party supplier of primary care provider information,

you can configure this page to allow web-based searches of a database of provider information.

See: Configuring the Primary Care Provider Search Facility, *Oracle HRMS Compensation and Benefits Management Guide*

Region	Tip Type	Message Name	Required Communication Short Name	Valid Communication Usages
Primary Care Provider Selection Content	Instruction	Instruction	PCP.PcpSelectContentPageLevel	Program, Life Event
Primary Care Provider Selection Content	Instruction	Instruction	PCP.PcpSelectContentPlanLevel	Program, Plan Type, Plan, Life Event
Primary Care Provider Selection Content	Hint		—	—
Primary Care Provider Selection Content	Message (Can't Designate)	92567	—	—

Primary Care Provider Summary and Search Pages

Hidden Fields: You can use the following regions to add the hidden Full Name field to the page and to remove the Name field if necessary.

- BEN_PCP_SEARCH_TABLE
- BEN_PCP_SELECT_TABLE

On the Primary Care Provider Search page, you can use the BEN_PCP_SEARCH_CRITERIA region to add the hidden fields of Physician Group and Hospital. The hidden fields of Location, School, and Degree are reserved for future use.

For the Physician Group, Hospital, Language, and Specialty fields, you must load the available data as provided by your third party provider into the corresponding Lookup Codes--in the following order--using the Application Utilities Lookups window in the Professional User Interface.

- BEN_PCP_MED_GRP
- BEN_PCP_HOSPITAL
- BEN_PCP_LANGUAGE
- BEN_PCP_SPCLTY

Region	Tip Type	Message Name	Required Communication Short Name	Valid Communication Usages
Primary Care Provider Search	Instruction		PCS.PCP_SEARCH	Program, Plan Type, Plan, Life Event
Search	Instruction		PCS.PCP_SEARCH_CRITERIA	Program, Plan Type, Plan, Life Event
PCP Result Table	Instruction		PCS.PCP_SEARCH_RESULT	Program, Plan Type, Plan, Life Event
Ben PCP XML Request Params	Tip			
Ben PCP XML Request Params	Message (No PCPs found)			

Confirmation Page

The Confirmation page enables a participant to see a summary of their choices and a warning of any oversights or miscalculations they may have made.

> **Note:** You can also use the Confirmation page to display a *signature region* for participants to print from their web browser. Use this region if you require a participant's signature as part of a benefits enrollment. Use the Personalization Framework to display the signature region for this page.

Benefits users can print a summary statement of their enrollment, along with their signature, to keep as a proof of their records or to submit to an HR Representative if required. They can also view, print, or save the summary as a PDF document instead. The statement page displays a summary of the participant's benefits enrollment along

with any warning messages, oversights, or miscalculations the participant may have made during the enrollment. Depending on the participant's enrollment data and personalization on the page, the Confirmation Page displays the following:

- Flex credits summary
- Benefits selection
- Covered dependents
- Beneficiaries
- Primary care providers
- Signature region

To print a benefits confirmation statement, click Printable Page. The printable page prints only the relevant information, excluding navigation buttons, tip messages, instruction text, tabs, and other user interface components.

To open or save the statement as a PDF document, click Publish PDF. Choose Open or Save in the File Download dialog box. You can print the document once you open it.

If you want to change the layout of the PDF Confirmation page, you can configure a copy of the default RTF template that XML Publisher uses for this page, which is Benefits Enrollment Confirmation.

Hidden Fields: You can use the following regions to add the hidden Full Name field to the page and to remove the Name field if necessary.

- BEN_OVW_BENEF_TABLE
- BEN_OVW_CVR_DEPS_TABLE
- BEN_OVW_PCP_TABLE

You can use the BEN_OVW_SELECTIONS_TABLE region to display a column for the taxable cost of a benefit. This column corresponds to a standard rate with an activity type of Self-Service Display, or--if you are displaying multiple rates for the compensation object--to the rate you have defined with 3 in the Self Service Display Order field. If you are displaying multiple rates, you can also display the Cost 2 (After Tax Cost) and Cost 4 (Miscellaneous) columns to show the rates you have defined with 2 and 4 in the Self Service Display Order field.

You can also use the BEN_OVW_SELECTIONS_TABLE region to display Coverage Start and End Date columns. These columns show the coverage start and end dates for each election.

Region	Tip Type	Message Name	Required Communication Short Name	Valid Communication Usages
Ben Enrollment Confirmation Content	Instruction		BEC.ENRL_CONF_CONTENT	Program, Life Event
Flex Credits	Instruction		BEC.FLEX_CREDITS	Program, Life Event
Flex Credit Summary	Instruction		BEC.OVERVIEW_FC_SUMMARY	Program, Life Event
Flex Credit Rollovers	Instruction		BEC.FLEX_CREDIT_ROLLOVERS	Program, Life Event
Benefit Selections	Instruction		BEC.OVERVIEW_SELECTIONS	Program, Life Event
Covered Dependents	Instruction		BEC.OVERVIEW_CVRD_DEPS	Program, Life Event
Beneficiaries Enrollment Confirmation	Instruction		BEC.ENRL_CONF_BENEFICIARIES	Program, Life Event
Primary Care Providers Enrollment Confirmation	Instruction		BEC.ENRL_CONF_PCP	Program, Life Event
BEN_ENRL_CONF_WARNINGS	Message (Confirmation Success)	92605	—	—
BEN_ENRL_CONF_WARNINGS	Message (Action Item Warning)	92606	—	—

Configurable FlexFields

Confirmation Page

Region	Flex Name	Flex Code
Benefit Selections	Additional Ben Prtt Enrt Rslt F Details	N/A

Unused Flex Credits Page

The Unused Flex Credits page provides a summary of the flex credits left unspent by a participant.

Region	Tip Type	Message Name	Required Communication Short Name	Valid Communication Usages
Unused Flex Credits Content	Instruction		FLX.UNUSED_FLEX_CREDIT_CONTENT	Program, Life Event
Unused Flex Credits Content	Instruction		FLX.UNUSED_FLEX_CREDIT_NONE	Program, Life Event
Unused Flex Credits Content	Message (No Unused Flex Credits)	92633	—	—
Unused Flex Credits Content	Message	92632	—	—

Change Session Date Page

The Change Session Date page lets you test future-dated elections. For example, you may want to perform system testing before the start of an open enrollment period. This page should be removed in your production environment so that benefits participants do not alter their enrollment date.

See: Setting the Effective Date of a Scheduled Enrollment in Self-Service Benefits, *Oracle HRMS Compensation and Benefits Management Guide*

Region	Tip Type	Message Name
Session Date Content	Instruction	92604
Session Date Content	Tip (Effective Date)	92637

Temporary ID Card Page

The Temporary ID Card page lets a participant print an ID card which the participant can use to obtain medical, dental, or other benefit treatment before the participant receives the official membership card from the provider.

Region	Tip Type	Message Name	Required Communication Short Name	Valid Communication Usages
Oracle Self-Service Human Resources Identification Card	Instruction		TMP.ENRL_TEMP_ID_PAGE	Program, Life Event
Ben Temporary ID Card Content	Instruction		TMP.ENRL_TEMP_ID_PLAN	Program, Plan Type, Plan, Life Event
Temporary ID Card	Instruction		TMP.ENRL_TEMP_ID_CARD	Program, Plan Type, Plan, Life Event

See: Configuring Web Pages, *Oracle HRMS Deploy Self-Service Capability Guide*

Self-Service Benefits What-if Pages

You can access Self-Service Benefits What-if from the following menus and functions:

Menu and Function Names

User Menu Name	Function Name
Manager Self-Service	Self-Service Benefits What-if Manager
Employee Self-Service	Self-Service Benefits What-if Employee

You can configure the following definitions using the Personalization Framework.

Configurable Tips and Instructions

Region	Tip Type	Message Name
Impact on Benefits Region	Header Text	BEN_93423_SS_WATIF_HDR_LABEL
Choose Winning Life Event Region	Message (Error)	BEN_93393_WATIF_CONFLICT_LER
Choose Winning Life Event Region	Instruction	BEN_93392_WATIF_CNFLT_LER_INS
Effective Date Region	Instruction	BEN_93389_WATIF_EFF_DATE_INS
Associated Data Changes Region	Instruction	BEN_93391_WATIF_DATA_CHG_INS
Impact on Benefits Region	Instruction	BEN_93394_WATIF_PG_INS_TEXT

You can personalize the following columns to display them:

Seeded Hidden Columns

Column Name	Displayed Detail
Reference Period	Activity Reference Period

Column Name	Displayed Detail
Current Electable	Compensation objects currently electable
Current Coverage	Coverage information about currently electable compensation objects
Current Defined Amount	Defined Amount
What-If Electable	Compensation objects based on the what-if modeling
What-If Coverage	Coverage information about compensation object based on the what-if modeling
What-If Defined Amount	Defined Amount based on what-if modeling

Setting Up User Access to Self-Service Benefits

Self-Service Benefits functions are attached to the Benefits Self-Service menu. You can change menu names and function names, or remove menus and functions if required.

As a standard practice, you should copy and edit all delivered menus you want to update. Otherwise, your changes will be overwritten the next time you apply a patch to the application.

See: Configuring Tabbed Regions, *Deploy Self-Service Capability Guide*

See: User's Menu *(Oracle Applications System Administrator's Guide)* for more information on configuring menus.

To set up user access to self-service benefits:

1. Log on to Oracle HRMS with the System Administrator responsibility.
2. Open the Menus window.
3. Query the Self-Service Menu in the Menu field: GHR_EMPLOYEE_DIRECT_ACCESS. The following Self-Service User Menu Name displays to users:
   - Federal Employee Self-Service

   You can change the menu name if required.
4. Query the global Benefits Submenu in the Menu field:

BEN_SELF_SERVICE_BENEFITS. The following Benefits Submenu User Name displays:

- Benefits Self Service

Because the Benefits Self Service submenu is not linked to a top level menu (it has no prompt) the submenu is hidden. The Benefits Self Service submenu has the following prompts.

- Benefits Enrollment
- Current Benefits

These prompts function as the labels on the tabs of the self-service web page.

5. Save your work.
6. Add a new row for the US Federal benefits function.
7. Enter a sequence number.
8. Enter a prompt, such as US Federal HR Benefits.
9. Choose the Self-Service Benefits Enrollment - Federal function, (GHR_SS_BNFT_ENRT).
10. Save your work and close the Menus window.
11. You can use the Form Functions window to customize the predefined functions--GHR_SS_BNFT_ENRT.
12. Use the Form Functions window to create your own Self-Service Benefit functions from the sample functions supplied. The sample User Function Names are:
    - Self Service View Current Benefits
    - Self Service Benefits Enrollment

    The Function Names are:
    - BEN_SS_CURR_BNFT
    - GHR_SS_BNFT_ENRT

    If you update the predefined functions, you must update your custom function to use the predefined parameters and HTML Calls.

    Note: It is a good practice to check the Readme for each Self-Service Benefits patch you apply to see if the parameters and HTML Calls

for the predefined functions have changed.

See: Form Functions Window *(Oracle Applications System Administrator's Guide)*

13. Set Security Profiles. Use the System Profile Values window to link the responsibility you have created to a Security Profile and your Business Group. The Security Profile is:

    - HR: Security Profile

      Note: If you fail to link your Responsibility to your Business group with the HR: Security Profile, any benefits participants who attempt to enroll will receive an error message indicating they cannot enroll.

    See: User Profiles (*Oracle Applications User's Guide* and *Oracle Applications System Administrator's Guide*)

14. Set the HR: Business Group Profile. Use the System Profile Values window to link the responsibility you have created to your Business Group. The Business Group Profile is:

    - HR: Business Group

15. Define the people you would like to access Self-Service Benefits.

    There are two ways to do this. You can follow the typical steps for defining a new user and assign each user a responsibility that enables access to Self-Service Benefits, one at a time.

    See: Users Window *(Oracle Applications System Administrator's Guide)*.

    Or, you can set up concurrent programs to automate this manual process.

Enabling US Federal Benefits Notifications

As a general practice, most federal personnel offices approve a participant's benefits elections, such as health benefit and TSP selections. If your agency's policies include this review or approval process, you can have Oracle workflow send a notification to the POI groupbox when employees enroll or update their benefit elections. The notification contains a link to the employee's confirmation page. After reviewing the elections, you can contact the participant to correct and resubmit the elections or manually override the changes in the professional user interface.

When you want to change the predefined function, you copy and rename the original process. By leaving the original process intact, you can refer to it and also use it as a basis for future upgrade. After you copy the process, use the Function window and the

system administrator responsibility to change the notification setting and attach the function to your menu Federal Employee Self Service Benefits.

See: Defining SSHR Functions, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

To have Oracle Workflow send the POI groupbox a benefit notification:

1. Click the Forms tab.
2. Query the function GHR_SS_BNFT_ENRT
3. Navigate to the Parameters field and change the send Notification parameter from N to Y. The entire parameter should read:

   displayDate=N&allowEnrt=Y&ssProcessUnrestricted=Y&sessionDate=&sendFYINotification=Y&wfProcessName=GHR_FYI_NOTIFICATION_PRC&displayAgreement=N
4. Save the form function.

Setting up FEHB

Before the employees or human resource personnel can access self-service benefits through the self-service user interface or the professional forms interface, you must set up FEHB.

> **Note:** Do not add or update life events associated to the predefined FEHB program and plan enrollment requirements.

To set up US Federal Employee Health Benefits:

1. Run the Plan Design Import concurrent process.

   This process runs for all the business groups.

   See: Importing a Plan Design From a File, page 1-103
2. Run the Populate FEHB Program and Plan Design concurrent manager program.

   This process runs for the business group associated with your login's responsibility.

   See: Running the Populate FEHB Program and Design Plan Process, page 5-26
3. Compile the FEHB fast formulas for each business group.

   See: Compiling FEHB Fast Formulas, page 5-26
4. Set up user access.

See: Set Up User Access to Self-Service Benefits, page 5-22

5. Set up notifications.

   When an employee has selected their benefits, the application notifies the Personnel Office groupbox. If you do not want the POI groupbox to receive these notifications, you can deselect this option.

   See: Enabling US Federal Benefits Notifications, page 5-24

6. If you have maintained employee benefit records based on the health benefit elements, migrate these FEHB employees to the benefits model.

   See: Migrating FEHB Information, page 5-27

7. Set up a batch process to close an employee's enrollment after the employee or HR has entered the elections and to resolve any incomplete election information.

   See: Benefits Batch Processes, page 6-40

Populating FEHB Programs and Design Plans

Before you can access the predefined programs and plans for Federal Employee Health Benefits, you must run a concurrent manager process that installs this data.

Use the Submit Processes and Reports window.

To run the Populate FEHB Program and Design Plan Process:

1. In the Name field, choose Populate FEHB Program and Design Plan from the list of values.

   The application enters the business group associated with your login's responsibility in the Parameters field.

2. Click Submit.

3. If you have more than one business group, login with a different responsibility and repeat these steps to populate FEHB program and plans for that business group.

What's Next

See: Compiling FEHB Fast Formulas, page 5-26

Compiling FEHB Fast Formulas

After you populate the Federal Employee Health Benefit plans and programs for each business group, you must compile the fast formulas for the same business groups.

See: Running the Populate FEHB Program and Design Plan Process, page 5-26

Use the Submit Requests and Processes window.

To compile individual formulas:

1. In the Name field, choose Compile Formula.
2. In the Parameters window, choose the formula type and formula name.
   - Formal Type: Extra Input
   - Formula Names: FEHB_GET_PLAN_OPTION_SHORT_CODE
3. Choose the Submit button.
4. Repeat these steps, substituting the following parameter information for the remaining fast formulas.

Formula Type	Formula Name
Person Change Causes Life Event	GHR_CONT_LER_TRIGGER
Person Change Causes Life Event	GHR_ADDRESS_LER_TRIGGER
Person Changes Causes Life Event	GHR_MARI_STATUS_LER_TRIGGER
Participation and Rate Eligibility	FEHB_PLAN_ELIGIBILITY
Participation and Rate Eligibility	GHR_FEHB_PGM_ELIGIBILITY
Enrollment Opportunity	GHR_FEHB_PLAN_ELECTABLE

Migrating FEHB Information

After you populate the FEHB plans, you must convert the existing records for employees participating in FEHB to the Federal Benefits model.

The conversion process migrates the last updated record of the Health Benefits element. If the Pre Tax Waiver is blank (null) or N, the application:

- Migrates the information to a newly created Health Benefits Pre Tax element

  The Health Benefits Pre Tax element has the same effective start date as the previous Health Benefit element.

- Deletes the previous Health Benefit element
- Updates the Premium Rate input value to 0

If the Pre Tax Waiver is Y, the application migrates the record to the Health Benefits element, and updates the Premium Rate input value to 0.

Use the Submit Processes and Reports window.

> **Note:** The process runs against the business group of your login's responsibility.

To migrate employees to FEHB plans:

1. In the Name field, choose Federal Benefits - FEHB Conversion of Benefits from the list of values.
2. Click Submit.
3. If you have more than one business group, login with a different responsibility and repeat these steps for each business group.

Setting up TSP and TSP Catch-Up

Before the employees or human resource personnel can use benefits self-service or the professional forms interface to enroll in Thrift Savings Plans (TSP), you must populate the predefined plans and programs and then migrate the employees who currently contribute to TSP.

> **Note:** If you install TSP, install TSP Catchup as well. Complete the set-up for TSP before starting TSP Catch-up, and complete each concurrent process before proceeding to the next step.

To Set Up TSP:

1. Review the pay period pay dates to confirm that they correspond to your agency's payroll pay dates.

   The application uses the pay period pay date to determine the employee's eligibility.

   See: Updating the Pay Period Pay Dates, *Oracle HRMS Payroll Processing Management Guide*

2. Run the Populate TSP program and plan design concurrent manager program for each business group.

See: Running the Populate TSP Program and Plan Design Process, page 5-30

3. Compile the TSP fast formulas for each business group.

   See: Compiling TSP and TSP Catch-Up Fast Formulas, page 5-31

4. Set up user access.

   See: Set Up User Access to Self-Service Benefits, page 5-22

5. Set up notifications.

   When an employee has selected their benefits, the application notifies the Personnel Office groupbox. If you do not want the POI groupbox to receive these notifications, you can deselect this option.

   See: Enabling US Federal Benefits Notifications, page 5-24

6. Migrate TSP employees currently contributing to TSP to the Benefits model.

   See: Migrating TSP and TSP Catch-Up, page 5-32

To Set Up TSP Catch-up:

1. Review the pay period pay dates to confirm that they correspond to your agency's payroll pay dates.

   The application uses the pay period pay date to determine the employee's eligibility.

   See: Defining Pay Dates, *Oracle HRMS Payroll Processing Management Guide*

2. Run the Populate TSP Catch-Up program and plan design concurrent manager program for each business group.

   See: Running the Populate TSP Program and Plan Design Process, page 5-30

3. Compile the TSP Catch Up fast formulas for each business group.

   See: Compiling TSP and TSP Catch-Up Fast Formulas, page 5-31

4. Schedule the Participation Process:Selection concurrent manager process to run daily to check the eligibility of employees for TSP Catch-Up. By running the process daily, you de-enroll employees from TSP Catch-up in the same pay period as their de-enrollment from TSP.

   See: Running the Participation Batch Process, page 6-48

   The Participation Process:Selection de-enrolls employees:

   - During the year when they terminate their contributions
   - At the end of calendar year if they have no future-dated enrollments

See: De-enrolling Employees in TSP, page 6-21, De-enrolling Employees in TSP Catch-Up, page 6-22

Note: As a suggestion for enhanced performance, run the process only for the Federal Thrift Savings Plan (TSP) Catch Up Contributions. To ensure the process updates the records, select the Commit for the Validation segment.

5. Set up user access.

   See: Set Up User Access to Self-Service Benefits, page 5-22

6. Set up notifications.

   When employees submit their benefit elections, the application notifies the Personnel Office groupbox. If you do not want the POI groupbox to receive these notifications, you can deselect this option.

   See: Enabling US Federal Benefits Notifications, page 5-24

7. Migrate TSP Catch-Up employees currently contributing to TSP Catch-Up to the Benefits model.

   See: Migrating TSP and TSP Catch-Up, page 5-32

Populating TSP and TSP Catch-Up Programs and Plans

Before you can access the predefined programs and plans for TSP and TSP Catch-Up, you must run the concurrent manager processes that install this data.

Use the Submit Processes and Reports window.

To run the Populate TSP Program and Design Plan Process:

1. In the Name field, choose Populate TSP Program and Design Plan from the list of values.
2. Choose the Submit button.
3. Repeat these steps for each business group that you have set up.

To run the Populate TSP Catch-Up Program and Design Plan Process:

1. In the Name field, choose Populate TSP Catch-Up Program and Design Plan from the list of values.
2. Choose the Submit button.

3. Repeat these steps for each business group that you have set up.

What's Next

See: Compiling TSP and TSP Catch-Up Fast Formulas, page 5-31

Compiling TSP and TSP Catch-Up Fast Formulas

After you populate the TSP and TSP Catch-Up plans and programs for each business group, you must compile the fast formulas for the same business groups.

See: Running the Populate TSP Program and Plan Design Process, page 5-30

Use the Submit Requests and Processes window.

To compile individual formulas:

1. In the Name field, choose Compile Formula.
2. In the Parameters window, choose the formula type and formula name.
   - Formal Type: Participation and Rate Eligibility
   - Formula Names: GHR_EMP_TSP_ELIGIBILITY
3. Choose the Submit button.
4. Repeat these steps, substituting the following parameter information for the remaining fast formulas.

Formula Type	Formula Name
Rate Start Date	GHR_TSP_RATE_START_DATE
Extra Input	GHR_TSP_STATUS
Postelection Edit	GHR_VERIFY_TSP_AMOUNT
Postelection Edit	GHR_VERIFY_TSP_PERCENT
Participation and Rate Eligibility	GHR_EMP_TSP_CATCHUP_ELIGIBILITY
Enrollment Opportunity	GHR_TSP_PLAN_ELECTABLE

Formula Type	Formula Name
Enrollment Coverage Start Date	GHR_TSP_CVG_START_DATE

Migrating TSP and TSP Catch-Up Information

After you populate the Thrift Savings Plan and Thrift Savings Plan Catch-Up plans, you must convert the existing records for employees participating in TSP and TSP Catch-Up to the Federal Benefits model.

The application migrates the last open-ended element record of the employee and creates a new element with a start date of the first pay period following the employee's election.

Use the Submit Processes and Reports window.

> **Note:** The process runs against the business group of your login's responsibility.

To migrate employees to TSP plans:

1. In the Name field, choose Federal Benefits - TSP Conversion of Benefits from the list of values.
2. Click Submit.
3. If you have more than one business group, login with a different responsibility and repeat these steps for each business group.

To migrate employees to TSP Catch-Up plans:

1. In the Name field, choose Federal Benefits - TSP Catch Up Conversion of Benefits from the list of values.
2. Click Submit.
3. If you have more than one business group, login with a different responsibility and repeat these steps for each business group.

If there is a problem in migrating an employee's record, the application enters the error information in the Federal Process Log.

Basic Benefits Setup

Basic Benefits Overview

Using Basic Benefits, you can set up benefit plans in just the same way you handle all other components of your compensation and benefits packages. You use *elements* to represent the various benefits available to your employees. When you give these elements a benefits classification, Oracle HRMS automatically:

- Defines whether coverage is available to dependents and beneficiaries
- Creates input values to record coverage level, and employee and employer contribution amounts (for health care plans)

Elements can represent benefits ranging from tangible items such as lunch vouchers and government cars to life insurance plans for employees and their dependents.

To enroll employees in benefits, you make entries to benefits elements, either manually or in a batch using BEE.

Benefit Programs and Core-Plus-Options Arrangements

You may need to group benefit offerings together as a hierarchy (program, plan type, plan, option) so that administrative rules set at the program level cascade to the plans in that program. You may also need program-based enrollment for fixed and core-plus-options arrangements. These features are not supported in Basic Benefits. You need to use the Standard Benefits feature set.

What To Read Next

If you decide that Basic Benefits meets your limited requirements for benefits administration, you can read more in the following topics:

- **Benefits Classifications** - describes the classifications available for benefits elements; you select one classification for each benefit.
- **Benefits Enrollment** - summarizes the procedure for enrolling employees in benefit plans, recording their beneficiaries, and setting up cover for their dependents.
- **Basic Benefits Setup** - summarizes the procedures for defining elements and other aspects of implementation.

Basic Benefits Setup

The process for setting up benefit plans in the Basic Model is very similar to the process

for setting up any other form of compensation and benefit.

You defineelements to represent benefits and benefit plans using the Element window. Use the primary classification Information and the appropriate benefits classification.

Benefits Carriers

Using the Organization window, you enter benefits carriers into the database as external organizations with the classification Benefits Carrier. You can then associate the appropriate carrier with an element representing a benefit or benefit plan, by selecting the carrier from a list when you create the benefit element.

Eligibility for Benefits

You establish employee eligibility for benefits in the same way that you set eligibility rules for any element, that is, by building element links. Links define the components that must be present in employees' assignments for the employees to be eligible for entries to the element. For example, if life insurance is available only to employees who work full time, you can build a link for the element for this benefit to the work schedule of Full Time.

Setting Up Basic Benefits

You set up Basic Benefit plans in much the same way that you set up other components of your compensation and benefits packages. Before you start, review the features offered by Oracle's other benefits administration solutions (Standard Benefits and Advanced Benefits) to ensure that you implement the model that most closely matches your needs.

1. **Create Benefit Carriers**

   Use the Organization window to enter benefits carriers as external organizations with the classification Benefits Carrier. See: Creating an Organization, *Enterprise and Workforce Management Guide*

2. **Define Validation**

   Define validation for entries made to enroll employees in benefit plans.

   To restrict entries to a list of valid values, define a new Lookup Type and add values for this new lookup. See: Adding Lookup Types and Values, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

3. To validate entries using formulas, write a formula of type Element Input Validation. See: Writing Formulas for Validation, *FastFormula User Guide*

4. **Define Categories**

   If you need a new category for your benefit plan elements, add it in the Application Utilities Lookups window. Benefit plan elements are in the Information

classification (Lookup type US_INFORMATION) if you don't use Oracle Payroll and in the Voluntary Deductions classification if you do use Oracle Payroll. See: Adding Lookup Types and Values, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

5. **Define Coverage Levels**

   Basic Benefits includes four coverage levels for benefit plans: Employee Only, Employee and Spouse, Employee and Children, Employee and Family. If you need additional coverage levels, add them in the Application Utilities Lookups window for the Lookup type US_BENEFIT_COVERAGE. See: Adding Lookup Types and Values, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

6. **Define Elements for Information**

   If you are not using Oracle Payroll, create elements to represent benefit plans, See: Making Manual Element Entries, page 1-40

7. In the Further Element Information window, select the benefits carrier and a period type to identify the frequency of employee contributions to the plan.

8. **Define Links**

   If employer charges for the benefit should be distributed over other elements, `define the distribution set.`, page 1-33

9. `Define element links`, page 1-29for each benefit to define one or more groups of employees who are eligible to receive it.

   See also: `Element Link Details Report`, page 1-32

10. **Enter Coverage Levels and Default Contributions**

    For health care benefit plans, you can enter coverage levels and default employee and employer contribution amounts in the Benefit Contributions window.

    To enable this, you must first create specific input values for your element, and configure the formula and formula result rules generated by the Deductions window.

    See: Configuring Components for Health Care Benefit Plans, page 5-36

    See: Establishing Health Care Plan Coverage and Default Contributions, page 5-38

11. **Set up COBRA**

    Basic Benefits includes two reasons for terminating continued coverage under COBRA: End of Coverage and Non-payment. If you need additional reasons, add them in the Application Utilities Lookups window for the Lookup type US_COBRA_TERM_REASON. See: Adding Lookup Types and Values, *Configuring, Reporting, and System Administration Guide*

Configuring Components for Health Care Benefit Plans (Basic Benefits)

If you want to enter coverage levels and default employee and employer contribution amounts in the Benefit Contributions window for health care benefit plans, you must complete a number of additional setup steps.

These steps apply to elements in the benefits classifications Medical, Dental, and Vision.

To configure generated components for health care benefit plans:

1. Query the element in the Element window and set your effective date to the element's start date (that is, the date you used to define or initiate the element).

2. In the Input Values window, create the following input values, being careful to enter the names exactly as shown:

   - Coverage (Character)

     Select US_BENEFIT_COVERAGE as the Lookup and select the appropriate value (such as Employee only) as the Default.

   - ER Contr (Money)

   - EE Contr (Money)

   See: Defining an Element's Input Values, page 1-25

3. In the Benefit Contributions window, select the appropriate coverage levels and default contribution amounts.

   See: Establishing Health Care Plan Coverage and Default Contributions, page 5-38

4. In the Element window, create a nonrecurring ER Liability shadow element for indirect results.

5. In the Formula window, modify the generated Oracle Payroll formula for the pre-tax deduction as shown in the following table:

In the section . . .	Replace this text . . .	With this text . . .
INPUT VALUES DEFAULTs	Default for Amount is 0	Default for **EE_Contr** is 0 Default for **ER_Contr** is 0
INPUTS SECTION	INPUTS are Amount, Period_Type(text)	INPUTS are **EE_Contr, ER_Contr,** Period_Type (text)

In the section . . .	Replace this text . . .	With this text . . .
Main formula body	THEN (IF Amount WAS DEFAULTED AND /* NOT Flat Amount */ Percentage WAS DEFAULTED THEN /* NOT Percent either! */	THEN (IF **EE_Contr** WAS DEFAULTED AND /* NOT Flat Amount */ Percentage WAS DEFAULTED THEN /* NOT Percent either! */
	dedn_amt = Amount * deduction_freq_factor IF Period_Type = UPPER('Calendar Month') AND (dedn_amt + AMY_MED_PRETAX_ASG_GRE_MONTH - Amount) <= .02 AND (AMY_MED_PRETAX_ASG_GRE_MONTH + dedn_amt) > Amount THEN dedn_amt = Amount - AMY_MED_PRETAX_ASG_GRE_MONTH)ELSE /* Percentage calculation */(	dedn_amt = **EE_Contr** * deduction_freq_factor IF Period_Type = UPPER('Calendar Month') AND (dedn_amt + AMY_MED_PRETAX_ASG_GRE_MONTH - **EE_Contr**) <= .02 AND (AMY_MED_PRETAX_ASG_GRE_MONTH + dedn_amt) >**EE_Contr** THEN dedn_amt = **EE_Contr** - AMY_MED_PRETAX_ASG_GRE_MONTH) ELSE /* Percentage calculation */(
	,to_within/*========== End Program ==========*/	,to_within, **ER_Contr** /*========== End Program ==========*/

See: Writing or Editing a Formula, *Oracle HRMS FastFormula User Guide*

6. In the Formula Result Rules window, select the benefit plan element and choose the Find button. Click on the processing rule that was generated from the Deductions window.

7. In the Formula Results region, select the new formula result (ER_Contr) and create the following result rule:

   - Type: Indirect Result
   - Element: the ER Liability element you created in step 4, page 5-36
   - Input Value: Pay Value

   See: Defining Formula Processing and Result Rules, *Oracle HRMS FastFormula User*

Guide

8. Link the benefit plan element. Also link the ER Liability element if you want to establish costing.

Establishing Plan Coverage and Default Contributions (Basic Benefits)

To enter coverage levels and default employee and employer contribution amounts for a health care benefit plan, use the Benefit Contributions window.

> **Note:** The plan element must be in the benefits classifications, Medical, Dental, or Vision. You must configure the plan element, formula, and formula results rules as described in Configuring Components for Health Care Benefit Plans, page 5-36.

To enter plan coverage levels and contribution amounts:

1. Query the benefit plan in the Benefit Contributions window.
2. Enter the coverage levels available for the plan in the Coverage field.
3. For each coverage level, enter an employee and an employer contribution amount. Enter an amount of zero when a plan has no contribution from the employer or from the employee.
4. Save your work. You are now ready to enroll employees in this plan.

Life Events

Life Event Reasons

You define a life event reason as any change to a person that impacts benefits participation. The system creates a life event when it detects a change in a person's HR record that you have defined as a life event reason.

You can define these types of life event reason:

- Compensation--Use this type to set up one life event reason for each Compensation Workbench plan

  See: Setting Up Compensation Workbench Plans, *Oracle HRMS Compensation and Benefits Management Guide*

- Absence--Use this type to set up three life event reasons (Absence Started, Absence Ended, and Absence Deleted) to detect creation of, and changes to, absence records.

- Checklist--Use this type to assign an HR administrator a series of tasks based on a common event, such as a new hire or termination.

If you use iRecruitment, use the iRecruitment type to set up one life event reason to process compensation plans for applicants.

In Advanced Benefits, assignment changes, an anniversary of employment, a marriage, or the occurrence of an open enrollment, are all examples of life events (in addition to the Compensation and Absence life event reasons). You can define life event reasons to determine key benefits processes, including:

- Enrollment eligibility and electability

- Rates and coverage amounts

- Available flex credits

- Coverage start and end dates

- Required communications

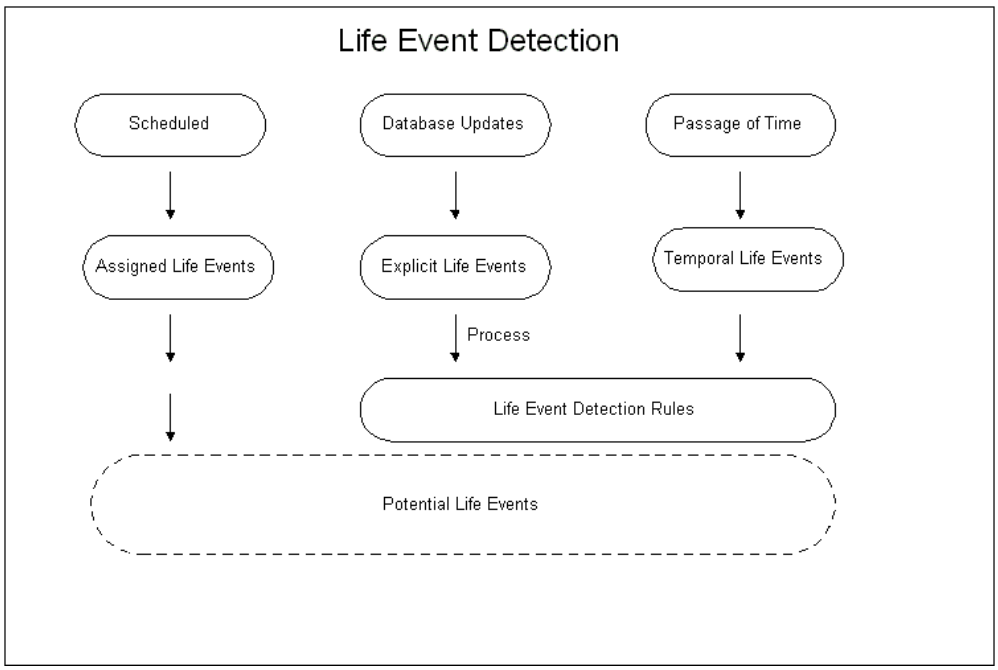
- Automatic and default enrollments

Life events can be explicit, temporal, or scheduled.

- **Explicit** life events are changes to a person's HR record, such as a job change.

- **Temporal** life events occur with the passage of time, such as the six month anniversary of employment.

- **Scheduled** life events are assigned life events, such as an open enrollment period.



Because life event detection can be complex, and because the accurate determination of qualifying life events is important to benefits administration, detected life events are initially given a status of *potential* so that they do not generate enrollment actions.

You can review potential life events for a person and then process the life event using the Participation batch process. Potential life events become *active life events* if they meet your plan design requirements. Active life events can trigger enrollment opportunities.

Life Event Terminology

Life events are a cornerstone of benefits processing; understanding some basic terminology before you define any qualifying life event reason is important. The table below outlines the basic life event terminology:

Life Event Terminology

Terminology	Description

Life Event Reason	A life event reason is an approved explanation for enrollment, de-enrollment, or change in enrollment resulting from a life event. Participation eligibility is determined based on the life event reasons and eligibility profiles you associate with programs, plans, and options.
Related Person Life Event Reason	A related person life event reason occurs when a life event experienced by the primary participant generates a life event for a person related to the participant.
Person Change	A person change is a change in system data that you define to indicate that a person has experienced a given life event.
Related Person Change	A related person change is a change in system data that you define to indicate that a person has experienced a given related life event.

Life Event Definition

You define a life event by specifying the processing characteristics of the life event and the database change that triggers the life event. You can trigger life events with criteria similar to those you use to define your eligibility profiles and variable rate profiles. Not all criteria are available to trigger life events, but you can always write a formula (using the Person Change Causes Life Event formula type) to trigger an event using criteria that are not available in the list of tables and columns.

You can also trigger life events based on changes to segments in special information types.

See: Setting Up Special Information, *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

Life events are defined separately from any compensation object or activity rate so that a single life event can have multiple uses.

Life Event Notification

Because life events are not always reported and recorded in a timely manner, you can specify whether a life event is processed as of the date the life event occurred, as of the notification date (the date the life event is recorded in the system) or the later of the actual date or notification date.

Temporal life events, such as age changes, are always processed as of the actual

occurred date.

Person Changes

You define the changes to a person's record that trigger a life event by specifying the value of the database field that indicates this person change has occurred.

> **Note:** Do not define person changes for Compensation life event reasons.

You select the database table and column for which you want to define a change that the system detects and processes as a life event. You specify the *new value* for this combination of database table and column that, when detected, indicates that a life event has occurred.

For example, you can define that a person change is detected when the database value of a person's marital status changes from Single to Married.

A person change can be defined based on the detection of:

- A new value
- A change from a specific old value to a specific new value
- Any change to a value
- A change from any value to no value
- A change from no value to any value

You can also select a rule that defines more complex conditions for triggering a life event.

You link the person change that you define to a life event. You can link multiple person changes to a single life event and you can link a single person change to more than one life event.

You can define a life event to trigger based on changes to more than one table, or based on multiple changes to the same table.

For changes based on multiple tables, the APIs detect the life event when there is a data change in one of the tables that meet your Person Change criteria (an Or condition).

For multiple changes in the same table, the person must satisfy all Person Change criteria associated with the table for the API to detect the life event (the And condition).

Life Event Detection

Advanced Benefits

When you define a life event, you specify whether or not it is an *overriding* life event. If two or more life events with the same Occurred On date are detected for a person, the system picks the overriding life event as the winner.

If two or more potential life events are detected with the Override Flag set to On, the Participation batch process records an error in the log file. In these cases, you use the Potential Life Events form to select the winning life event.

You can select a *timeliness evaluation code* that indicates if a life event that occurs prior to the current calendar year or a given number of days prior to the system date should be voided or processed manually.

You can set a *life event treatment code* to prevent temporal event detection for a specified life event reason under certain conditions.

See: Defining General Characteristics of Life Events Reasons, page 5-49

Absence Life Events

Absence life events are processed by the Participation Process in Absence mode. In this mode, the process handles multiple potential life events in date order.

Closing, Backing Out, and Voiding Life Events

You can remove the processing of a life event performed by the Participation process, and you can prevent further processing of a life event.

- Close a life event to prevent further processing.
- Back out a life event to roll back any updates generated by the Participation Process (such as updates to eligibility, rates, automatic de-enrollments, and so on)
- Void a life event to roll back any updates *and* prevent further processing by the Participation process.

Life Event Usage (Advanced Benefits)

Once you create a life event definition, you can use that definition for a variety of purposes. This section describes the ways that you can use life events.

Enrollment Requirements

You can link life event definitions to your enrollment requirements for a compensation object so that a person must experience a particular life event before they can enroll in a plan for which they are eligible. You can also use life events to restrict enrollment

changes based on whether or not the participant is currently enrolled in a benefit.

Because scheduled enrollments are also a kind of life event, you must link scheduled life events to a compensation object if you are defining an enrollment period for that benefit.

Enrollment requirements based on life events can be applied to both participants and dependents.

Enrollment Coverage

You can vary the amount of coverage available for a plan based on a life event. You define the standard coverage amount for the plan or option in plan and then the coverage level available for those participants who experience the life event you select.

You can also limit a currently enrolled participant's ability to change coverage levels based on a life event.

Communications

You can generate a reminder letter for a participant with an open life event. Communications can also be triggered based on emerging life events, such as an event that will occur due to a temporal event.

Collapsing Life Events (Advanced Benefits)

You create a *collapsing life event definition* for those instances when a combination of two or more detected life events results in either a different life event or the voiding of the detected events.

The system uses your collapsing life event definition in conjunction with other life event reasons that you have defined. You must define life event reasons before you define how to collapse life event combinations. Life events with a status of potential or active can be collapsed.

Using And/Or expressions, you define the life event combinations that cause a collapsing life event. You can include up to ten life events as part of your collapsing life event definition. Select a collapsing logic code to indicate if the detected life events should be voided or collapsed into another life event.

Collapsing Life Event Date Determination

You can select the effective date of the new life event as:

- The effective date of the batch process.
- The earliest or latest life event occurred date for the set of potential life events being evaluated.

- The date of the resulting life event if it is included in the set of potential life events being evaluated.

- The earliest life event, latest life event, or batch process date if the resulting life event is not in the set of potential events being evaluated.

You can specify the number of *tolerance days* that the system considers when detecting life events that are evaluated by your collapsing life event rule. The tolerance period is based on the earliest life event occurred on date of the set of potential life events under consideration. For example, if the tolerance level is 10 days and the earliest life event occurred on date is 01-JAN, then the system considers all potential life events detected between 01-JAN and 11-JAN.

Collapsing Life Events Process

After you define your life events and collapsing life event rules, you run the Participation batch process to determine the winning life event for each selected participant. Your collapsing life event definitions are considered in conjunction with your other life event definitions, including overriding life event definitions and timeliness evaluations that determine how potential life events are processed.

Seeded Life Event Reasons

Oracle HRMS delivers seeded life event reasons you can use for benefits administration. Seeded life event reasons are pre-defined; you can re-name them but they cannot be otherwise modified or deleted. You do not set up person changes for seeded life event reasons as you do with user defined life event reasons.

You link seeded life event reasons to your plan design just like user defined life event reasons, or you can include a seeded life event reason as a parameter when you run either of the following batch processes to manage life events:

- Participation Process: Life Event

- Participation Process: Temporal

For example, you could run the Temporal Participation Process to detect changes in age that might make a person age into a savings plan or age out of a medical plan. In this example, you would select the seeded life event reason Age Changed as a parameter when you run the process from the Concurrent Manager.

See: Life Event Usage, page 5-43

The following is a description of the life event reasons that are seeded with Oracle HRMS:

Administrative and Open Enrollment

- **Administrative:** Assign the administrative life event reason to a person or group of persons when the terms and conditions of a benefit plan change significantly and participants must be allowed to re-evaluate their elections. Examples of administrative life events include renegotiation of contract rates or addition of a new benefit

- **Open Enrollment:** Use the Open life event reason to determine eligibility for an open enrollment period. Open enrollments typically occur at recurring scheduled periods, such as an annual health and welfare benefits enrollment or a quarterly savings plan enrollment.

- **Unrestricted:** The unrestricted life event reason is used for benefit enrollments that are not time-dependent, such as a savings plan.

When you run the Participation Process in Scheduled mode from the Concurrent Manager, and select the enrollment period start date, the system creates a life event with a status of Detected for each person who meets the batch process criteria.

Temporal

When you run the Participation Process in scheduled, life event, or temporal mode, the system creates a life event when the minimum or maximum boundary is crossed as specified in the definition you create for the applicable derived factor. The seeded life event reasons for temporally derived factors are:

- **Age Changed**

- **Combined Age and Length of Service Changed**

- **Compensation Changed**

- **Hours Worked in Period Changed**

- **Length of Service Changed**

- **Total Percent Full Time Changed**

You implement temporally based life events by creating the derived factor, including the derived factor in an eligibility profile or variable rate profile, and linking the profile to a compensation object.

See: Derived Factors, page 1-119

COBRA Administration (US Only)

The seeded life event reasons for COBRA are used to determine *ineligibility* or

enrollment period change for COBRA benefits. COBRA life event reasons should be associated with programs or plans subject to COBRA regulations.

- **Loss of Eligibility:** This seeded life event reason detects when a COBRA enrollment period has passed.

- **Maximum Period of Enrollment Reached:** This seeded life event reason detects when a COBRA participant is to be de-enrolled due to reaching the maximum period of enrollment, which can vary based on subsequent life events that occur during COBRA coverage, such as a divorce or qualifying disability.

- **Non or Late Payment:** This seeded life event reason detects when a COBRA participant's payment is delinquent or late based on the participant's enrollment start date and the COBRA Payment due date. The initial payment is granted a 45 day grace period.

- **Voluntary End of Coverage:** This seeded life event reason detects when the participant's COBRA participation has been voluntarily ended. This indicates that the COBRA eligibility end date has been reached as recorded in the COBRA Beneficiaries window with an ineligible reason of Voluntary End of Coverage.

- **Period of Enrollment Changed:** This seeded life event is created when a person's COBRA eligibility end date is changed. For example, this could occur for a participant who is initially eligible for 18 months of COBRA coverage who becomes disabled during the first 60 days of coverage. The participant's enrollment period is changed to 29 months and the COBRA eligibility period end date is changed accordingly.

Miscellaneous Seeded Life Event Reasons

- **Enrollment Override:** Use this seeded life event reason when you employ the Participation Overrides window or the Enrollment Override window to make a person eligible or ineligible for a benefit, or for enrollment or de-enrollment.

- **Quartile in Grade:** This seeded life event is created by the system when a change in a person's grade, salary basis, or salary moves them into a new quartile in grade. These conditions trigger the Quartile in Grade life event if the BEN: Enable Quartile in Grade Life Event user profile option is set to Yes. If you set this profile option to No, the system never creates a Quartile in Grade potential life event.

- **Reduction of Hours:** This seeded life event reason is used when a reduction in hours causes a person to experience a change in benefits status, such as becoming eligible or ineligible for a benefit.

- **Satisfied Waiting Period:** This seeded life event is created by the system when a person experiences a life event but has not yet satisfied the waiting period for the benefit and is therefore not eligible. The life event is created with the occurred on

date equal to the date the person satisfied the waiting period. The life event is given a status of potential until the waiting period completion date is reached.

- **Added During Enrollment:** This seeded life event is used by Self- Service Benefits enrollment to prevent a life event from occurring when you create a family member or update a family member's details. You can define a *gain dependent*life event reason if you want to trigger a life event based on a family member change in Self-Service.

Life Event Definition (Advanced Benefits)

This example shows you the high level steps necessary to create a marriage life event.

1. Use the Life Event Reasons window to define the Marriage life event reason this person change triggers.

   See: Defining General Characteristics of Life Event Reasons, page 5-49

2. Use the Person Changes window to define the person change that triggers this Marriage life event.

   See: Defining Person Changes, page 5-52

3. Use the Person Change Causes Life Event window to associate the person change with the Marriage life event.

   See: Associating a Person Change with a Life Event, page 5-54

4. A FastFormula programmer creates a Marriage rule that specifies how the system detects the Marriage life event when doing so is more complex that steps 2 and 3 can accommodate.

5. Use the Life Event Reasons window to associate this Marriage rule to the Marriage life event.

6. After you define these person changes, every time a database change occurs, a program reads the table you populate using the Person Change Causes Life Event window. If all conditions are met, this program updates the Person in Life Event Reason table.

   This step requires no human intervention.

7. On a periodic basis, the benefits administrator runs the Participation batch process which reads the Person in Life Event Reason table and then determines the impact on the person's eligibility for enrollment, change in enrollment, and de-enrollment.

   See: Participation Batch Processes, page 6-35

Defining General Characteristics of Life Event Reasons

You use the Life Event Reasons window to date effectively define life events and their associated processing.

To define general characteristics of a life event reason:

1. Set your effective date to the appropriate start date for this life event reason.

2. Enter a Name for this life event reason.

   Note: Use a noun for the life event reason name since this life event may appear in communications that you send to participants.

3. Select a life event reason Type. Choose from a variety of types including:

   - **Absence:** Select this type if you want entry and ending of absences to trigger life events.

   - **Checklist**: Select this type to trigger HR Checklist events for HR administrators.

   - **Compensation** : Select this type if you are defining a life event for a Compensation Workbench plan.

   - **Personal (Advanced Benefits only)**: Examples include Marriage, Divorce, and Birth.

   - **Scheduled (Advanced Benefits only)**: Examples include age and length of service changes.

   - **Work (Advanced Benefits only)**: Examples include Change in Job Assignment, New Hire, and Termination.

   - **iRecruitment**: Select this type if you are defining a life event for compensation plans for iRecruitment applicants.

4. If you selected Absence as the Type, select the Life Event Operation Code: Delete Event, Start Event, or End Event. For example, to set up the life event reason that detects entry of an absence end date, select End Event.

5. Select an Evaluation Rule to apply to this life event reason. You can use an evaluation rule to define:

   - How to combine multiple detected life events into one

   - How to fully detect a life event when its detection is complex

- When to eliminate a previously detected life event.

6. Enter a description of the life event in the Description field.

7. Select a Life Event Treatment code if you want to limit the detection of seeded temporal life events. Choose from:

   - **Do Not Detect Past Temporal Events**: Prevents the detection of past temporal events while the application processes this life event.

   - **Do Not Detect Past or Future Temporal Events**: Prevents temporal event detection while the application processes this life event. Use this code with the seeded open and administrative events, or any other explicit events, when you do not want to detect temporal events.

   - **Never Detect This Temporal Life Event**: Prevents the automatic detection of a specific temporal event. Set this code for any seeded temporal event, such as Age Change or Length of Service Change, that you do not want to detect, such as for mid-year changes.

8. Select a Timeliness Evaluation code to indicate how the system processes potential life events that fall outside a time period that you define.

9. Do one of the following:

   - Enter the number of days after the life event occurred beyond which the system does not process this potential life event in the Timeliness Days field.

   - Select a Timeliness Period if the potential life event should be voided or processed manually because it occurred prior to the current calendar year.

   - Select a Rule that controls your timeliness definition.

     Note: The Timeliness Days and Timeliness Period fields are mutually exclusive.

10. Select an Occurred Date Determination code that controls if the life event is processed according to the date the event occurred or the date the event was recorded in the system.

    Note: By setting the profile option BEN: Comp Objects Display Name Basis in the System Profile Values window, you can choose whether compensation object names display in application windows (both in the professional and Self-Service user interfaces) based on the life event occurred on date or the user's session date.

The default profile option value is Session.

11. If you want to link a life event reason to a self-service process, select a value in the Selectable for Self Service field to indicate in which processes this life event should be available.

    - All--the life event can be selected in all self-service processes
    - Add/Update/Delete Family Members--the life event can be selected in Self-Service Benefits when the user adds, updates, or end dates a family member contact
    - Add/Update Family Members--the life event can be selected in Self-Service Benefits when the user adds or updates a family member contact
    - Delete Family Members--the life event can be selected in Self-Service Benefits when the user end dates a family member contact
    - Basic Registration--the life event can be selected in the New Employee Registration process
    - COBRA Registration--the life event can be selected in the Non-employee Registration process
    - Basic and COBRA Registration--the life event can be selected in both the New Employee and the Non-Employee Registration processes

    Note: In Self-Service Benefits, a user can select life event reasons with a Selectable for Self Service value of All, Add/Update/Delete Family Members, or Delete Family Members as valid reasons for ending a relationship between the primary participant and a dependent or beneficiary.

    Note: Do not use the Life Events page in self-service registration if you are the employer of benefits recipients. This page is only for third party benefits providers.

    See: Configuring the New Employee and Non-Employee Registration Processes, *Oracle HRMS Deploy Self-Service Capability Guide*

12. Select the Check Related Persons Eligibility field if the system generates a related person life event when the primary participant experiences this life event.

    If you select the Check Related Persons Eligibility field, complete the Causes Related Person Life Events block as described in step 15, page 5-52

13. Select the Override field if this life event is the overriding life event in the case of the collision of two or more life events.

    Note: When two or more overriding life events collide, no life event is selected as the winner. You use the Potential Life Events form to select the winning life event.

14. Select the COBRA Qualifying Life Event field if this life event impacts eligibility for US COBRA benefits.

15. Select the name of the related person life event this life event triggers in the Causes Related Person Life Event field.

    Repeat this step for each related person life event that is triggered by this life event.

16. Save your work.

Next Step

Associating a Person Change With a Life Event, page 5-54

Defining Person Changes

You define the changes to a person's record that trigger a life event by specifying the value of the database field that indicates this person change has occurred.

To define a person change:

1. Query or enter a life event in the Life Event Reasons window.

2. Choose the Person Changes button if you are defining a life event for a primary participant.

   - Or, choose the Related Person Changes button if the life event experienced by the primary participant causes a life event for a related person.

3. Choose the Define Person Change button or the Define Related Person Change button depending if you chose Person Changes or Related Person Changes in step 2.

4. Enter a Name for the person change you are defining.

5. Select the Table Name of the database table containing the column name (field) and new value that indicates a person has experienced this life event.

   Note: Refer to the *Oracle HRMS Technical Reference Manual* for

definitions of the database tables and columns.

6. Select the Column Name.

7. Select the Old Value if the life event you are defining is only detected when the column name value change from a specific old value to a specific new value.

8. Select the New Value that triggers a detected life event.

9. If necessary select a Rule of the type Person Changes Causes Life Event to refine the circumstances under which the system determines that this person change has occurred. You can use this rule if changes to different columns on the same table trigger the same life event.

   Note: If you select a rule and associate this person change with an absence-type life event, the values you enter in the Old Value and New Value fields are ignored and only the rule is evaluated. If the rule returns the value Yes, the Person Change has occurred, regardless of the value in the selected column.

10. Enter the text in the What-if Label field that represents this person change when you model eligibility using the What-if Eligibility/Ineligibility Participation window.

11. Select the Rule Overrides check box if you attach a Person Changes Causes Life Event rule to this Person Change and you want the results of the formula to determine how to detect the event.

    The API executes the rule when a change happens on the table you select for this Person Change.

    If you do not select this check box, the application detects a life event when a person meets the criteria of both the rule and the table/column values you selected in steps 5 through 8.

12. Click the Add Record icon on the toolbar if you want to define another person change.

    You can add a person change based on another column in the same table you previously selected, or a column in a different table. Changes based on columns in the same table function as an And condition; changes based on columns in different tables function as an Or condition.

13. Save your work.

Associating a Person Change with a Life Event

In order to know when a person has experienced a life event, you associate a *person change* with each life event you define. A person change is a change to a person's HR record that indicates a life event might have occurred.

You can also associate a *related person change* with a life event if a change to the primary participant's HR record generates a life event for a person related to the primary participant.

> **Note:** You must define your person changes and related person changes before these can be associated to a life event. See: Defining Person Changes, page 5-52

To associate a person change with a life event:

1. Query or enter a life event in the Life Event Reasons window.
2. Choose the Person Changes button if you are defining a life event for a primary participant.
   - Or, choose the Related Person Changes button if the life event experienced by the primary participant causes a life event for a related person.
3. Select the Name of a person change that you have defined.

   Repeat this step for each person change you link to this life event reason. If you define the Person Change based on a single table, the application must detect Person Changes in all the columns you select to trigger the life event (the And condition).

   For Person Changes based on multiple tables, the application must detect all Person Changes for at least one of the tables to trigger the life event (the Or condition).
4. Save your work.

Defining a Collapsing Life Event (Advanced Benefits)

You use the Collapsing Rules window to build your collapsing life event definition. By selecting life events and expressions (and/or), you create the conditions that the system evaluates when determining the new life event.

To define a collapsing life event:

1. Enter the Seq (sequence) in which this collapsing life event definition is processed relative to any other collapsing life event definitions.

2. Select the life event into which your life event combination collapses in the Results in field.

3. Use the Tolerance field to enter the number of days after the earliest life event occurred date beyond which the system ignores any detected life events when evaluating your life event combinations.

4. Select the primary life event in your life event combination in the first Life Event field.

5. Select the Expression (and/or) used to evaluate the detected life event combination.

6. Select another life event to include in combination with the primary life event in the next Life Event field.

7. Select more life event/expression combinations depending on the complexity of your collapsing life event definition.

8. Select a Collapsing Logic code or rule that indicates if the detected life events are voided or collapsed into a resulting life event.

9. Select a Life Event Occurred Date code or rule to specify the occurred on date of the resulting life event.

10. Save your work.

Benefit Enrollment Requirements

Enrollment Requirements

Enrollment requirements determine *when* an eligible person can enroll in a benefit. You define enrollment requirements for a program, plan type, or plan to determine scheduled enrollment periods and the qualifying life events that enable an enrollment.

Enrollment requirements that you define at the program level cascade to the plan type and plan levels unless you override these requirements for a given plan type or plan. Although there are many program-level enrollment attributes, participants do not technically enroll in a program. Instead, they enroll in the plans associated with that program.

You can also use the enrollment requirements forms to implement other restrictions, as follows.

- You can coordinate coverage levels between all plans in a plan type. For example, you can require that a person who elects the "employee only" coverage option in one plan elects this coverage level for all plans in the plan type in which they enroll.
- For insurance plans, you can limit the coverage level that can be elected by a spouse or a dependent to a percentage of the coverage elected by the primary participant.
- Advanced Benefits customers can require that an action item be completed before an enrollment is valid.
- You can also define dependent coverage requirements such as dependent information that is required for an enrollment to be valid (date of birth or social security number) and required certifications.
- You define beneficiary designation requirements at the plan level.

General Program Enrollment Requirements

For a Program

You can define general enrollment requirements for a program, such as enrollment coverage start and end dates and activity rate start and end dates. These dates are not particular calendar dates, but dates relative to a scheduled enrollment in the program year.

Advanced Benefits customers can define at the program level whether default or automatic enrollments apply to any plans in this program.

For insurance plans, you can limit the coverage level that can be elected by a spouse or a

dependent to a percentage of the coverage elected by the primary participant.

For a Plan Type in a Program

You can define enrollment requirements for the plan types in a program if these requirements differ between plan types. For example, you can define a required period of enrollment for the plans in one plan type.

Other requirements you can set at the plan type level relate to life insurance plans. You can:

- Specify if the plans in a plan type limit the amount of coverage a spouse or a dependent of the primary participant can elect as a percentage of the coverage elected by the primary participant
- Specify if the system determines imputed income and life insurance maximums for a plan type

You can limit the maximum number of plans in a plan type in which a person can enroll, or require that a participant enroll in a minimum number of plans in a plan type.

For a Plan in a Program

Advanced Benefits customers can define if a plan in a program is the default enrollment for a participant who fails to make an election. You can limit the circumstances under which a plan is the default based on whether or not the participant is currently enrolled in the program.

For example, you can define a default plan for newly enrolled participants, and indicate that currently enrolled participants must remain enrolled in their current plan.

Scheduled Program Enrollments and Life Event Enrollments (Timing)

Scheduled Enrollments for Programs

For scheduled enrollments, you define the enrollment type for the program, either open, administrative, or unrestricted.

> **Important:** Open and administrative enrollment types are only available to Advanced Benefits customers. Because unrestricted enrollments are not date dependent, the system does not recognize an enrollment period for unrestricted enrollments. An unrestricted enrollment is considered closed when the enrollment is saved.
>
> You cannot combine unrestricted and life event processing in the same program. If a plan does not require a life event for electability, attach the plan to a separate, unrestricted program or set up a plan not in program.

You associate a program year period with those programs that contain one or more

plans with scheduled enrollments. Within the program year, you can specify the enrollment period for plans in the program, the date on which defaults are assigned, the date after which no further processing is allowed, and the enrollment close date.

For programs that allow an override to the enrollment start and end dates or the activity rate start and end dates, you can specify these enrollment and activity rate periods.

Life Event Enrollments for Programs (Advanced Benefits)

You can define the life events that trigger an enrollment opportunity for the plans in a program. You can also specify the date on which defaults are assigned, the date after which a person experiencing the life event is no longer eligible for enrollment, and the life event enrollment close date.

You can define the enrollment coverage start and end dates for a life event. This is not a particular calendar date, but a date relative to the life event.

As with scheduled enrollments, you can define overrides to enrollment start and end dates or activity rate start and end dates for a program that are caused by a life event that you associate with the program.

Life Event Enrollment Requirements for Plan Types and Plans in Program (Advanced Benefits)

You can associate with a plan type or a plan in program those life events that trigger an enrollment action. Depending on the life event and the participant's current enrollment status, you can define whether or not the life event enables an enrollment action. You select from *enrollment codes* that limit the participant's enrollment options based on whether they are currently enrolled in the compensation object that you specify.

For example, you can specify that a participant who experiences a particular life event and is currently enrolled in a plan can keep their current elections but cannot change their elections. But, if the participant is not currently enrolled in the plan, then they can enroll. You would select an enrollment code of Current, Keep Only; New, Can Choose.

You can also define for a plan in program the *enrollment method* associated with a life event, either automatic or explicit.

Dependent Coverage Enrollment Requirements for Programs

The information required to enroll a dependent in a benefit can be different from the information required to enroll a primary participant. For dependents you can define:

- Dependent coverage start and end dates
- Required information for enrollment, such as social security number/legislative ID and date of birth
- Required certifications

- Dependent coverage eligibility profiles
- Enrollment actions triggered by a life event
- Certifications required for enrollment after the occurrence of a specific life event

Plan Enrollment Requirements

You specify enrollment requirements at the program level if the requirements apply to all the plans in the program. You use plan level enrollment requirements to override values set at the program level for individual plans. The enrollment requirements that you can specify for scheduled enrollments and life event enrollments are the same at the program and plan level.

In addition, you set enrollments requirements for not in program plans and options in plans by using plan enrollment requirements.

You can define general enrollment requirements for a plan, such as enrollment coverage start and end dates. You can also set limitations to the minimum and maximum number of options in a plan in which a person can be enrolled.

If an action must be complete before an enrollment is valid, you can associate enrollment action types with a plan if you are an Advanced Benefits customer.

You can also define designation requirements that limit the familial relationship types covered by an option.

Enrollment Requirements for Plans Not in Program

You define enrollment requirements for plans not in program just as you do for plans in program. However, plans not in program also have additional enrollment requirements that you can set.

For each plan not in program, you can select a default enrollment code that determines how the system processes an enrollment when a participant fails to make an election.

For a plan not in program with a required enrollment period, you need to specify whether the required enrollment period applies to the plan, the options in the plan, or the plan type that contains the plan.

You can also specify the time period in which activity rates for a plan not in program are expressed in the user interface, for example by month or annually.

Enrollment Requirements for Options

You can define enrollment requirements that apply to the options in a plan, such as:

- The default option for participants who do not make an election (Advanced Benefits)

- The options that are required for enrollment in the plan
- The enrollment method, either automatic or based explicitly on the participant's election (Advanced Benefits)

You can also set designation requirements for an option. See: Defining Options, page 1-93

Rate Start and End Dates

The Total Compensation processing model uses the rate start and end date codes on the Plan and Program Enrollment requirements windows to derive when the standard rate begins and ends for an enrollment. These codes also determine when the corresponding element entry begins and ends.

Depending on the code you select, the application determines the rate dates based on the life event occurred on date, enrollment coverage date, or effective date of the election.

Enrollment Action Types (Advanced Benefits)

An enrollment action is any action that is required of a participant to complete an enrollment or de-enrollment. In addition to the enrollment action types delivered with the product, you can use the Enrollment Action types window to define additional enrollment action types.

You associate an enrollment action with the enrollment requirements for a program or plan.

Enrollment Types

Most benefit plans define when an enrollment can be initiated or altered during the plan year. Often, restrictions are placed on when an eligible participant can enroll in a plan or change a current election.

Oracle HRMS controls enrollments using enrollment types:

- Unrestricted Enrollment
- Open Enrollment (Advanced Benefits)
- Administrative Enrollment (Advanced Benefits)
- Life Event Enrollment (Advanced Benefits)
- Automatic and default enrollment (Advanced Benefits)
- Explicit enrollment

Unrestricted Enrollment

Unrestricted enrollments are enrollments you define that are not time-dependent and often do not require a special reason for enrollment. A savings plan is a typical example of a benefit for which you might elect to use the unrestricted enrollment type.

Oracle customers who do not license Advanced Benefits must use unrestricted enrollments to process participants into a benefits plan. This is the only enrollment type available to you.

> **Important:** Advanced Benefits users cannot combine unrestricted and life event processing in the same program. If a plan does not require a life event for electability, attach the plan to a separate, unrestricted program or set up a plan not in program.

During the plan design phase, you choose the unrestricted enrollment type for all your programs and plans. Then, when a benefits representative (or in the case of self-service enrollments, a participant) processes an enrollment, the system determines the person's electable choices based on the eligibility requirements for the benefit.

Unrestricted enrollments do not restrict an enrollment to a certain period or require that an action item or certification be completed for an enrollment to be valid.

Open Enrollment (Advanced Benefits)

You define an open enrollment for a benefit as a predefined time period during the plan year when a participant can alter elections in a plan. This is the most common type of scheduled enrollment.

Administrative Enrollments (Advanced Benefits)

Administrative enrollments are rare, but you might use this enrollment type when a significant change occurs to the coverage offered under a plan and it is necessary to allow participants to re-evaluate their continued participation in the plan.

Life Event Enrollments (Advanced Benefits)

Life event enrollments are caused by a significant change to the participant which requires or enables an enrollment action.

Automatic and Default Enrollments (Advanced Benefits)

You can automatically enroll an eligible participant into a benefit. To do so, you set up the enrollment method of automatic when defining the enrollment requirements for the benefit. Automatic enrollments are typically used to provide interim coverage before participants can make their own elections.

You define default enrollments as those elections an eligible participant receives if they do not specify an election within a pre-defined enrollment period. Default enrollments are processed when you run the Default Enrollment batch process from the concurrent manager.

See: Benefits Batch Processes, page 6-39

Explicit Enrollments

All elections that are neither automatic or default are considered explicit elections. The participant must explicitly elect the benefit into which they enroll either through a self-service form or through their benefits department.

Enrollment Codes

When you define enrollment requirements for a compensation object, you select from enrollment codes that limit the participant's enrollment options based on whether they are currently enrolled in the compensation object. You can select enrollment codes for a program, plan in program, plan not in program, and option in plan. You can also select enrollment codes for specific life events for each compensation object.

For each plan not in program, you can select a default enrollment code that determines how the system processes an enrollment when a participant fails to make an election. Similarly, you can specify default enrollment codes for programs, plans in programs, and plan types in programs to determine default enrollment after specific life events. You can also select a default enrollment code for options in plans to specify when the option is the default based on a new or existing enrollment.

> **Note:** In Standard Benefits, the default enrollment is displayed on the enrollment window but you need to save the election to enroll the participant. In Advanced Benefits, default enrollments are made automatically when you run the Default Enrollments process.

You can select from the enrollment codes and default enrollment codes listed below, or you can create a formula-based rule to define your own requirements.

List of Enrollment Codes

Current, Can Keep or Choose; New, Nothing: If a person is currently enrolled in this compensation object, the person can keep their current elections or make new elections. If a person is not yet enrolled, the person cannot make an election.

Current, Can Keep or Choose; New, Can Choose: If a person is currently enrolled in this compensation object, the person can keep their current elections or make new elections. If a person is not yet enrolled, the person can make new elections.

Current, Can Keep or Choose But Starts New; New, Can Choose: If a person is

currently enrolled in this compensation object, the person can keep their current elections or make new elections. The coverage ends at the end of the plan year and restarts the next day so that the participant must explicitly re-elect each year, even though the coverage amount may stay the same. If a person is not yet enrolled, the person can make new elections.

> **Note:** You can only select this code from the Program or Plan Enrollment Requirements windows at either the plan type in program, plan in program, or plan level based on a life event. It is recommended that you select this code only for the Open enrollment life event.

Current, Choose Only; New, Can Choose: If a person is currently enrolled in this compensation object, the person must make an explicit election to stay enrolled. If a person is not yet enrolled, the person can make new elections.

Current, Choose Only; New, Nothing: If a person is currently enrolled in this compensation object, the person must make an explicit election to stay enrolled. If a person is not yet enrolled, the person cannot make an election.

Current, Keep Only; New, Can Choose: If a person is currently enrolled in this compensation object, the person must keep their current elections. If a person is not yet enrolled, the person can make new elections.

Current, Keep Only; New, Nothing: If a person is currently enrolled in this compensation object, the person must keep their current elections. If a person is not yet enrolled, the person cannot make an election.

Current, Lose Only; New, Can Choose: If a person is currently enrolled in this compensation object, the person must de-enroll from their current elections. If a person is not yet enrolled, the person can make new elections.

Current, Lose Only; New, Nothing: If a person is currently enrolled in this compensation object, the person must de-enroll from their current elections. If a person is not yet enrolled, the person cannot make new elections.

Current, Assign; New, Assign (Automatic): If the enrollment method code is Automatic, both current and new enrollees automatically enroll and cannot de-enroll.

Current, Nothing; New, Assign (Automatic): If the enrollment method code is Automatic, current enrollees automatically de-enroll; new enrollees automatically enroll and cannot de-enroll.

Current, Assign; New, Nothing (Automatic): If the enrollment method code is Automatic, current enrollees automatically enroll and cannot de-enroll; people not already enrolled cannot make an election.

Rule: Select Rule if you define a FastFormula rule to determine a person's electability based on their current enrollment status. The formula must be of the type *Enrollment Opportunity*.

List of Default Enrollment Codes

New, Defaults; Current, Nothing: If a person is not yet enrolled in a given benefit, enroll that person in the default enrollment for that benefit. If the person is already enrolled in that benefit, de-enroll the person from that benefit.

New, Defaults; Current, Defaults: If a person is not yet enrolled in a given benefit, enroll that person in the default enrollment for that benefit. If a person is already enrolled in a benefit, enroll the person in the default enrollment for that benefit.

New, Defaults; Current, Same Enrollment and Rates: If a person is not yet enrolled in a given benefit, enroll that person in the default enrollment for that benefit. If a person is already enrolled in a benefit, do not change that enrollment or the activity rate.

New, Defaults; Current, Same Enrollment but Default Rates: If a person is not yet enrolled in a given benefit, enroll that person in the default enrollment for that benefit. If a person is already enrolled in a benefit, do not change the enrollment but assign the default activity rate.

New, Nothing; Current, Same Enrollment and Rates: If a person is not yet enrolled in a given benefit, do not enroll that person in that benefit. If a person is already enrolled in a benefit, do not change that enrollment or the activity rate.

New, Nothing; Current, Same Enrollment but Default Rates: If a person is not yet enrolled in a given benefit, do not enroll that person in that benefit. If a person is already enrolled in a benefit, do not change that enrollment but assign the default activity rate.

New, Nothing; Current, Defaults: If a person is not yet enrolled in a given benefit, do not enroll that person in that benefit. If a person is already enrolled in a benefit, enroll that person in the default enrollment for that benefit.

New, Nothing; Current, Nothing: If a person is not yet enrolled in a given benefit, do not enroll that person in that benefit. If the person is already enrolled in that benefit, de-enroll that person from that benefit.

Rule: Indicates that you will specify a FastFormula rule for this default treatment. The formula must be of the type *Default Enrollment*.

Enrollment Period Determination for Life Events

For situations where you back-out and reprocess an event - or when an event occurs during the enrollment window of a prior event - you can determine how the application determines the start and end date of the newly calculated enrollment period.

As part of your implementation, you can select a Period Determination code for each life event you attach to a program or a plan not in program.

Note: You can only set this code at the program level for plans in a

program; the code applies to all plans in the program.

The application uses this code to adjust the enrollment period start date in the following situations:

- You back-out and reprocess an event
- An event occurs within the enrollment window of another event
- The application detects a colliding life event

Select one of the following enrollment codes to control the calculation of the new enrollment window.

- **Retain Number of Days in Original Enrollment Period**: This is the default value if you select no code; this code does not adjust the start date. The application calculates the enrollment window using the enrollment period start and end date codes based on the later of an existing *Processing Date* for a prior life event or, the life event occurred on date of the current event being processed.

  If you back out and reprocess an event, the enrollment window will be the original number of days from the later of the original enrollment period start date, the backed-out date, or the system date. In most cases, the enrollment window will begin on the system date.

- **Later of Enrollment Period Start Date or Future Enrollments Start Date**: This code retains the original enrollment period. However, the enrollment period must be one day or more *after* any future enrollment start date.

  This is the most commonly used code; it always tries to retain the exact enrollment window based on the original start and end dates. If there is an enrollment result after the original enrollment period end date, the enrollment start date will be set to one day after the existing enrollment result. The code keeps the original end date if the end date is later than the new start date, otherwise, the end date will be reset to equal the new start date.

  If the enrollment window has past, the participant will not be able to make election changes in Self-Service and the HR professional would need to set the effective date back to the enrollment window to make elections for the participant

  You should also select this code if you base participant eligibility on family member information.

- **Later of Future Enrollments Start Date or System Date**: This code retains the original enrollment period. However, the enrollment period must be one day or more *after* any future enrollment start date or the system date if the life event has been backed-out and reprocessed.

  Selecting this code allows a participant to update elections in Self-Service on the

day you reprocess a backed-out event.

- **Later of Future Enrollments Start Date or Backed Out Date**: This code retains the original enrollment period. However, the enrollment period must be one day or more *after* any future enrollment start date or the backed-out date if the life event has been backed-out and reprocessed.

  Note: if you set up your life event to close based on the code 'When Enrollment Period Ends', the Close Enrollment Process closes the event.

Reinstatement of Elections for Reprocessed Life Events

As part of implementation, you can configure how Oracle HRMS reinstates elections when a benefits administrator backs out a life event for a person (due to an intervening or colliding life event) and then reprocesses the original life event.

Select a *Reinstate Code* to control election reinstatement based on the reprocessed life event. You can also determine how the application processes reinstatements for overriden activity rates by selecting an *Override Code*. Select from the following codes based on your administrative practices.

- Reinstate all if no electability change for life event
- Reinstate if no change for backed out enrollment
- Reinstate if electability exists for backed out result
- Never Reinstate
- Always use overridden rates
- Override the rates if no change

You can select a Reinstate Code and an Override Code for programs and plans not in program based on each life event you define.

Dependent Coverage and Beneficiary Designation Requirements

Dependent coverage enrollment requirements determine when an eligible dependent can enroll in a benefit. The information required to enroll a dependent can be different from the information required to enroll a primary participant. For dependents you can define:

- Dependent coverage start and end dates
- Required information for enrollment, such as social security number/legislative ID

and date of birth

- Required certifications
- Dependent coverage eligibility profiles
- Enrollment actions triggered by a life event
- Certifications required for enrollment after the occurrence of a specific life event

> **Note:** For Standard Benefits, you must link the Unrestricted life event to the compensation object at the dependent designation level.

The enrollment requirements you specify at program level are inherited at plan type and plan level. The requirements you specify at plan level are inherited by all options in the plan.

You can define beneficiary designation requirements at the plan level. All options in the plan inherit these beneficiary designation requirements.

Defining Enrollment Methods for a Program

You use the Enrollment Methods alternate region of the Program Enrollment Requirements window to define how a participant enrolls in a program.

If you use Standard Benefits, you can define requirements for unrestricted enrollments using this window.

Advanced Benefits customers can specify whether default or automatic enrollment rules apply for a program.

To define an enrollment method for a program:

1. Query the Program for which you are defining program enrollment requirements.

   The current status of the program is displayed. For a definition of the program statuses, see Defining a Benefits Program, page 1-64.

2. For Advanced Benefits users, select the enrollment method, either **automatic** or based on the participant's **explicit** choice, in the Method field.

3. For Advanced Benefits users, select an Automatic Rule to define the circumstances under which automatic enrollments apply for this program.

4. Check the Allows Unrestricted Enrollment field if this program uses the unrestricted enrollment type.

   You must also check the Allows Unrestricted Enrollment field for each plan in this

program that uses the unrestricted enrollment type.

> **Important:** You must check this field if you have not purchased an Advanced Benefits license. If you license Advanced Benefits, you cannot combine unrestricted and life event processing in the same program. If a plan does not require a life event for electability, attach the plan to a separate, unrestricted program or set up a plan not in program.

5. For Advanced Benefits users, check the No Default Enrollment Applies field if the system takes no enrollment actions when eligible persons fail to specify available elections for plans or options in this program.

6. For Advanced Benefits users, check the No Automatic Enrollment Applies field if the system does not automatically enroll eligible persons in any plans in this program.

7. Select an Enrollment Code or rule that defines a participant's enrollment choices for this program based on whether the participant is currently enrolled in the program.

   See: Enrollment Codes, page 5-62

8. Save your work.

Defining Coverage Requirements for a Program

You use the Coverage region of the Program Enrollment Requirements window to define when coverage starts and ends for a program, if coverage levels are coordinated between plans in the program, and rules regarding spousal and dependent coverage for insurance plans.

To define coverage requirements for a program:

1. Select an Enrollment Coverage Start Date code or rule to specify when coverage begins for participants who enroll in plans in this program.

2. Select an Enrollment Coverage End Date code or rule to specify when coverage ends for participants who lose eligibility for a plan in this program.

   In the Maximum % of Participant Coverage block:

3. Enter a Spouse Insurance Coverage percentage to specify the maximum insurance coverage amount allowed for spouses for all insurance plans in the program, expressed as a percentage of the employee's insurance coverage amount.

Important: If you define spousal or dependent life insurance coverage limits, you must create one plan type for spousal life insurance plans and another plan type for dependent life insurance plans.

4. Enter a Dependent Insurance Coverage percentage to specify the maximum insurance coverage amount allowed for dependents other than spouses for all insurance plans in the program, expressed as a percentage of the employee's insurance coverage amount.

5. Save your work.

Defining an Action Item Due Date (Advanced Benefits)

You use the Action Types window to enter the date by which a person must complete an action item associated with a compensation object.

Action items include enrollment certifications, and dependent and beneficiary designation requirements.

To define an action item due date:

1. Query the compensation object for which you are defining an action item due date in the Program Enrollment Requirements window or the Plan Enrollment Requirements window.

2. Choose the Action Types button.

3. Select an action item in the Action Type field.

4. Select an Action Type Due Date code or rule.

5. Save your work.

Defining Activity Rate Enrollment Requirements for a Program

Use the Rates region of the Program Enrollment Requirements window to define when activity rates start and end for the plans in a program.

To define activity rate enrollment requirements for a program:

1. Select a Rate Start Date Code or Rule to specify the date on which activity rates apply to the plans in this program.

2. Select a Rate End Date Code or Rule to specify when activity rates end for

participants in the plans in this program.

3. Save your work.

Defining Enrollment Requirements for Plan Types in a Program

You can define enrollment requirements that apply to a plan type in a program.

To define enrollment requirements for a plan type in a program:

1. Choose the General tab and then the Plan Type tab in the Program Enrollment Requirements window.

2. Select a Plan Type in this program for which you are defining enrollment requirements.

3. Check the Coordinate Coverage for All Plans field to specify that participants in this plan type must elect the same coverage options for all plans in this plan type.

4. Choose from the following if you limit insurance coverage for a spouse or a dependent to a percentage of the employee's insurance coverage:

   - Check the Subject to Spouse's Maximum % Insurance Coverage field if for this plan type you are limiting the insurance coverage of the spouse of an employee to a percentage of the employee's insurance coverage.

   - Check the Subject to Dependent's Maximum % Insurance Coverage field if for this plan type you are limiting the insurance coverage of a dependent of an employee to a percentage of the employee's insurance coverage.

     Important: If you define spousal or dependent life insurance coverage limits, you must create one plan type for spousal life insurance plans and another plan type for dependent life insurance plans.

5. Check the Sum Participant's Life Insurance field if the system determines imputed income and life insurance maximums for this plan type in this program.

6. For Advanced Benefits users, choose from the following if this plan type is part of a flex credit program:

   - Check the Provides Credits field if flex credits are allocated for this plan type.

   - Check the Credits Apply Only To This Plan Type field if flex credits in this plan type cannot be rolled over into other plan types in this program.

7. Select a Required Period of Enrollment Value and UOM for this value to describe the period of time in which a participant's elections for all plans in this plan type must be in effect (except in the case of a qualified life event).

   To define a required period of enrollment for an option, see: Defining Options, page 1-93.

8. Save your work.

Defining Enrollment Limitations for Plan Types in a Program

You can define the minimum and maximum number of plans in which a person can be simultaneously enrolled for a plan type in a program. You can also specify the required enrollment period for the plans in a plan type.

Use the Program Enrollment Requirements window.

To define enrollment limitations for a plan type in a program:

1. Choose the General tab, then the Plan Type tab.

2. In the Limitations region, select a Plan Type in this program for which you are defining enrollment limitations.

3. Check the No Minimum field if there is no minimum number of plans of this plan type in which a participant must be enrolled.

   - Or, enter the Minimum number of plans of this plan type in which a participant must be enrolled.

4. Check the No Maximum field if there is no maximum number of plans of this plan type in which a participant must be enrolled.

   - Or, enter the Maximum number of plans of this plan type in which a participant must be enrolled.

   In the Required Period of Enrollment block:

5. Enter a Value that represents the length of time for which a person must be enrolled in the plans in this plan type.

6. Select the unit of measure of this value in the UOM field.

7. Select a rule if you use a formula to determine the required period of enrollment for the plans in this plan type.

8. Save your work.

Defining Enrollment Requirements for a Plan in a Program

If you are an Advanced Benefits customer, you can specify the circumstances under which a plan is the default for a program. A life event reason can override this information.

To define enrollment requirements for a plan in a program:

1. In the Program Enrollment Requirements window, choose the General tab and then the Plan tab.
2. Select the plan in this program for which you are defining enrollment requirements.
3. For Advanced Benefits users, select the enrollment method, either **automatic** or based on the participant's **explicit** choice, in the Method field.
4. For Advanced Benefits users, select an Automatic Rule to define the circumstances under which automatic enrollments apply for this plan.
5. Select an Enrollment Code or rule that defines a participant's enrollment choices for this plan based on whether the participant is currently enrolled in the plan.

   See: Enrollment Codes, page 5-62
6. Check the Allows Unrestricted Enrollment field if the enrollment type for this plan in program is unrestricted.

   You must also check the Allows Unrestricted Enrollment field for the program that contains this plan.

   > **Important:** You must check this field if you have not purchased an Advanced Benefits license. If you license Advanced Benefits, you cannot combine unrestricted and life event processing in the same program. If a plan does not require a life event for electability, attach the plan to a separate, unrestricted program or set up a plan not in program.
7. Save your work.

Default Enrollment Requirements

You run the Default Enrollment Process from the concurrent manger to create default enrollments based on your plan design and eligibility requirements. Default enrollment processing is only available for Advanced Benefits customers.

To define default enrollment requirements for a plan in a program:

1. Choose General -> Plan -> Default in the Program Enrollment Requirements window.
2. Select a Default Enrollment Method Code or Rule for this plan.
3. Check the Assign on Default field if participants who fail to specify an election are enrolled in this plan.
4. Save your work.

Defining Coverage Requirements for a Plan in a Program

You can define when coverage starts and ends for participants who enroll in a plan in a program. You can also define restrictions to the amount of available coverage provided by a plan.

Use the Program Enrollment Requirements window. Choose the General tab, then the Plan tab, and then the Coverage region.

To define coverage start and end dates for a plan in a program:

1. Select a plan in this program for which you are defining coverage start and end dates.
2. Select an Enrollment Coverage Start Date code or rule to specify when coverage begins for participants who enroll in this plan.
3. Select an Enrollment Coverage End Date code or rule to specify when coverage ends for participants who lose eligibility for this plan.

   Note: You should coordinate your coverage start and end dates with your activity rate start and end dates.

4. Save your work.

Defining Coverage Start and End Dates for a Plan Type in a Program

You can define when coverage starts and ends for participants who enroll in a plan type in a program. These coverage dates apply to all the plans in this plan type unless you override the coverage dates at the plan level.

Choose the General tab, then the Plan Type tab, and then the Coverage region.

To define coverage start and end dates for a plan type in a program:

1. Select a plan type in this program for which you are defining coverage start and end dates.
2. Choose an Enrollment Coverage Start Date code or rule to specify when coverage begins for participants who enroll in a plans in this plan type.
3. Choose an Enrollment Coverage End Date code or rule to specify when coverage ends for participants who lose eligibility for a plan in this plan type.

   Note: You should coordinate your coverage start and end dates with your activity rate start and end dates.

4. Save your work.

Defining Activity Rate Start and End Dates for a Plan in a Program

You can define when activity rates start and end for the plans in a program.

Use the Program Enrollment Requirements window. Choose the General tab, then the Plan tab, and then the Rates region.

To define activity rate start and end dates for a plan in a program:

1. Select a plan in this program for which you are defining activity rate start and end dates.
2. Select a Rate Start Date code or rule to specify the date on which activity rates apply to this plan.
3. Select a Rate End Date code or rule to specify when activity rates end for participants in this plan.

   Note: You should coordinate your coverage start and end dates with your activity rate start and end dates.

4. Save your work.

Defining Activity Rate Start and End Dates for a Plan Type in a Program

You can define when activity rates start and end for the plan types in a program. These activity rate dates apply to all the plans in this plan type unless you override the activity rate dates at the plan level.

Choose the General tab, then the Plan Type tab, and then the Rates region.

To define activity rate start and end dates for a plan type in a program:

1. Select a plan type in this program for which you are defining activity rate start and end dates.
2. Choose a Rate Start Date Code or Rule to specify the date on which activity rates apply to this plan type.
3. Choose a Rate End Date Code or Rule to specify when activity rates end for participants in this plan type.

   Note: You should coordinate your coverage start and end dates with your activity rate start and end dates.

4. Save your work.

Defining a Scheduled Enrollment for a Program

You use the Program Enrollment Requirements window to define a scheduled enrollment so that eligible persons can enroll, or alter elections, in one or more plans during a specified time period.

For example, you could schedule an open enrollment period for a benefits program from 1 November to 30 November each year.

Standard Benefits customers can define a scheduled enrollment period for a plan or program, but the information is considered read-only and does not restrict enrollment processing.

To define a scheduled enrollment period for a program:

1. Query a program in the Program Enrollment Requirements window. Choose the Timing tab, and then the Scheduled tab.
2. Select an Enrollment Type for the scheduled enrollment period that you are defining for this program.
3. Select a Year Period that applies to the scheduled enrollments for the plans in this program.
4. Enter the enrollment start date in the Persons May Enroll During the Period From field.
5. Enter the enrollment end date in the To field.

6. For Advanced Benefits users, enter a Defaults Will be Assigned on date to specify the date on which default benefits assignments are made when participants fail to make their choices as part of this scheduled enrollment.

7. Choose a No Further Processing is Allowed After date to specify the latest date on which the plan sponsor can apply elections applicable to this enrollment period.

   Important: Typically, a third party administrator's requirements for receiving elections information determines this date.

8. Select a Close Enrollment Date To Use code that defines the enrollment closing date based on one of three factors:

   - Processing End Date
   - When Elections Are Made
   - When Enrollment Period Ends

9. Select a Period Determination code to control how the application establishes a start and end date for an enrollment period in the following situations:

   - You back-out and reprocess an event
   - The event occurs within the enrollment window of another event
   - A colliding life event occurs

10. Choose the Overrides alternate region to override any enrollment period or activity rate start and end dates for this program.

11. Choose an Enrollment Start Date Code or Rule to specify the date from which an override to an enrollment date applies to this scheduled enrollment for this program.

12. Choose an Enrollment End Date Code or Rule to specify the final date on which an override to an enrollment date applies to this scheduled enrollment for this program.

13. Choose a Rate Start Date Code or Rule to specify the date from which an override to an activity rate applies to this scheduled enrollment for this program.

14. Choose a Rate End Date Code or Rule to specify the final date on which an override to an activity rate applies to this scheduled enrollment for this program.

15. Choose the Reinstate alternate region.

16. Select a Reinstate Code to control how the application reinstates elections when a benefits administrator reprocesses a backed out life event.

17. Select an Override Code to control how the application reinstates previously overriden activity rates for reinstated elections.

18. Save your work.

Defining Requirements for a Life Event Enrollment for a Program (Advanced Benefits)

You define a life event enrollment schedule to establish temporal parameters for enrollment, de-enrollment, or changes to elections following a given life event, regardless of when that life event occurs during the plan year.

To define life event enrollment requirements for a program:

1. Query a program in the Program Enrollment Requirements window. Choose the Timing tab and then the Life Event tab.

2. Select the Enrollment Type of Life Event.

3. Select a Life Event for which you are defining enrollment requirements.

4. Enter the number of Days After Enrollment Period to Apply Defaults if you define a default enrollment for this program.

5. Enter the number of days persons can fail to respond in the Days After Enrollment Period for Ineligibility field.

   Important: After this number of days, the person is no longer eligible to enroll in benefits for which this life event made them eligible.

6. Enter the number of Additional Processing Days allowed.

7. Select a Close Enrollment Date to use code that defines the enrollment closing date based on one of three factors:

   - Processing End Date
   - When Elections Are Made
   - When Enrollment Period Ends

8. Choose the Overrides alternate region to override any life event enrollment period or activity rate start and end dates based on this life event.

9. Select an Enrollment Start Date Code or Rule to specify the date from which an override to an enrollment date applies to this life event enrollment for this program.

10. Select an Enrollment End Date Code or Rule to specify the last date on which an override to an enrollment date applies to this life event enrollment for this program.

11. Select a Rate Start Date Code or Rule to specify the date from which an override to an activity rate applies to this life event enrollment for this program.

12. Select a Rate End Date Code or Rule to specify the last date on which an override to an activity rate applies to this life event enrollment for this program.

13. Choose the Reinstate alternate region.

14. Select a Reinstate Code to control how the application reinstates elections when a benefits administrator reprocesses a backed out life event.

15. Select an Override Code to control how the application reinstates previously overriden activity rates for reinstated elections.

16. Save your work.

Defining Enrollment Periods for Life Event Enrollments for a Program (Advanced Benefits)

You can define an enrollment period for a life event so that a participant experiencing this life event has a defined period in which to take an enrollment action.

When you select an enrollment period start date code, the system calculates the start date as of the effective date of the Participation batch process that detected the life event. The enrollment end date is calculated based on the Life Event Occurred on Date which is displayed on the Maintain Potential Life Events window.

To define an enrollment period for life event enrollment for this program:

1. In the Program Enrollment Requirements window, with the Timing tab and then the Life Event tab chosen, choose the Periods region.

2. Select Life Event in the Enrollment Type field to specify that you are defining a life event enrollment.

3. Select the Life Event for which you are defining an enrollment period.

4. Select an Enrollment Period Start Date and End Date Code or Rule to specify the

enrollment period for this life event.

You can set the enrollment period to a specific number of days from the event by selecting one of the following codes:

- Number of Days from Event
- Number of Days from Notified
- Number of Days from later Event or Notified

Choose Event or Notified based on whether you set the enrollment period from the Date Event Occurred or the Date Event Recorded.

5. Select a Period Determination code to control how the application establishes a start and end date for an enrollment period in the following situations:
   - You back-out and reprocess an event
   - The event occurs within the enrollment window of another event
   - A colliding life event occurs

   See: Enrollment Period Determination for Life Events, page 5-64

6. Save your work.

Defining Coverage and Activity Rate Periods for a Plan in a Program

You use the Enrollment Period for Plan window to define start and end dates for enrollment coverage and activity rates for a plan in a program. You can define enrollment periods for scheduled or life event enrollments.

To define an enrollment period for a plan in a program:

1. Select the plan for which you are defining coverage and activity rate start and end dates.
2. Choose an Enrollment Coverage Start Date code or rule to specify when coverage begins for participants who enroll in this plan.
3. Choose an Enrollment Coverage End Date code or rule to specify when coverage ends for participants who lose eligibility for this plan.
4. Select a Rate Start Date Code or Rule to specify the date on which activity rates apply to this plan.
5. Select a Rate End Date Code or Rule to specify when activity rates end for

participants in this plan.

6. Save your work.

Associating an Enrollment Rule with a Program

You can associate an enrollment rule with a program. You can also associate such rules with overrides for enrollment or activity rate start and end dates.

To define an enrollment rule for a program:

1. Navigate to the Enrollment Rules window.
2. Enter a Seq (sequence) number for the enrollment rule you are defining for this enrollment or override for this program.
3. Select this Rule.
4. Save your work.

Defining Life Event Enrollment Requirements

You use the Life Event tabbed region of the Program Enrollment Requirements window to define life event requirements for a program, plan type in program, or a plan in program.

Your life event enrollment requirements restrict a participant's enrollment changes based on their current enrollment status.

To define life event enrollment requirements for a plan type or a plan in program:

1. Query the program for which you are defining enrollment requirements.
2. Choose the Program, Plan Type, or Plan tabbed region based on whether you are defining life event enrollment requirements for a program, plan type in program, or a plan in program.
3. Select the plan type or plan in program for which are defining life event requirements if you selected the Plan Type or Plan tabbed region.
4. Select the Life Event for which you are defining enrollment requirements.

   Only Life Events of the Personal and Work types are displayed in the list of values.

   General Change of Life Requirements

5. Choose the General alternate region to define enrollment restrictions based on whether the participant is currently enrolled in this compensation object.

6. Check the Current Enrollment Precludes Change field if a participant who is currently enrolled in this compensation object cannot change elections based on this life event.

7. Check the Still Eligible, Can't Change field if a participant who is still eligible for this compensation object after this life event cannot change their current elections.

8. Select a factor in the Enrollment Change field that limits the compensation objects a participant can change when this life event occurs.

9. Choose the Enrollment alternate region.

10. Select an Enrollment Method code:

    Explicit: An eligible person can choose from available offerings following the occurrence of this life event.

    Automatic: The system automatically enrolls an eligible person in a given offering following the occurrence of this life event.

11. Select an Enrollment Code or Rule to indicate if the participant can alter elections based on if they are newly or currently enrolled in this compensation object.

    See: Enrollment Codes, page 5-62

12. Select a Default Enrollment code to specify the default treatment when a person who experiences this life event fails to make an election.

13. For a plan in program, check the Assign on Default field if this plan in program is the default plan for those persons who do not enroll as a result of this life event.

14. Save your work.

Defining Dependent Coverage Enrollment Requirements for a Program or a Plan Type in Program

You can define how participants designate dependents for a program. Then, all plan types and plans in this program inherit these dependent coverage enrollment requirements unless you specify otherwise at the plan type or plan in program level.

> **Important:** Unless otherwise noted, the dependent coverage requirements you define for a program apply to all compensation objects in this program's hierarchy, regardless of the dependent designation level (plan type or plan) you define.

To define dependent coverage requirements for a program:

1. Query a program in the Program Enrollment Requirements window.
2. Choose the Dependent Coverage tab then choose the Program or Plan Type tab.
3. Select a Designation Level code to specify at what level of the compensation object hierarchy dependent information is recorded for this program or plan type in program.
4. Select the Plan Type in this program for which you are defining dependent coverage enrollment requirements if you choose the Plan Type tab.
5. Select a Program or Plan Type Dependent Designation code to specify whether you require participants to designate dependents when enrolling at any level in this program or plan type.
6. Select a Dependent Coverage Start Code or Rule to specify how the system determines the date on which coverage for dependents in this program or plan type takes effect.
7. Select a Dependent Coverage End Code or Rule to specify the date on which coverage for dependents in this program or plan type ends.
8. Deselect the Suspend Enrollment check box if failure to provide required information does not result in election suspension for the participant.

   By default, Advanced Benefits suspends an election if the participant does not provide required information for a dependent, such as a certification or date of birth. For Standard Benefits, the application does not suspend elections.
9. Check the No Certification Needed field to specify that you do not require the participant to submit certification for a dependent to qualify that person as a dependent.
10. In the following fields, select whether you require the participant to provide dependent information.
    - Social Security Number/Legislative ID
    - Date of Birth
    - Address

      Note: Failure of the participant to provide this information results in election suspension if you require the information.

11. Check the Derivable Factors Apply field to alert the system to the fact that a derived factor is associated with a dependent coverage eligibility profile for this program or plan type.

    The system uses this information to determine whether to calculate derived factors. If you do not check this field, then no dependent coverage in any plan types or plans in this program can have any derived factors associated with them.

12. Save your work.

Defining Dependent Coverage Certifications for a Program

You use the Dependent Certifications window to date effectively define the certifications necessary to enroll dependents in a program.

To define a dependent coverage certification for a program:

1. Select the dependent coverage Certification Type for this program.
2. Select a Certification Required by value to specify when you require this certification type in order for a participant to enroll in this program.
3. Select a Relationship Type to indicate the kinds of dependents who must provide this certification.
4. Check the Required field if this dependent coverage certification type is required.
5. Check the Preferred field if this dependent coverage certification type is preferred for this program, but not required.
6. Check the Lack of Certification Suspends Designation field if failure to provide this dependent coverage certification type suspends the dependent's enrollment in this program.
7. Save your work.

Defining Dependent Coverage Eligibility Profiles for a Program

You use the Dependent Eligibility Profiles window to link a dependent coverage eligibility profile to a program.

To define a dependent coverage eligibility profile for a program:

1. Select a dependent coverage eligibility profile or a coverage eligibility rule to associate with this program.

2. Check the Mandatory field if a person must meet criteria in this eligibility profile in order to qualify as a dependent for the plans in this program.

   Note: If multiple dependent coverage eligibility profiles are attached to the program, a person must satisfy all profiles marked as Mandatory and at least one profile that is not marked Mandatory.

3. Save your work.

Defining Dependent Coverage Eligibility Profiles for a Plan Type in a Program

You use the Dependent Eligibility Profiles window to date effectively maintain dependent coverage eligibility profiles for a plan type in program.

To define eligibility profiles for dependent coverage for a plan type in a program:

1. Select a Profile.

2. Check the Mandatory checkbox if a person must meet criteria in this dependent coverage eligibility profile in order to qualify as a dependent in this plan type in this program.

   Note: If multiple dependent coverage eligibility profiles are attached to the plan type in program, a person must satisfy all profiles marked as Mandatory and at least one profile that is not marked Mandatory.

3. Select a Coverage Eligibility Rule if you are using a rule to define the dependent coverage eligibility for this plan type in program.

4. Save your work.

Defining Dependent Coverage Change of Life Event Enrollment Requirements

You use the Dependent Change of Life Event window to maintain enrollment requirements for dependents based on life events for a plan type or a program.

Note: For Standard Benefits, you must link the Unrestricted life event to

the compensation object at the dependent designation level.

To define dependent coverage change of life event enrollment requirements:

1. Select a Life Event for which you are defining life event enrollment requirements for dependent coverage in this plan type or program.
2. Select a Change Dependent Coverage Code or Rule that limits how a participant can change their dependent coverage when this life event occurs.
3. If this life event results in adding dependent coverage, select a Coverage Start Date code or Rule to specify how the system determines when that coverage begins following the occurrence of this life event.
4. If this life event results in removing dependent coverage, select a Coverage End Date Code or Rule to specify how the system determines when that coverage ends following the occurrence of this life event.
5. Deselect the Suspend Enrollment check box if failure to provide required certification for this life event does not result in election suspension for the participant.
6. Save your work.

Defining Dependent Coverage Certifications for Change of Life Event Enrollment Requirements

You use the Dependent Change of Life Event Certifications window to maintain the certifications that you require to enroll a dependent in a plan type or a program after a given life event.

Select a life event in the Dependent Change of Life Event window and choose the Change of Life Event Certifications button.

To define dependent coverage certifications for a change of life event enrollment requirement:

1. Select a Certification Type for this life event.
2. Select a Certification Required By value to specify the date when you require this certification type in order for a dependent to receive coverage following this life event.
3. Select the Relationship Type for which this certification type is generated based on

this life event.

4. Check the Required field to specify that this dependent coverage certification type is required.

5. Check the Lack of Certification Suspends Enrollment field if failure to provide this dependent coverage certification type suspends the dependent's enrollment.

6. Save your work.

Defining an Enrollment Method for a Plan

You define enrollment requirements for a plan or the options in a plan using the Plan Enrollment Requirements window. Enrollment methods restrict when a participant can enroll in a plan.

To define an enrollment method for a plan:

1. Query the plan for which you are defining enrollment requirements in the Plan field.

   The current status of the plan is displayed. For a definition of the plan statuses, see: Defining a Benefits Plan, page 1-77.

2. With the General tab and the Plan tab selected, choose the Enrollment tabbed region.

3. For Advanced Benefits customers, select an Enrollment Method to specify the type of enrollment this plan uses.

   Explicit: An eligible person can choose from available offerings in this plan.

   Automatic: The system automatically enrolls an eligible person in a given offering in this plan (Advanced Benefits customers only).

4. For Advanced Benefits users, select an Automatic Rule to define the circumstances under which automatic enrollments apply for this plan.

5. Select a Post-election Edit Rule if you have defined a special post-election processing rule for this plan.

6. Check the Allows Unrestricted Enrollment field if enrollment in this plan is unrestricted.

   Important: You must check this field if you have not purchased an Advanced Benefits license. If you license Advanced Benefits, you cannot combine unrestricted and life event processing in the same

program. If a plan does not require a life event for electability, attach the plan to a separate, unrestricted program or set up a plan not in program.

7. Check the Enroll in Plan and Option field if this plan requires or allows simultaneous enrollment in both a plan and one or more options in plan.

   Important: You should check this field if you define a savings plan where a participant can elect the plan and one or more investment options in the plan.

8. Deselect the Suspend Enrollment check box if failure to provide required information does not result in election suspension for the participant.

   By default, Advanced Benefits suspends an election if the participant does not provide required certification. For Standard Benefits, the application does not suspend elections.

9. Select a Code that controls when you require certification for enrollment in this plan.

10. Select an Enrollment Code that defines whether a participant can keep, lose, or choose elections based on if they are currently enrolled in this plan or newly enrolling.

    See: Enrollment Codes, page 5-62

11. Save your work.

Defining Enrollment Coverage Requirements for a Plan

You use the Plan Enrollment Requirements window to define enrollment coverage requirements for a plan.

To define enrollment coverage for a plan:

1. Query the plan for which you are defining enrollment requirements in the Plan field.

   The current status of the plan is displayed. For a definition of the plan statuses, see: Defining a Benefits Plan, page 1-77.

2. With the General tab and the Plan tab selected, select the Coverage tabbed region.

3. Choose an Enrollment Coverage Start Date Code or Rule to specify when coverage

begins for participants in this plan.

4. Choose an Enrollment Coverage End Date Code or Rule to specify when coverage ends for participants in this plan.

5. Check the Dependent Covered by Other Plans field if you do not allow a participant to designate a dependent for this plan if the dependent is already covered under another plan.

6. Save your work.

To define coverage restrictions for a plan:

1. Query the plan for which you are defining coverage restrictions.

2. Choose the Coverage Restrictions button.

3. Select a value in the Restrict Change Based On field if you want to limit changes in coverage to a plan or an option.

   - **Benefit Restriction Applies** limits changes in coverage to a plan.

   - **Option Restriction Applies** limits changes in coverage to an option in a plan.

4. Select a value in the Change Restrictions field that limits a participant's ability to decrease or increase coverage in this plan.

   In the Values block:

5. Define the minimum coverage level a participant may elect. Choose one of the following options:

   - enter the minimum coverage amount

   - select a Min Rule that determines the fixed minimum coverage amount

   - check the No Min field if the plan defines no minimum coverage amount

6. Define the maximum coverage level a participant may elect. Choose one of the following options:

   - enter the maximum coverage amount

   - select a Max Rule that determines the fixed maximum coverage amount

   - check the No Max field if the plan defines no maximum coverage amount.

   - enter the maximum coverage amount a person may elect if they provide

certification in the Max with Certification field.

7. Enter the maximum multiple coverage value available with certification in the Max with Certification field.

In the Increases block:

8. Define the maximum flat amount increase for a participant who is already enrolled in this plan. Choose one or both of the following options:

   - enter the maximum coverage increase amount in the Max field
   - enter the maximum coverage increase amount available with certification in the Max with Certification field

In the Multiple Increases block:

9. Define the maximum multiple coverage increase level for a participant who is already enrolled in this plan. Choose one or both of the following options:

   - enter the maximum multiple increase amount in the Max field
   - enter the maximum multiple increase amount available with certification in the Max with Certification field

> **Note:** Increase levels are based on the options attached to the plan. For example, to restrict a maximum level increase from 1x salary to 3x salary, enter a maximum increase of 2.

In the Interim to Assign block:

10. Select an Assign Code or rule that determines the interim coverage to assign in those cases where a participant's election of this coverage has been suspended pending the completion of an action item.

    See: Interim Coverage, page 5-116 for an explanation of the codes.

11. Select an Unsuspend Code that defines the enrollment coverage start date to use when a suspended enrollment becomes unsuspended.

> **Note:** If you do not select an unsuspend code, the coverage start date is the date on which the enrollment is unsuspended.

12. Save your work.

13. For Advanced Benefits customers, choose the Life Event Reason button if the available coverage for a plan varies based on a life event.

14. Select the Life Event that causes the available coverage to vary.

    Note: The remainder of the fields on the Life Event Reason window function in the same manner as the fields on the Coverage Restrictions window. Complete these fields as necessary to restrict the available coverage for this plan based on this life event.

15. For Advanced Benefits customers, choose the Certifications button if a certification is required to elect coverage at a particular level.

16. Select an Enrollment Certification Type.

17. Select a Certification Required When rule.

18. Check the Required field if this certification is required to receive this coverage amount for this plan.

    Note: If you do not check the Required field, the certification is considered preferred.

19. Save your work.

Defining Activity Rates Requirements for a Plan

You use the Plan Enrollment Requirements window to define when activity rates start and end for a plan.

To define activity rate requirements for a plan:

1. Query the plan for which you are defining enrollment requirements in the Plan field.

   The current status of the plan is displayed. For a definition of the plan statuses, see Defining a Benefits Plan, page 1-77.

2. With the General tab and the Plan tab selected, select the Rates tabbed region.

3. Choose a Rate Start Date Code or Rule to specify when activity rates start for participants in this plan.

4. Choose a Rate End Date Code or Rule to specify when activity rates end for participants in this plan.

5. Save your work.

Defining Enrollment Limitations for a Plan

You use the Plan Enrollment Requirements window to define the minimum and maximum number of options in which a participant can be enrolled in a plan. You can also define the required period of enrollment for a plan.

To define enrollment limitations for a plan:

1. Query the plan for which you are defining enrollment requirements in the Plan field.

   The current status of the plan is displayed. For a definition of the plan statuses, see Defining a Benefits Plan, page 1-77.

2. With the General tab and the Plan tab selected, select the Limitations tabbed region.

3. Check the No Minimum field if there is no minimum number of options in this plan in which a participant must be enrolled.

   - Or, enter the Minimum number of options in this plan in which a participant must be enrolled.

4. Check the No Maximum field if there is no maximum number of options in this plan in which a participant must be enrolled.

   - Or, enter the Maximum number of options in this plan in which a participant must be enrolled.

   In the Required Period of Enrollment block:

5. Enter a Value that represents the length of time in which a person must be enrolled in this plan.

   To define a required period of enrollment for an option, see: Defining Options, page 1-93.

6. Select the unit of measure of this value in the UOM field.

7. Select a rule if you use a formula to determine the required period of enrollment for this plan.

8. Save your work.

Defining Designation Enrollment Requirements for a Plan or Option in Plan

You use the Designation Requirements window to date effectively define a group relationship for a plan or an option in plan depending if you navigate to the window

from the Plan or Option tab. A group relationship limits the relationship types that can be covered under a plan. You can also limit the number of dependents that a plan covers.

To define designation requirements for a plan or option in plan:

1. Query the plan for which you are defining enrollment requirements in the Plan Enrollment Requirements field.
2. Choose the Plan or Option tab.
3. Choose the Designation Requirements button.
4. Select a Group Relationship for which you are defining designation requirements.
5. Select Beneficiaries or Dependents in the Type field to indicate the designee type covered by this designation requirement.
6. Enter the minimum and maximum number of designees that can be covered under this plan.
   - Check the No Minimum or No Maximum field if there is no minimum or maximum number of designees for this plan.
   - Check the Cover All Eligible field if there is no minimum or maximum number of designees for this plan and you want to provide coverage to all designees who meet the eligibility profile.

     Note: You enter 0 in the Minimum and Maximum fields if the plan allows no designees.

7. Select one or more Relationship Types to include with this group relationship.
8. Repeat steps 4-7, page 5-92 for each group relationship you are defining for this plan.
9. Save your work.

Defining Enrollment Requirements for Not in Program Plans

You use the Plan Enrollment Requirements window to define special enrollment requirements for plans that you do not associate with a program.

To define enrollment requirements for a not in program plan:

1. Query the plan for which you are defining enrollment requirements in the Plan

field.

The current status of the plan is displayed. For a definition of the plan statuses, see Defining a Benefits Plan, page 1-77.

2. With the General tab and the Plan tab selected, select the Not in Program tabbed region.

3. For Advanced Benefits users, select a Default Enrollment Code or Rule to define how the system processes enrollments when a participant fails to make an election.

   See: Enrollment Codes, page 5-62

   Note: If an option in this plan is the default option, you must still select this plan as the default plan.

4. Save your work.

Defining Enrollment Requirements for Options in a Plan

You can specify whether an option is ever a default for a plan, and the circumstances under which that option is the default in the Plan Enrollment Requirements window. A life event reason can override this information.

To define general enrollment requirements for an option in a plan:

1. Query the plan for which you are defining enrollment requirements in the Plan field.

   The current status of the plan is displayed. For a definition of the plan statuses, see Defining a Benefits Plan, page 1-77.

2. Select the General tab and then the Option tab.

3. Select an Option in this plan for which you are defining enrollment requirements.

4. Select a Post-Election Edit Rule if you have defined a special post-election processing rule for this option.

5. For Advanced Benefits users, check the Automatic Enrollment field if an eligible participant is automatically enrolled in this option.

6. Select a Family Member Code or rule to indicate the kind of family members that must be recorded in a participant's contact record in order for that participant to be eligible for this option.

Note: Family members are recorded in the Contacts window.

7. For Advanced Benefits users, select an Automatic Rule to define the circumstances under which automatic enrollments apply for this plan.

To define default enrollment requirements for an option:

You run the Default Enrollment Process from the concurrent manger to create default enrollments based on your plan design and eligibility requirements. Default enrollment processing is only available for Advanced Benefits customers.

1. Choose General -> Option-> Default in the Plan Enrollment Requirements window.
2. Select a Default Enrollment Code or Rule to specify when this option is the default based on a new or existing enrollment.
   - Or, check the Assign on Default field if a participant who fails to specify an election is enrolled in this option as the default.

   See: Enrollment Codes, page 5-62

   Note: If this is the default option for the plan, you must also define the plan as the default plan.

3. Save your work.

Defining Enrollment Limitations for an Option in a Plan

You can define when a participant is required to enroll in an option and the required period of enrollment for an option.

To define enrollment limitations for an option in a plan:

1. Query the plan for which you are defining enrollment requirements in the Plan field.
2. With the General tab and the Option tab selected, select the Limitations tabbed region.

   In the Option is Required block:

3. Check the Required field if enrollment in this option is required.
   - Or, select a Rule to limit the conditions under which enrollment in this option is required.

In the Required Period of Enrollment block:

4. Enter a Value that represents the length of time in which a person must be enrolled in this option.

5. Select the unit of measure of this value in the UOM field.

6. Select a rule if you use a formula to determine the required period of enrollment for this option.

7. Save your work.

Defining a Scheduled Enrollment for a Plan

You use the Plan Enrollment Requirements window to define a scheduled enrollment so that eligible persons can enroll in a plan or change their elections during a specified time period each year.

For example, you could schedule quarterly enrollment periods for a plan from 1 January to 15 January, 1 April to 15 April, 1 July to 15 July, and 1 October to 15 October of each year.

Standard Benefits customers can define a scheduled enrollment period for a plan or program, but the information is considered read-only and does not restrict enrollment processing.

To define an enrollment period for a plan:

1. Query a plan in the Plan Enrollment Requirements window. Choose the Timing tab, and then the Scheduled tab.

2. Choose an Enrollment Type code for the scheduled enrollment period you are defining for this plan.

3. Select a Year Period to specify the plan year for which this scheduled enrollment applies to this plan.

4. Enter the date on which participants can begin to enroll in this plan in the Persons May Enroll During the Period from field.

5. Enter the last date on which participants can enroll in this plan in the To field.

6. For Advanced Benefits users, choose a Defaults Will be Assigned on date to specify the date on which default assignments are made when participants fail to make their choices as part of the scheduled enrollment for this plan.

7. Choose a No Further Processing is Allowed After date to specify the latest date on

which the plan sponsor can apply elections applicable to this enrollment period for this plan.

Typically, a third party administrator's requirements for receiving elections information determines this date.

8. Select a Close Enrollment Date to use code that defines the enrollment closing date based on one of three factors:
   - Processing End Date
   - When Elections Are Made
   - When Enrollment Period Ends
9. Select a Period Determination code to control how the application establishes a start and end date for an enrollment period in the following situations:
   - You back-out and reprocess an event
   - The event occurs within the enrollment window of another event
   - A colliding life event occurs
10. Choose the Overrides alternate region to override any enrollment period or activity rate start and end dates.
11. Choose an Enrollment Type code for the override scheduled enrollment period you are defining for this plan.
12. Choose an Enrollment Start Date Code or Rule to specify the start date from which an override to an enrollment date applies to this scheduled enrollment for this plan.
13. Choose an Enrollment End Date Code or Rule to specify the last date on which an override to an enrollment date applies to this scheduled enrollment for this plan.
14. Choose a Rate Start Date Code or Rule to specify the date from which an override to an activity rate applies to this scheduled enrollment for this plan.
15. Choose a Rate End Date Code or Rule to specify the last date on which an override to an activity rate applies to this scheduled enrollment for this plan.
16. Choose the Reinstate alternate region.
17. Select a Reinstate Code to control how the application reinstates elections when a benefits administrator reprocesses a backed out life event.
18. Select an Override Code to control how the application reinstates previously

overriden activity rates for reinstated elections.

19. Save your work.

Associating Enrollment Rules with a Plan

You use the Enrollment Rules window to associate a scheduled or life event enrollment rule with a plan.

Navigate to the Enrollment Rules window from the Scheduled or Life Event tab depending if you are defining an enrollment rule for a scheduled or life event enrollment.

To associate an enrollment rule with a plan:

1. Enter a Seq (sequence) number for the enrollment rule you are defining for this plan.

2. Select an enrollment Rule.

3. Save your work.

Defining Requirements for a Life Event Enrollment for a Plan (Advanced Benefits)

You define a life event enrollment schedule to establish temporal parameters for enrolling, de-enrolling, or changing elections following a given life event, regardless of when that life event occurs during the plan year.

For example, you could allow newly hired employees 30 days to enroll in a plan before requiring that they wait until the next open enrollment period.

To define requirements for a Life Event Enrollment for a plan:

1. Query a plan in the Plan Enrollment Requirements window. Choose the Timing tab and then the Life Event tab.

2. Select the Enrollment Type of Life Event.

3. Select a Life Event for which you are defining enrollment requirements.

4. Enter the number of Days After the Enrollment Period to Apply Defaults if you define a default enrollment for this program.

5. Enter the number of days persons can fail to respond in the Days After Which Becomes Ineligible field.

Important: After this number of days, the person is no longer eligible to enroll in benefits for which this life event made them eligible.

6. Enter the number of Additional Processing Days allowed.
7. Select a Close Enrollment Date to Use code that defines the enrollment closing date based on one of three factors:
   - Processing End Date
   - When Elections Are Made
   - When Enrollment Period Ends
8. Choose the Overrides alternate region to override any life event enrollment period or activity rate start and end dates based on this life event.
9. Select a life event for which you are defining enrollment override information.
10. Select an Enrollment Start Date Code or Rule to specify the date from which an override to an enrollment date applies to this life event enrollment for this plan.
11. Select an Enrollment End Date Code or Rule to specify the last date on which an override to an enrollment date applies to this life event enrollment for this plan.
12. Select a Rate Start Date Code or Rule to specify the date from which an override to an activity rate applies to this life event enrollment for this plan.
13. Select a Rate End Date Code or Rule to specify the last date on which an override to an activity rate applies to this life event enrollment for this plan.
14. Choose the Reinstate alternate region.
15. Select a Reinstate Code to control how the application reinstates elections when a benefits administrator reprocesses a backed out life event.
16. Select an Override Code to control how the application reinstates previously overriden activity rates for reinstated elections.
17. Save your work.

Defining a Life Event Enrollment Period for a Plan (Advanced Benefits)

You define an enrollment period for a life event to limit the time when a qualifying

participant can make a benefit election based on a life event.

Use the Plan Enrollment Requirements window.

To define a life event enrollment period for a plan:

1. Choose the Timing tab and the Life Event tab and then choose the Periods region.
2. Select a life event for which you are defining an enrollment period.
3. Select an Enrollment Period Start Date and End Date Code or Rule to specify the enrollment period for this life event.

   You can set the enrollment period to a specific number of days from the event by selecting one of the following codes:

   - Number of Days from Event
   - Number of Days from Notified
   - Number of Days from later Event or Notified

   Choose Event or Notified based on whether you set the enrollment period from the Date Event Occurred or the Date Event Recorded.
4. Select a Period Determination code to control how the application establishes a start and end date for an enrollment period in the following situations:

   - You back-out and reprocess an event
   - The event occurs within the enrollment window of another event
   - A colliding life event occurs

   See: Enrollment Period Determination for Life Events, page 5-64
5. Save your work.

Defining Life Event Enrollment Certifications for a Plan or Option in Plan (Advanced Benefits)

You use the Life Event Certifications window to maintain the certifications that you require to enroll a participant in a plan or option in plan after a given life event.

To define life event enrollment certifications for a plan or option in plan:

1. Select a life event for which you are defining an enrollment certification.
2. Deselect the Suspend Enrollment check box if failure to provide required

information does not result in election suspension for the participant.

By default, Advanced Benefits suspends an election if the participant does not provide required certification. For Standard Benefits, the application does not suspend elections.

3. Select a Determination Code that controls when you require certification for enrollment in this plan or option.

4. Select a Certification Required By Rule to specify when you require certification to support enrollment in this plan or option.

5. Select an Enrollment Certification Type that you require or accept for enrollment in this plan or option in plan after this life event.

6. Select a Certification Required By Rule to specify when you require this certification type.

7. Check the Required field to specify that the receipt of this certification type is required before an enrollment is valid after this life event.

8. Save your work.

Defining Life Event Enrollment Requirements for a Not in Program Plan

You use the Plan Enrollment Requirements window to define life event enrollment requirements for a not in program plan and to determine when a participant can enroll or change elections in a not in program plan based on the occurrence of a life event.

> **Important:** You define enrollment requirements for plans in program using the Program Enrollment Requirements window.

To define life event enrollment requirements for a not in program plan:

1. Query a plan and choose the Life Event tab.

2. Choose the Plan tab and then choose the General alternate region.

3. Select the Life Event for which you are defining general enrollment requirements.

   Only Life Events of the Personal and Work types are displayed in the list of values.

4. Check the Current Enrollment Precludes Change field if a participant who is currently enrolled in this plan cannot change elections based on this life event.

5. Check the Still Eligible, Can't Change field if a person who experiences this life event and is still eligible for this plan cannot change his or her current enrollment

elections.

Important: You can set the Still Eligible, Can't Change checkbox at the plan in program, not in program plan, and option in plan levels.

6. Select an Enrollment Change code to specify the degree to which a participant can change enrollment in a plan.
7. Choose the Enrollment alternate region.
8. Select the Life Event for which you are defining enrollment requirements.
9. Select an Enrollment Method code for this life event enrollment for this plan.

   Explicit: An eligible person may choose from available offerings in this plan following the occurrence of this life event.

   Automatic: The system automatically enrolls an eligible person in a given offering in this plan following the occurrence of this life event.
10. For Advanced Benefits users, select an Automatic Rule to define the circumstances under which automatic enrollments apply for this plan.
11. Select an Enrollment Code for a life event enrollment you are defining for this plan.

    See: Enrollment Codes, page 5-62
12. Choose a Default Enrollment Code to specify for this plan the default treatment when a person experiencing this life event fails to make a choice among available choices.
13. Check the Assign on Default field if this plan is the default plan for those persons who fail to make an election as a result of this life event.
14. Save your work.

Defining Life Event Enrollment Requirements for an Option in a Plan

You use the Plan Enrollment Requirements window to define enrollment requirements for a life event for an option in a plan. These enrollment requirements override those you define for the plan associated with the option.

For example, you could define enrollment requirements for an Employee Plus Spouse option in a medical plan when the life event Marriage occurs for the participant.

To define life event enrollment requirements for an option in plan:

1. Query a plan and choose the Life Event tab.

2. Choose the Option tab and then choose the General alternate region.

3. Select the option in this plan for which you are defining enrollment requirements.

4. Select the Life Event for which you are defining enrollment requirements.

   Only Life Events of the Personal and Work types are displayed in the list of values.

5. Check the Current Enrollment Precludes Change field if a participant who is currently enrolled in this option cannot change elections based on this life event.

6. Check the Still Eligible, Can't Change field if a person who experiences this life event and is still eligible for this option may not change his or her current enrollment elections.

   Important: You can set the Still Eligible, Can't Change checkbox at the program, plan in program, and not in program plan levels.

7. Choose the Enrollment alternate region.

8. Select the Life Event for which you are defining enrollment requirements for this option in this plan.

9. Select an Enrollment Code based on whether the participant is currently enrolled in this option.

   See: Enrollment Codes, page 5-62

10. Select a Default Enrollment Code to specify for this option in this plan the default treatment when a person experiencing this life event fails to make a choice among available choices.

11. Check the Assign on Default field if this option in this plan is the default for those persons who fail to make an election as a result of this life event.

12. Check the Automatic Rule field if you use a rule to determine if this life event results in automatic enrollment of this option.

13. Select the Automatic Enrollment rule.

14. Save your work.

Defining Dependent Coverage Requirements for a Plan

You can define how participants designate dependents for a plan. Then, all options in this plan inherit these dependent coverage enrollment requirements.

To define dependent coverage requirements for a plan:

1. Query a plan in the Plan Enrollment Requirements window.

2. Choose the Designations tab and then the Dependent tab.

3. Select a Dependent Designation Code to specify whether you require participants to designate dependents when enrolling in this plan.

4. Deselect the Suspend Enrollment check box if failure to provide required information does not result in election suspension for the participant.

   By default, Advanced Benefits suspends an election if the participant does not provide required information for a dependent, such as a certification or date of birth. For Standard Benefits, the application does not suspend elections.

5. Check the No Certification Needed field to specify that you do not require the participant to submit certification for a dependent to qualify that person as a dependent.

6. In the following fields, select whether you require the participant to provide dependent information.

   - Social Security Number/Legislative ID
   - Date of Birth
   - Address

   Note: Failure of the participant to provide this information results in election suspension if you require the information.

7. Select a Dependent Coverage Start Code or Rule to specify how the system determines the start date for coverage for dependents in this plan.

8. Select a Dependent Coverage End Code or Rule to specify how the system determines the end date for coverage for dependents in this plan.

9. Check the Derivable Factors Apply field to alert the system that a derived factor is associated with a dependent coverage eligibility profile for this plan. (The system uses this information to determine whether to calculate derived factors or proceed.)

   Note: If you do not check this field, then no dependent coverage in this plan may have any derived factors associated with it.

10. Click the Certifications button to open the Dependent Certifications window and to

define the certifications necessary to enroll dependents in a plan.

11. Select a dependent coverage Certification Type you require or prefer in order for participants to designate dependents for participation in this plan.

12. Select the Relationship Type for which this certification type is required for this plan.

13. Select a Certification Required by value to specify when you require this Certification Type in order for participants to designate dependents for participation in this plan.

14. Check the Required field to specify that this dependent coverage certification type is required.

15. Save your work.

Defining Dependent Coverage Eligibility Profiles for a Plan

You use the Dependent Eligibility Profiles window to link a dependent coverage eligibility profile to a plan.

To define a dependent coverage eligibility profile for a plan:

1. Select a dependent coverage eligibility profile or a coverage eligibility rule to associate with this plan.

2. Check the Mandatory field if a person must meet criteria in this eligibility profile in order to qualify as a dependent for this plan.

3. Save your work.

Defining Dependent Coverage Change of Life Event Enrollment Requirements for a Plan

You use the Dependent Change of Life Event window to limit dependent designations for a plan based on a life event.

To define dependent coverage change of life event enrollment requirements for a plan:

1. Query a plan in the Plan Enrollment Requirements window.

2. Choose the Designations tab and then the Dependent tab.

3. Choose the Dependent Change of Life Event button.

4. Select a Life Event for which you are defining dependent coverage enrollment requirements.

   Note: For Standard Benefits, you must link the Unrestricted life event to the compensation object at the dependent designation level.

5. Select whether the system adds or removes coverage for a dependent as a result of this life event in the Change Dependent Coverage Code or Rule field.

6. Select a Coverage Start Date Code or Rule if this life event results in adding dependent coverage.

7. Select a Coverage End Date Code or Rule if this life event results in removing dependent coverage.

8. Deselect the Suspend Enrollment check box if failure to provide required information does not result in election suspension for the participant.

9. Choose the Change of Life Event Certifications button to maintain the certifications that you require to enroll a dependent in a plan after a given life event.

10. Select the Certification Type for this life event.

11. Select a Certification Required By value to specify when you require this certification type in order for a dependent to receive coverage following this life event.

12. Select the Relationship Type for which this certification type is required for this life event.

13. Check the Required field to specify that this dependent coverage certification type is required.

14. Save your work.

Defining Certifications for Enrollment in a Plan

You use the Certifications window to define a certification that is required or preferred for enrollment in a plan.

1. Select the Certification Type you require or prefer in order for a participant to enroll in this plan.

2. Select a Certification Required to specify when you require this Certification Type in order for a participant to enroll in this plan following this life event.

3. Check the Required field if failure to provide this Certification Type suspends enrollment in this plan.

4. Save your work.

Defining Beneficiary Designation Requirements for a Plan

You can define beneficiary designation requirements for a plan. Then, all options in this plan inherit these beneficiary designation requirements.

To define beneficiary designation requirements for a plan:

1. Query a plan in the Plan Enrollment Requirements window.

2. Choose the Designations tab and then the Beneficiary tab.

3. Select the Beneficiary Designation Code to specify whether beneficiary designations for the plan are optional or required.

4. Select the Default Beneficiary Code to specify the type of person (such as a spouse) who is the beneficiary in those cases when the participant fails to designate a beneficiary for the plan.

   Note: This field is information-only and does not effect system processing. You must manually designate a person's beneficiaries.

5. Deselect the Suspend Enrollment check box if failure to provide required information does not result in election suspension for the participant.

   By default, Advanced Benefits suspends an election if the participant does not provide required information, such as a certification or date of birth. For Standard Benefits, the application does not suspend elections.

6. Check the No Certification Needed field to specify that you do not require the participant to submit certification for a beneficiary to qualify that person as a beneficiary.

7. In the following fields, select whether you require the participant to provide beneficiary information.

   - Social Security Number/Legislative ID

   - Date of Birth

- Address

  Note: Failure of the participant to provide this information results in election suspension if you require the information.

8. Select a Measures Allowed code to define if amounts to be distributed to beneficiaries should be specified by percent only or by percent and amount.

9. Select an Increment Amount and Increment Percent to specify how the system expresses benefit amount increments.

10. Select a Min Designatable Amount and/or Percent to specify the smallest monetary amount that a participant can designate to a beneficiary according to the terms of the plan.

11. Check the appropriate fields in the Restrictions block, as needed.

    - **Minor Designee Requires Trustee** if you require participants to identify a trustee for any beneficiary the governing regulatory body defines as a minor.

    - **May Designate Organization as Beneficiary** if this plan allows participants to designate an organization such as a charity as a beneficiary.

    - **Qualified Domestic Relations Rule Applies** if you require the participant to designate a qualified domestic partner as primary beneficiary, or obtain the consent of a qualified domestic partner to name another individual.

    - **Additional Instruction Text Allowed** if participants can provide a textual description of how benefits are to be distributed to beneficiaries in those cases when the instructions are complex.

    - **Contingent Beneficiaries Allowed** if this plan allows participants to identify one or more contingent beneficiaries in addition to any primary beneficiaries.

12. Choose the Certification button to open the Beneficiary Certifications window.

13. Select the Certification Type you require or prefer in order for participants to designate beneficiaries for this plan following this life event.

14. Select a Certification Required by value to specify when you require or prefer this Certification Type in order for participants to designate beneficiaries for this plan following this life event.

15. Select a Relationship Type to indicate if this plan limits beneficiary designations to a person who is of a particular relationship to the participant.

16. Select a Beneficiary Type to indicate if this plan limits beneficiary designations to either persons or organizations.

17. Check the Required field if this certification is required from a beneficiary.

18. Save your work.

Activity Rates and Coverage Calculations

Activity Rates

You define an activity rate calculation to determine the **contribution** that an employee (and, in some cases, an employer) spends to purchase a benefit on a recurring or non-recurring basis. Activity rates also determine the monetary **distribution** paid from a plan such as a savings plan or a flexible spending account.

The process of defining contribution and distribution activity rates varies depending on the complexity of your calculations. These activities include defining:

- Standard contributions and distributions
- Prorated partial month contributions
- Variable activity rates
- Employer matching rate contributions
- Imputed income calculations for plans subject to imputed income regulations in the US

As part of your activity rate definition you can also define deduction schedules and payment schedules for contributions and distributions that do not process each pay period.

You can use the Total Compensation Setup Wizard, *Total Compensation User Guide* to update multiple standard and variable activity rates simultaneously. You can:

- correct existing rates or change rates from an effective date onwards
- update rates for a combination of rate type, plan type, and plan
- make updates on the page or by way of Web ADI-enabled spreadsheet loaders

Activity Rates and Element Definitions

When you define an activity rate definition, you select the element to which the activity rate corresponds. That way, when the system calculates an activity rate for a person and a benefit plan or option, the result can be captured in the element and transferred to payroll and other areas of your HR system as necessary.

> **Note:** Set up your elements as a prerequisite to defining your activity rates. If your element definition changes, you must re-attach the

element to the rate.

If your plan design allows a participant to enroll in more than one plan at a time in a plan type or more than one option in a plan, you create an element for each plan and each option. If you define activity rates at the plan level that cascade to each option in the plan, you must define an element for each option.

You use eligibility profiles, instead of element links, to determine benefits eligibility. Create an *open element link* for each benefits-related element. Query the benefits element in the Element Link window and save the record without selecting any assignment criteria to create an open link. If necessary, you can set up several links with assignment criteria for costing purposes. However, you must ensure that these links do not conflict with your eligibility profiles.

Normally, you define one input value per activity rate. However, you can select a formula in the Extra Inputs Rule field and map the formula outputs to input values by choosing the Extra Inputs button.

When a participant enrolls in a benefit, the activity rate result is written to the element. You can view the result in the Element Entries window and the Entry Values window. You cannot manually add or edit an entry for an element associated with an activity rate. These entries are maintained by the system when you make an election change or an enrollment override.

See: Defining and Linking an Element for Standard and Advanced Benefits, page 1-27

See: Elements: Building Blocks of Pay and Benefits, *Oracle HRMS Compensation and Benefits Management Guide*

Standard Contributions and Distributions

You define a standard contribution or distribution as a calculation that determines the amount a person must pay to participate in a benefit (a contribution) or the amount that is paid to a participant (a distribution).

You associate a standard calculation with a plan or an option in plan so that when a participant makes an election, the contribution or distribution amount is determined.

Standard calculations are used for a variety of plan types, such as medical plans and savings plans. Other plan types require special activity rate calculations, these include flex credit plans and plans subject to imputed income taxes.

Defining a standard contribution or distribution involves:

- Defining general characteristics of the activity rate
- Defining the activity rate calculation method
- Defining prorated activity rates

- Defining payroll processing requirements
- Defining variable rate calculations, if applicable

General Characteristics of Activity Rates

For all activity rates, you indicate if the activity type is a contribution or distribution made by the participant or the employer. Examples of activity types include:

- Employee Individual Contribution
- Employer Matching Plan Contribution
- Employer Distribution

You specify the tax basis on which the contribution or distribution is made, such as pretax or aftertax.

If you are defining a calculation for a non-monetary distribution, you can define the unit of measure in which that distribution is expressed, such as Options for stock options.

Activity Rate Calculation Methods

You define an activity rate calculation method to determine the rate of contribution or distribution for a plan or option. In addition to flat rates, the system supports a range of calculation methods including multiple of actual premium and multiple of compensation.

Calculation methods can also set boundaries for the result of the standard calculation. You can define a minimum and maximum contribution or distribution amount for the result of an activity rate calculation.

You can set the increment by which activity rates are expressed and the default activity rate value.

Prorated Activity Rates

For a participant whose enrollment coverage date falls within the month, you can define if the system prorates the activity rate. For prorated activity rates, you can define the date range within the month that is subject to the prorated rate. For example, you may only want to prorate activity rates for participants who enroll between the 5th and the 25th of the month.

You specify the percentage of the standard activity rate used to calculate the prorated activity rate for participants who enroll mid-month.

Activity Rate Payroll Processing

As part of defining an activity rate calculation for a benefit, you define your payroll processing system, such as Oracle Payroll. Then, you define whether the calculation is recurring or non-recurring. For recurring calculations, you can define a schedule for deductions or payments depending if the calculation is for a contribution or a distribution.

You can also define when the activity rate value should be entered. Typically this is at the time of enrollment, but the system also supports automatic rate entry.

Rate Certification (Advanced Benefits Only)

You can enforce certification requirements for a standard rate attached to a plan or option in plan when the plan is not in a program. The element associated with the standard rate is not entered for the participant until you mark the certification as having been received, on the Person Enrollment Certification window. The element is entered based on the rate start date code specified on the Plan Enrollment Requirements window.

When you define the standard rate, you can select a certification type from the lookup type BEN_ENRT_CTFN_TYP.

Variable Rates

You can associate a variable rate profile with a standard calculation if the activity rate may vary by participant.

See Variable Rate Profiles, page 5-113

Employer Matching Rates

Note: This feature is reserved for future use.

If you define a plan where the employer matches a percentage of the employee's contribution, such as for a savings plan, you can define how the system calculates the matching rate.

Because employer matching percentages may vary based on the employee's contribution percentage, you may need to define more than one matching rate for an activity rate.

If the benefit plan sets a maximum employee earnings amount or a maximum contribution percentage beyond which a matching rate should not be calculated, you can define this maximum earnings amount or contribution percentage. That way, if the employee's earnings or contribution percentage exceeds the limit, the system calculates the matching rate based on the maximum amount or percentage that you define.

You define the matching contribution percentage based on the employee's contribution percentage. However, you can also define minimum and maximum employer contribution limits.

Period-to-Date Limits

Note: This feature is reserved for future use.

For those plans with contribution limits, you can associate a period-to-date limit with the activity rate that determines the contribution amount. Period-to-date limits are often used with 401(k) plans in the US.

Variable Rate Profiles

You can define an activity rate for a benefit that varies based on some factor. You group together the factors that cause an activity rate to vary into a *variable rate profile*. You then associate the variable rate profile with an activity rate which, in turn, you associate with a particular benefit plan or option.

As with participant eligibility profiles, variable rate profiles may consist of employment factors, personal factors, derived factors, and other factors such as participation in a particular benefits plan.

You can use a participant eligibility profile that you have defined as a criteria set in a variable rate profile. This lets you define your criteria once, then reuse the criteria set to control both eligibility and variable rates. Oracle recommends attaching eligibility profiles to variable rates--as opposed to individual criteria--to improve system performance.

Note: You can only attach one participant eligibility profile to a variable rate profile. You cannot attach an eligibility profile to a variable rate profile if you have already attached existing criteria to the profile. However, you can remove any existing criteria, then attach an eligibility profile.

Most variable rate profiles are defined so that participants who meet certain criteria are eligible to receive the variable rate. However, you can also define a variable rate profile so that persons who meet the criteria become *excluded* from receiving the variable rate. In such cases, the standard activity rate for the benefit applies to these persons.

FastFormula Rules in Variable Rate Profiles

If you use a FastFormula rule as part of your variable rate profile, the participant must meet the criteria of the rule and one value from any other criteria that you include in the profile. If you use more than one FastFormula rule, by default the participant must meet

the criteria of all the rules. If you change the user profile option BEN:VAPRO Rule from AND to OR, the participant need only meet the criteria of one rule.

You can associate a variable rate profile with the following kinds of activity rates:

- Standard contributions and distributions
- Flex credit calculations
- Imputed income calculations
- Actual premiums
- Reimbursement plan rates (for flexible spending accounts)

Coverage Calculations

A coverage calculation defines the level of benefits coverage a participant receives under plans such as a group term life insurance or accidental death & dismemberment insurance plan.

Typical business requirements allow a participant to choose either a flat coverage amount or an amount that is a multiple of the participant's salary. The system also supports many other coverage calculation methods.

Here are several of the aspects of a coverage calculation that you can define:

- Minimum and maximum coverage amounts
- Maximum coverage amount available with certification (Advanced Benefits)
- Maximum coverage increases for flat amounts and coverage amounts that are a multiple of a given value
- Prorated coverage for employees who enter flexible spending accounts at any time other than the beginning of the plan year

When you define a coverage calculation method you define if the coverage level amount is entered at the time of enrollment or during the definition of the coverage calculation. You can choose from the following calculation methods depending on the requirements of the plan:

- Flat fixed amount
- Flat range
- Flat amount plus multiple of compensation
- Flat amount plus multiple of compensation range

- Multiple of compensation
- Multiple of compensation plus flat range
- Multiple of compensation range
- No standard value
- Same as annualized elected activity rate
- Post Enrollment Calculation Rule

If necessary, you can associate a variable rate profile with a coverage calculation when the calculation may vary by participant.

You can define a life insurance plan where spouse or dependent coverage is a percentage of the participant's elected coverage. Write a FastFormula with a rule type of Coverage Amount Calculation and attach the rule to the coverage calculation using the Post Enrollment Calculation Rule.

This formula executes both when you run the Participation Process to determine electable choices and when you save an enrollment or choose the Recalculate button on the Flex Enrollment window, Non-Flex Enrollment window, or the Benefits Selection page in Self-Service.

> **Note:** Since the formula executes when you run the Participation Process, the coverage amount selected by the employee may not be available. Therefore, the formula should contain a default coverage value.

Coverage Across Plan Types

For those benefit programs that restrict the amount of coverage that a participant can elect across plan types in a program, you can group the plan types in the program to which a minimum or maximum coverage amount applies.

Cross plan type coverage limits work in conjunction with coverage limits you define at the plan level. If you define a maximum coverage limit at the plan level, the cross plan type coverage limit must not have a maximum coverage level that is *less than* the maximum you set for a plan in that plan type.

For example, suppose your organization defines a Group Term Life Insurance plan type. Within that plan type, you offer the Employee Group Term Life Insurance plan that provides coverage equal to two times earnings up to a maximum of $200,000.

You also maintain a corresponding plan type for Non-Group Term Life Insurance plans. In this plan type, you define a plan that has a maximum coverage level of $120,000.

You could define an across plan type coverage limit called "All Life Insurance Maximum" that limits the maximum coverage a participant can elect across these two

plan type to $300,000.

Interim Coverage (Advanced Benefits)

As part of your plan design, you can define the interim coverage assigned to a participant when a participant's enrollment in a benefit is suspended pending the completion of an action item.

For example, you might require a certificate of good health from a participant who is currently enrolled in a life insurance plan with a coverage level of 1x compensation if the participant newly elects a coverage of 3x compensation during an open enrollment period. If you suspend the new election pending receipt of the certification, you can provide interim coverage until the certification is provided.

Interim Coverage Determination

You can qualify the conditions under which interim coverage is provided based on the participant's current enrollment and the new suspended election. You can either use an interim to assign code or an interim to assign rule to determine the interim electable choice.

Interim to Assign Code

Each interim to assign code contains two parts.

- The first part identifies if the suspended election is current or new. Current means that the suspended enrollment is for the Same Option in Plan, Same Plan, or Same Plan Type as the participant's current enrollment.

- The second part defines the interim coverage that is provided. You have the following options:

    - *Same*: The system assigns the person's current election as interim coverage.

    - *Next Lower*: The system assigns as interim coverage the plan in plan type, option in plan, or coverage amount of a range that is the next lower sequence that will not be suspended based on your plan or option definitions. You assign a sequence number when you define a plan or option.

    - *Default*: The system assigns as interim coverage the default compensation object or coverage amount defined for the plan, based on the default enrollment codes.

    - *Min*: The system assigns as interim coverage the minimum option in plan, plan in plan type, or coverage amount within a range defined for the plan.

    - *Nothing*: The system assigns no interim coverage in place of the suspended coverage.

Example: *Current Same Plan Type, Default; New, Nothing*--This code means that if the participant is currently enrolled in a plan of the same plan type, they are assigned the default coverage; if they are not currently enrolled in a plan of the same plan type, they receive no interim coverage.

Interim to Assign Rule

The interim to assign rule provides greater flexibility in interim cover determination. You configure an interim to assign rule to return one of the following parameters that meets your business requirements:

- An interim to assign code
- An electable choice ID within the plan type of the suspended enrollment
- An electable choice ID within the plan type of the suspended enrollment, and a benefit amount, which must be less than the amount for the suspended enrollment.

  Note: Return a benefit amount only if the interim coverage calculation method is:

  - Flat range
  - Flat amount, and the Enter Value at Enrollment option is selected

For more information about the Default to Assign Pending Action formula type, see Oracle FastFormula Reference Guide available on MetaLink (Note ID 218059.1).

Unsuspended Enrollments (Advanced Benefits)

For those cases where a suspended enrollment is unsuspended, you define the enrollment coverage start and end dates and the activity rate start and end dates for the unsuspended enrollment.

If you assign interim coverage when an enrollment is suspended, the interim enrollment is ended one day before the coverage start date of the unsuspended enrollment.

You select an *unsuspend enrollment code* that controls the enrollment coverage start date of the unsuspended enrollment if the unsuspended date is equal to or later than the original enrollment coverage start date. Select from the following codes:

- *As of Completed Date* This code sets the enrollment coverage start equal to the effective date on which the enrollment is unsuspended.
- *Use Existing Enrollment Start Date* This code uses the original enrollment coverage start date, even if this date is before the suspension end-date.

- *Recalculate Using Completed Date and Enrollment Start Date Code*This code recomputes the enrollment coverage date using the un-suspended date as the life event occurred on date or notification date (depending on your life event definition) if the computed coverage start date is less than the effective date of the un-suspension.

The activity rate start and end dates are re-calculated based on the enrollment coverage start date of the unsuspended enrollment.

Imputed Income Calculations (US only)

Section 79 of the US Internal Revenue Service code defines imputed income as certain forms of indirect compensation termed *fringe benefits*, and taxes the recipient accordingly. You define *imputed income calculations* to calculate the amount of a benefit that is taxable as imputed income.

For example, if you offer a group term life insurance plan that provides coverage in excess of $50,000 to a participant or in excess of $2,000 to a spouse or dependent, you can define an imputed income calculation that determines the amount of coverage that is subject to imputed income tax regulations.

You can select the payroll system that processes the imputed income calculation and the manner in which the calculations are processed. If your payroll system calculates imputed income on a basis other than every pay period, you can associate one or more payment schedules with the imputed income calculation.

> **Note:** By default, the imputed income calculation assumes that the employer pays 100% of the benefit, and the benefits system does not subtract employee contributions from the calculation. However, you can set the BEN:Imputed Income Post Tax Deduction profile to Y so that the imputed income process deducts the sum of all standard rates defined as Subject to Imputed Income with a Tax Type of After Tax and an Activity Type of either Employee Payroll Contribution, Employee Individual Contribution, or Employee Plan Contribution.

For employees whose participation in an imputed income plan begins mid-month, you can define partial month treatment rules.

You can also restrict the calculation to a subset of people according to assignment type or types (such as Employee, Benefits, or Employee then Benefits).

You associate a variable rate profile with an imputed income calculation because imputed income taxes vary based on a person's age.

See: Imputed Income Plans (US), page 1-62

Actual Premium Calculations

Premiums are the amount paid by a benefit plan sponsor to the supplier of a benefit. Typically, premiums are calculated on a per-participant basis, but the system also

supports premium calculation based on the total participants enrolled in a plan or the total volume of elected coverage.

You can think of premium determination and processing as divided into the following areas:

- Premium calculation setup
- Premium determinations that occur during enrollment
- Recalculation of premiums based on life events (Advanced Benefits)
- Premiums and credits are determined by the Premium Calculation batch process at month end
- Manual adjustment of calculated premiums by participant or by plan and review of monthly premium totals

Premium Calculation Setup

You setup premiums calculations to define how the system calculates, costs, and administers premiums. The system supports the administration of the following premium types:

- regular premiums that are calculated on a per-participant basis
- premiums based on the total number of participants covered in a plan or option in plan
- premiums based on the total coverage volume elected in a plan or option in plan

You can calculate premiums *prospectively* (in advance of the period of coverage) or *retrospectively* (as a result of coverage previously received). Premium are calculated on a monthly basis in accordance with the most common business practices of benefit suppliers. The system supports pro-rated premium calculations for benefits participants who gain or lose coverage mid-month. You can also define a *standard wash rule* so that participants who are covered by a plan for less than a full month have no premium obligation.

You can choose how to cost a participant's premium so that the contribution is distributed to the appropriate general ledger account. A single plan or option can have multiple premiums so that, for example, you could calculate one premium for an employee contribution and a second premium for the employer contribution.

Premium setup also includes defining the calculation method you use to determine the premium, including any variable rates. You link premium calculations to the benefit supplier organization so that premiums can be remitted to the appropriate source.

Premiums Based on Total Participants or Total Coverage Volume

For premiums that are determined based on the total number of participants or the total coverage volume elected by all participants in a plan or option in plan, you use variable rate profiles to calculate the premium.

You select a variable rate criteria of Total Participants or Total Coverage Volume and then define a variable rate calculation that determines the premium based on the number of participants or the coverage volume that you specify.

> **Note:** Variable rates for actual premiums must have a tax type of Not Applicable.

Enrollment Based Premium Determination

Premiums that are calculated on a per-participant basis are determined when a participant elects a plan or option in plan.

At month end, you run the Premium Calculation batch process from the Concurrent Manager to select the participants for whom you want to write a premium result.

You can then view monthly premium results by participant in the Monthly Participant Premium window or by plan and option in the Monthly Plan or Option Premium window.

> **Note:** Premiums that vary based on the total number of participants or the total coverage volume elected by all participants for a plan or option in plan are determined only when you run the Premium Calculation batch process.

Premium Changes Based on Life Events (Advanced Benefits)

You can define premiums that vary based on life events.

You link a life event reason that you have defined to a premium definition so that when a participant experiences this life event the premium is recalculated.

> **Note:** You can define a life event such that its impact only effects a participant's premium, and not their eligibility for benefits.

Calculation of Monthly Premiums and Credits by Batch Process

You run the Premium Calculation batch process from the Concurrent Manager to calculate monthly premiums. By selecting parameters, you can control the plan or option in plan for which premiums are calculated. You can also select the processing month and year and the participant or participant groups for whom a premium is

calculated.

The batch process uses your premium definition to determine the per participant premium or the total premium for the compensation object depending on your premium type.

> **Note:** You cannot select parameters that limit the results of the Premium Calculation process by person criteria for calculations that allocate premiums to participants based on the total number of participants in a plan or option.

For premiums that have been paid but which *should not* have been paid (due to retroactive changes or an error in processing), the Premium Calculation process allocates credits to offset the result of the previously paid premium. Credits are applied against the premium due for the current month.

Your *credit lookback processing rules* determine how credits are applied to a premium. If you restrict the application of credits to the current plan year or you restrict credit lookbacks to a particular length of time, the system does not apply credits to the current premium if the month from which the credits are due is outside the boundary of the credit lookup period.

Credits can only be applied to premiums that are calculated on a per-participant basis. In all cases, the applied credits cannot exceed the premium due.

Manual Premium Adjustments

The product lets you manually adjust a premium result both for a participant and for the premium total for a plan or option in plan. Use this feature if making a manual adjustment to a premium result is a more efficient means of correcting a premium error than recalcuating the premium.

Period-to-Date Limits

For those plans where there is a regulated maximum contribution amount (such as a 401(k) plan in the US) or where a participant has discretion over the amount contributed into the plan, you can define period-to-date maximum contributions.

These maximums are specified either by the plan itself or, as is true in the US, by regulations. In addition to straightforward limits in which the period-to-date amount, once reached, stops subsequent contributions for the remainder of the period, other, more complex, limits must be enforced.

Benefit Balances

You use the Benefit Balances window to create a benefit balance that you can then associate with a person or a formula.

For example, you might define a benefits balance for use when calculating how many

flex credits an employee can be given to spend on benefits as part of a flex program.

Benefit balances are useful in transitioning data from a legacy benefits system to Oracle HR.

Variable Rate Factors

You can define from one to dozens of variable factors for a variable rate profile. A participant must meet all the criteria in your variable rate profile in order to receive the variable rate.

Personal Factors

You select personal factors by choosing the Personal tab in the Variable Rate Profiles window.

Uses the first three enabled segments defined for the Competency Key Flexfield for the business group as criteria.

Disabled Uses an employee's disability category as criteria.

Gender Uses a person's gender as a variable factor to associate with an activity rate.

Leaving Reason Uses an employee's termination reason as criteria. This criteria is often used for continuing benefits eligibility, such as for COBRA in the US.

Opted for Medicare Uses whether an employee is enrolled in the US Medicare program as criteria.

Person Type Uses a person's person type(s) as a variable factor to associate with an activity rate.

Postal Zip Uses individual zip/postal codes or ranges of zip/postal codes as a variable factor to associate with an activity rate.

Qualification Title Uses a person's qualification title, such as an advanced education degree, as criteria.

Service Area Uses a person's service area, such as a city or other geographical area, as a variable factor to associate with an activity rate.

Tobacco Use Uses whether or not a participant uses tobacco as a variable factor to associate with an activity rate. In countries where it is illegal to hold information about a person's tobacco usage, for example, Italy, this personal factor is unavailable.

Employment Factors

You select employment factors by choosing the Employment tab of the Variable Rate Profiles window.

Assignment Set Uses an employee's assignment or a set of assignments as a variable factor to associate with an activity rate.

Assignment Status Uses a person's state of employment (Active, Inactive, or On Leave) as a variable factor to associate with an activity rate.

Bargaining Unit Uses an employee's bargaining unit (local union group) as a variable factor to associate with an activity rate.

Full/ Part-time Uses whether an employee works full-time or part-time as a variable factor to associate with an activity rate.

Grade Uses an employee's grade as a variable factor to associate with an activity rate.

Hourly/Salaried Uses whether an employee is hourly or salaried as criteria.

Job Uses an employee's job classification as criteria.

Labor Union Member Uses whether an employee is a labor union member as a variable factor to associate with an activity rate.

Leave of Absence Uses an employee's leave of absence reason as a variable factor to associate with an activity rate.

Legal Entity Uses an employee's legal entity (GRE) as a variable factor to associate with an activity rate (US only)

Organization Unit Uses an employee's organization as a variable factor to associate with an activity rate.

Pay Basis Uses an employee's pay basis as a variable factor to associate with an activity rate.

Payroll Uses an employee's payroll as a variable factor to associate with an activity rate.

People Group Uses a participant's people group as a variable factor to associate with an activity rate.

Performance Rating Uses an employee's performance rating as criteria.

Position Uses a person's position as criteria.

Quartile in Grade Uses an employee's pay range for a grade, divided by four, to determine the quarter into which the person's salary amount falls.

Range of Scheduled Hours Uses the number of hours an employee is scheduled to work as a variable factor to associate with an activity rate. This is taken from the Working Hours field on the assignment. For employees with more than one assignment, the hours are totaled across all assignments if you check the 'Use All Assignments for Eligibility' check box on either the Programs or Plans window. If you define multiple scheduled hours ranges, the Participation Process evaluates each range as an 'Or' condition.

Work Location Uses an employee's work location as a variable factor to associate with an activity rate.

Derived Factors

You select derived factors by choosing the Derived Factors tab of the Variable Rate

Profiles window.

Age Uses an employee's age as a variable factor to associate with an activity rate.

Combined Age and Length of Service Uses an employee's combination age and length of service factor as a variable factor to associate with an activity rate.

Compensation Level Uses an employee's compensation level as a variable factor to associate with an activity rate.

Full Time Equivalent Uses an employee's percent of full-time employment as a variable factor to associate with an activity rate.

Hours Worked in Period Uses an employee's hours worked in a given period as a variable factor to associate with an activity rate.

Length of Service Uses an employee's length of service as a variable factor to associate with an activity rate.

Other Factors

You select other factors by choosing the Other tab in the Variable Rate Profiles window.

Benefits Group Uses a person's benefits group as a variable factor to associate with an activity rate.

COBRA Qualified Beneficiary Uses whether a person is considered a qualified beneficiary under COBRA regulations to determine the variable rate (US only).

Continuing Participation Used to set the date on which an ex-employee's payment for a continuing benefit must be received.

Health Coverage Selected Uses the plan and option in plan in which the participant is enrolled as a variable factor to associate with an activity rate.

Participation in Another Plan Uses a person's participation in a particular plan as a variable factor to associate with an activity rate. You can use this factor to define special rates when two plans are elected in conjunction with one another.

Rule Uses a FastFormula rule that you define to determine a variable factor to associate with an activity rate.

Total Coverage Volume Uses the total coverage elected for a plan or option in plan by all participants as a variable factor in determining the actual premium owed by a plan sponsor to the benefits supplier.

Total Participants Uses the total number of participants covered by a plan or option in plan as a variable factor in determining the actual premium owed by a plan sponsor to the benefits supplier.

Related Coverages

The criteria available under the Related Coverages tab are designed primarily for COBRA administration in the US but, you can use them for other purposes.

Calculation Methods: Values, Increments, and Operations

You select a **calculation method** to help you define the contribution or distribution activity rate for a plan or option. Calculation methods are composed of values that you define, operations that you perform on those values, and, in some case, values from the results of other calculations that you have defined.

The following list describes the components that you can include in an activity base rate calculation.

- **Flat Amount:** A standard rate that does not vary or an amount you enter as part of a more complex calculation.
- **Minimum Value:** The smallest amount a participant can elect to contribute or receive as a distribution.
- **Maximum Value:** The largest amount a participant can elect to contribute or receive as a distribution.
- **Increment:** The units participants must use to specify elected amounts during enrollment. For example, if the increment value is 100, participants must specify amounts in whole hundreds of currency.
- **Default Value:** The value assigned to the participant during a default enrollment or when a participant fails to specify an explicit value when one is required during enrollment.
- **Operation:** A mathematical operator that is applied to a value, such as Multiplied by or Percent of.
- **Actual Premium:** The per-participant amount paid by a plan sponsor to the benefits supplier.
- **Coverage:** The amount of coverage available under the plan or option for which you are defining the activity rate.
- **Coverage Operation:** A mathematical operator that is applied to a coverage amount.
- **Compensation Level:** The participant's salary.
- **Rounding Code/Rule:** Specifies how the system rounds the result of the calculation when the value is not a fixed amount.
- **No Standard Values Used:** The calculation always uses a variable rate.
- **Post Enrollment Calculation**: This method calculates a person's standard rate or

coverage amount based on election information entered during enrollment. It requires that you write a FastFormula rule type of Rate Value Calculation (for rates) or Coverage Amount Calculation (for coverages) and attach the rule to the activity rate definition.

The Participation Process evaluates this rule when first determining electable choices and rates and again after you choose the Recalculate button on the enrollment window. Therefore, your rule must use default electable choice information or return values that will not cause the formula to error when you run the Participation Process.

- **Rule:** Uses a FastFormula rule to structure the calculation.

Activity Rate Calculations

The tables below contain sample activity rate calculations for the various calculation methods that you can use with a standard contribution/distribution or a flex credit calculation.

Flat Amount

Calculation	Value
Example	5

Result = 5

Flat Amount Entered at Enrollment

Calculation	Minimum Value	Maximum Value	Increment	Default Value
Example	1,000	10,000	by 1	5,000

Result = 5,000 (can be changed at enrollment to value between 1,000 and 10,000)

Multiple of Compensation or Balances

Calculation	Value	Operation	Compensation

Example	1	Per 10,000	25,000

Result = 2.5 (1/10,000) x 25,000

Multiple of Compensation or Balances, Enter Value at Enrollment

Calc	Min Val	Max Val	Increment	Default	Operation	Comp Lvl
Example	1	3	1	2	Per 10,000	25,000

Result = 2.5 (1/10,000) x 25,000

*5.0 (2/10,000) x 25,000

7.5 (3/10,000) x 25,000

Multiple of Compensation or Balances and Coverage

Calc	Value	Operation	Compensation	Coverage Operation	Coverage
Example	(0.0001	Multiplied by	25,000)	Per 10,000	100,000

Result = 25.0 ((.0001 x 25,000) / 10,000) x 100,000

Multiple of Coverage

Calculation	Value	Operation	Coverage
Example	5	Per 100,000	200,000

Result = 10 (5 / 100,000) x 200,000

Multiple of Coverage, Enter Value at Enrollment

Calc	Min Val	Max Val	Increment	Default	Operation	Coverage
Example	2	6	2	4	Per 100,000	200,000

Result = 4 (2/100,000) x 200,000

*8 (4/100,000) x 200,000

12 (6/100,000) x 200,000

Multiple of Parent Rate

Calculation	Value	Operation	Activity Base Rate (Parent Rate)
Example	1	Multiplied by	2.5

Result = 2.5 (1 x 2.5)

Multiple of Parent Rate and Coverage

Calc	Value	Operation	Parent Activity Rate	Coverage Operation	Coverage
Example	(1	Multiplied by	8)	Per 100,000	100,000

Result = 8.0 ((1 x 8) / 100,000) * 100,000

Multiple of Actual Premium

Calculation	Value	Operation	Actual Premium
Example	50	Percent	8

Result = 4 (50 / 100) x 8

Multiple of Actual Premium and Coverage

Calc	Value	Operation	Actual Premium	Coverage Operation	Coverage
Example	(10	Percent of	8	Per 10,000	100,000

Result = 8.0((10 / 100 * 8) / 10,000) x 100,000

Coverage Calculations

You use the Coverages form to calculate the coverage amount available for a plan or an option. You can set the contribution rate necessary to purchase this coverage using the Standard Rates window.

The tables below contain sample coverage calculations for the various calculation methods that you can use in defining coverage for a benefit.

Flat Amount

Calculation	Value
Example	50,000

Result = 50,000

Flat Range

Calculation	Minimum Value	Maximum Value	Increment	Default Value
Example	30,000	50,000	by 10,000	40,000

Result = 30,000

*40,000

50,000

Multiple of Compensation

Calculation	Value	Operation	Compensation Level

Example	2	Multiplied by	25,000

Result = 50,000 (2 x 25,000)

Multiple of Compensation Range

Calc	Min Val	Max Val	Increment	Operation	Comp Lvl	Default
Example	2	6	2	Multiplied by	25,000	4

Result = 50,000 (2 x 25,000)

*100,000 (4 x 25,000)

150,000 (6 x 25,000)

Flat Amount Plus Multiple of Compensation

Calc	Value		Min Val	Operation	Comp Lvl
Example	50,000	Plus	(2	Multiplied by	25,000)

Result = 100,000 50,000 + (2 x 25,000)

Flat Amount Plus Multiple of Compensation Range

Calc	Val		Min Val	Max Val	Increment	Operation	Comp Lvl	Default
Example	50,000	Plus	(2	6	2	Multiplied by	25,000)	4

Result = **100,000** 50,000 + (2 x 25,000)

***150,000** 50,000 + (4 x 25,000)

200,000 50,000 + (6 x 25,000)

Multiple of Compensation Plus Flat Range

Calc	Val	Operation	Comp Lvl		Min Val	Max Val	Increment	Default
Example	(2	Multiplied by	25,000)	Plus	30,000	50,000	10,000	40,000

Result = **80,000** (2 x 25,000) + 30,000

***90,000** (4 x 25,000) + 40,000

100,000 (6 x 25,000) + 50,000

Actual Premium Calculations

You use the Calculation Method tabbed region of the Actual Premiums window to define the calculation that determines the actual premium rate per participant for a plan or an option.

The tables below contain sample actual premium calculations for the various calculation methods that you can use with an actual premium calculation.

Flat Amount

Calculation	Value
Example	5

Result = 5

Multiple of Coverage

Calculation	Value	Coverage Operation	Coverage
Example	5	Per 100,000	200,000

Result = 10 (5 / 100,000) x 200,000

Multiple of Total Coverage

Calculation	Value	Operation	Total Coverage
Example	1	Per 1,000	1,000,000

Result = 1000 (1 / 1000) x 1,000,000

Multiple of Total Participants

Calculation	Value	Operation	Total Participants
Example	5	Multiply By	50,000

Result = 250,000 5 x 50,000

Defining Activity Rates for a Standard Contribution/Distribution

You create a separate contribution or distribution activity rate calculation for each plan or option in your benefits offering that requires a contribution or distribution. After you link the calculation to the plan or option, you define the calculation.

You date effectively maintain standard contributions and distributions using the Standard Rates window. You can also use Total Compensation Setup Wizard, *Oracle HRMS Compensation and Benefits Management Guide* to update multiple rates simultaneously.

To define an activity rate for a standard contribution/distribution:

1. Enter or query the standard contribution or distribution that you are defining in the Name field.

2. Select the Status of this activity rate.

   Pending: This plan or option in plan currently does not use this calculation, but could in the future if you change the Status of this calculation to Active. Select the Pending status when setting up a standard contribution/distribution calculation that possibly may not become Active.

   Active: The system currently calculates this standard contribution/distribution for this plan or option in plan.

   Inactive: The system currently does not calculate this standard

contribution/distribution for this plan or option in plan.

Closed: The system currently does not calculate this standard contribution/distribution, nor will it do so in the future.

3. Choose the General tabbed region if it is not already selected.

4. Select the Level in the compensation object hierarchy at which you are defining the activity rate.

5. Select the Compensation Object for which you are defining the activity rate.

6. Select an Activity Type code that identifies the business function this calculation performs, such as an Employee Contribution or an Employer Payroll Distribution.

7. Select the Tax Type indicating the tax impact of this calculation to participants.

   You select this Tax Type primarily for classification purposes; the payroll system is primarily responsible for processing taxability.

8. Select a Usage code that limits the use of this activity rate to a particular kind of contribution or distribution.

9. Select a UOM (unit of measure) to express the result of this calculation if this activity rate is for a non-monetary distribution.

10. Select an Element Determination Rule. The application uses this rule to determine an employee's currency for the worksheet amount rate if you choose a Determination Code of Automatic or do not choose a determination code.

    See: Defining Processing Information for a Standard Contribution/Distribution, page 5-137

11. Select the Element you defined that corresponds to this activity rate definition.

    Note: Set up your elements as a prerequisite to defining your activity rates. If your element definition changes, you must re-attach the element to the rate. For an absence plan, you must also re-select the Extra Input Rule and re-map the input values to formula results.

12. Check the Element and Input Value Required field.

13. Select the Input Value for the activity rate, such as pay value.

14. If you are defining a rate for an absence plan and you need to associate more than one input value with the activity rate, select the Extra Input Rule. This is a formula that calculates the values to be returned to the other input values. When you have

finished defining the rate, choose the Extra Inputs button to associate the formula results with the appropriate input values.

15. Check the Uses Variable Rate field if the result of this calculation varies due to some factor or other piece of discreet data about the participant and you associate a variable rate profile with the calculation.

    To associate a variable rate profile to this activity rate, see Associating a Variable Rate Profile with a Standard Contribution/Distribution Calculation, *xx*

16. Select the Parent/Child code to specify whether this calculation is a parent activity rate (the primary activity rate) or a child activity rate (dependent upon the parent activity rate).

17. Check the Subject to Imputed Income field if the activity rate for this compensation object is governed by US imputed income regulations.

18. Save your work.

Defining a Calculation Method for a Standard Contribution or Distribution

You use the Calculation Methods region of the Standard Rates window to define how a standard activity rate is calculated.

See Also

Calculation Methods: Values, Increments, and Operations, page 5-125

Example: Activity Rate Calculations, page 5-126

To define a calculation method for a standard activity rate:

1. Query the activity rate for which you are defining a calculation method in the Name field.

2. Select the method you are using to calculate the activity rate in the Calculation Method field.

   Important: The window changes based on the calculation method you select.

3. Complete your calculation definition based on the calculation method you select.

4. Save your work.

Defining Proration for a Standard Contribution/Distribution Calculation

You can specify how the system prorates a calculation (usually a contribution) when a participant's enrollment coverage date falls within a month, and the plan requires that activity rates be prorated based on the date during the month when the participant's coverage starts.

To define proration for a standard contribution/distribution calculation:

1. Enter or the query the standard activity rate for which you are defining a prorated value in the Standard Rates window.

2. Select the Partial Month Determination tabbed region.

3. Select a Partial Month Determination Code or Rule to specify how the system calculates this standard contribution/distribution when a participant's enrollment coverage date falls within a month.

   All: The system calculates this activity rate as if the participant was enrolled for the entire month.

   None: The system calculates this activity rate as if the participant was not enrolled at all for the entire month.

   Prorate Value: The system prorates this standard contribution/distribution based on the percentage of the month the participant was enrolled. Use the Proration window to define your proration method for this calculation.

   Rule: If special circumstances apply, select a rule that the system uses to calculate this activity rate when a participant's enrollment coverage date falls within a month.

   Wash Rule: If special circumstances apply, select a wash rule that the system uses to calculate the day on which to apply the wash rule day for this activity rate.

4. Select an Effective Date Code or Rule to specify how the system calculates the effective date from which the partial month is calculated.

5. Enter a Wash Rule Day if participants whose activity rate start date begins *after* the wash rule day do not receive a contribution or distribution for that month.

   - Conversely, participants whose activity rate end date is *before* the wash rule day do not receive a contribution or distribution for that month.

6. Choose the Proration button to open the Proration window if you select a partial month determination code of Prorate Value.

7. Select the Prorate on day/month basis check box to base your proration calculation on the day/month ratio, instead of a flat percentage value.

Basing the proration calculation on the day/month basis prevents you from having to set up different proration calculations for months with different numbers of days.

8. Enter the From and To days within the month that represent the starting and ending dates for this proration calculation.

   Set the From day equal to the To day to prorate the calculation for a single day.

9. Enter a value specifying the Percent of the total standard contribution or distribution that the system uses to calculate the prorated activity rate for those persons whose enrollment coverage dates fall within these From and To days.

10. Select a Proration Rule if you created a formula of the type Partial Month Proration Rule to calculate prorated activity rates.

    See: *Oracle FastFormula Reference Guide for Standard and Advanced Benefits*, MetaLink Note 218059.1.

11. In the Applies to Month with Days field, select the value that represents the months with that number of days (31, 30, 29, 28) to which this calculation applies.

12. Select whether this proration calculation starts or stops on this date range in the When to Use field.

13. Select a Rounding Code or Rule to specify how the system rounds the result of this calculation.

14. Save your work.

Defining Characteristics of Annual Rates

For those plans where a participant enters an annual contribution rate during enrollment, you can define how the system prorates the minimum and maximum contribution amounts for those participants who enter the plan mid-year.

> **Note:** The annual rate value is calcuated based on a 12-month period regardless if the plan year is for a period of 12 months or less.

If you use Self-Service Benefits, your employees can enter annual rates duing enrollment if you complete the fields on the Annual Rate tab and you check the Enter Value At Enrollment check box on the Calculation Method tab of the Standard Rates window.

To define the characteristics of an annual rate:

1. Enter or the query the standard activity rate for which you are defining a prorated value in the Standard Rates window.

2. Choose the Annual Rates tab.

   In the Comparison Balances block:

3. Select whether this annual rate is compared to the claims submitted against the annual amount or the amount contributed to the plan.

4. For those plans where you prorate the annual contribution amount based on the days or pay periods remaining in the plan year, select:

   - A Prorate Minimum Annual Value Code or Rule
   - A Prorate Maximum Annual Value Code or Rule

5. Save your work.

Defining Processing Information for a Standard Contribution/Distribution

You use the Processing Information tabbed region of the Standard Rates window to define the system (such as Oracle Payroll) that processes the contribution deduction or distribution payment. You may also select, from a range of choices, the point in the enrollment process when a contribution amount is entered.

To define processing information for a standard contribution/distribution:

1. Complete the Processing Information check boxes by selecting from a range of choices that define when and how a contribution or distribution amount is entered for this plan or option in plan.

   Important: These checkboxes are important, because they determine whether an election results in a payroll deduction for a participant.

   - Check the **Value Override Allowed** field if the participant may override the default rate at the time of enrollment.
   - Check the **Assign on Enrollment** field to automatically enter the calculated amount during enrollment.
   - Check the **Display on Enrollment** field to display the activity rate on the enrollment form.
   - Check the **Process Each Pay Period Default** field if the system calculates this standard contribution/distribution each pay period unless otherwise specified.

Note: Checking this field disables use of the Schedule Information button.

2. Select the system that processes this calculation in the Processing Source field.

3. Select a Recurring code. Choose from:

   - **Once:** the contribution or distribution occurs once for a participant in this plan or option in plan.

   - **Recurring:** the contribution or distribution occurs on a defined periodic basis for an indefinite period of time.

   - **Either:** the contribution or distribution can either occur once or on a recurring basis.

4. In the Value Passed to Payroll field, select the amount that you want to pass to a participant's element entry on enrollment.

   - Select Estimated Per Pay Period to calculate the element entry based on a fixed number of pay periods, 52 for weekly and 26 for bi-weekly pay periods.

     Note: If you select no value, the application passes the per pay period amount. You can only prorate per pay period amounts.

5. Select a Compensation Category.

6. Select a Currency Determination Code to indicate how the application processes the source of currency for each employee. Choose from:

   - **Automatic** - this is the default value. If you select this, then the application first looks at the element determination rule to determine the currency. If you do not define an element determination rule, then the application determines the currency based on the standard rate element. If you do not define a currency at the standard rate element level, then the application determines the currency based on the salary basis element. If you do not define a currency at the salary basis level, then the application uses the currency you define for the plan.

   - **Plan** - if you select plan, then the application determines the currency you defined for the plan on the not in program tab.

   - **Salary Basis Element** - if you select this, then the application determines the currency based on the input currency of the element type associated with the salary basis definition linked to the employee's assignment.

- **Standard Element Rate** - if you select this, then the application determines the input currency of the element type associated with the CWB worksheet amount standard rate.

7. Save your work.

To define rate certification requirements:

1. Choose the Rate Certification button, which is visible for plans that are not in a program.
2. Select a Rate Certification Type.
3. Save your work.

Defining Deduction and Payment Schedules for a Standard Contribution/Distribution

You can define a deduction or payment schedule to specify how frequently the system calculates a contribution (for deductions) or distribution (for payments) if you are using Oracle Payroll and you do not check the Process Each Pay Period Default field in the Processing Information region.

You date effectively define deduction and payment schedules in the Schedule Information window.

To define scheduling for a standard contribution:

1. Select a Deduction Schedule for this standard contribution.
2. For this Deduction Schedule, select a Pay Frequency to specify how frequently the system deducts this standard contribution.
3. Check the Default field if this Pay Frequency is the default pay frequency for this Deduction Schedule.
4. If you associate more than one Pay Frequency with this Deduction Schedule, repeat steps 2 and 3 for each Pay Frequency.
5. Save your work.

To define Payments for a standard distribution:

1. Select a Payment Schedule for this standard distribution.
2. For this Payment Schedule, select a Pay Frequency to specify how frequently the

system makes this standard distribution.

3. Check the Default field if this Pay Frequency is the default pay frequency for this Payment Schedule.

4. If you associate more than one Pay Frequency with this Payment Schedule, repeat steps 2 and 3 for each Pay Frequency.

5. Save your work.

Defining a Non-Oracle Payroll System to Process Benefit Earnings and Deductions

You use the Payroll Information tabbed region of the Standard Rates window if a non-Oracle payroll system calculates this contribution or distribution.

To define a non-Oracle payroll system to process earnings and deductions:

1. Enter the Name of the foreign payroll system.

2. Select if this payroll system processes earnings or deductions in the Type field.

3. Save your work.

Associating a Variable Rate Profile with a Standard Contribution/Distribution Calculation

If a standard contribution or distribution can vary based on a derived factor or a discrete piece of data, you can use the Variable Rates window, accessed from a button on the Standard Rates window, to associate a variable rate profile or rule with the activity rate calculation to specify how the result can vary.

To associate multiple conditions that must all be satisfied, you must attach all the conditions to a single variable rate profile. Specifying them in a sequence in the Variable Rates window instructs the application to find only the *first* satisfying condition and then stop.

> **Important:** You must define a variable rate profile or rule before you define a standard contribution or distribution that uses a variable rate.

To associate a variable rate profile or rule with a standard contribution/distribution calculation:

1. Enter a Seq (Sequence) number to specify the order in which the system processes this variable rate profile relative to any other profiles you associate with this standard contribution/distribution calculation.

2. Select the Name of a variable rate profile you are associating with this standard contribution/distribution calculation.

3. Choose the Rules tab if you are associating a variable rate rule with this calculation. Enter the Seq (sequence) number and select the name of this variable rate rule.

4. Save your work.

Defining Matching Rates for a Standard Contribution Calculation

> **Note:** The matching rates feature is reserved for future use. It is currently not operational.

If you define an employer matching contribution that is a percentage of the employee contribution (in contrast to a fixed employer contribution), you can define how the system performs such matching. Multiple instances of a matching contribution may be necessary if the employer match varies according to the amount the employee contributes.

You define matching rates in the Standard Rates window. Choose the Matching Rates button.

To define matching rates for a standard contribution calculation:

1. If special circumstances apply, select a matching rate calculation rule.

2. Enter a Seq (sequence) number to specify the order in which the system processes this matching rate for this contribution.

3. Enter a From % and To % to specify the lowest and highest employee contribution percentage to which this matching contribution applies.

   In the Matching Values block:

4. Enter a Match % to specify the matching percentage for this matching rate.

5. Enter a Minimum and Maximum Amount to specify the boundaries of the employer match, regardless of the value the system calculates.

   Check the No Maximum Amount field if the match has no Maximum Amount

defined for it.

In the Maximum Pay to Consider block:

6. Enter an Amount to specify the maximum amount of employee earnings against which the system calculates this match.

   Check the No Maximum Amount field if the match is not limited by the Maximum Amount of employee earnings.

7. Enter a Percent to specify the maximum percentage of employee earnings against which the system calculates this match.

   Check the No Maximum Percent field if the match is not limited by a Maximum Percent of employee earnings.

8. Check the Continue Matching after Maximum field if employer matching contributions continue up to the maximum percentage or amount, even though the worker has met the limit of worker contributions.

   Note: This is particularly useful for US 401(k) plans as workers may choose high salary percentages in order to contribute as much as possible as soon as possible. When employer contributions match each pay period, it may occur that the worker is contributing too much each pay period to receive the employer's highest matching amount. For example, a worker could contribute 15% of pay up to the worker maximum contribution limit of $9,000, but the employer matches only 50% up to 6% of what the worker contributes. As Oracle Payroll performs the actual calculation, checking this field only alerts the system to activate the proper calculation process.

9. Save your work.

Associating a Period-to-Date Limit with a Standard Contribution/Distribution Calculation

You can associate period-to-date limits for a calculation or a distribution. You typically define period-to-date limits for savings plans.

Choose the PTD Limits button in the Standard Rates window to select a period-to-date limit.

To define a period-to-date limit for a calculation:

1. Select a Period-to-Date Limit to associate with this calculation.

2. Save your work.

Defining General Information for a Variable Rate Profile

You use the Variable Rate Profiles window to define a variable rate when an activity rate for a plan can vary for each participant based on one or more factors.

To set up variable rate profiles for use in Grade/Step Progression criteria sets, use the Variable Rate Profiles using the Eligibility Profiles window and set your effective date to 01-JAN-1951

To define general information for a variable rate profile:

1. Enter the Name of the variable rate profile you are defining.

2. Select its current Status.

   Pending: This variable rate profile is currently proposed, but not yet associated with an activity rate.

   Active: This variable rate profile is currently associated with an activity rate.

   Inactive: This variable rate profile is currently not associated with an activity rate.

   Closed: This variable rate profile was once Active or Proposed, but is no longer associated with an activity rate.

3. Choose the General tab if it is not already selected.

4. Select an Activity Type code to specify the type of activity rate to which this variable rate applies.

   If you are setting up a variable rate profile for use in Grade/Step Progression, the Activity Type code must be Grade Step Progression Salary Amount.

5. Select a Tax Type code to specify the tax status of the activity rate.

   Note: The system displays only those tax types that are valid based on the activity type you select.

   Note: Variable rates for actual premiums must have a tax type of Not Applicable.

6. Select a Reference Period code to specify the time period applicable to the activity rate.

7. Select a Treatment code to specify the type of calculation the system performs on the activity rate.

8. Select a Usage that limits the kind of activity rate to which this variable rate can apply.

9. Select an Assignment to which this variable rate profile applies. For example, you can define a variable profile of Benefits Assignment Only if you use this profile to determine continuing eligibility.

10. Save your work.

Defining a Calculation Method for a Variable Rate Profile

You use the fields in the Calculation Methods region of the Variable Rate Profiles window to define how a variable activity rate is calculated.

To define a calculation method for a variable rate profile:

1. Query the variable rate for which you are defining a calculation method in the Name field.

2. Click the Calculation Method tab.

3. Select the method you are using to calculate the variable activity rate in the Calculation Method field.

   Important: The window changes based on the calculation method you select.

4. Complete your calculation definition based on the calculation method you select.

5. Select Always Sum All Participants or Always Sum All Coverage if you are defining a variable rate profile for an actual premium based on the total coverage volume for all participants or the total number of participants.

   - Conversely, do not select Always Sum All Participants or Always Sum All Coverage if you want the variable rate determined based *only* on the number of participants who meet the criteria of the variable rate profile.

6. Save your work.

Defining the Criteria in a Variable Rate Profile

You define the criteria that compose a variable rate profile so that participants who meet the criteria receive the variable rate you have defined. You can also define a variable rate profile so that participants who meet the criteria are specifically *excluded* from receiving the variable rate.

Note: You can use a participant eligibility profile that you have defined as a criteria set in a variable rate profile. This lets you define your criteria once, then reuse the criteria set to control both eligibility and variable rates. Oracle recommends attaching eligibility profiles to variable rates--as opposed to individual criteria--to improve system performance.

If you use a FastFormula rule as part of your variable rate profile, the participant must meet the criteria of the rule and one value from any other criteria that you include in the profile. If you use more than one FastFormula rule, by default the participant must meet the criteria of all the rules. If you change the user profile option BEN:VAPRO Rule from AND to OR, the participant need only meet the criteria of one rule.

To define the criteria in a variable rate profile:

1. Enter or query the variable rate in the Variable Rate Profiles window.

   If you are attaching an Eligibility Profile for a Grade/Step Progression criteria set, use the Variable Rate Profiles using the Eligibility Profiles window and set your effective date to 01-JAN-1951. For a Grade/Step Progression criteria set, you can only attach Eligibility Profiles to your Variable Rate, but not individual criteria.

2. Choose the Eligibility Profiles button to open the Eligibility window if you want to link a participant eligibility profile to the variable rate profile.

3. Select an Eligibility Profile Name.

4. Select the Required check box if the participant must satisfy this eligibility profile to receive the variable rate.

   Note: Currently, you can attach only one criteria set to a variable rate profile, so the set is automatically required.

5. Close the Eligibility window.

6. If you want to use variable rate criteria--instead of an eligibility profile--choose the Criteria button to open the Variable Rate Criteria window.

7. Choose a tabbed region that contains a criteria element you want to include in your variable rate profile.

8. Select a criteria element.

   For example, in the Other Factors region you could select Participation in Another Plan as a criteria element if you want to define a special rate for when two plans are elected in conjunction with one another.

If you are attaching an Eligibility Profile for a Grade/Step Progression criteria set, you can use the following criteria only:

- Bargaining Unit
- Full Time/Part Time
- Job
- Location
- Organization
- Performance Type
- Person Type
- Rating Type
- Rule
- Service Area

9. Enter a Seq (sequence) number specifying the order the system processes this criteria element relative to any other criteria in the variable rate profile.

   Important: You must assign a sequence number of a higher priority to all criteria that are used to exclude eligibility in a variable rate profile.

10. Select a value for the criteria element you have selected.

11. Check the Exclude field if a person who meets the value of this criteria element is excluded from receiving the variable rate associated with this profile.

12. Repeat steps 7-11, page 5-145 for each criteria element you include in this variable rate profile.

13. Choose the Display All tabbed region to view the criteria elements in this variable rate profile.

14. Save your work.

Defining Matching Rates for a Variable Rate Calculation

Note: The matching rates feature is reserved for future use. It is currently not operational.

The process for defining a matching rate for a variable rate calculation is the same as defining a matching rate for a standard contribution.

From the Variable Rate Profiles window, choose the Matching Rates button.

To define a matching rate for a variable rate calculation:

1. Query the variable rate for which you want to define a matching calculation rate.
2. Choose the Matching Rates button to display the Matching Rates window.
3. Define the matching rate calculation.

   See: Defining Matching Rates for a Standard Contribution Calculation, page 5-141
4. Save your work.

Defining a Coverage Calculation

You use the Coverages window to define the amount of coverage available for a plan or an option in plan. Coverage calculations are typically used to determine the coverage offered by an insurance plan but may also include other benefit offerings, such as stock options.

To define a coverage calculation for a plan:

1. Enter or query the coverage calculation you are defining in the Name field.
2. Select the Type of benefit provided by this plan or option in plan, such as Coverage or Time Off.
3. Choose the General tabbed region if it is not currently selected.
4. Select the Level at which you are creating a coverage calculation.
5. Select the plan or option in plan for which you are defining a coverage calculation in the Compensation Object field.
6. Select a UOM for non-monetary coverage amounts, such as options or shares.
7. Select a Boundary Period that restricts any lower or upper limit coverage amount

that you specify to a specific length of time.

8. Check the Max Overridable field if the user can override the maximum coverage amount.

9. Save your work.

Defining a Coverage Calculation Method

You define a coverage calculation method to define how the coverage amount is calculated for a plan or an option in plan.

See: Calculation Methods: Values, Increments, and Operations, page 5-125

See: Coverage Calculations, page 5-129

To define a coverage calculation method:

1. Enter or query the coverage calculation you are defining in the Name field.

2. Choose the Calculation Method tabbed region.

3. Select the Calculation Method you are using to define this coverage calculation.

4. Check the Enter Value at Enrollment field if you enter the coverage amount at the time of enrollment.

5. Complete the remaining fields based on the calculation method you select.

6. Enter a Lower Limit value or rule to define the minimum amount of coverage available under this plan or option regardless of the result of the coverage calculation.

7. Enter an Upper Limit value or rule to define the maximum amount of coverage available under this plan or option regardless of the result of the coverage calculation.

8. Save your work.

Associating a Variable Rate Profile with a Coverage Calculation Method

You use the Benefit Variable Rates and Rules window to associate a variable rate profile with a coverage calculation if the calculation can vary for each participant.

To associate a variable rate profile with a coverage calculation:

1. Enter the Seq (sequence) number in which the system should process this variable

rate profile relative to any other variable rate profiles that you associate with this coverage calculation.

2. Select the variable rate profile in the Profile Name field.

3. Select another profile if you use more than one variable rate for this calculation.

4. Alternatively, choose the Rule tab and select a variable rate rule to associate with this calculation.

5. Save your work.

Defining a Coverage Limit Across Plan Types

You use the Coverage Across Plan Types window to define the minimum and maximum coverage amount that a participant can elect across plan types in a program.

You can place a plan type in only one across plan type group. You can also set coverage limits at the plan level.

To define a coverage limit across plan types:

1. Select the program for which you are defining cross plan type coverage limits.

   Note: The system displays the plan types in this program in the Coverage Plan Types block.

2. Enter a name that identifies this cross plan type coverage limit.

3. Enter the minimum amount of coverage that a participant must elect across the plan types in this grouping.

4. Enter the maximum amount of coverage that a participant must elect across the plan types in this grouping.

   In the Coverage Plan Types block:

5. Select a plan type for which you are defining a cross plan type coverage limit.

   - Check the Applies To field if you are placing this plan type into this cross plan type grouping.

     Note: The Already Used field appears checked if you have already placed this plan type into another cross plan type grouping.

6. Repeat step 5 for each plan type that you are placing into this cross plan type

grouping.

7. Save your work.

Defining an Imputed Income Calculation

You use the Imputed Income window to date effectively define activity rates that calculate the amount of plan income that is considered a "fringe benefit" and subject to Section 79 of the US Internal Revenue Service code.

To define an imputed income calculation:

1. Enter a Name for the imputed income calculation you are defining.

2. Select the imputed income Plan for which you are defining this calculation.

3. Select an Assignment to Use, enabling you to apply this calculation to a subset or sequence of assignment types.

4. Select a Status code for this imputed income calculation.

   Pending: This plan currently does not use this imputed income calculation, but could in the future if you change the Status of this calculation to Active. Select the Pending status when setting up an imputed income calculation that possibly may not become Active.

   Active: This imputed income calculation is associated with an imputed income benefit.

   Inactive: This imputed income calculation is not associated with an imputed income benefit.

   Closed: This imputed income calculation is not associated with an imputed income benefit.

5. Select a processing Source code to identify the system that processes this imputed income calculation.

6. Check the Uses Payment Schedule field if a payroll system uses a payment schedule other than "every pay period" when processing this imputed income calculation.

7. Check the Process Each Pay Period field if a payroll system processes this imputed income calculation every pay period.

8. Enter a Wash Rule Day if participants who start coverage for this plan do not receive imputed income contributions or distributions for the month when their coverage start date is *after* the wash rule day.

- Conversely, participants who end coverage for the plan will not receive imputed income for the month when their coverage end date is *before* the wash rule day.

In the Payroll Information block:

9. Select the Element Entry that this calculation creates.

10. Select the Input Value of the element entry.

11. Select a Recurring code to specify whether this imputed income calculation occurs for the participant only Once, Recurs on a periodic basis for an indefinite time period, or Either.

12. Select a Partial Month Determination Code or Rule to specify how the system calculates this imputed income calculation when the employee participates in the imputed income benefit mid-month.

13. Enter a Foreign Earning Deduction ID and Name to identify this payroll system if a non-Oracle payroll system processes this imputed income calculation.

14. Select a Foreign Earning Deduction Type of deduction or earnings to specify how this non-Oracle payroll system processes this calculation.

15. Save your work.

Associating a Variable Rate Profile with an Imputed Income Calculation

You use the Variable Rates window to associate a variable rate profile with an imputed income calculation.

To associate a variable rate profile with an imputed income calculation:

1. Query or enter an imputed income calculation in the Imputed Income window and choose the Variable Rates button.

2. Select a Variable Rate Profile to associate with this imputed income calculation.

   Important: Calculation of imputed income does *not* use the Activity Reference Period from the Variable Rate Profile window; it uses the Activity Reference Period from the Program window. To calculate imputed income at a monthly rate, for example, you must change (or verify) the value in the Program window.

3. If necessary, adjust the From and To dates to specify the dates through which you associate this profile with this calculation.

Associating a Payment Schedule with an Imputed Income Calculation

You use the Payment Schedule window to define a payment schedule for an imputed income calculation if the payroll system uses a schedule other than "every pay period."

To associate a payment frequency schedule with an imputed income calculation:

1. Query or enter an imputed income calculation in the Imputed Income window and choose the Payment Schedule button.
2. Select the Payment Schedule or Rule the payroll system uses to process this imputed income calculation.
3. Select the Pay Frequency code to specify how frequently the payroll system processes this imputed income calculation.
4. Check the Default field if the system assigns this payment schedule to this imputed income calculation when the payroll system does not specify which payment schedule to use.
5. Save your work.

Defining an Actual Premium

You use the Actual Premiums window to maintain the criteria used to calculate an actual premium cost.

To define an actual premium:

1. Enter the premium name or a description of the premium in the Name field.
2. Select the premium type in the Type field.
3. Select the premium payer in the Payer field.
4. Select the plan to which you are associating this premium.
5. Select an option in plan if you are associating this premium to an option.
6. Select the organization to which the premium is paid in the Supplier field.

   Note: The list of organizations is limited to those organizations that you attach to the plan or to the program containing the plan.

7. Select the Currency in which this premium is paid.

Note: The Activity Reference Period is monthly for all actual premiums. This is a read-only field.

8. Save your work.

General Definitions

Deleting an Actual Premium

You can delete an actual premium that you have created in error if you have not associated the premium with a plan or an option in plan in which a participant is currently enrolled.

Use the end-dating feature of the system to de-activate an actual premium that is no longer valid.

Defining Period-to-Date Limits

You use the Period-to-Date Limits window to date effectively define plan year contribution limits for plans or options in plan. When you define a standard contribution, you can associate a period-to-date limit for those plans or options in plan that require contribution restrictions.

You can base period-to-date limits on a person's accrued activity rate balance, as a percentage of their compensation, or based on a fastformula rule that you define.

To define a period-to-date limit:

1. Enter a Name for this period-to-date limit.

2. Select a Determination Code that defines when the limit is reached.

Balance Region

3. Enter the maximum amount that a participant may accrue during a plan year for this balance in the Max Value field.

4. Select the period-to-date balance Type.

Compensation Region

You use the fields in the compensation region if you are limiting a period-to-date contribution as a percentage of a participant's compensation, or based on a derived compensation factor.

5. Enter the maximum percentage of a participant's compensation that can be accrued in this balance in the Max Percent field.

6. Select a compensation factor in the Factor field if you are using a derived compensation factor to determine the period-to-date limit for this balance.

7. Enter the Max Pay to Consider if you define a maximum compensation amount that the system considers when calculating a period-to-date limit based on a percentage of compensation or a derived compensation factor.

Rule Region

8. Select a Rule if you are defining a period-to-date limit based on a FastFormula rule that you have written.

9. Save your work.

   You can now use the Standard Contribution/Distribution window to associate your period-to-date limit with the contribution activity rate for a plan or option in plan.

Defining a Benefit Balance

You use the Benefit Balances window to enter and maintain benefit balances that you can link to persons or to formulas.

To define a benefit balance:

1. Enter a Name used to identify the benefit balance.

2. Enter a Description of your benefit balance.

3. Select a Usage code.

   Your system administrator or benefits administrator defines the benefit balance usage codes as part of the system implementation.

4. Select the unit of measure in which this balance is expressed in the UOM field.

5. Select a Non-Monetary UOM for benefits not expressed in currency, such as stock options or shares.

6. Save your work.

   You can now associate this benefit balance with a person benefit balance or a formula.

6

Administration for Health and Welfare Management

Administration for Health and Welfare Management Overview

With Standard and Advanced Benefits administration, you can enroll participants in plans and options for which they are eligible. It includes enrollments entered by benefits administrators, as well as web-based self-service enrollments. You can use non-flex enrollment windows for most programs that are not funded by flex credits.

Oracle US Federal HR includes predefined US Federal Employee Health Benefits (FEHB) and Thrift Savings Plan programs and plans. You can enroll employees in FEHB or TSP when you process an Appointment, Conversion to Appointment, or Extension RPA action. You can also enroll and manage benefits using self-service.

See: US Federal Self Service Benefits, page 5-4

For other agency-specific programs and plans, you can use the administration features of Standard and Advanced Benefits to manage your benefits programs.

Reporting on Benefits

You can assign programs and plans to reporting groups that you define, then generate reports to meet regulatory or other reporting needs. You can write your own reports or select from reports delivered with Oracle HRMS.

Various predefined reports let you monitor the enrollment cycle during and after an election period, reconcile premiums, and, for Advanced Benefits, track life events.

See: Reports and Processes in Oracle HRMS, *Oracle HRMS Configuring, Reporting, and System Administration*

Key Concepts

To broaden your understanding of Standard Benefits Administration and

administrative features common to both Standard and Advanced Benefits, see:

FEHB Administration, page 6-5

Running the Maintain Participant Eligibility Process (Standard Benefits), page 6-31

Enrollment Management, page 6-62

Standard and Advanced Benefits Administration

Oracle HRMS provides a solution for managing benefits for US federal employees. Your Oracle Human Resources license includes an extended Standard benefits feature set that enables you to manage your agency's benefit offerings.

The Oracle Advanced Benefits license provides the Standard Benefits feature set plus additional functionality, such as communication features and processing requests using online benefit service centers.

Standard Benefits Administration

Standard Benefits provides the functionality you need to administer benefit programs that do not offer flex credit based benefits.

Does the application support enrollments for new hires?

Yes, you can enroll participants when processing Appointment, Conversion to Appointment and Extension RPA actions.

Can you override eligibility and enrollment results?

If the application determines that someone is ineligibile, you can enroll that person. You can also override a participant's benefit elections, and define whether or not a person can elect to waive participation in a benefit for which they are eligible.

How do I control eligibility for benefit plans?

For self-service plans, eligibility is based on predefined factors, such as the work or residence location for Federal Employee Health Benefits. For benefit plans that are not predefined, you link each benefit plan to employment conditions, such as grades, organizations, full-time or part-time, jobs, salary bases, or any other employee grouping you need to define. Only employees that meet the link conditions can enroll in the plan.

Do I enter benefits using a Request for Personnel Action?

You can enroll an employee in Federal Health Benefits, Federal Employee Group Life Insurance, and Thrift Savings Plans when you appoint that person.

You can also assign non-RPA elements, such as an entitlement, using the Element Entry

window.

Can I record coverage for dependents?

Yes, for benefits classified as Medical you can establish coverage for the employee's dependents.

Can you model enrollment eligibility?

You can use the product for "what-if" eligibility modeling. For a given person, you can view what their benefit eligibility results would be if a particular life event occurred. The system does not save these results.

How do I automate benefits administration?

In your plan design, you define the qualifying life events that generate enrollment actions and participant communications. Batch processes that your system administrator can schedule to run on a nightly basis detect when a life event has occurred to a participant. Enrollment opportunities are then generated for the participant based on the life event and the rules of your plan design.

You can also define automatic and default enrollments to reduce the time you spend processing enrollments.

US Federal Benefits Administration

Federal Employee Health Benefits Overview

Federal government employees can elect, change, or cancel Federal Employee Health Benefits (FEHB). Employees enroll and manage their FEHB benefits using Oracle Self-Service Human Resources (SSHR). The information entered using self-service is the same information required for the SF-2809 (Health Benefits Election Form for Federal Employees). As an HR administrator, you can enroll employees when you process an Appointment, Conversion to Appointment, or Extension RPA action. Afterwards, you can administer benefits for employees using the benefits user interface.

See: Appointment, Conversion, and Extension Enrolments, page 6-4

The application simplifies the process of determining health benefit eligibility through life events. With the exception of employees who waive the pre-tax deductions, employees can change their benefits selection only when a valid life event change occurs.

The Office of Personnel Management (OPM) defines life events that permit benefits enrollment or changes to benefit elections. Some life events result from RPA updates, such as an Appointment or Change in Duty Station personnel action. Other life events result from employee entering or changing their personal details, such as the addition of a dependent or change in primary address. Some life events are not automated, such as when a family member loses coverage due to the discontinuance of a FEHB plan. In these cases, you initiate a life event for that employee, so the employee can make a new election.

Before the employees or you can enroll and make changes to employee benefits through SSHR or the professional user interface, you must set up FEHB.

See: FEHB Administration, page 6-5, Setting up FEHB, page 5-25

Appointment, Conversion, and Extension Enrolments

When you process an Appointment, Conversion to Appointment, or Extension RPA actions, you can enter health benefits, Federal Employee Group Life Insurance (FEGLI), and Thrift Savings Plans (TSP) benefits information.

> **Note:** For Extension actions, you can change health benefit information, but not FEGLI or TSP benefits. (The Office of Personnel Management does not authorize changes to existing FEGLI or TSP benefits for Extension actions.)

To make data entry faster when processing these RPA actions, the application enters default benefit values in the US Federal Benefits RPA extra information.

Upon update to HR, the application creates Assignment elements associated to the benefits using the effective date entered for the RPA as the element's start date. The application:

- Creates the Health Benefits Assignment element

  If you have implemented advanced benefits and entered Yes for the Pre-Tax Waiver, the application creates a Health Benefit Assignment element; if you entered No, the application creates a Health Benefit Pre-Tax Assignment element.

  If you have not implemented advanced benefits, the application creates a Health Benefit Assignment element with the Pre-Tax Waiver information.

- Creates the Federal Employee Group Life Insurance Assignment element

- Creates the Thrift Savings Plan (TSP) Assignment elements for employees enrolled in a Federal Employee Retirement System (FERS) or Civil Service Retirement System (CSRS) or equivalent retirement plans

- Updates the appropriate fields of the People extra information (US Federal Person Benefit Information and US Federal SCD) with the information not stored in the elements, such as the eligibility and expiration dates

- Initiates the appropriate potential life events, such as Initial Opportunity to Enroll if you have implemented Advanced Benefits

  The employee can then modify the elections during the life event period using self-service, or you can enter the elections for the employee using the professional user interface. If you have not implemented Advanced Benefits, you must correct and update the element entries manually.

If you need to correct the benefit elections originally entered in the RPA, do not process a Corrections action; update the information in the benefits professional user interface.

See: Enrolling a Person in a Non-Flex Program, page 6-75

FEHB Administration

You can use Standard Benefits to administer and manage employee enrollment in Federal Employee Health Benefits (FEHB) plans and options based on the full range of Office of Personnel Management (OPM) qualified life events.

Plan Eligibility

The employee's work or residence location determines the employee's plan enrollment eligibility. Employees participating in FEHB may elect predefined plans and options specific to their state or county of residence, or to their work location. (Overseas employees can elect nationwide plans only.)

In certain situations, you may need to override the eligibility results. For example, if you extend an employee's Leave Without Pay (LWOP) beyond 365 days, the employee may become ineligible for FEHB. If this extension occurs, you can grant an exception so that the employee can enroll in a plan or option.

In other situations, you may need to waive someone's eligibility. For example, if OPM removes a plan from a FEHB program, an employee can neither select nor remain with the plan. In that case, you can waive the employee's participation in the plan so that the employee can enroll in another plan.

See: Overriding Enrollment Results for a Plan, *Oracle HRMS Compensation and Benefits Management Guide*

Enrollment Management

Electable benefit choices occur as a result of one of the OPM defined life events. The application triggers a life event when the employee initiates a change in health benefits through SSHR or when you:

- Process an Appointment, Conversion to Appointment, or Extension action that gives the employee an opportunity to enroll in health benefits
- Update an RPA to the database that changes the employee's eligibility, such as a NOAC 781 Change in Work Schedule
- Initiate a potential life event through the benefits user interface, such as a life event for someone who now qualifies for medicare (Employee Becomes Eligible for Medicare life event)

Additional non-OPM life events ensure smooth transitions, such as the continued coverage for rehires and transfers, the termination of life events for separation actions, and opening the enrollment period for an employee on after tax deductions.

The following table lists life events and indicates which life events the HR administrator manually initiates (HR) and which life events the application initiates as a result of actions such as RPA updates. Life event codes starting with 1 denote employees participating in premium conversion (pre tax deductions), and codes starting with 5 denote employees who declined participation in premium conversion (after tax deductions).

Life Event Name	Life Event Code	Life Event Triggered (Auto/HR)
Initial Opportunity to Enroll	1A / 5A	Auto
Open Season	1B / 5B	Auto (time period specified by customer)

Life Event Name	Life Event Code	Life Event Triggered (Auto/HR)
Change in Family Status	1C / 5C	HR
Change in Employment Status Affecting Entitlement to Coverage	1D / 5D	Auto
Change in Employment Status Affecting Cost of Insurance	1E	Auto
Employee Returns from Uniformed Service	1F	HR
Begin or Return from Non-Pay Status or Insufficient Salary - Coverage Continued	1G	HR
Salary of Temporary Insufficient to Make Withholdings for Plan in Which Enrolled	1H / 5M	HR
Employee/Family Member Moves Outside HMO Enrollment Area	1I /5J	HR
Transfer From a Post of Duty Within US to Post of Duty Outside US or Vice Versa	1J / 5F	Auto
Separation from Federal Employment When Employee or Spouse is Pregnant	1K / 5E	HR
Employee Becomes Eligible for Medicare	1L / 5K	HR
Employee/Family Member Loses Coverage Under FEHB or Another Group Plan	1M / 5G	Auto

Life Event Name	Life Event Code	Life Event Triggered (Auto/HR)
Loss of Coverage Under a Non-Federal Health Plan-Moves Out of Commuting Area	1N / 5I	HR
Employee/Family Member Loses Coverage Due to Discontinuance of an FEHB plan	1O / 5H	HR
Employee/Family Member Gains Coverage Under FEHB or Another Group Insurance Plan	1P	HR
Change in Spouse's/ Dependent's Coverage Under a Non-Federal Health Plan	1Q	HR
Temporary Employee Completed One Year of Continuous Service - Pre-Tax Waiver	5L	HR

Pre-Tax and After Tax Plan Options

The employee has the option upon initial enrollment to choose a plan with a pre-tax deduction or after tax option. If an employee wants to change from a pre-tax to an after tax option after the period of initial enrollment has expired, the employee must wait until a valid life event occurs, such as Open Season.

If an employee chooses after tax deductions, the employee can make the following changes without waiting for a valid life event:

- Terminate health benefits by declining coverage (pre-tax employees can only terminate coverage with a life event such as Open Season)
- Change to a lower option, for example from Family to Self, or from a High to Low option
- Change to pre-tax option

Benefits processing requires a life event, so when an employee on after-tax deductions

wants to change their benefit elections, such as decline coverage, the employee must contact HR to have the HR administrator initiate an After Tax Deductions life event.

Manual Enrollment

Using the benefits user interface, you can manually initiate life events for an employee, enroll an employee in a plan, and make changes to that person's benefit selections. You may need to manually initiate a life event when:

- An employee does not have access to a computer

  See: Manually Enrolling Employees in FEHB, page 6-15

- The application does not automatically detect the life event, such as an employee or eligible family member losing coverage under FEHB or another group plan

  See: Manually Enrolling Employees in FEHB, page 6-15

- A Cancellation or Correction action requires that you back out a life event

  See: Retroactive Actions, Cancellations, Corrections, page 6-10

- At the time of the Appointment action, the employee wishes to continue coverage in an agency health plan, for example in a state health plan

  See: Enrolling Employees in Agency Sponsored Health Plans, page 6-16

Termination of Health Benefits

You terminate health benefits by processing a Separation action. The application automatically initiates a Terminate Contributions life event that enters an end date for all restricted and non-restricted benefit enrollments and enters an end date for all element records.

Effective Dates

The application determines the date on which a life event occurs based on the effective date or the user-entered date.

Where Information Changed	Date Used
RPA action	RPA's effective date
Address window	From Date of the primary address

For all Appointment actions other than transfers or rehires with a break in service of less than 3 days, the FEHB effective date is the beginning of the pay period following

the receipt of the employee's elections.

See: Administration of Specific Federal Life Events, page 6-14

FEHB and Retroactive Actions, Cancellations, Corrections

When you process Retroactive, Cancellation, or Correction action, you may find that potential life events no longer apply. For example, if you cancel a Change in Work Schedule action that initiated a Change in Employment Status life event, the triggered life event no longer applies. After processing a Retroactive, Cancellation, or Correction action, review the employee's life events and determine whether you need to take further action.

Retroactive Actions

If you process a Retroactive action such as a Retroactive NOAC 508 Conversion to Term Appointment NTE and the enrollment date has expired, the employee cannot make benefit elections through self service. You can extend that date by changing the end date, or by closing the event and initiating a new life event.

See: Manually Creating a Potential Life Event for a Person, page 6-58, Manually Voiding a Potential Life Event for a Person, page 6-58, Purging Person Data for Backed-Out and Voided Life Events, page 6-53

Cancellations and Corrections

When you process a Cancellation or Correction action, you should review the status of the life events for that person to determine whether to void or back out the events. If the life event is open, you can void the life event. If the life event is closed, you can back out the life event and, if appropriate, initiate a new life event. For example, if you cancel a Change in Duty Station action that involves a relocation to a duty station outside the United States, you would void the life event for a Transfer From a Post of Duty Within US to Post of Duty Outside US.

See: Manually Creating a Potential Life Event for a Person, page 6-58, Viewing a Person's Life Event Information, page 6-55, Manually Voiding a Potential Life Event for a Person, page 6-58, Purging Person Data for Backed-Out and Voided Life Events, page 6-53

Thrift Savings Plan Overview

Federal government employees covered by the Federal Employee's Retirement System (FERS), the Civil Service Retirement System (CSRS), and Foreign Service Retirement and Disability System (FSRDS) can participate in Thrift Savings and Thrift Savings Catch-up plans.

See: Thrift Savings Catch-Up Contributions, page 6-12

Enrollment and Termination

Employees can enroll, change, or terminate their contributions at any time during the year. As an HR administrator, you can enroll employees when you process an Appointment, Conversion to Appointment or Extension RPA action. In the RPA extra information, you indicate the employee's eligibility status and the amount or percent the person wishes to contribute each pay period.

If you do not know the employee's election choices, the employee can use self-service later to enter that information. If the employee does not have access to a computer, you can enroll employees and change their contributions in the Non-flex Program window.

See: Enrolling in TSP, page 6-18, Enrolling in a Non-Flex Program, page 6-75

After entering the TSP information, the application validates the employee's eligibility status and then updates the TSP element with the contribution amount and rate.

See: Enrolling Employees in TSP, page 6-18

Changing and Terminating Enrollment

If an employee makes an unintentional change to the contribution information, the employee can correct that information within the current pay period. If the employee wants to de-enroll before the start of the first pay period when the contributions take effect, you or the employee must terminate the contributions. Any changes to enrollment take effect the first day of the pay period following the elections.

Employees can terminate their contributions at any time in self-service. As an HR administrator, you can terminate their contributions for them through the professional user interface. When employees use TSP for a hardship loan, you can terminate the TSP contributions and enter the date on which the employee can begin contributing to TSP again.

See: Suspending TSP for Hardship Loans, page 6-19

Coverage and Rate Start Dates

The coverage and rate start date begin on the same day, usually the start of the first pay period following the agency's acceptance of the election form. An exception to this start date includes those employees that you transferred or rehired within 31 days of a Separation or Transfer action. For these employees, the coverage and rate start date correspond to their hire date.

Notifications

When employees enroll or change their TSP elections, you can have the application send a notification to the Personnel Office (POI) groupbox. You can review the linked confirmation page and, if necessary, contact the employee to correct and resubmit the elections. If the employee does not have access to a computer, you can transfer the data

from the employee's TSP-1 form, or consult with the employee and then make the necessary elections through the professional user interface.

See: Enabling US Federal Notifications, page 5-24

Retroactive Actions, Cancellations, and Corrections

If you process a Retroactive action, Cancellation, or Correction action for an employee that changes the person's eligibility, you must review and update the person's TSP information.

For example, if a retroactive Conversion to Appointment action changes a data element such as the retirement plan from FERS to CSRS, you must update the employee's Person Benefit Extra Information and review or update the employee's enrollment status in the TSP element, and the contribution amount or rate in the Non-Flex Program window.

Employees on Non Pay Status

If you have placed an employee on Non Pay status (LWOP), the employee can continue to make elections to TSP and TSP Catch-up contributions. When an employee returns to duty (Active Assignment), the TSP contributions resume based upon the most recent contribution election.

Thrift Savings Catch-Up Contributions

After enrolling in Thrift Savings Plan (TSP), eligible TSP participants can make tax-deferred catch-up contributions from their basic pay up to the maximum allowable amount. Employees can enroll, change or terminate their contributions at any time during the year. At the end of the year you de-enroll all employees; they can re-enroll at the beginning of the next year.

Enrollment in TSP Catch-up

Employees must meet eligibility conditions to participate in TSP Catch-up. TSP participants qualify for TSP Catch-up if they:

- Have an Active assignment status
- Are 50 years old or will become 50 in the same calendar year as their enrollment
- Contribute the maximum amount to TSP

To participate in TSP Catch-up using self-service, employees must first enroll in TSP. The next time the employee uses self-service, the benefit enrollment opportunities include TSP Catch-up. The amount the employee enters for the TSP Catch-up represents the amount contributed each pay period, not a total annual amount. An employee's TSP Catch-up contribution begins the first full pay period after the agency accepts the

employee's TSP Catch-up election form.

If an employee does not have access to a computer or other circumstances require your intervention, you can enroll the employee in TSP Catch-up using the benefits interface.

See: Enrolling a Person in a Non-Flex Program, page 6-75

Pay Period Pay Dates

The application uses pay period pay dates, the date on which the agency issues employee pay checks, as a basis for validating an employee's eligibility for enrolling in TSP Catch-up and determining whether the employee has exceeded the maximum contribution amounts.

See: Defining Pay Dates, *Oracle HRMS Payroll Management Guide*

The application uses the pay period pay date to determine which annual limits apply to TSP Catch-up elections made at the end of the year. If an employee changes an election in the last full pay period of the year with a pay date in the same year, the application verifies the amount based on the next year's allowable contributions. For example, if the pay periods occur from December 4 to December 17 with a pay date of December 23, and from December 18 to December 31 with a pay date of January 6, elections made in the December 4-17 pay period take effect in the next pay period December 18-31 but the December 18-31 pay period has a pay date that falls in the next calendar year, January 6. As a result, the application applies the next year's annual amounts when verifying the contribution amount.

De-enrollment from TSP Catch-up

During the year, when an employee de-enrolls from TSP Catch-up or you de-enroll that person from the benefits interface, you run the Participation Process: Selection concurrent program to complete the de-enrollment and end the person's element.

At the end of the year, you run the Participation Process: Selection program on the last day of the last pay period of the year in which the pay date occurs. The program de-enrolls all employees who have no future-dated enrollments and ends their TSP Catch-up elements. Employees can re-enroll after the annual de-enrollment.

Employees cannot make changes to their TSP Catch-up contributions on that annual de-enrollment date. For example, if the last pay period begins December 9 and ends December 22 with a pay date of December 28, you schedule the de-enrollment date for December 22. Employees can change their elections before and after December 22, but not on December 22.

You should schedule the Participation Process: Selection concurrent program to run daily to ensure that you de-enroll employees from:

- TSP Catch-up in the same pay period as their de-enrollment from TSP
- TSP Catch-up at the end of the calendar year

See: Running the Participation Batch Process, page 6-48

Administration of Specific Federal Life Events

Managing employee benefits sometimes requires manual intervention, such as generating a potential life event or voiding one, or making the benefit elections for the employee through the professional user interface.

Change in Residence or Duty Station

When employees relocate their primary residence to a different state or their duty station changes to a different state, the application triggers an Employee/Family Member Loses Coverage under FEHB or Another Group Plan life event. The employees can then revise their benefit elections using Oracle Self-Service Human Resources (SSHR). If an employee's residence or duty station relocation occurs within the same state, you must manually initiate the life event.

See: Manually Creating a Potential Life Event for a Person, page 6-58

See: Viewing a Person's Life Event Information, page 6-55

Change in Work Schedule

For employees participating in premium conversion (pre-tax option), the application automatically triggers the potential life event for Change in Employment Status Affecting Cost of Insurance when an employee changes work schedules. For employees participating in After Tax Deductions, the application automatically triggers the life event Change in Employment Status Affecting Entitlement to Coverage. These life events permit the employees to change their benefit elections.

In practice, work schedule changes in some agencies do not change employee benefits. In these cases, you can void the potential life event.

See: Manually Voiding a Potential Life Event for a Person, page 6-58

See: Purging Person Data for Backed-Out and Voided Life Events, page 6-53

Continued Coverage for Transfers and Rehires

The Continued Coverage life event ensures a smooth transition for employee transfers and rehires. The effective date for FEHB depends on the type of appointment:

- If you process a Conversion to Appointment (NOAC 500s's), a Conversion to Appointment or a Reinstatement action (NOACs 140, 141, 143) within 3 days of the Separation action, and the person has no change in duty station or work schedule, the application maintains that person's benefit elections as of the Conversion effective date

- If you process a Reinstatement action (NOACs 140, 141, 143) within 30 days of the Separation action, and the person has no change in duty station or work schedule, the employee's FEHB elections take effect the beginning of the pay period following receipt of election

- If you process a Reinstatement action (NOACs 140, 141, 143) and the employee is not on the database as an active employee or ex-employee, the employee's FEHB elections take effect the beginning of the pay period following receipt of election

After the application generates the Continued Coverage life event, you can consult with the employee, and then enter the enrollment elections for that person in the Non-Flex Enrollment window.

See: Enrolling a Person in a Non-Flex Program, page 6-75

Enrolling Employees in FEHB

As an HR administrator, you can enroll employees when you process an Appointment, Conversion to Appointment, or Extension RPA action. Later, the employee can manage benefit elections through self service or you can manage that person's benefit elections using the benefits user interface. For example, if an employee wishes to switch from after tax to pre-tax deductions, you can initiate an After Tax Deduction life event and make that change for the employee.

Use the Request for Personnel Action window for Appointment enrolments:

To enroll an employee using an RPA:

1. Process an Appointment action.

   If you process an Appointment action, the application automatically generates an Initial Opportunity to Enroll life event. If you process a transfer or rehire action, the application processes an appropriate life event based on the information entered for the employee, such as a Continuing Coverage life event or Change in Location life event.

   See: Appointment, Conversion, and Extension Enrolments, , page 6-4 Administration of Specific Life Events, page 6-14, Processing a Request for Personnel Action (RPA), *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

2. Click Extra Information, select the US Federal Benefit RPA extra information, click in the Details field to display the extra information, and enter the benefits information.

3. Complete, approve, and update the Appointment action following your agency's practices.

   See: Processing a Request for Personnel Action (RPA), *Oracle HRMS Workforce*

Sourcing, Deployment, and Talent Management Guide

To manage benefits using the benefits user interface:

1. Initiate a potential life event, if required.

   Manually initiate a life event when RPA actions or updates to the employee information such as a change in primary address do not automatically initiate one. For example, you might initiate an open season life event or a life event for an employee who now qualifies for medicare.

   See: FEHB Administration,, page 6-5 Manually Creating a Potential Life Event for a Person, page 6-58

2. If you initiated a life event, run the Participation Process: Life Event concurrent manager process.

   See: Running the Participation Batch Process, *Oracle HRMS Compensation and Benefits Management Guide*

3. Use the Non Flex Enrollment to change benefit options.

   See: Enrolling a Person in a Non-Flex Program, page 6-75

Enrolling Employees in Agency Sponsored Health Plans

HR administrators can enroll employees in agency-sponsored health plans that are not part of the Federal Employees' Health Benefits program administered by the OPM. For example, if you hire an employee who previously worked for the state, that person might wish to continue the state benefit health plan.

To enroll an employee in an agency health plan:

1. Process an Appointment action.

   If you process an Appointment action, the application automatically generates an Initial Opportunity to Enroll life event. If you process a transfer or rehire action, the application processes a Continuing Coverage life event.

   See: Appointment, Conversion, and Extension Enrolments, , page 6-4 Administration of Specific Life Events, page 6-14

2. Click Extra Information, select the US Federal Benefit RPA extra information, click in the Details field to display the extra information, and enter the benefits information.

3. In the FEHB Enrollment field, select W Agency Sponsored Health Plan.

4. In the FEHB Health Plan field, select plan ZZ Federal Employee Health Benefit

Special Code.

5. Complete the benefits information and the remaining fields of the Appointment action. Approve and update the RPA following your agency's practices.

   See: Processing a Request for Personnel Action (RPA), *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

Changing an Employee's Enrollment Status

When you appoint an employee, you define the employe's enrollment status, for example pending enrollment. If the employee's initial opportunity to enroll expires without the employee making an election, the application changes the pending status to waived/cancelled. The employee can enroll at the next valid life event, such as Open Season.

> **Note:** If you have not implemented advanced benefits and the enrollment period expires, you must change the employee's enrollment status to waived/cancelled in the Health Benefit element.

If the employee's enrollment status is ineligible, you can change that status when the person becomes eligible so that the employee can enroll when the next life event occurs.

Use the employee's Assignment Element Entries window to change the Health Benefit element entries.

To change the enrollment status to eligible:

1. Select the Health Benefits Pre-Tax element and click Entry Values.

2. In the Health Enrollment option, select X to indicate that the employee is eligible for coverage.

3. In the Health Plan option, select ZZ Federal Employee Health Benefit Special Code.

   > **Note:** When you update the element entries with W, X, Y, and Z, you must also enter the Health Plan option ZZ, Federal Employee Health Benefits Special Code.

4. Save your work.

5. Run the Participation Process: Selection concurrent manager process.

   See:Running the Participation Batch Process, *Oracle HRMS Compensation and Benefits Management Guide*

Changing Employee Enrollment Options for Child Equity Court Orders

When you receive a child equity court order date from the judicial system, you must restrict the choice of benefit enrollment options so that the employee can no longer choose Self Only or Decline Coverage. Later when you receive the official notification that the child equity court order has elapsed, you must reinstate the enrollment options. You can easily administer this change.

1. Navigate to the employee's US Federal Person Benefits Extra Information and enter the official Child Equity Court Order Date.

2. Manually initiate a Change in Family Status.

   The employee can then select Self and Family enrollment options in self-service.

   > **Note:** The application does not enforce this enrollment election. It is up to the HR specialist to ensure that the employee has made the appropriate enrollment change.

3. To reinstate the enrollment options after receiving the official notification, clear the Child Equity Court Order Date in the US Federal Person Benefits Extra Information, and manually initiate a Change in Family Status.

   See: Manually Creating a Potential Life Event for a Person, page 6-58

Enrolling Employees in TSP

Employees covered by the Federal Employee Retirement System (FERS), Civil Service Retirement System (CSRS), or Foreign Service Retirement and Disability System (FSRDS) can participate in Thrift Savings Plans.

As an HR administrator, you can initially enroll employees when you process an Appointment, Conversion to Appointment or Extension RPA action. Employees can then manage their TSP benefits using self-service.

As an HR administrator, you can also manage TSP benefits for the employees using the benefits user interface. For example, if the employee does not have access to a computer, you can enroll the person in TSP and later if the employee decides to stop contributing to TSP, you can terminate TSP contributions for that person.

See: Enrolling a Person in a Non-Flex Program, page 6-75

See: De-enrolling Employees in TSP and TSP Catch-Up, page 6-22

To enroll employees in TSP:

1. Process an Appointment RPA action.

See: Appointment, Conversion, and Extension Enrolments, page 6-4

See: Processing a Request for Personnel Action, *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

2. Click Extra Information, select the US Federal Benefit RPA extra information, click in the Details field to display the extra information, and enter the TSP information.

3. Enter the TSP status:

   - For CSRS employees, enter an E for Eligible to Contribute.
   - For FERS employees, enter an I for Ineligible for Agency Contributions.

   The application automatically enters the Appointment's effective date as the TSP Status Date.

4. For FERS employees, enter an Agency Contribution Eligibility Date.

   The FERS employee is ineligible for agency contributions until the TSP Agency Contribution Eligibility Date occurs. After the date has passed, you can change the TSP eligibility status from I to E in the TSP Contributions element.

5. Complete the TSP fields based on the employee's elections.

6. Complete, approve, and update the Appointment action according to your agency's practices.

   See: Processing a Request for Personnel Action (RPA), *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

Suspending TSP for Hardship Loans

If employees use their TSP savings for a hardship loan, you can terminate their TSP contributions until they become eligible to participate in the saving program again.

To terminate enrollment for hardship loans:

1. Query the employee record in the Person window.

2. Click Extra Information, select the US Federal Person Benefit Information and click the Details field to display the extra information.

3. In the TSP Employee Contribution Eligibility Date, enter the date that the employee must reach before changing TSP elections.

4. Save your work.

5. Navigate to the Non-flex Program window and query the employee's record in the

Person Find window.

6. In the Program field, scroll to display the Federal Thrift Savings Plan (TSP).

7. In the Plan and Option region, select TSP Terminate Contributions.

8. Save your work.

The application prevents the employee from changing the TSP elections until the day following the TSP Employee Contribution Eligibility Date.

Continuing TSP Coverage for Rehires and Transfers

Rehired or transferred employees can continue their TSP coverage. When you rehire ex-employees (NOACs 140, 141, 143) within 30 days of a Separation action, the application continues their TSP coverage as of the Reinstatement effective date. If employees change their elections, those changes take effect the pay period after the HR office receives the information.

When you transfer employees, their TSP coverage continues uninterrupted. At any time following the transfer, the employee can change the elections using self service or you can for that person using the benefits Non-flex Program window.

For both rehires and transfers, you must specify the eligibility status as you did for the original appointment action.

To specify eligibility:

1. Process a reinstatement or transfer action.

   See: Processing a Request for Personnel Action, *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

2. Click Extra Information, select the US Federal Benefit RPA extra information, click in the Details field to display the extra information, and enter the benefits information in the fields.

3. Enter a TSP Status.

   - For CSRS employees, enter an E for Eligible to Contribute.

   - For FERS employees, enter an:

     - I if the effective date of the rehire or transfer occurs before the Agency Contribution Eligibility Date

     - E if the effective date of the rehire or transfer occurs after the Agency Contribution Eligibility Date

4. For FERS employees, enter an Agency Contribution Eligibility Date.

   The FERS employee is ineligible for agency contributions until the TSP Agency Contribution Eligibility Date occurs. After the date has passed, you can change the TSP eligibility status from I to E in the TSP Contributions element.

5. If the employee currently has a hardship loan restriction, enter the TSP Employee Contribution Eligibility Date.

   The TSP Employee Contribution Eligibility Date is the date when the restriction ends and the employee can resume TSP elections.

6. Complete the TSP fields based on the employee's elections.

7. Complete, approve, and update a reinstatement or transfer action.

   See: Processing a Request for Personnel Action, *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

De-enrolling Employees in TSP

Employees can terminate their contributions to TSP at any time during the year. When an employee de-enrolls from TSP, the next time the Participation Process:Selection concurrent manager program runs, the program automatically de-enrolls that person from TSP at the start of the next pay period and ends the element.

Employees can use self-service to de-enroll from TSP by changing their contribution to zero. If an employee does not have access to a computer or to self-service, you can de-enroll that person using the:

- Non-Flex Program window, if you have implemented benefits
- Assignment elements window, if you have not implemented benefits

To de-enroll an employee from TSP using the Non-Flex Program window:

1. Set the effective date to the pay period end date.
2. Query the employee record.
3. In the Program field, scroll to display the TSP program.
4. Select Terminate Contributions.

The application creates a new element after ending the previous one. The new element maintains the TSP Status and Status Date information. If the employee is also enrolled in TSP Catch-up, the Participation Process: Selection concurrent program de-enrolls that person from TSP Catch-up.

To de-enroll an employee from TSP using the Assignment Element Entries window:

1. Select the element.
2. In the Element Entries window, change the amount or percent to zero.
3. Choose the appropriate Status and Status Date.
4. Save your work.

De-enrolling Employees in TSP Catch-Up

During the year, employees can terminate their contributions to TSP Catch-up at any time. At the end of the year, you must de-enroll employees from TSP Catch-up. If the employee chooses to continue contributing to TSP Catch-up, the employee must enroll again in the new calendar year.

To complete the de-enrollment, you run the Participation Process-Selection program. This program ends the TSP Catch-up element at the start of the next pay period. At the end of the year you must schedule the program to de-enroll employees on the last day of the last pay period of the calendar year in which the pay date occurs. Employees cannot make changes to their TSP Catch-up elections on that day.

See: Thrift Savings Catch-up Contribution, page 6-12

We recommend that you schedule the Participation Process: Selection concurrent program to run daily to ensure that you de-enroll employees from:

- TSP Catch-up in the same pay period as their de-enrollment from TSP
- TSP Catch-up at the end of the calendar year

See: Thrift Savings Catchup Contributions, page 6-12

Employees de-enroll from TSP Catch-up using self-service by selecting Terminate Contributions. If an employee does not have access to a computer or to self-service, you can de-enroll that person using the:

- Non-Flex Program window, if you have implemented benefits
- Assignment elements window, if you have not implemented benefits

To de-enroll an employee from TSP Catch-up using the Non-Flex Program window:

1. Set the effective date to the date when the employee wants to terminate TSP Catch-up contributions.

2. Query the employee record.

3. In the Program field, scroll to display the TSP Catch-up program.

4. Delete the TSP Catch-up entry.

The application ends the current element at the end of the pay period. For example, if the pay period runs from January 8 to January 22 and you set the effective date to January 10, the application ends the element as of January 22.

To de-enroll an employee from TSP Catch-up using the Assignment Element Entries window:

1. Select the element and delete it.

2. Save your work.

Basic Benefits Administration

Benefits Enrollment

To enroll eligible employees in a benefit, you make entries for them to the benefit element's input values. You must manage some benefits, such as the Federal Employees Group Life Insurance and Retirement Plan with the RPA. These management tasks include adding, changing, or terminating these benefits.

Dependent Coverage

After enrolling an employee in a benefit that provides dependent coverage, you set up coverage as appropriate for his or her dependents. Before setting up this coverage, you enter the dependents into the database as contacts of the employee.

Beneficiaries of Benefits

After enrolling someone in a benefit for which there can be beneficiaries, you record the employee's named beneficiaries. Employees can name both individuals and organizations as beneficiaries. Further, they can specify a benefit percentage for each beneficiary, and name both primary beneficiaries and those at lower levels.

You enter individuals named as beneficiaries into the database as contacts of the employee, and organizations or institutions named as beneficiaries as organizations with the classification Beneficiary Organization.

Establishing Benefit Coverage for Dependents

Benefits can provide coverage both to employees and their dependents.

After enrolling an employee in a benefit such as Federal Employees Group Life Insurance (FEGLI) using an RPA, you establish coverage for the employee's dependents using the Covered Dependents window. You access this window from the Element Entries window.

Enroll an employee in a benefit plan using the Element Entries window then open the Covered Dependents window.

> **Note:** First use the Contact window to check that the dependents have been entered on the system. If not, enter them now. Be sure to check the Dependent box for each person, and to enter his or her gender, birth date, social security number, and address. See: Entering Next of Kin and Other Contacts, *Workforce Sourcing, Deployment, and Talent Management Guide*

To establish benefit coverage for a dependent:

1. Set your effective date to the date this insurance coverage begins for the dependent.

2. In the Element Entries window for the employee's primary assignment, select the element representing the benefit for which you are entering dependent coverage. Choose the Others button and select Dependent Coverage to open the Covered Dependents window.

3. In the Full Name field of the Covered Dependents window, select the dependent's name. The social security number, relationship, and coverage start date all display.

   Note: The name of a dependent who already has coverage in effect as of the effective date does not appear on the list. The name of a dependent with coverage scheduled to begin on a future date does appear. You receive a message about the previously scheduled coverage when saving your entries in this window.

4. Save your work.

5. To establish coverage under this benefit for another dependent of the employee, repeat steps 3 and 4.

   Note: To purge a dependent from the database, you must first purge his or her record as a covered dependent, and then purge the person as a contact.

Stopping Dependent Coverage Only

To stop benefit coverage for a dependent while the employee's coverage remains in effect, you must use the Covered Dependents window. Unchecking the Dependent box in the Contact window for a dependent with existing dependent coverage prevents this person from receiving new dependent coverage, but is not sufficient to stop existing coverage.

To stop dependent coverage:

1. Enter or query the employee in question, and select the Assignment button.

2. Set the effective date to the stop date of the dependent's coverage.

3. In the Element Entries window for the employee's primary assignment, select the element representing the benefit for which you are stopping dependent coverage. Choose the Others button and select Dependent Coverage to open the Covered

Dependents window.

4. Query the dependent whose coverage is stopping and choose Edit - Delete Record.

5. To retain a record of this person in the database as a dependent, choose End Date and save.

6. If the person is no longer a dependent of the employee, go to the Contact window, uncheck the Dependent box, and save.

> **Note:** The person must remain in the database as a contact if any of the following apply:

- He or she is the recipient of a garnishment payment or other payment from the employee
- He or she is named as a beneficiary for one or more of the employee's benefits
- He or she is a primary contact of the employee.

Recording Beneficiaries for Benefits

Employees may name beneficiaries for benefits in these classifications:

- Life (insurance coverage)
- Defined Contribution plans for retirement savings
- Pension (Defined Benefit pension plan)
- Retirement Plans (Federal Employee's Retirement System or Civil Service Retirement System contributions)

Enroll an employee in a benefit plan using the Element Entries window then open the Beneficiaries window.

Employees may name as their beneficiaries both individuals and organizations, such as charities, hospitals, and educational or religious institutions.

> **Note:** Enter organizations that are beneficiaries into the system using the Organization window, giving them the classification *Beneficiary Organization*.

To record a beneficiary for a benefit:

1. Set your effective date to the date the person or organization becomes a beneficiary

of the benefit.

2. In the Element Entries window for the employee's primary assignment, select the element representing the benefit. Choose the Others button and select Beneficiaries to open the Beneficiaries window.

3. In the Level field, select Primary, Second, Third, or Fourth as the level of the beneficiary you are entering. All primary-level beneficiaries who survive the employee become the actual beneficiaries of the benefit.

   If no primary beneficiaries survive the employee, the second-level beneficiaries become the actual beneficiaries, and so forth through levels three and four. There is no limit on the number of beneficiaries you can enter at a level.

4. In the Name field, select the name of the beneficiary. The list includes all contacts marked as beneficiaries for this employee, and all organizations with the classification Beneficiary Organization. The system displays the beneficiary's type (contact or organization) and start date.

   Note: A beneficiary already on record as of the current effective date for this benefit of the employee does not appear on the list. A beneficiary already entered to go into effect on a future date does appear. You receive a message about the future-dated entry when saving your entries in this window.

5. In the Percentage field, enter to two decimal places the percentage of the benefit to which this beneficiary is entitled. For example, for 33.34% enter 33.34. If the total of percentages entered for beneficiaries at a level does not equal 100.00 as of the current effective date, you receive an error message.

   If you enter a percentage that causes the total for beneficiaries at this level to be greater or less than 100.00 as of another date, the system notifies you of the date but permits you to save the entry. Change your effective date to this date, and make the necessary adjustments.

   Note: If some but not all of the beneficiaries at a level predecease the employee and he or she does not specify an adjustment of the percentages for the remaining beneficiaries, such adjustment must be done off line.

6. To list additional beneficiaries for this benefit, repeat steps 3 through 5.

7. Save your work.

   Note: To purge a beneficiary from the database, you must first

purge the record of the person or organization as a beneficiary, and then purge the entry of a contact or an organization.

Stopping Employee and Dependent Coverage

When you terminate an employee with a Separation action, the system automatically end dates all elements for that employee as well as the coverage for his or her dependents.

1. To stop a particular benefit for an employee, you place an end date on the element entry enrolling the employee in the benefit. To accomplish this you delete the entry as of the end date. This end date then automatically applies to the coverage of the employee's dependents under this benefit, and appears in the Covered Dependents window.

   For example, if you put in an end date for an element entry that enrolls an employee in Dental Plan A, coverage of the employee's dependents under this plan automatically receives this end date also. This ensures that when the employee's benefit coverage ends, the coverage of his or her dependents also automatically ends. However a record of the dependent remains in the database.

   If you must later change or remove an end date placed on the employee's element entry, perhaps to correct an error, the change or removal automatically applies to the coverage of the employee's dependents. So, if you later remove the end date from the employee's element entry for Dental Plan A, the system automatically removes any end dates it finds for coverage of the employee's dependents under Dental Plan A.

   This means that if you must correct or remove an end date of an element entry that enrolls an employee in a benefit, and must for other reasons end the coverage of one or more dependents of the employee, you should complete the work on the element entry before ending coverage for individual dependents.

Removing Beneficiaries When Employee Benefits Stop

When you terminate an employee with a separation action, the system automatically end dates all elements for that employee as well as the coverage for his or her beneficiaries.

1. To stop a benefit for an employee, you place an end date on the element entry enrolling the employee in the benefit. To accomplish this you delete the entry as of the end date. This end date then automatically applies to the beneficiaries for this benefit named in the Beneficiaries window. If you later change or remove the end date placed on the employee's element entry, perhaps to correct an error, the change or removal automatically applies as well to end dates existing for the

beneficiaries.

The automatic entry, change or removal of the beneficiaries' end date ensures that people and organizations do not remain in the system as beneficiaries of benefits that no longer cover the employee.

If you must correct or remove an end date of an element entry that enrolls an employee in a benefit, and must for other reasons supply an end date for one or more beneficiaries named for the benefit, you should complete the work on the element entry before providing end dates for the beneficiaries.

Removing Beneficiaries When Employee Benefits Continue

To remove a beneficiary while a benefit remains in effect for the employee, you must use the Beneficiaries window. Unchecking the Beneficiary box in the Contact window prevents a person from being named as a beneficiary in the future, and removing the classification Beneficiary Organization prevents an organization from being named as a beneficiary in the future. However these actions are not sufficient to remove the person or organization as a currently-named beneficiary.

To remove a beneficiary while maintaining coverage:

1. Enter or query the employee, and choose the Assignment button.
2. Set your effective date to the end date for the beneficiary.
3. In the Element Entries window for the employee's primary assignment, select the element representing the benefit for which you are removing the beneficiary. Choose the Others button and select Beneficiaries to open the Beneficiaries window.
4. Query the beneficiary to be removed, choose Edit - Delete Record, and save.
5. To retain a historical record of the removed beneficiary, select End Date and save.
6. If the removed beneficiary is no longer a beneficiary of any of the employee's benefits, go to the Contact window, uncheck the Beneficiary box, and save.

   Note: A contact removed as a beneficiary of a benefit must remain in the database as a contact if any of the following apply:

   - He or she is the recipient of a garnishment payment or other payment from the employee
   - He or she is named as a beneficiary for any other benefits of the employee
   - He or she is a primary contact of the employee.

Reviewing Employee Enrollment in Benefit Plans (Basic Benefits)

Use the View Employee Dental, Medical and Vision Benefits window.

To review an employee's enrollment in health care benefit plans:

1. Select the employee assignment to view from the Assignments folder. You can then see for this employee the **plan name, benefit classification** and **COBRA eligibility** for each plan in which he or she is enrolled.

   For each plan that holds information in the Benefits Table, you also see the **coverage level**, the **employer** and **employee contributions** at this level, the **total contribution,** and the unit of measure for the contributions, which is usually money.

   > **Note:** To review coverage of an employee's dependents in a health care plan, use the Covered Dependents window.

Participant Eligibility Management (Standard Benefits)

Maintain Participant Eligibility (Standard Benefits)

If you use Standard Benefits in Oracle HRMS, you can determine eligibility and ineligibility for current and potential benefits participants through the Maintain Participant Eligibility batch process.

If the eligibility process finds a person *newly eligible* for one or more compensation objects, the process creates or updates the person's eligibility record. Typically, a gain in eligibility indicates an enrollment opportunity.

If the eligibility process finds a currently enrolled participant ineligible, the process de-enrolls the participant from the newly ineligible compensation object and ends the participant's coverage and rate.

> **Note:** You can define an Oracle Alert to notify a benefits administrator, participant, or other personnel when the process detects a change in eligibility status. For example, you can send an alert to an administrator indicating that the process has de-enrolled a participant. The administrator can then process an unrestricted enrollment to determine if the participant has any new enrollment opportunities, such as for continuing coverage.

Schedule this process before your payroll run so that deductions are not calculated for coverages which should be ended. You should also run the process before writing system extracts to transmit coverage changes to third party carriers.

See: Running the Maintain Participant Eligibility Process, page 6-31

Running the Maintain Participant Eligibility Process (Standard Benefits)

As a Standard Benefits user, you run the Maintain Participant Eligibility Process on a regular basis to manage eligibility for your employer-sponsored benefits programs.

You run this process from the Submit Requests window.

To run the Maintain Participant Eligibility Process:

1. Select the Maintain Participant Eligibility Process in the Name field.
2. Enter the Parameters field to open the Parameters window.
3. Enter the Effective Date on which you are running the process.

4. Select one or more parameters to limit the eligibility determination to a segment of your employee and benefits participant population.

   For example, you can determine eligibility for participants currently enrolled in a particular benefits plan or for employees in an organization you select.

5. Select a Person Selection rule to restrict the process to persons who need to be de-enrolled. For example, persons who are newly terminated or deceased and currently enrolled in an active program.

   Reducing the number of persons selected by the Maintain Participant Eligibility Process improves application performance by reducing the number of records written to the eligibility tables.

6. Choose the OK button.

7. Complete the batch process request and choose Submit.

Running the Eligibility and Enrollment List Report

Run the Eligibility and Enrollment List to display the total number of eligible and enrolled participants in plans used for Standard and Advanced Benefits and Individual Compensation Distribution. The report also lists recently ineligible and de-enrolled participants.

Recently ineligible persons are those people found ineligible in a compensation object for which they were previously eligible.

This report enables you to:

- Reconcile total participant counts with third-party providers
- Determine the effectiveness of a plan by comparing the number of eligible people to the actual number of enrolled participants
- Monitor trends in changes to the volume of currently enrolled participants
- Analyze the impact of potential changes to plan offerings on participants
- Generate a mailing list of currently enrolled participants

You run reports from the Submit Requests window.

To run the Eligibility and Enrollment List:

1. Select Eligibility and Enrollment List in the Name field.

2. In the Parameters window, enter the Reporting Start Date and the Reporting End Date to limit the eligibility and enrollment list to this period.

To view eligibility results, enter the eligibility start and end dates. Or, enter coverage start and end dates for enrollment results.

3. You can also select other criteria to limit the results of the report:

   - Person, Person Type
   - Program
   - Plan Type, Plan: limits the report to the selected plan type or the plan.

     Note: You must select either the Plan Type or the Plan.

   - Plan Not in Program
   - Option
   - Enrollment Method (select a value of **Generated** for enrollments processed through data conversion or IVR transaction)
   - Person Selection Rule
   - Organization
   - Location
   - Benefits Group
   - Reporting Group
   - Payroll
   - Person Identifier: the report displays the selected identifier.
   - Sort Order 1 to Sort Order 3: sorts the report based on your selection.

4. Indicate if you want to view report results such as:

   Note: The default value for the following is Yes:

   - Display Eligibility and Enrollment Summary: lists people who are Eligible, Currently Enrolled, Enrolled by each Enrollment Method Type, Newly De-enrolled, and Newly Ineligible.
   - Display Enrolled Participants by Plan: lists people enrolled for the selected plan.

- Display All Enrolled Plans by Participant: lists all plans in which the selected participant is enrolled.
- Display Mailing Address: displays participant address details in the Enrolled Plans by Participant Section.
- Display Email Address: displays participant email addresses in the Enrolled Plans by Participant Section.
- Display Date of Birth: displays participant date of birth in the Enrolled Plans by Participant Section.
- Display Gender: displays participant gender in the Enrolled Plans by Participant Section.

5. Choose OK.
6. In the Submit Request window, verify the parameters you selected, set the schedule and the options for running the report.
7. Choose the Submit button.

Participation Management (Advanced Benefits)

Participation Batch Processes (Advanced Benefits)

The Participation batch process uses your plan design to determine eligibility and enrollment information for the persons and benefit plans that you select. When you run the batch process, the system performs the following actions:

- It determines how system-triggered life events impact a person's eligibility, electability, enrollment, de-enrollment, activity rates and coverage.
- It creates related person life events based on these system-triggered life events.
- It determines when automatic enrollment is appropriate for benefits, and then automatically enrolls those eligible persons.
- It de-enrolls participants who lose their eligibility in programs, plans or options and cancels any of their related current enrollment events.

How often you run the Participation batch process depends on the size of your employee population and the timing of your payroll run. Typically, plan sponsors with large employee populations will run the Participation process daily. Because temporal life events (such as birthdays and length of service anniversaries) occur each day for employees of such large enterprises, these events impact employees' eligibility and electability on a daily basis.

On the other hand, a small employer using a single, biweekly payroll run for all of its employees might find running the Participation batch process before each payroll run sufficient.

When the system encounters multiple active life events, it processes the one with the earliest effective date first. A person can have more than one potential life event at a time, but only one active life event at any point in time.

The Participation process produces a user log file that details what operations took place and what database objects the system updated.

Running the Participation Process for Terminated Employees

After processing employee terminations, Advanced Benefits customers run the Participation Process in life event mode to de-enroll a person from any compensation objects.

> **Note:** You should set up the application to detect a life event based on termination. Standard Benefits users can de-enroll a terminated

employee by processing an unrestricted enrollment or by running the Maintain Participant Eligibility process.

Because you define all benefits elements with a termination of Final Close, the HR termination process end-dates the person's benefits element entries based on the Final Process Date. However, the Participation process recalculates the element entry end date based on the activity rate end date code for a compensation object according to the following rules.

- If the Participation process derives an element entry end date that is earlier than the date derived by the termination process, the Participation process resets the element entry end date to the new date.
- If the Participation process derives an element entry end date that is earlier than the date of an existing payroll run result, the Participation process sets the element entry end date to the run result date.
- If the Participation process derives an element entry end date that is later than the date derived by the termination process, the Participation process errors for that person. In this instance, an HR professional must reverse the termination and set the Final Processed Date to a future date.

Note: The Participation process only updates the end dates of element entries for elements attached to standard activity rates.

Modes of the Participation Batch Process (Advanced Benefits)

You select a run mode for the Participation process based when you are determining eligibility for a scheduled enrollment or an enrollment based on a life event. You can run the process so that results are not saved or so that results are saved to the database.

The following table describes the different batch process modes.

Batch Process Modes

Batch Process Mode	Description
Selection	Determines eligibility for selected persons for selected compensation objects, but does not create electable choices. You can use Selection mode when determining how many persons are eligible for a compensation object. You can choose to commit the eligibility results to the database or rollback the results of the batch process and not update the database.

Scheduled	Determines eligibility, electable choices, and enrollment information for selected persons for selected compensation objects based on a scheduled enrollment event. This mode also determines eligibility for the dependents and beneficiaries of eligible participants.
Life Event	Determines eligibility, electable choices, and enrollment information for selected persons for selected compensation objects based on a life event. This mode also determines eligibility for the dependents and beneficiaries of eligible participants.
Temporal	Determines temporal life events based on the derived factors of compensation level, percent of full-time employment, hours worked in period, age, length of service, and combination age and length of service. **Note:** Life events created by the temporal process must be processed in life event mode.

Purging Batch Related Tables (Advanced Benefits)

Each time you run one of the following batch processes the system creates an audit log if you set the Audit Log parameter to Yes:

- Close Action Items Process
- Close Enrollments Process
- Default Enrollment Process
- Participation Process: Life Event
- Participation Process: Scheduled
- Participation Process: Selection
- Participation Process: Temporal
- Temporal Communications (Action Item Reminder)
- Temporal Communications (Emerging Events)
- Temporal Communications (Enrollment Reminder)
- Temporal Communications (Mass Mailing)

Audit log files accumulate until you purge them. You should periodically purge batch

related tables to help the system run more efficiently.

If the audit logs become full, the application prevents you from running any of the processes which create an Audit log. Run the purge process, then restart the process which was interrupted when the log became full.

Note: By default, the application sets the Audit Log parameter to No.

The Participation Audit Activity Purge process protects ongoing activities by purging data only from completed batch processes. Purging the audit logs does not affect life event or election information.

You can purge the log associated with a single concurrent request ID or purge all logs that were created for a Business Group on a date you select.

The process purges data from the following tables:

- BEN_REPORTING
- BEN_PERSON_ACTIONS
- BEN_BENEFIT_ACTIONS
- BEN_BATCH_RANGES

Life Event Back-out in Batch Mode

You run the Life Event Back-out process from the Concurrent Manager when a life event has been started for a group of persons in error. For example, you might run this process if a salary increase is incorrectly applied to a group of persons, or if a transfer has been incorrectly processed for an organization.

You can back-out all kinds of life events, including:

- Temporal life events (such as number of hours worked)
- Scheduled life events (such as an open enrollment period)
- Explicit life events (such as an address change or assignment transfer)

When you back-out a life event, the system marks all electable choices and related information, such as payroll contributions, dependent designations, and communications, with a status of *backed-out*.

Life events can be backed out that have a status of *started* or *processed*; you can only back-out a person's most recent life event.

You select run-time criteria to control the persons for whom you are backing out a life event. If you use *person selection criteria*, such as organization, the person must meet *all* the criteria you specify.

If you do not select person criteria, the process backs out the life event for all persons who experience the event within the date range you specify.

> **Note:** Enter the same date in the From Occurred Date and To Occurred Date fields to run the life event back-out process for a single date.

You can view the results of the Life Event Back-out process in the Process Report. The Summary Report identifies the run-time parameters you selected and provides the total number of persons for whom the selected life event was backed-out.

> **Note:** Use the Person Life Event window to back-out a life event for a single person.

You can purge person data associated with backed-out and voided life events to reduce the volume of data that you store.

See: Purging Person Data for Backed-Out and Voided Life Events, page 6-53

Benefits Batch Processes (Advanced Benefits)

After you run the Participation batch process to determine eligibility and electable choices for your benefits participants, you use the following batch processes to help you process your enrollments:

- Default Enrollment Process
- Close Unresolved Action Items Process
- Close Enrollments

Default Enrollment Process (Advanced Benefits)

You run the Default Enrollment batch process to enroll a participant into a plan when the participant fails to make an election by a certain date and you have defined a default enrollment for a plan or option.

You also use this process to enroll a participant in a plan or option that you define as mandatory if the person fails to elect this required plan or option by a certain date.

As a prerequisite, you run the Participation batch process before you run the default enrollment process so that eligible participants can be identified.

The Default Enrollment process also determines any action items that must be completed before the enrollment is considered valid.

> **Note:** If a participant is currently enrolled in a plan or option that is not

a default for this enrollment period, the default enrollment process will **de-enroll** the participant from the compensation object if the participant has not made an explicit election.

Close Unresolved Action Items Process (Advanced Benefits)

As part of your plan design, you define the action items that are required for an enrollment to be valid. You can also define action items as optional.

For example, you may require that a person must provide the date of birth for all dependents covered by a plan if the participant enrolls in the Employee Plus Family option of a medical plan.

You use the Close Unresolved Action Items batch process to close any required or optional action items that have not been completed by the participant. This process also deletes any suspended enrollments for the persons who meet the criteria you specify.

You run this process before you run the close enrollment process.

Interim Enrollments

If a plan that you include as a parameter in this process provides interim coverage to a participant with a suspended enrollment, the process closes the suspended enrollment and preserves the interim coverage. The interim coverage is effective until the interim coverage end date that you define in your plan design.

Close Enrollments Batch Process (Advanced Benefits)

You run the Close Enrollments batch process to close a person's enrollment after elections have been made and to resolve any incomplete election information. This process marks a person's qualifying life event reason as *processed*.

Use one of the following close modes when you run the Close Enrollments process:

- **Force Close** closes a person's life event regardless of the enrollment period or any pending workflow approvals.
- **Normal Close** closes a person's life event only after the enrollment period has passed for all unenrolled choices.
- **Preserve Pending Transactions** performs a force close if the process finds no pending workflow approvals.

Maintain Designee Eligibility (Advanced Benefits)

Some benefit plans require that dependents covered under the plan meet certain eligibility criteria in order to receive coverage. For those plans that require dependents

to be under a certain age, you need to run the Maintain Designee Eligibility batch process to determine when a dependent becomes *ineligible* for benefits coverage based on an age change.

This change in age is called *aging out* of a benefit.

Activity Summary Reports (Advanced Benefits)

Each time you run an enrollment batch process or the Maintain Designee Eligibility batch process, the system automatically generates the Activity Summary Report. You can also run this report directly from the Concurrent Manager.

The activity summary report groups information about a batch process into four main categories:

Processing Summary

- Number of participants successfully processed
- Number of participants processed in error
- Number of participants unprocessed
- Total number of participants selected

Successful Processing Summary- By Event Type

- Number of participants with a life event created
- Number of participants without a life event created
- Number of participants with a temporal life event created
- Total number of participants successfully processed

Successful Processing Summary- By Action

- Number of participants without a life event created
- Number of participants with a **new**life event created
- Number of participants with a **replaced** life event
- Total number of participants successfully processed

Error Summary

- The activity summary report also lists the total number of errors in the batch process categorized by error type.
- This report also includes standard report header information such as the Business Group for which the report was run, the execution start and end times, and the number of people selected and processed in the batch run.

Audit Log Report (Advanced Benefits)

Each time you run an enrollment batch process, the system automatically generates the Audit Log Report. You can also run this report directly from the Concurrent Manager.

The audit log identifies each person in the report by personal and assignment information such as their name, social security number or national identifier, job title, grade level, and organization.

For an audit log report that you generate against a Participation batch process that is run in Life Event mode, the audit log displays information about the life events processed in the batch run.

This report also includes standard report header information, such as the Business Group for which the report was run, the execution start and end times, and the number of people selected and processed in the batch run.

Errors By Error Type and Errors By Person (Advanced Benefits)

Each time you run an enrollment batch process, the system automatically generates the Errors By Error Type Report and the Errors By Person Report. You can also run these error reports directly from the Concurrent Manager.

Both reports return the same error data but format the data in different ways. The Errors By Error Type Report lists all the errors that occurred for the batch process you select. For each error type, the report lists all the persons with this error and their social security number or national identifier.

The Errors By Person Report lists all the errors that occurred for each person with an error in the batch process you select.

Both reports also include standard report header information such as the Business Group for which the report was run, the execution start and end times, and the number of person selected and processed in the batch run.

Restart Process (Advanced Benefits)

If a batch process stops processing before it is complete due to errors or other reasons, you can restart the batch process. The following benefits batch processes can be restarted:

- Participation Process
- Default Enrollment
- Close Unresolved Action Items
- Close Enrollments

Note: You use the Batch Process Parameters window to specify the maximum number of errors that can occur for a batch process before the process is aborted.

Participation Management (Advanced Benefits)

You run the Participation batch process from the Concurrent Manager to determine eligibility and electable choices for those persons who meet the batch process selection criteria that you specify.

The results of the Participation process contain participation information that you can review before you record any participant's benefit elections.

For each person included in the Participation process results, you can review the compensation objects for which the person is eligible or ineligible, activity rate amounts, the life event reason that determined the electable choice, and other enrollment related information.

You can manually generate a life event for a person, or void a life event that was created in error, if you need to supplement the results of the Participation process.

The system also provides a "what-if" eligibility modeling feature that lets you enter proposed data changes to a participant's record and then view the eligibility results that would occur. The eligibility modeling feature is useful for helping a participant understand how a potential life event, such as a marriage or a work re-location, will effect their benefits eligibility.

Participation Information (Advanced Benefits)

You use the View Participation Information window to display, by person, the eligibility results of the Participation batch process. The following data is displayed according to the structure of the compensation object hierarchy:

- All programs, plans, and options in plan for which a person is eligible
- All programs, plans, and options in plan for which a person is *ineligible* if you check the Track Ineligible Person field for that compensation object in your plan design
- Standard activity rates and actual premiums for plans and options in which a person is enrolled

Important: In order to ensure that the information you display for a person is current, you must first run the Participation batch process for that person.

Life Events and Electable Choices (Advanced Benefits)

After you run the Participation process, you can use the Person Life Event window to view any active life event or potential life events that were created for a person. You can also manually create or void a potential life event.

Active Life Events

For active life events, you can view the status of the life event, including when the event occurred, when it was processed, and when it was closed.

You can also view any enrollment opportunities that were created for a person and any elections made by the participant in association with the active life event. This information includes:

- Enrollment period dates
- Enrollment coverage dates
- Assignment dates for default and automatic enrollments
- Benefit limitations such as required certifications or earliest de-enrollment dates
- Activity rate information

Potential Life Events

Potential life events are database changes that the system detects based on your life event reason definitions. You can review potential life events for a person to ensure that life events are correctly defined, detected, evaluated, and processed.

The system displays the following information for each potential life event detected for a person:

- Status
- Enrollment period start date, if applicable
- Processing dates, such as the date the event occurred and the date it was detected

Person Life Event Security

You can define a user role that restricts which participant life events display on the Person Life Events window when accessed by various HR professionals within your enterprise.

For example, you can restrict employees in your Benefits department from viewing life events related to compensation. Similarly, you can ensure that a Compensation Administrator sees only compensation-related life events.

See: Setting Up a Role Based on a Life Event, page 6-49

Manually Created Life Events and Voided Life Events (Advanced Benefits)

You can manually create a life event for a person if the system fails to detect a life event based on your life event definitions. You then run the Participation batch process to create a potential or active life event from the manual life event.

You can void potential life events that the system detects in error. Invalid potential life events may be created if your life event definitions do not fully account for situations where the system detects multiple life events.

What-if Eligibility (Advanced Benefits)

You can model eligibility for benefits based on proposed changes to a person's HR record. When you model eligibility, changes are not saved to the database, so you can view different eligibility scenarios without having to manually rollback data.

For example, you can inform an employee of the benefits impact of a re-location or a change in weekly hours worked. You can view eligibility, electable choices, and a plan or option's enrollment rate.

When you model eligibility, the system ignores current life events that are in progress for a given person. What-if eligibility is based only on the data changes you elect to model.

Prerequisites

- Define the life events for your benefits program and link one or more person changes to each life event

  Note: You cannot model eligibility for scheduled life events.

When you define a person change for a life event, you enter a What-if Label that appears as the field label for the data changes you can model.

Runtime Parameters for the Participation Batch Process (Advanced Benefits)

You select runtime parameters to limit the persons and compensation objects that the system processes when determining eligibility, electable choices, and enrollment information. The parameters that the system displays for selection depend on the mode you select for your batch run. Effective date, derived factor, and validate are required parameters. Some parameters contain default values that you can override if necessary.

Note: A person or compensation object must meet all of the criteria, based on the parameters you select, in order to be included in the batch process run result.

Note: The Participation batch process only processes compensation objects with an active status.

An alphabetical listing of all possible runtime parameters follows.

Benefits Group Select a Benefits Group to specify that the system process persons assigned to this Benefits Group.

Comp Object Select Rule Select a formula to limit the compensation objects that are processed in the batch run.

Derived Factors This parameter is required. Select Yes (default) to instruct the system to calculate derived factors (such as age and length of service) in order to determine participation eligibility and activity rates for a compensation object.

Select No if you do not use derived factors to determine participation eligibility or activity rates for the compensation objects you are processing in this batch run.

Effective Date This parameter is required. Enter the date to use for the Participation process. It is used for determining eligibility, electability, and as a reference point for determining other dates such as start and stop dates for enrollment/coverage and rates.

If you select a mode of Life Event, the Effective Date refers to the date the life event occurs.

If you select a mode of Scheduled or Selection, the Effective Date refers to when this person's elections take effect, such as 1 Jan 2000.

Eligibility Profile This parameter is only used for the Selection mode. Select an Eligibility Profile to specify that the system process all persons for all active compensation objects that use the selected eligibility profile.

Enrollment Start Date This parameter is only used for the Scheduled mode. Enter the enrollment start date to specify that the system process only persons with this enrollment start date.

Legal Entity Select a Legal Entity (GRE) to specify that the system process all active employees (and their related persons) whose primary assignment is to the Legal Entity (US only).

Life Event This parameter is only used for the Life Event mode and Temporal mode. Select a Life Event to specify that the system process persons experiencing this Life Event.

Life Event Occurred on Date This parameter is only used for the Scheduled mode. Enter the life event occurred on date to specify that the system process only persons experiencing a life event that occurred on this date.

LocationSelect a Location to specify that the system process all employees (and their related persons) assigned to that Location.

Only Programs Select Yes to specify that the system process all persons for all programs.

Plans Not in Programs The system does not determine eligibility, electable choices, or enrollment information for any plans in programs or options in plans.

Select Yes to specify that the system process all persons for all not in program plans.

Option Name This parameter is only used for the Selection mode. Select the name of the option whose participants and eligible persons the system processes during this batch run.

OrganizationSelect an Organization to specify that the system process all employees (and their related persons) whose primary assignment is to the Organization.

PayrollSelect a Payroll to specify that the system process employees (and their related persons) whose primary assignment is to this Payroll.

Person Name Select one person for processing.

Person Selection Rule Select a FastFormula rule designed to limit which persons are processed by the batch run. The Person Selection Rule and the Person Name parameters are mutually exclusive.

Person Type Select one person type for processing.

Plan Name Select the name of the plan whose participants and eligible persons the system processes during this batch run.

Plan Type Select the Plan Type whose participants and eligible persons the system processes during this batch run. This includes all active plans and options in plan of the selected plan type.

Postal Zip Range Select a Postal Zip Range to specify that the system process employees (and their related persons) whose primary assignment is located within or is equal to this postal or zip code (US) range.

Program Name Select one program for processing. The system processes all participants and eligible person for the specified program, plans in that program, and options in plan in that program.

Reporting Group Select a Reporting Group to specify that the system process all persons for all active programs and plans associated with this Reporting Group.

Validate This parameter is required. Selecting a value of Rollback lets you view the results of this batch run but prevents the system from making any changes to database data.

Running the Participation batch process first with a Validate value of Rollback is a good idea. After the batch run is processed, you can view the results in the log. When you are satisfied with the results, rerun the batch process using a Validate value of Commit.

Variable Rate Profile This parameter is only used for the Selection mode. Select a

Variable Rate Profile to specify that the system process all persons for all active compensation objects that use the selected variable rate profile.

Defining Batch Process Parameters (Advanced Benefits)

You use the Batch Process Parameters window to set the parameters for a batch process *before* you run the process. Based on your processing needs, you can define the number of processing threads, the chunk size, and the maximum number of errors allowed in a batch run.

To define parameters for a batch process:

1. Select the batch process for which you are defining parameters in the Name field.
2. Enter the number of Threads to use for this process.
3. Enter the number of persons who can be processed per thread in the Chunk Size field.
4. Enter the maximum number of errors to allow per thread in the Max Errors field.
5. Save your work.

Running the Participation Batch Process (Advanced Benefits)

You run the Participation Batch Process from the Submit Requests window. Select runtime parameters as needed. The parameters of effective date, derived factor, and validate are required each time you run the process.

To run the Participation batch process:

1. Check the Single Request field.
2. Select a Participation batch process in the Request Name field. Choose one of the following:
   - Participation Process: Selection
   - Participation Process: Scheduled
   - Participation Process: Life Event

   See: Modes of the Participation Batch Process, page 6-35
3. Select one or more runtime parameters in the resulting Parameters window to limit the group of persons the system will process during this batch run.

See: Runtime Parameters for the Participation Batch Process, page 6-45

Important: If you select more than one runtime parameter for a batch run, the system only returns persons who satisfy **all** the criteria you specify.

4. Choose the Submit Request button to submit this batch run for system processing.

Monitoring Batch Processes (Advanced Benefits)

You use the Monitor Batch Process window to view information about a batch process that you have started, including the percentage of completion of that process.

To monitor a batch process:

- Query the process you want to view by its request ID.

  The system displays the:

  - Request ID
  - Batch Process name
  - process Status
  - % Complete

Setting Up a Role Based on a Life Event Type

You can restrict the display of participant life events based on the role of an HR professional in your enterprise. Choose from the following windows that enable this restriction:

- Person Life Events
- View Enrollment Results
- Enrollment Override

For example, you can restrict employees in your Benefits department from viewing enrollment results related to compensation. Similarly, you can ensure that a Compensation Administrator sees only compensation-related life events.

1. Navigate to the Information Types Security window.
2. Select the Information Type of BEN_LER_TYP_CD and attach the type to the

required Responsibility.

3. Save your work and close the Information Types Security window.
4. Navigate to the Roles window.
5. Create a new Role and select a Role Type.
6. Choose the Extra Information tab.
7. Select a Life Event Type based on the kind of life events you want to display to this user. You can have multiple types for the same user.

   Choose one or more:

   - Benefits
   - Compensation (for Compensation Workbench)
   - Absence (UK only)
   - Grade Step Progression

     Note: Selecting **Benefits** restricts the view to life events you define with a type of Work, Personal, or Unrestricted or to any of the seeded life events for Advanced Benefits.

8. For each type, indicate if the person has Read/Write access.

   Employees with Write access can void and back out life events.
9. Choose the Users tab.
10. Select the person to whom you are assigning this role.

    If you do not define a role for a user with specific life event types, the user can access all the life event types with no restrictions.

Running the Life Events Summary Report

Run the Life Events Summary Report to analyze life events that occur to your compensation and benefits participants.

The report enables administrators to monitor changes to the employee population. This helps you to:

- Determine the number of participants with detected life events so you can resource for upcoming administrative needs

- Analyze the frequency of a given life event among your employees
- Analyze the status of a life event for participants during a specified period
- Compare the number of events occurring during two periods

The report provides:

- A summary total of the number of potential and active life events that occur within the reporting and comparison periods
- All life events by life event status, life event name, and by the person's assignment location
- Life Events by plan with person details, such as name, Social Security Number, and location, and other life event information such as status, type, and the life event occurred on or notification date

You run reports from the Submit Requests window.

To run the Life Events Summary Report:

1. Select Life Events Summary Report in the Name field.
2. In the Parameters window, select the Report Module. Choose from:
   - Summary Totals
   - Life Events by Plan with Person Details
   - All Modules
3. Enter the Report Run Date.
4. Select other criteria to limit the results of the report to a specific person:
   - Person Name, National Identifier
5. Enter the Reporting Period Start Date and the Reporting Period End Date to limit the report to this period.
6. You can also select other criteria to limit the results of the report:
   - Comparison Period Start Date, Comparison Period End Date

     Note: If you specify one of these dates, you must also specify the other.

- Location
- Assignment Type
- Organization
- Reporting Group: limits the report to all plans attached to the selected reporting group.
- Benefit Group
- Plan: limits the report to the selected plan.

  Note: You cannot process the report if you select a plan that is not attached to the selected reporting group.

- Life Event
- Life Event Type

7. Select the Sort Order:
   - Sort Order 1: The default value is Person Name
   - Sort Order 2: The default value is Life Event Status
   - Sort Order 3: The default value is Life Event Name
   - Sort Order 4: The default value is Life Event Occurred Date
8. The default value for Display Flexfields is No. Select Yes to report on information contained in the flexfields.
9. Choose OK.
10. In the Submit Request window, verify the parameters you selected, set the schedule and the options for running the report.
11. Choose the Submit button.

Running the Participation Audit Activity Purge Process (Advanced Benefits)

The Participation Audit Activity Purge process purges data that accumulates in the audit tables when you run the Participation batch process--or any Advanced Benefits

process which creates an audit log-- with the audit log turned on.

You run reports from the Submit Requests window.

See: Purging Batch Related Tables, page 6-37

To run the Participant Audit Activity Purge Process:

1. Select the Participation Audit Activity Purge process in the Name field.
2. Enter the Parameters field to open the Parameters window.
3. Do *one* of the following:
   - Enter a Concurrent Request ID to purge the audit logs associated with a single batch process.

   Or

   - Select a Business Group to purge all the audit logs for the business group on a date you specify, then
   - Enter the Effective Date for which you want to purge all audit logs for the Business Group.
4. Choose the OK button.
5. Complete the batch process request and choose Submit.

Purging Person Data for Backed-Out and Voided Life Events

With the exception of unrestricted life events, you can back out or void any type of life event for a person. You should periodically purge this backed-out and voided data to reduce the volume of person data stored in your database.

You can purge person data related to backed-out and voided life events for Advanced Benefits and Compensation Workbench plans. The purge process removes a variety of data such as enrollment rates, premium results, and electable choice information.

You run processes from the Submit Requests window.

To purge person data for backed-out and voided life events:

1. Select Purge Backed-out Or Voided Life Events in the Name field.
2. Enter the Effective Date of the process.
3. Select the Life Event for which you want to purge backed-out or voided person data.

Or, select a Life Event Type to purge all backed-out or voided instances of that life event type.

4. Enter a From and To Occurred Date to limit the purge to events that occurred within that date range.

5. You can select from a variety of parameters that limit the purge to a specific group of persons:

   - Person Name
   - Person Selection Rule
   - Organization
   - Location
   - Benefits Group
   - Legal Entity
   - Payroll

6. Select a Backed Out Status of Voided or Backed Out.

   If you select Backed Out, the process purges data related to both backed-out and voided life events.

7. Select Yes in the Audit Log field to generate a results log for this process that indicates the number of rows deleted.

8. Select Yes in the Delete Life Events field to remove potential life events with a status of Voided.

   Selecting Yes does not remove potential life events with a status of Unprocessed.

9. Click OK.

10. Complete the batch process request and click Submit.

    The purge process deletes data from the tables listed below. To improve system performance, a database administrator should optimize these tables through sizing, indexing, and standard performance tuning after purging data.

    Ben_elig_per_f

    Ben_elig_per_opt_f

    Ben_enrt_rt

    Ben_enrt_prem

Ben_enrt_bnft

ben_elctbl_chc_ctfn

ben_elig_per_elctbl_chc

ben_pil_elctbl_chc_popl

ben_elig_dpnt

ben_prtt_rt_val

ben_prtt_enrt_actn_f

ben_prtt_prem_f

ben_prtt_enrt_ctfn_prvdd_f

ben_elig_cvrd_dpnt_f

ben_prtt_enrt_rslt_f

ben_pl_bnf_f

Viewing a Person's Participation Information (Advanced Benefits)

You use the View Participation Information window to display information that the Participation batch process generates for a person.

> **Important:** In order to ensure that the information you display for a person is current, you must first run the Participation batch process for that person.

To display participation information for a person:

1. Query a person whose participation information you want to view.

   The system displays the hierarchy of compensation objects for which this person is eligible or ineligible and the participation start and end dates.

   See: Navigating the Program Structure Hierarchy, page 1-94

2. Choose the Info Online button from the toolbar--available if you license the third party product Authoria HR--to display a context-sensitive list of pages in the Authoria HR repository.

Viewing a Person's Life Event Information

You use the Person Life Events window to date effectively view information about a life event that occurs to a person. Although a person can have more than one *potential* life event at a time, the system only displays information about the *active* life event.

To view a person's life events:

1. Find the person for whom you are viewing life event information.

   The system displays a list of current potential life events for this person with the status and date of occurrence of each life event.

   Event is the name of the life event experienced by this person as of the effective date.

   Status indicates the degree to which the system has processed this life event.

   Detected: The Participation batch process has detected the change in data as a potential life event.

   Processed: The Participation batch process has determined whether this potential life event is an actual life event.

   Unprocessed: You have created this life event manually. (The next time you run the Participation batch process, this process will change its status to Detected.)

   Voided: You have specified that this potential life event is not an actual life event.

   > **Important:** Only the Participation batch process can set the status of a potential life event to Detected or Processed. You can manually set the status of a potential life event to Unprocessed or Voided; the system cannot set the status to Unprocessed or Voided.

   *Life Event Occurred On Date*indicates the date the potential life event occurred.

2. Check the Show Backed Out Events check box to view life events with a status of Backed-Out.

3. Select a life event and do one of the following:

   - Choose the Enrollment Opportunities button to view enrollment information based on this life event, such as the enrollment period start and end dates.

   - Choose the Close Event button to prevent any further processing of the life event.

   - Choose the Back Out Event button to roll back any updates generated by the Participation Process (such as updates to eligibility, rates, automatic de-enrollments, and so on)

     You can only back out the latest life event.

   - If the life event is related to an absence, choose the View Absence Details button to see the absence record.

4. Choose the Info Online button from the toolbar--available if you license the third party product Authoria HR--to display a context-sensitive list of pages in the Authoria HR repository.

Viewing Electable Choices for a Person Based on a Life Event (Advanced Benefits)

You use the Display Enrollment Information window to view any electable choices a person has based on an active life event.

You navigate to this window by querying a person's record in the View Person Life Event Information window and then choosing the Enrollment Opportunities button.

To view a person's electable choices based on a life event:

1. Select a program or plan from the list of electable choices.

   The system displays information about the program or plan.

   Status indicates the status of the program or plan.

   UOM is the unit of measure in which the benefit is expressed.

   Enrollment Period Start Date is the date on which this person can enroll in this program or plan.

   Enrollment Period End Date is the last date on which this person can enroll in this program or plan.

   Default Enrollment Date is the date on which this person is enrolled in this program or plan if they fail to make an election.

   Enrollment Type Cycle indicates the type of enrollment cycle (open, unrestricted, administrative, or life event) that resulted in the electable choice for this person and this program or plan.

   Election Made Date is the date this person elected this benefit.

   Processing End Date identifies the latest date on which the plan sponsor can apply elections for this enrollment period.

   Close Enrollment Date to Use is the date on which enrollments are considered closed for this program or plan.

   Activity Reference Period identifies the time period in which activity rates are expressed.

   Default Assigned Date identifies the date on which this program or plan was assigned as the default if the person failed to make an election.

   Automatically Assigned Date is the date on which this program or plan was automatically assigned to this person.

Manually Creating a Potential Life Event for a Person (Advanced Benefits)

When the system fails to detect a change to a person's record as a potential life event, you can use the Person Life Event window to create that potential life event manually.

After you create a potential life event for a person, you run the Participation batch process to determine eligibility and electable choices based on the life event.

To manually create a potential life event for a person:

1. Query the name of the person for whom you are manually creating a potential life event.

   The list of current potential life events for this person is displayed.

2. Create a new row in the Potential Life Events block.

3. Select the nameof this potential life event in the Life Event field.

4. Select a Statusof Unprocessed to indicate that this potential life event has been created manually.

5. Enter the Occurred Dateto indicate the date the potential life event occurred.

6. Save your work.

Manually Voiding a Potential Life Event for a Person (Advanced Benefits)

When the system improperly identifies a data change as a potential life event, you can manually void that potential life event using the Person Life Event window.

To manually void a potential life event for a person:

1. Query the name of the person for whom you are manually voiding a potential life event.

   The list of current potential life events for this person is displayed.

2. Select the potential life event.

3. Select a Statusof Voided to indicate that this potential life event has been manually voided.

4. Save your work.

Re-opening a Processed Life Event for a Person (Advanced Benefits)

You can use the Person Life Events window to re-open the most recently processed life event for a person by changing the life event status from *Processed* to *Started*.

After you re-open a person's life event, you can make election changes, dependent designation changes, or changes to the participant's enrollment window. Use this feature when you do not want to back-out and re-process life events or override enrollments.

Re-opening a person's life event does not cause the application to re-evaluate eligibility or electability. However, if the initial processing of the person's life event caused an eligibility loss to one or more COBRA qualified beneficiaries, re-opening the life event forces the application to re-evaluate eligibility for COBRA qualified beneficiaries.

The application does not re-calculate activity rates--other than those rates you or the participant enter during enrollment--when you re-open a processed life event.

> **Note:** You cannot re-open a life event when a future-dated life event exists with a status of Started or Processed.

To re-open a processed life event for a person:

1. Query the name of the person for whom you are re-opening a processed life event.
2. Choose the Life Events tab.
3. Select the person's most recent life event.
4. If the application allows you to re-open this life event, the Close Event button changes to read *Re-open*.
5. Choose the Re-open button.

   Verify that the application changed the life event status from Processed to Started.
6. Save your work.

   You can now navigate to the appropriate enrollment window and re-process elections for the person as necessary.

Setting Up What-if Modeling

To set up What-if Modeling, you need to do the following:

1. In the Person Change window, add the What-if label to person data changes. You must do this for data changes to display in Self-Service Benefits What-if.

See: Defining Person Changes, page 5-52

2. Attach the Benefit Compensation Objects EIT to the Responsibility. Your EIT setup determines the compensation objects you want to include or exclude from the compensation object hierarchy.

   See: Setting Up Extra Information Types Against a Responsibility, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

3. Define Roles from the Maintain Roles window. This is optional, and you can configure this if you want to restrict which plans display based on the role of the self-service user.

   See: Associating Transaction Workflow Roles to Users, *Oracle HRMS Configuring, Reporting, and System Administration Guide*

4. Save your work.

Modeling a Person's Benefits Eligibility (Advanced Benefits)

You use the Determine What-If Eligibility/Ineligibility Participation window to model the impact of an HR change to a person's eligibility and electability for benefits.

> **Note:** The system automatically rolls back the proposed data changes and eligibility results when you clear or exit the window.

To model a person's benefits eligibility:

1. Query the Name of the person for whom you want to model benefits eligibility.

   > **Note:** The person's current eligibility and electability for benefits is displayed in the Eligibility and Electability tabbed regions.

2. Choose the Data Changes tabbed region.

3. Enter the data change or changes for which you want to model eligibility by clicking into the appropriate field and entering or selecting a value.

   > **Note:** The available data change fields are limited to the data changes associated with your life event definitions and to derived factors such as salary and hours worked.

4. Enter the Effective Date of the proposed data changes.

5. Choose the Process Events button to determine eligibility and electability for benefits.

   The system displays the hierarchical structure of compensation objects for which the person is eligible based on the data changes you selected.

6. Choose the Eligibility or Electability tabbed region to view the results of the eligibility modeling.

7. You can view rate information for a plan or option by highlighting the rate in the Eligibility or Electability tabbed region and choosing the traffic light button.

Enrollment Management

Enrollment Management

Enrollment management is the process of registering your employees and other eligible participants in benefit plans and options. It includes recording contribution rates and coverage amounts and entering the dependents and beneficiaries of the primary participant into the system.

Enrollments commonly occur when a benefits specialist enters a participant's elections into the HR system. However, for Advanced Benefits users, enrollments can also include **default enrollments** for persons who do not specify elections during an enrollment period and **automatic enrollments** which are typically used to enter newly hired employees into interim coverage until they can make their own elections.

Because enrolling employees in benefits programs can be a labor intensive process for an organization with many employees, the product enables self-service enrollments using web enrollment forms and interactive voice response technology (IVR).

Enrollment eligibility and electable benefit choices are based on the eligibility profiles and enrollment requirements that you associate with a benefit.

You can override eligibility results if you are an Advanced Benefits customer. You can grant an exception so that an ineligible person can enroll in a plan or option for which they are otherwise ineligible. Conversely, you can waive a person's participation in a plan for which they have met the eligibility criteria.

Enrollment Forms

The system is delivered with four enrollment forms:

- Flex Enrollment (Advanced Benefits)
- Non-Flex Enrollment
- Savings Plan Enrollment
- Miscellaneous Plan Enrollment

You use the Flex enrollment form to enroll participants in flexible benefits programs and vacation buy/sell programs.

You use the Non-Flex enrollment form if you are implementing a benefits program that does not use flex credits.

You use the Savings Plan form to enroll a participant in an investment plan.

You use the Miscellaneous Plan form to enroll participants in plans that are not part of a

program.

Flex Program Enrollment (Advanced Benefits)

You manage open enrollment and life event enrollment for a flex program or a flex plus core program using the Flex Enrollment form.

You use the form to enter an eligible person's elections, contribution rates, and coverage levels. As elections are entered, the system calculates the eligible person's spent and unspent flex credits.

From the Flex Enrollment window you can taskflow to windows that enable you to:

- View the flex credits an eligible person can spend
- Distribute excess flex credits, as allowed by your flex program definition
- Record receipt of certifications required for enrollment in the program
- Record completed enrollment action items
- Enter plan dependents and beneficiaries
- Record a participant's primary care provider

Non-Flex Program Enrollment

You use the Non-Flex Enrollment form to enroll participants in plans and options that are not funded by flex credits. This is the enrollment form you use if you have not purchased the Advanced Benefits product license, or if you are an Advanced Benefits customer who maintains benefit programs that are not funded by flex credits.

You use the form to enter an eligible person's elections, contribution rates, and coverage levels. From the Non-Flex Enrollment window you can taskflow to windows that enable you to:

- Record completed enrollment action items (Advanced Benefits)
- Record receipt of certifications required for enrollment in the program (Advanced Benefits)
- Enter plan dependents and beneficiaries
- Record a participant's primary care provider

Savings Plan Enrollment

You use the Savings Plan Enrollment form to record a person's contribution rate and their investment option elections for a savings plan.

From the Savings Plan Enrollment form you can taskflow to windows that enable you to:

- Record completed action items (Advanced Benefits)
- Record receipt of certifications required for enrollment in the program (Advanced Benefits)
- Enter plan dependents and beneficiaries

Important: The product does not accommodate 401(k) balance transfers from other benefits systems for employees who are rolling over 401(k) balances from a previous employer.

Miscellaneous Plan Enrollment

You use the Miscellaneous Plan Enrollment form to enroll a participant in a plan that is not part of a program and is not a savings plan. Miscellaneous plans do not provide flex credits to participants.

You use the form to enter an eligible person's elections, contribution rates, and coverage levels. From the Miscellaneous Enrollment form you can taskflow to windows that enable you to:

- Record completed action items (Advanced Benefits)
- Record receipt of certifications required for enrollment in the program (Advanced Benefits)
- Enter plan dependents and beneficiaries
- Record a participant's primary care provider

Special Plan Rates

Note: The special plan rates feature is reserved for future use.

Special contribution rates are sometimes offered by a benefits carrier for the joint election of two plans. When a participant elects a plan that is defined as part of a special rate pair, they receive a discounted rate on the second plan.

You use the Special Rates form to view any special rates offered for the plans in a Flex program, Non-Flex program, or for a miscellaneous (not in program) plan.

Action Items and Certifications (Advanced Benefits)

As part of enrolling a participant in a benefit, you can view the action items that must be completed before the enrollment is valid.

From the Person Enrollment Action Items form, you can navigate to the following forms to enter changes to the record of a participant, dependent, or beneficiary in order to complete the action item.

- Person Enrollment Certification
- Dependent/Beneficiary Designation
- People

You define required action items as part of your plan design.

Action Items and Subsequent Life Events

If you process a **subsequent life event** for a participant with an open action item, how the application processes the suspended election and any interim coverage for the participant depends on a variety of factors. The scenarios below outline how the application processes action items under different conditions.

- **Scenario 1**: If you process a subsequent life event with an occurred on date that is before the action item due date of the original event, the application retains the action item, certification, interim coverage, and suspended enrollment for the original election. If the subsequent life event occurred on date is after the action item due date, you close the action item by running the Close Unresolved Action Item Process. The application assigns the interim election to the employee as the actual election and deletes the suspended election.

- **Scenario 2**: If you process a subsequent life event before the action item due date, the application creates a new action item. Suspended elections and interim coverage carry forward, and you can complete the action item when you receive the required certification. If you want to close the action item prior to processing the subsequent life event, you must back out the life event; however, if the action item completion date is on or after the subsequent life event, you do not need to back out the life event.

- **Scenario 3:** For a subsequent life event, the participant is eligible for a plan but has no electable choices. In this case, the application does not end date the action item from the original life event. Suspended enrollments and interim coverage carry forward to the subsequent event. The application creates a new action item that corresponds to the new enrollment results created for suspended elections and interim coverage.

- **Scenario 4**: If the participant makes an election change based on a subsequent life

event, the application retains the action item and suspended election for the original life event. If necessary, the application creates a new action item with a new due date for the new enrollment based on the subsequent life event.

Dependents and Beneficiaries

As part of enrollment processing, you record the persons selected by a participant as dependents or beneficiaries of a plan or option. The system displays eligible designees for participants with enrollments in progress.

Because you can limit the relationship type of the dependents who are eligible to receive coverage under a benefit plan, the system displays only those dependents eligible for coverage. For example, if a participant elects employee plus spouse coverage, the system only displays dependents of the spouse relationship type.

You use the Dependent/Beneficiary Designation form to:

- Enter and modify dependent or beneficiary designation information
- Assign a benefit to a beneficiary as a percentage or an amount
- Monitor certification requirements (Advanced Benefits)

Participants can designate dependents at the plan or option level; beneficiaries are designated at the plan level.

Primary Care Providers

You can record in the system the physician or dentist that a participant elects to be their primary care provider. Providers are categorized by their service provider type, such as General Practitioner, Dentist, or Ob/Gyn. The system provides these and other service provider types and your system administrator can extend this list as part of your implementation.

> **Note:** A person can have only one primary care provider of each provider type within the a plan.

Enrollment Results

After you enroll a participant in a benefit, you can display the enrollment results for that person.

Enrollment information is date effectively displayed so that you can view historical or future-dated information. You can display enrollment results that are created by one of the following means:

- An electable choice is saved on an enrollment form

- A default or automatic enrollment is processed
- The close enrollment process has completed

Participation Overrides (Advanced Benefits)

The ability to override eligibility results is a requirement for enterprises with a high need for flexible benefits administration. Grand-fathered coverage, special employment terms, or required adjustments for highly compensated employees are all typical reasons for overriding eligibility results.

You use the Person Participation Information window to override eligibility results for a person for one or more plans *after* you run the Participation process to determine eligibility and electable choices. You then enroll the person using the Enrollment Override window.

You also use the Person Participation Information window to record an election for a person who was not processed in the Participation batch process.

You use the Enrollment Override window to enroll a person in a plan or option for which they have been found ineligible. You can also use this window to override rate and coverage amounts for a plan or an option and to override dependent eligibility results.

Waive Participation Management

You can allow an eligible person to waive participation in a plan type or plan in one of two ways. You can enroll the person in a special plan called a *waive plan,* or, if you are an Advanced Benefits customer, you can use the Waive Participation form to specify which plan types or plans a person is waiving.

You typically define a waive plan when you want the waive plan to appear to the participant as an electable choice.

When you waive a person's participation in a plan type, the person waives the ability to enroll in all plans in that plan type. You cannot override a plan type waiver for any plans in that plan type.

Retroactive Enrollments

A variety of common business practices dictate that enrollment coverage may start retroactive to the current system date. These examples include:

- Enrollments based on retroactive life events, including enrollments that replace existing coverage
- Enrollment coverage and activity rates that start based on the life event occurred date as opposed to the life event notification date

- Suspended coverage that becomes unsuspended when interim coverage had been assigned

  Note: SSHR users: Suspended plan rates are not included in displayed used amounts, and so are not deducted from Flex credits.

- Participant election changes within an enrollment period
- Participant elections that replace automatically assigned coverage
- Administrative changes to current enrollments

You define enrollment coverage start dates and activity rate start dates for a compensation object as part of your plan design. Because coverage can start based on a date prior to an election, there is the potential for activity rates to also start *before* the election is recorded.

If a payroll run occurs between the activity rate start date and the election date, the activity rate will not be processed in the payroll run. Since the election had not yet occurred, the activity rate did not exist for the payroll run.

In this scenario, and in other cases where activity rates start before an election is recorded in the system, you may need to create *payroll adjustments* to deduct payments if your organization requires retroactive benefits payments.

For retroactive enrollments that replace a previous enrollment, the system end-dates the previous enrollment based on the coverage and rate end dates defined for the compensation object. You should define your enrollment coverage and rate start and end dates such that overlapping dates do not occur.

Court Orders

You can use the product to record court orders that require a participant to provide coverage for a dependent or that place restrictions on how a benefit payment can be distributed.

In the US, regulations termed *Qualified Medical Child Support Orders* (QMCSO) require a participant to cover a dependent when the participant is eligible for a plan and a court order has been issued.

A *Qualified Domestic Relations Order* (QDRO) is a judgement, decree, or order that relates to the provision of child support, alimony payment, or marital property rights to a spouse, child, or other dependent of a participant.

You can use the product to:

- Record those persons subject to a Qualified Medical Child Support Order or a Qualified Domestic Relations Order

- Specify the benefit plan or plan type that is subject to the provisions of the court order
- Enter the names of the claimants eligible to receive benefit coverages based on the court order
- For QDROs, enter the benefit amount or benefit percentage due to each applicable claimant or designee

During enrollment, the system issues a warning message indicating that a participant is subject to a court order. This warning does not prevent the election because the participant may have covered the dependent outside of the employer's plan.

You define enrollment requirements and restrictions for QMCSOs and QDROs as part of your plan design.

Enrolling a Person in a Flex Program (Advanced Benefits)

You use the Flex Program window to enroll an eligible participant in a flex program. Completing an enrollment involves:

- Selecting the plan and option in which the person is enrolling
- Entering coverage levels for those plans that provide coverage
- Entering the contribution value per activity period for those plans that allow a participant to choose their contribution amount
- Entering the annual contribution amount for those plans that allow a participant to specify the annual contribution to a plan
- Saving the person's election
- Completing dependent and beneficiary designations

> **Important:** Before you use this window, you must run the Participation batch process to 1) ensure that the list of eligible persons for this enrollment cycle is up-to-date, and 2) create available enrollment choices for those persons.

To enroll a person in a flex program:

1. Set the effective date.
2. Query the Name, Social Security number, or other standard identifying information for the person you are enrolling.

3. Select the Program in which the person is enrolling.

   Important: If you take no enrollment action, the participant will be enrolled in the plans and options that are currently displayed.

4. Tab into a blank Plan Type field and select the Plan Type that contains the plan and option that the person is electing.

5. Select the person's election in the Plan and Option field.

6. Choose the Info Online button from the toolbar--available if you license the third party product Authoria HR--to display a context-sensitive list of pages in the Authoria HR repository.

7. Complete the election by entering participant values, where appropriate, in the tabbed regions of the enrollment window.

8. Choose the Recalculate button to update the standard rate or coverage amount based on election information you entered.

   You only need to recalculate a rate if your system administrator defined a Post Enrollment Calculation rule for the standard rate or coverage calculation.

9. Save this person's elections when you have completed the enrollment.

Flex Credit Summary:

Based on the participant's current elections, the system displays a flex credit summary for the currently selected plan type.

Provided: The total flex credits provided for the plan type

Less Used: The amount of flex credits spent on the plans and options in this plan type. Typically this is the pre-tax amount.

Excess: The amount of flex credits left unspent.

Forfeited: The amount of flex credits that will be forfeited if they are not spent.

Other: The cash amount spent that does not decrement a benefits pool; this amount typically reflects the amount of after-tax cash spent on a benefit.

Net: The sum of pre-tax and after-tax contributions.

General Tab:

1. Choose the General tab. The system displays the following view-only information:
   - The Coverage Start and End date for this plan or option

- The Start Code used to calculate the coverage start date
- The Original Start date that this person enrolled in this plan
- The effective date of the enrollment

> **Note:** The Enrolled field appears checked if a person is currently enrolled in this plan or option.

Amount Tab:

1. Choose the Amount tab.
   - The tax type of this activity rate appears in the Taxability field.
2. Enter the annual coverage amount that can be elected for this plan or option in the Annual Amount field.

   Use this field if the participant can elect an annual amount to contribute to a plan. The system displays the minimum and maximum annual contribution amounts based on your plan definition.
3. Enter the Defined Amount of the contribution or distribution, if applicable. The system displays the following view-only information:
   - The Increment by which a contribution or distribution can be increased or decreased.
   - The Minimum and Maximum contribution or distribution amount.

> **Note:** The fields in the Communicated block indicate the communicated activity rate for this contribution or distribution if this rate is different than the actual amount that is used for element entries.

Rate Tab:

1. Choose the Rate tab. The system displays the following view-only information:
   - The activity rate Start and End date and the unit of measure in which the rate is expressed
   - A checkbox indicating if the activity rate has been overriden for this plan or option and the date through which the rate is overriden

Benefit Tab:

1. Choose the Benefit tab.

2. Enter the benefit Amount if the participant can choose the amount they contribute to this plan or option.

   The remainder of the fields in the Benefit tabbed region contain view-only information:

   - The Type field displays the tax type of this benefit.

   - The Calculation field displays the calculation method used to derive the activity rate for this benefit.

   - The Minimum and Maximum fields display this plan or option's coverage limits for this participant.

   - The Increment field displays the increments in which coverage can be increased or decreased.

Limitation Tab:

1. Select the Limitation tab. The system displays the following view-only information:

   - The Certification Alert field appears checked if the participant is required to provide certification before being enrolled in this benefit.

   - The Suspended field appears checked if enrollment in this benefit has been suspended pending the completion of an action item, such as providing required certification.

   - The Interim field appears checked if this plan or option has been assigned to the participant as interim coverage pending the completion of an action item.

   - The Automatic field appears checked if the participant has been automatically enrolled in this plan or option.

   - The Dependents field indicates if dependents are required or optional for this plan.

   - The Earliest De-enroll field indicates the earliest date on which a participant can de-enroll from this plan or option.

   - The Must Also Enroll In field displays any plan or option in which a participant must be enrolled in order to make this election.

Note: This field is reserved for future use.

- The Override Through date indicates the date through which the enrollment has been overriden.
- The Override Reason indicates the reason given for the override.

Manually Deleting an Enrollment

You use the same process to manually delete an enrollment regardless of the enrollment form in which you entered the enrollment.

To deenroll newly ineligible participants in batch, Standard Benefits users can run the Maintain Participant Eligibility process; Advanced Benefits users can run the Life Event mode of the Participation Process.

To manually delete an enrollment:

1. Open the form in which you entered the enrollment. Choose from:
   - Flex Program Enrollment form
   - Non-Flex Program Enrollment form
   - Savings Plan Enrollment form
   - Miscellaneous Plan Enrollment form
2. Set the effective date.
3. Query the Name, Social Security number, or other standard identifying information for the person whose enrollment you are deleting.
4. Select the plan and option you are deleting.

   Note: To delete a savings plan enrollment, you delete both the savings plan and any options in which the person is enrolled.

5. Choose the Delete Record icon on the toolbar.
6. Save your work.

Viewing a Person's Flex Credits (Advanced Benefits)

You can view the flex credits available to a participant and the benefit pool that provides the credits.

To view a person's available flex credits:

- Query a participant in the Flex Enrollment window then choose the Flex Credits button. The system displays:
  - The flex credits available for various compensation objects
  - The benefit pool providing the flex credits

    The system also indicates if the flex credits for an option may be forfeited.

Allocating Excess Credits for a Person Enrolling in a Flex Program (Advanced Benefits)

If you allow participants to specify how they allocate their excess flex credits after they have made their elections, you can view this information for a person in the Excess Credits window.

To allocate excess credits:

- Choose the Excess Credits button. The system displays:
  - The benefit pool that provides the flex credits for the plans and options that the participant has elected
  - The plan types, plans, and options that the participant has elected
  - The amount of flex credits provided based on elected plans and options
  - The amount of flex credits used by the participant for each electable plan or option
  - The amount of flex credits to be distributed as cash, if applicable
  - The amount of flex credits to be forfeited if the participant does not elect to use them
  - A check box indicating the credits were rolled over into this plan or option

Enrolling a Person in a Non-Flex Program

You use the Non-Flex Program window to enroll an eligible participant in a program that is not funded by flex credits. Completing an enrollment involves:

- Selecting the plan and option in which the person is enrolling
- Entering coverage levels for those plans that provide coverage
- Entering the contribution value per activity period for those plans that allow a participant to choose their contribution amount
- Entering the annual contribution amount for those plans that allow a participant to specify the annual contribution to a plan
- Saving the person's election
- Completing dependent and beneficiary designations

> **Important:** For Advanced Benefits users, you must run the Participation batch process before you use this window to 1) ensure that the list of eligible persons for this enrollment cycle is up-to-date, and 2) create available enrollment choices for those persons.

> **Important:** If you are using Standard Benefits, electable choices are created when you query the program in the enrollment window for a participant.

To enroll a person in a non-flex program:

1. Set the effective date.
2. Query the Name, Social Security number, or other standard identifying information for the person you are enrolling.
3. Select the Program in which the person is enrolling.

   > **Important:** If you take no enrollment action, the participant will be enrolled in the plans and options that are currently displayed.

4. Tab into a blank Plan Type field and select the Plan Type that contains the plan and option that the person is electing.

5. Select the person's election in the Plan and Option field.

6. Choose the Info Online button from the toolbar--available if you license the third party product Authoria HR--to display a context-sensitive list of pages in the Authoria HR repository.

7. Complete the election by entering participant values, where appropriate, in the tabbed regions of the enrollment window.

8. Choose the Recalculate button to update the standard rate or coverage amount based on election information you entered.

   You only need to recalculate a rate if your system administrator defined a Post Enrollment Calculation rule for the standard rate or coverage calculation.

9. Save this person's elections when you have completed the enrollment.

General Tab:

1. Choose the General tab. The system displays the following view-only information:

   - The Coverage Start and End date for this plan or option
   - The Start Code used to calculate the coverage start date
   - The Original Start date that this person enrolled in this plan
   - The effective date of the enrollment

     Note: The Enrolled field appears checked if a person is currently enrolled in this plan or option.

Amount Tab:

1. Choose the Amount tab.

   - The tax type of this activity rate appears in the Taxability field.

2. Enter the annual coverage amount that can be elected for this plan or option in the Annual Amount field.

   Use this field if the participant can elect an annual amount to contribute to a plan. The system displays the minimum and maximum annual contribution amounts based on your plan definition.

3. Enter the Defined Amount of the contribution or distribution, if applicable. The system displays the following view-only information:

- The Increment by which a contribution or distribution can be increased or decreased.

- The Minimum and Maximum contribution or distribution amount.

  Note: The fields in the Communicated block indicate the communicated activity rate for this contribution or distribution if this rate is different than the actual amount that is used for element entries.

Rate Tab:

1. Choose the Rate tab. The system displays the following view-only information:

   - The activity rate Start and End date and the unit of measure in which the rate is expressed

   - A checkbox indicating if the activity rate has been overriden for this plan or option and the date through which the rate is overriden

Benefit Tab:

1. Choose the Benefit tab.

2. Enter the benefit Amount if the participant can choose the amount they contribute to this plan or option.

   The remainder of the fields in the Benefit tabbed region contain view-only information:

   - The Type field displays the tax type of this benefit.

   - The Calculation field displays the calculation method used to derive the activity rate for this benefit.

   - The Minimum and Maximum fields display this plan or option's coverage limits for this participant.

   - The Increment field displays the increments in which coverage can be increased or decreased.

Limitation Tab:

1. Select the Limitation tab. The system displays the following view-only information:

   - The Certification Alert field appears checked if the participant is required to

provide certification before being enrolled in this benefit.

- The Suspended field appears checked if enrollment in this benefit has been suspended pending the completion of an action item, such as providing required certification.
- The Interim field appears checked if this plan or option has been assigned to the participant as interim coverage pending the completion of an action item.
- The Automatic field appears checked if the participant has been automatically enrolled in this plan or option.
- The Dependents field indicates if dependents are required or optional for this plan.
- The Earliest De-enroll field indicates the earliest date on which a participant can de-enroll from this plan or option.
- The Must Also Enroll In field displays any plan or option in which a participant must be enrolled in order to make this election.

  Note: This field is reserved for future use.

- The Override Through date indicates the date through which the enrollment has been overriden.
- The Override Reason indicates the reason given for the override.

Enrolling a Person in a Savings Plan

You use the Savings Plan window to enroll an eligible participant in a savings plan. Completing an enrollment involves:

- Selecting the plan and option in which the person is enrolling
- Entering the contribution amount or percentage per activity period for those plans that allow a participant to choose their contribution level
- Saving the person's election
- Completing dependent and beneficiary designations

  Important: For Advanced Benefits users, you must run the Participation batch process before you use this window to 1) ensure that the list of

eligible persons for this enrollment cycle is up-to-date, and 2) create available enrollment choices for those persons.

Important: If you are using Standard Benefits, electable choices are created for the participant when you query the participant in the enrollment window.

To enroll a person in a savings plan:

1. Set the effective date.
2. Query the Name, Social Security number, or other standard identifying information for this person.
3. Select the savings plan in which the person is enrolling in the Name field.

   The system displays the following view-only information:

   - The Life Event reason prompting this savings plan enrollment

   In the **Coverage** block the system displays:

   - The Coverage Start and End date for this savings plan
   - The Start Code used to calculate the coverage start date
   - The Original Start date that this person enrolled in this plan

   In the **Override** block the system displays:

   - The date through which a savings plan can be overriden and the reason supporting the override

   The other fields in the Savings Plan window display information about the status of this savings plan.

   Note: The Enrolled field appears checked if a person is currently contributing to this plan.

   - The Automatic field appears checked if the participant has been automatically enrolled in this plan
   - The Suspended field appears checked if enrollment in this plan has been suspended pending the completion of an action item, such as providing required certification

- The Interim field appears checked if this plan has been assigned to the participant as interim coverage pending the completion of an action item
- The Certification Alert field appears checked if the participant is required to provide certification before enrolling in this plan
- The Earliest De-enroll field indicates the earliest date on which a participant can de-enroll from this plan
- The Currency field indicates the currency in which this benefit is paid.
- The Must Also Enroll In field displays any plan in which a participant must be enrolled in order to make this election

  Note: This field is reserved for future use.

4. Choose the Info Online button from the toolbar--available if you license the third party product Authoria HR--to display a context-sensitive list of pages in the Authoria HR repository.

Entering Investment Rates

You use the Rates window to enter the total contribution percentage or amount for a savings plan. You then use the Investment Options window to enter the contribution amount for one or more options in the plan.

> **Note:** As a prerequisite, you must check the Enroll in Plan and Option field in the Plan Enrollment Requirements window when you define the savings plan if a participant can enroll in both the plan and the options in that plan.

1. Query the Name, Social Security number, or other standard identifying information for this person in the Savings Plan window.
2. Select the savings plan in which the person is enrolling in the Name field.
3. Choose the Rates button.

General Tab

4. Choose the General tab. The system displays the following view-only information:
   - The Name of the activity rate definition
   - The Activity Type, for example Employee Contribution or Employer Contribution

- The unit of measure (UOM) for the currency of the activity rate
- The activity rate Start and End dates

Types Tab

5. Choose the Types tab. The system displays:
   - The Tax Type of the activity rate, such as pre-tax or aftertax
   - The Calculation method used to derive the activity rate
6. Check the Stop Contribution field if the employee's participation in this investment plan has ended.

Defined Amount Tab

7. Choose the Defined Amount tab.
8. Enter the Amount or percentage of the contribution or distribution. The system displays the following view-only information:
   - The activity rate Period
   - The Minimum and Maximum contribution or distribution amount
   - The Increment by which a contribution or distribution can be increased or decreased

     Note: The Enter Value at Enrollment field appears checked to indicate that the investment amount is entered during the enrollment, as opposed to being a default amount.

Communicated Amount Tab

Note: The fields in the Communicated Amount tabbed region indicate the communicated activity rate for this contribution or distribution if this rate is different than the actual amount that is used for element entries.

9. Choose the Annual Amount tab.
10. Enter the annual amount or percentage that is contributed to the investment plan in the Amount field.

    Use this field if the participant can elect an annual amount to contribute to a plan. The system displays the minimum and maximum annual contribution amounts

based on your savings plan definition.

11. Save this person's elections.

Entering Investment Options

You use the Investment Options window to enter a participant's elections for a savings plan.

1. Query the Name, Social Security number, or other standard identifying information for this person in the Savings Plan window.
2. Select the savings plan in which the person is enrolling in the Name field.
3. Choose the Investment Options button.

General Tab

4. Choose the General tab.
5. Select a savings plan investment option in the Name field.

   Note: The Enrolled field appears checked if a person is currently contributing to this option.

   The system displays the following view-only information:

   - The Coverage Start and End date for this option
   - The Start Code used to calculate the coverage start date
   - The Original Start date that this person enrolled in this option

Amount Tab

6. Choose the Amount tab.
7. Select a savings plan investment option in the Name field.
8. Check the Stop Contribution field if the employee's participation in this investment option has ended.
9. Enter the annual amount or percentage that is contributed to the investment option in the Amount field.

   Use this field if the participant can elect an annual amount to contribute to an option. The system displays the minimum and maximum annual contribution amounts based on your option definition.

10. Enter the Defined Amount of the contribution or distribution, if applicable. The system displays the following view-only information:

    - The Increment by which a contribution or distribution can be increased or decreased.
    - The Minimum and Maximum contribution or distribution amount.

    Note: The fields in the Communicated block indicate the communicated activity rate for this contribution or distribution if this rate is different than the actual amount that is used for element entries.

Rate Tab

1. Choose the Rate tab. The system displays the following view-only information:

    - The Taxability of this activity rate
    - The activity rate Start and End date and the unit of measure (UOM) in which the rate is expressed
    - A checkbox indicating if the activity rate has been overriden for this option and the date through which the rate is overriden

Enrolling a Person in a Miscellaneous Plan

You use the Miscellaneous Plan window to enroll an eligible participant in a plan that is not associated with a program. Such plans are called **not in program plans**. Miscellaneous plans do not provide flex credits to participants. Completing an enrollment involves:

- Selecting the plan and option in which the person is enrolling
- Entering coverage levels for those plans that provide coverage
- Entering the contribution value per activity period for those plans that allow a participant to choose their contribution amount
- Entering the annual contribution amount for those plans that allow a participant to specify the annual contribution to a plan
- Saving the person's election
- Completing dependent and beneficiary designations

Important: For Advanced Benefits users, you must run the Participation batch process before you use this window to 1) ensure that the list of eligible persons for this enrollment cycle is up-to-date, and 2) create available enrollment choices for those persons.

Important: If you are using Standard Benefits, electable choices are created for the participant when you query the participant in the enrollment window.

To enroll a person in a miscellaneous plan:

1. Set the effective date.
2. In the Find Person window, enter the Name, Employee Number, or Social Security number for the person you are enrolling and choose the Find button.

General Tab

3. Choose the General tab.
4. Select the not in program Plan and Option in which the person is enrolling.

> **Note:** If you take no enrollment action, the participant will be enrolled in the plans and options that are currently displayed.

The system displays the following view-only information:

- The Status of the enrollment
- The Plan Type of the electable plan
- The Life Event reason prompting this enrollment
- The Frequency of the benefit distribution or contribution
- The Certification Required Alert field appears checked if the participant is required to provide certification before being enrolled in this benefit.
- The Pending Approval field appears checked if enrollment in this benefit has been suspended pending the completion of an action item, such as providing required certification.
- The Currency in which this benefit is paid

In the **Benefit/Coverage** region the system displays:

- The Amount of the contribution or distribution and its currency (in the UOM field).
- The Coverage Start and End date for this plan
- The Original Start date that this person enrolled in this plan

5. Choose the Info Online button from the toolbar--available if you license the third party product Authoria HR--to display a context-sensitive list of pages in the Authoria HR repository.

Benefit/Coverage Tab

6. Choose the Benefit/Coverage tab.

   The system displays the following view-only information:

   - The tax Type of this benefit
   - The Calculation Method used to derive the activity rate for this benefit
   - The Start Date Code used to calculate the coverage start date

   In the Amount Limitations region, the system displays:

   - The coverage limits for this participant this plan and option
   - The increments in which coverage can be increased or decrease

Enrollment Tab

7. Select the Enrollment tab. The system displays the following view-only information:

   - The Automatic Enrollment field appears checked if the participant has been automatically enrolled in this plan or option.
   - The Dependents field indicates if dependents are required or optional for this plan.
   - The Must Also Enroll In field displays any plan or option in which a participant must be enrolled in order to make this election.

     Note: This field is reserved for future use.

   - The Earliest De-enroll field indicates the earliest date on which a participant can de-enroll from this plan or option.
   - The Override Through date indicates the date through which the enrollment

has been overriden.

- The Override Reason indicates the reason given for the override.

8. Save this person's elections.

Viewing Special Rates for a Plan or Option

Before enrolling a participant in a flex program, non-flex program, or plan not in program, you can view special rates for which the participant may be eligible if certain plans are elected in conjunction with one another.

For example, you could define a medical plan so that the participant receives a special rate for a dental plan if they elect both plans. You define special rates using the variable rate profiles window.

See: Defining the Criteria in a Variable Rate Profile, page 5-144

To view special rates for a plan or option:

1. Query a participant in the Flex Enrollment, Non-Flex Enrollment, or Miscellaneous Plan Enrollment window depending on the type of plan in which the participant is enrolling.

2. Choose the Special Rates button. The system displays:

   - The plan type, plan, and option that must be elected by the participant to receive the special rate on the related compensation object

   - The related plan type, plan, and option for which a special rate is available

   - The standard rate for the related plan if the selected plan is not elected

   - The special rate for the related plan if the selected plan is elected

Maintaining a Participant's Primary Care Provider

You date effectively enter, update, and delete a person's primary care providers in the Primary Care Providers window.

To select a primary care provider for a person:

1. Query the Person whose primary care provider you are entering.

2. Select the Plan Type and Plan for which you are entering the person's primary care provider.

The available plans are limited to the plans in which the participant or their dependent is currently enrolled.

3. Select a provider in the Identifier, Name, and Type fields.

   If you enter the provider's identifier, the system fills in the Name and Type fields if a provider exists with the same identifier for this plan.

4. If necessary, select providers of a different service provider type in this plan, or select providers for different plans.

5. Save your work.

Displaying Enrollment Results

You use the View Enrollment Results window to display a person's enrollment information. This is a read-only form.

You can display enrollment information after an enrollment result is created by one of these means: an electable choice is saved on an enrollment form, a default enrollment is processed, or the close enrollment process has completed.

Enrollment information is date effectively displayed so that you can also view historical information.

To display enrollment results for a person:

1. Set the effective date to the date for which you want to view enrollment results.

2. Query the person for whom you want to view enrollment results.

   The system displays enrollment information for the compensation objects in which the person is enrolled.

3. Check the View By Coverage Date field to view the person's enrollment information as of their coverage start date.

   - Or, check the View By Session Date to view the person's enrollment information as of the system's effective date.

4. Choose from the available tabbed regions and task flow windows to view enrollment results.

   The system displays the windows that can be accessed from this form in read-only mode.

5. Choose the Info Online button from the toolbar--available if you license the third party product Authoria HR--to display a context-sensitive list of pages in the Authoria HR repository.

Running the Benefits Enrollment and Confirmation Reports

Run the Benefits Enrollment Kit Report to view electable choices for one or more persons. The report also displays enrollment deadlines and indicates any default plans that will be in effect if the person makes no election.

Run the Benefits Confirmation and Summary Report to view enrollment results for one or more benefits participants. The report displays results for participants who are enrolled in:

- Plans in program
- Plans not in program
- Multiple programs

Use the Submit Request window to run either report. You need a postscript viewer to see the results of the report.

To run the benefits enrollment or confirmation report:

1. Select Benefits Reports Wrapper Process in the Name field.
2. Enter the Parameters field to open the parameters window.
3. In the Report Name field, select either the Benefits Enrollment Kit Report or the Benefits Confirmation and Summary Report.
4. Enter the Effective Date of the report.
5. Select from a variety of criteria to limit the results of the report, such as a:
    - Compensation object
    - Life event
    - Type of assignment
    - Coverage start and end date
6. Indicate if you want to report on results such as:
    - Dependents and beneficiaries
    - Action items and certifications
    - Flexfield data

7. Choose the OK button.

8. Complete the batch process request and choose Submit.

Viewing Dependent Information

You use the Dependent/Beneficiary Designation window to view enrollment information for the dependent of a participant, including the following:

- The plan and option in which the dependent is enrolled
- The name of the dependent and their relationship to the participant
- Coverage dates

> **Note:** You can only view dependent information when your effective date is between the dependent coverage start and end date for the compensation object.

To view dependent information:

1. Query the name of the participant for whom you are viewing dependent designations.

2. Choose the View Dependents tab.

3. Highlight a Plan:Option in which the participant is enrolled.

   The system displays the dependents that have been designated for that plan or option.

4. Choose the Designate Dependents tab or the Designate Beneficiaries tab to create a designation.

Maintaining Dependent Designations

Use the Dependent/Beneficiary Designation window to designate a participant's dependents.

The participant must have an open life event to designate a dependent if you are using Advanced Benefits. Standard Benefits customers, or Advanced Benefits customers using the Unrestricted enrollment type, may designate dependents at any time.

> **Note:** As a prerequisite, you must enter the participant's contacts into the system before you can designate a contact as a dependent. Check

the Personal Relationship field for each potential dependent on the Contact window. The dependent must also meet the designation requirements defined for the plan and option and the requirements of any dependent eligibility profiles linked to the compensation object before becoming an eligible dependent.

See: Entering Next of Kin and Other Contacts, *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

To enter or modify a participant's dependent designation:

1. Query the name of the participant for whom you are entering or modifying dependent designations.
2. Select the plan and option for which the participant is designating a dependent in the Plan:Option field.
   - Any eligible dependents for this plan and option are displayed in the Eligible Dependents field.
   - The Employee field appears checked if this dependent is also an employee.
   - The Start and Through dates indicate the dependent coverage start and end dates for this plan.
3. Check the Covered field to indicate that this person is a dependent for this benefit.

   Uncheck the Covered field to undesignate a dependent previously covered by this benefit.
4. Choose the Certifications button to open the Dependent Certifications window.

   The system displays any certifications that must be submitted for this dependent.
5. Enter the Date Received to record receipt of a certification.
6. Save your work.
7. Close the Dependent Certifications window.
8. Choose the Care Providers button to specify a primary care provider for a dependent.

   See: Maintaining a Participant's Primary Care Provider, page 6-86
9. Choose the Contacts button to open the More Contacts window where you can view the dependents who were found ineligible for the selected plan or option.

10. Select a dependent from the list and choose the Designate button to have the system check for this dependent's eligibility.

    If the dependent is found eligible, the dependent will be added to the list of designees in the Eligible Dependents field, the Covered field will appear checked, and the record will automatically be saved.

11. Choose the Contacts button to open the Contact window where you can add a new contact for this primary participant.

Maintaining Beneficiary Designation Information for a Participant

You can designate a person or an organization as a beneficiary for plans that allow or require beneficiary designation using the Dependent/Beneficiary Designation window.

You can designate a beneficiary at any time, even after a life event or enrollment period is closed. However, for Advanced Benefits customers, beneficiary certifications only restrict designations when the participant's life event is open.

Beneficiary designation restrictions are based on your plan design.

See: Maintaining Beneficiary Designation Requirements for a Plan, page 5-106

To enter or modify a participant's beneficiary designation:

1. Query the name of the participant for whom you are entering or modifying beneficiary designations.

2. Choose the Designate Beneficiaries tab.

3. Select a Plan for which you are entering or modifying beneficiary designation information for this participant.

4. Select a beneficiary name in the Beneficiaries field to designate a person or charitable organization as this participant's beneficiary.

5. Select this beneficiary's Type, either Primary or Contingent.

6. If the participant is assigning a percentage of the benefit to the beneficiary, enter the % value of the total value of this benefit.

   While you do not need to need to enter an Amount value, you must enter at least one % value. The sum of all % values for a plan must equal 100%. If you specify a monetary Amount, the system pays this Amount value before it pays out any % values. In such a case, the % values refer to the paid benefit following the deduction of the Amount value.

7. If the participant is assigning a monetary amount from this benefit to this beneficiary, enter this monetary Amount.

8. Choose the Details button to open the Details window if you want to enter trustee information or special instructions regarding this beneficiary designation for this participant for this plan.

9. If appropriate, select a Trustee to oversee the benefits the participant assigns to this beneficiary.

   The trustee is the person you identify for a designated beneficiary who is a minor. During implementation, your system administrator can configure the application to require a participant to identity a trustee for beneficiaries who are minors. You can generate an action item that suspends the election pending the assignment of a trustee.

10. If appropriate, enter Instructions regarding this beneficiary designation.

11. Close the Details window.

12. Choose the Certifications button to open the Beneficiary Certifications window.

    The system displays any certifications that must be submitted for this beneficiary.

13. Enter the Date Received to record receipt of a certification.

14. Save your work.

Adding a New Beneficiary for a Participant

To add a new beneficiary for a participant:

1. From the Dependent/Beneficiary Designation window, choose the Designate Beneficiaries tab then choose the Contacts or Organizations button depending on whether the beneficiary is a person or an organization.

2. Complete the Contacts or Organizations window, as appropriate.

3. Save your work.

See Also:Entering Next of Kin and Other Contacts, *Oracle HRMS Workforce Sourcing, Deployment, and Talent Management Guide*

Creating an Organization, *Oracle HRMS Enterprise and Workforce Management Guide*

Recording Enrollment Actions Items for a Person (Advanced Benefits)

You use the Person Enrollment Action Items window to view and complete enrollment action items that have been created for a person. Action items are based on the enrollment requirements for the compensation objects in which the person is enrolling or de-enrolling. The following action items can be completed using this form:

- Beneficiary address
- Beneficiary date of birth
- Beneficiary social security number
- Beneficiary requires spousal consent certification
- Dependent date of birth
- Dependent social security number
- Enrollment certifications

To complete an action item for a person:

1. Query the Name, Social Security number, or other standard identifying information for this person.
2. Select the action item that the person is requested or required to complete in the Action Items field. The system displays:
   - A description of this action item
   - The compensation object in which the person is enrolling, de-enrolling, or changing elections
   - The life event prompting this enrollment, de-enrollment, or change in elections
   - The Due Date by which the action item is to be completed
   - Whether the action item is Required
3. Use the task flow buttons to navigate to the Certifications, People, or Designee window and complete the missing information, depending on the action item to be completed.
4. Check the Completed field when the action item is complete.

   Note: If the action item is for a missing certification, the Completed field appears checked when you enter the certification received date and save.

5. Select the Show Completed Action Items check box to display all completed and open action items for a person.
6. Save your work. You cannot save in this form unless the action item is complete.

Note: When a required action item is completed, the system unsuspends the participant's election if there are no other incomplete required action items and there is no more than one optional action item left incomplete. If a required action item is not completed, the enrollment is end-dated as of the effective date of the Close Enrollment process if the action is due before the close of enrollment.

For more information on how the application processes action items, see: Action Items and Certifications (Advanced Benefits), page 6-65

Recording Receipt of Enrollment Certifications (Advanced Benefits)

You record the receipt of enrollment certifications for a person using the Person Enrollment Certifications window.

You can also add and delete certifications or mark a received certification as denied.

Note: Use the Dependent/Beneficiary Designation window to record receipt of enrollment certifications for dependents and beneficiaries.

To record receipt of an enrollment certification for a person:

1. In the Find Person window, enter the Name, Employee Number, or Social Security number for this person and choose the Find button.
2. Select the certification type submitted by the participant in the Certifications field. The system displays:
   - The compensation object and life event that generated the certification
   - The due date by which the certification must be completed
   - A check box indicating if certification is required for enrollment in this compensation object
   - A check box indicating if the participant's enrollment in this compensation object has been suspended pending the completion of any action items.
3. Check the Received field to indicate that this certification has been received.

   Note: You can un-check the Received field after you save, if necessary.

4. Check the Denied field if this certification has been rejected.

To add a certification for a person:

1. Select a new certification from the list of certification types to add a certification to this participant's election.
2. Check the Required field to indicate that failure to provide this certification results in a suspended election.
3. Select the reason for the certification in the Due To field.
4. Save your work.

To delete a certification for an election:

1. Select the certification type and choose the delete icon from the toolbar.
2. Save your work.

To record receipt of a certification required by an activity rate:

1. Choose the Rate Certification button.

   This button appears for enrollments in compensation objects that have standard rates that require certification.

2. Do one of the following:

   - Mark the certification as Received. This enters the element associated with the standard rate on the date calculated by the rate start date code. (This code is specified on the Plan Enrollment Requirements window.)
   - Mark the certification as Denied. The Rate Certification Required check box remains checked on the View Enrollment Results window.

     Note: Once the certification is marked as Received, you cannot change it to Denied. Instead, you can delete the rate on the Miscellaneous Plan enrollment window or set the rate to zero on the Enrollment Override window. You can always update a certification from Denied to Received.

3. Save your work.

Overriding Enrollment Results for a Plan (Advanced Benefits)

You use the Enrollment Override window to override election information *after* you have used the Participation Overrides window to specify that a person can enroll in a plan or option for which they have been found ineligible.

You can also override the rate and coverage amounts for a given benefit. If the participant designates a dependent for the plan, you can override the dependents that are covered by the plan.

> **Caution:** You can set your effective date to any date and override enrollment information without backing out subsequent life events. You do not need to reprocess life events after you correct data. However, you must not compromise data integrity when processing an override. The application does not validate data, such as activity rates, that you enter in the Enrollment Override window.

To override enrollment results for a plan:

1. Set the effective date.
2. Query the Name of the person for whom you want to override enrollment results.

   > **Note:** The system displays the programs, plans, and options in which the person is currently enrolled.

General Tab

3. Choose the General tab if it is not already selected.
4. Select the plan and option you want to override.
5. Do one of the following:
   - Delete the enrollment by choosing the delete icon on the toolbar. Then, add a new row to the enrollment and select the plan and option in which you are enrolling the participant.
   - Or, override the enrollment by selecting a new plan and option from the list of values in the Plan field.

     > **Note:** The list of electable plans is based on the plan type of the plan in which the participant is currently enrolled.

Note: The Overridden field appears checked if this plan is an overriding plan and not a plan in which the participant was enrolled under normal circumstances.

Override Tab

6. Check the Overridden field to override this plan or option.

7. Enter the date through which the system overrides the otherwise ineligible person's participation in this plan or option in the Thru field.

   Note: You enter the override through date if you only want the override to be in effect for a limited period of time. The override through date cannot be later than the coverage end date.

8. Select the reason you are allowing this overriding enrollment in the Reason field.

Coverage Tab

9. Enter the following dates, as applicable:

   - Coverage Start date
   - Coverage End date

     Note: When you override a plan in which a person is enrolled, the new enrollment begins as of the coverage start date you enter. If you do not enter a coverage end date, coverage for the plan ends based on the coverage end date code defined for the plan.

   - Original Start Date
   - Earliest De-enrollment date

Benefit Tab

10. Enter the new coverage amount for this plan or option in the Value field.

11. Select the unit of measure of the benefit in the UOM field.

12. Enter the tax type of this benefit in the Type field.

13. Save your work.

Overriding Dependent Coverage Designations for a Plan

You use the Override Dependents window to override a participant's dependent designations for a plan.

> **Note:** You use the Dependent/Beneficiary Designation form to enter a participant's beneficiaries for an overriding plan.

Overriding Participation Information for a Person

You use the Participation Overrides window to maintain override information for a potential benefits participant who is otherwise ineligible to participate in a particular program.

To override participation information for a person:

1. Query the Name of the person for whom you are overriding participation information.
2. Check the View By Session Date field to view the person's participation information as of the system's effective date.

   Or, check the View By Participation Date to view this information as of the person's participation start date.
3. Select the Level in the compensation object hierarchy at which you are defining override information.
4. Select the Compensation Object for which you are overriding participation eligibility information for this person.
5. Check the Eligible field if this person is eligible for this benefit.
6. Choose the General tab if it is not already selected.
7. Select the Life Event Reason explaining why you are overriding this person's eligibility/ineligibility for this program or plan.
8. Enter the Waiting Period Completion Date if the participant must wait until a certain date before enrolling or de-enrolling in this compensation object.
9. Enter the Participation Start and End Dates through which this person participates in this program or plan.
10. Check the Restricted Distribution field if some organization (typically a court) has placed a restriction on the distribution of benefits to this participant.

For example, a QDRO (US) specifies a portion of the participant's retirement benefits must be paid to that person's prior spouse.

11. Check the Highly Compensated field if this person is highly compensated according to the terms of the plan.

12. Check the Key Employee field if this person is a key employee according to the terms of the plan.

13. Check the Dependents Only field if this plan only covers this person's dependents.

14. Save your work.

Overriding Eligibility Participation Information for a Person

You can override the run results of the Participation batch process for a person in the Participation Overrides window.

You can also freeze the future calculation of derived factors, such as age or length of service, for a person in a program or plan. The ability to freeze derived factors is useful when you want to exempt a participant from the eligibility rules that are linked to a particular derived factor.

To override eligible participation information for a person:

1. Query the Name of the person for whom you are overriding participation information.

2. Choose the Eligibility tab if it is not already selected.

Age and Length of Service

3. Choose the Age/Length of Service alternate region.

4. If you want the person's age to differ from that shown in the Age field, modify or enter that number.

5. If you want the person's age UOM to differ, modify or enter the unit of measure.

6. If you want the person's length of service to differ from that shown in the LOS field, modify or enter that number.

7. If you want the person's length of service UOM to differ, modify or enter that unit of measure.

8. If you want the person's number of hours worked to differ from that shown in the Hours Worked field, modify or enter that number.

9. If you want to modify the period in which the Hours Worked are measured, select a new value in the In Period field.

10. Enter the person's age and length of service in the Age & LOS field if you are overriding this derived value.

Compensation

11. Choose the Compensation alternate region.

12. If you want the person's computed compensation level to differ from that shown in the Compensation Reference field, modify or enter that number.

13. If you want the person's compensation currency to differ, enter that Currency.

14. If you want the calendar date the system uses to determine this person's length of service to differ from that shown in the Override Service Date field, modify or enter that date.

15. If you want the person's percent of full-time employment to differ from that shown in the Percent Full Time field, modify or enter that percentage.

16. Enter or modify the Hours Worked Qualification value if the system calculates the hours worked once (for a life event or an open enrollment period) or on a continuing basis each time you run the Participation batch process.

Freeze

17. In the Freeze block, check the derived factors you do not want the system to recalculate the next time it calculates derived factors for this person.

18. Save your work.

Overriding Waive Participation Information for a Person (Advanced Benefits)

You can use the Participation Overrides window to override the certifications required to enroll in a waive plan.

To override waive participation information for a person:

1. Query the Name of the person for whom you are overriding participation information.

Waive

2. Choose the Waive tab if it is not already selected.

3. Check the Waive Plan field if this person is waiving this program or plan.

4. Select the Certification Type that this person is waiving for this program or plan.

5. Select a Reason explaining why this person is being allowed to waive this certification type for this program or plan.

Override

6. Choose the Override tab.

7. Check the No Maximum Participation field if special circumstances dictate that this person is eligible or ineligible for this plan or program.

   Checking this field indicates that this person's eligibility/ ineligibility for the specified compensation object remains in force for an indefinite period of time, regardless of changes to this person's derivable or temporal information.

8. Check the Override field to override the otherwise ineligible person's participation in this plan.

9. Enter the date through which the system overrides the otherwise ineligible person's participation in this plan in the Through Date field.

10. Select a Reason explaining why you are overriding the otherwise ineligible person's participation in this plan.

11. Save your work.

Overriding Participation Information for a Person for an Option in a Plan (Advanced Benefits)

You can override eligibility results for a person enrolling in a plan option by using the Participation Overrides window.

Choosing to override eligibility results for one or more options in a plan is useful when you do not want to override the eligibility results for all options in a plan.

To override participation information for a person for an option in a plan:

1. Query the Name of the person for whom you are overriding participation information.

2. Select the program and plan that contains the option to override.

3. Choose the Options button.

4. Select the name of the option in this plan for which you are overriding participation

information in the Eligible Options field.

5. Check the Eligible field if you want this otherwise ineligible person to be eligible to participate in this option in this plan.

   Conversely, do not check the Eligible field if you want this otherwise eligible person to be ineligible to participate in this option in this plan.

6. Enter a Waiting Period Completion Date to change the date that must pass before a person is eligible for this benefit.

7. Enter the Start and End Dates through which this person is eligible/ineligible to participate in this option in this plan.

8. Check the Override field if special circumstances dictate that this person is deemed eligible or ineligible for this option in this plan.

9. Check the No Maximum Participation Override Through field if this person's eligibility or ineligibility for this option in plan remains in force for an indefinite period of time regardless of changes to this person's derivable or temporal information.

10. Select an Hours Worked Qualification code to indicate if the participant must meet the hours worked in period eligibility criteria once or on a recurring basis to qualify for this benefit.

11. Enter the date through which this override remains effective for this person's participation in the Override Through Date field, and select the Override Reason.

12. Save your work.

Managing Eligible Person Waivers (Advanced Benefits)

You use the Waive Participation window to enter waive information for plan types and plans in a program.

To manage eligible person waivers for a plan type in a program:

1. Query the Person who is eligible to receive the participation waiver.

2. Select the Program associated with the plan type or plans that this person is electing to waive.

3. Choose the Plan Type tab or the Plan tab depending if you are waiving all the plans in a plan type or only selected plans.

4. Select a Plan Type or Plan in this program that this person is electing to waive.

5. Select the Waive Reason that supports why this person is waiving participation in this plan type or plan.

6. Select the Certification Provided code that indicates this person provided the certification required to waive participation in this plan type or plan.

7. Check the Preferred field if this waive Certification is preferred, but not required.

8. Save your work.

Maintaining Court Orders for a Participant

You use the Court Orders window to record a Qualified Medical Child Support Order or a Qualified Domestic Relation Orders for participants in the US who are subject to either of these court orders.

When a participant enrolls in a plan type or plan that is subject to a court order, the system determines if the participant's dependents that are named in the court order are covered by the plan type or plan in question. A warning message is issued at the time of enrollment notifying the benefits administrator of the court order.

To maintain a court order for a participant:

1. Query the person for whom you are entering a court order.

2. Select a court order type in the Type field.

3. Enter a court order identifier in the Order ID field.

4. Do one of the following:
   - Select the plan subject to the court order in the Plan field.
   - Or, select the Plan Type if the court order applies to all plans in the plan type.

5. Enter the name of the court that issued the order in the Issuing Court field.

6. Complete these date-related fields.
   - *Issued Date*- the date the court issued the order
   - *Received Date*- the date your organization received the order
   - *Qualified Date*- the date you validated that the order satisfies the criteria of a qualified order

7. Enter a Description of the court order.

In the Period in Effect block:

8. Enter the dates on which dependent coverage starts and ends based on this court order.

In the QDRO Payment block:

9. Specify the QDRO payment amount in either the Amount field or the % (Percent) field.
   - Enter the unit of measure of this payment, if the order is for an amount.
   - Select a distribution method in the Distribution field.
   - Enter the Number of Payments that must be made Per Period

In the Cited block:

10. Select the name of the dependent or other person cited as a recipient of this benefit based on the court order.
    - Choose the Contacts button if you need to add a dependent for this participant.

11. Save your work.

Recording a Continuing Benefits Payment

You use the Record Continuing Benefits Payment window to enter the amount paid by a participant for participation in a continuing benefits plan, such as US COBRA plans.

To record a continuing benefits payment:

1. Query the person for whom you are recording a continuing benefits payment.

   The system displays all plans in which the participant is currently enrolled.

2. Select the plan and option for which you are recording a payment.

   The system display the activity rate for the plan you select and the Expected Payment Amount.

3. Enter the participant's payment amount in the Current Payment Amount field.

4. Save your work.

Recording a Contribution or Distribution

You use the Record Contributions or Distributions window to enter an amount paid by

or paid to a participant in association with a plan or an option.

To record a contribution or distribution:

1. Query the person for whom you are recording a contribution or distribution.
2. Choose the Activities tab.
3. Select the activity rate for which you are recording a contribution or distribution in the Activity field.
4. Enter the Amount of the participant's payment or distribution.
5. Choose the Compensation Objects tab to view the plans and options associated with the activity rate for which you are recording a contribution or distribution.
6. Choose the Display Payments button to display the Payments window. You can view the element associated with an activity rate and any payments recorded by the element in this window.
7. Save your work.

Continuing Benefits Eligibility

Continuing Benefits Eligibility

Oracle HRMS uses benefits assignments to maintain eligibility for continuing benefits. The application creates a benefits assignment as a copy of the employee's primary assignment when certain events occur, such as the termination of the employee or a qualifying reduction in hours.

See: Continuing Eligibility: Benefits Assignments, page 1-113

You can view, update, manually create, and end a person's benefits assignment. For example, special circumstances may dictate that you want to change an ex-employee's payroll. If so, you can update the payroll on the person's benefits assignment.

You can update or delete a benefits assignment without affecting the original employee assignment.

See: Maintaining a Benefits Assignment, page 6-106

Maintaining a Benefits Assignment

You use the Benefits Assignment window to view, update, and manually create a person's benefits assignment.

The application automatically creates benefits assignments based on certain events, such as an employee termination, if you set up the auto-generation of benefits assignments when you define the default payroll for a business group.

See: Defining Benefits Defaults Monthly for a Business Group, *Oracle HRMS Enterprise and Workforce Management Guide*

See: Continuing Eligibility: Benefits Assignments, page 1-113

To maintain a benefits assignment:

1. Query the person for whom you are maintaining a benefits assignment.
2. Select the person's location and organization.
3. Insert the person's assignment status in the Status field.

   Note: You can only manually insert a person's assignment status. You cannot update an assignment status that the system copies from the person's assignment record.

4. Update other assignment information as necessary.
   - Enter the person's people group in the Group field.
   - Select a Job, Position, and Grade.
   - Select a payroll.

     Note: US and Canadian users must select a payroll with a monthly periodicity.

5. Save your work.
6. Choose the Entries button if you want to add, purge, or end element entries for this assignment.

   You cannot manually enter or edit entries for elements attached to an activity base rate. These entries are updated by the system when you make an election change or enrollment override.

To delete a benefits assignment:

1. Query the person's benefits assignment and choose the Delete icon from the toolbar. You can choose to purge or end-date the record.

   Note: Deleting a benefits assignment does not affect the employee assignment.

Rates, Premiums, Balances, and Reimbursements

Recalculate Participant Values Overview (Standard Benefits)

You can update activity rates for currently enrolled participants based on plan design changes--such as yearly rate increases--or after a salary review period. You can also recalculate rates if you change the Value Passed to Payroll. For selected persons, you run the Recalculate Participant Values process to calculate:

- Participant rates
- Coverages
- Actual premiums
- Imputed income rates (US)

The process provides for a participant to continue coverage in their current benefits elections without the need for re-enrollment or a manual change in rates.

By running the Recalculate Participant Values process close to when plan design changes take effect, you can minimize the impact on currently enrolling participants. Most often, a system administrator schedules the process to run after the end of an annual enrollment period.

As a prerequisite to running the process you should:

- Update your plan design (defining the new rate calculations)
- Ensure that person records are current
- Run the Maintain Participant Eligibility process to update eligibility records and derived factors such as age and length of service

See: Running the Maintain Participant Eligibility Process, page 6-31

See: Running the Recalculate Participant Values process, page 6-109

> **Note:** You can use Total Compensation Setup Wizard, *Oracle HRMS Compensation and Benefits Management Guide* to update multiple standard and variable activity rates simultaneously.

Updating Activity Rates from Year-to-Year

When activity rates change between plan years, follow these steps to ensure that your rates are updated without any interruption to current enrollments.

Use the Standard Rates window to update activity rates. You can also use Total Compensation Setup Wizard, *Oracle HRMS Compensation and Benefits Management Guide* to update multiple rates simultaneously.

To update activity rates from year-to-year:

1. Set your effective date to the date and year in which the new rate becomes effective.
2. Make any changes that you require, such as updating the calculation to establish a new rate.

   Important: Occasionally, you may want to change the element and input value of a standard rate for business purposes. If so, set the effective date to the date you want the element to begin for participants that you process. The effective date must be later than the existing element entry start date for a person currently enrolled in a compensation object that uses the rate.

3. Save your work.

   When you process an enrollment or run the Recalculate Participant Values Process, the application calculates the rate according to your changes.

Running the Recalculate Participant Values Process (Standard Benefits)

The Recalculate Participant Values process updates activity rates based on changes to plan design.

You run processes from the Submit Requests window.

See: Recalculate Participant Values Overview (Standard Benefits), page 6-108

To run the Recalculate Participant Values process:

1. Select the Recalculate Participant Values process in the Name field.
2. Enter the Parameters field to open the Parameters window.

   You can select from a variety of criteria to limit the participants for whom you are re-calculating activity rates.

3. Select an individual in the Person Name field to run the process for a single person.
4. Select a Person Type if you want to calculate rates only for a particular person type (such as employee) within the compensation objects you select.
5. Select a compensation object--such as a plan or program--for which you are calculating rates.

6. If special circumstances apply, select a Compensation Object Selection Rule or a Person Selection Rule you have defined to limit the application of the rate re-calculation. For example, you can write a rule to restrict person selection to those employees with a recent salary change.

7. Choose the OK button.

8. Complete the batch process request and choose Submit.

   If you run this process in error, you can resubmit the process at a date that is prior to the effective date of the previous run. This will recalculate results using the earlier effective date and remove all future changes.

   Note: Anytime you run this process it will remove any future enrollment changes.

Running the Premium Reconciliation Report

Run the Premium Reconciliation Report to support the monthly benefits billing reconciliation process. This report compares monthly premium amounts to standard rates and element entries by pay period, for all participants enrolled during the reporting period.

Use this report as an error check for employees with no rates, rates that differ from element entries, and rates and element entries that do not equal monthly premium amounts. In addition, you can use this report as an account of monthly premium payments by sending it to the benefits provider.

You run reports from the Submit Requests window.

To run the Premium Reconciliation Report:

1. Select Reconciliation of Premium Contributions to Element Entries in the Name field.

2. In the Parameters window, enter the Reporting Start Date and the Reporting End Date to limit the premium reconciliation to this pay period.

   Note: If you select dates beyond the pay period, the report result will not display the reconciliation details.

3. Select other criteria to limit the report results to a particular employee, such as:

   - Employee Name
   - National Identifier
   - Employee Name Format: this limits the report result to the selected employee.

Note: The default format is the default Employee Name Format you configured during implementation. If you select Japanese, the report result displays the participant details in the full name format as per Japanese legislation requirements.

- Program: this limits the report to the specific program.

  Note: The list of values contains all active programs in the business group.

4. Select the Plan to limit the report results to data elements contained in the plan.

   Note: If you select a healthcare plan, the report displays details of healthcare options. Similarly, if you select an insurance plan, the report displays details of coverage options.

5. You can also select other criteria to limit the results of the report, such as:
   - Person Selection Rule
   - Organization
   - Location
   - Benefits Group
   - Reporting Group
   - Payroll
   - Premium Type

6. The default value for Output Type is Text. Select Comma Separated Values if you have many premium, rate, and element entry values.

7. Indicate if you want to view report results, such as:

   Note: The default value for the following is Yes:

   - Display Plan Reconciliation Report: provides total participant monthly premiums, standard rates, element entries, and discrepancy amounts for each payroll frequency in the reporting period.

- Display Plan Discrepancies Report: lists all participant records with a discrepancy due to monthly premiums, standard rates, or element entries per pay period.
- Display Life Event Report: lists all participants whose life event caused a change to plan premiums in the reporting period. If there are no such participants, the report result does not display this section.
- Display Plan Participant Details Report: lists all the participants enrolled in the plan including option/coverage, monthly premium, and coverage start and end date.
- Display Participant Details: displays the Plan Reconciliation and Plan Discrepancies sections of the report.

8. Choose OK.
9. In the Submit Request window, verify the parameters you selected, set the schedule and the options for running the report.
10. Choose the Submit button.
11. Close the Submit Requests window.
12. Open the Find Requests window.
13. Click Find.
14. Select your Request ID and click View Output.

    The Discrepancy column highlights the amounts that do not reconcile for a person. The following codes indicate the reason for the discrepancy:

    S = Element entries (per pay period) for total contributions subtracted from the standard rate pay period total do not equal zero.

    P = Element entries (per pay period) for total contribution subtracted from the participant monthly premium do not equal zero.

    SP = Both standard rates and the participant monthly premium do not reconcile with element entries for the period.

Viewing and Adjusting Monthly Premiums for a Plan or Option in Plan

You use the Monthly Plan or Option Premium window to view the plans and options for which you have defined a premium calculation.

Use this form if you need to manually adjust the premium result for a plan or an option in plan or if you need to enter or update the costing segment against which the

premium is applied.

To view or adjust a monthly premium for a plan or option in plan:

1. Query the Plan or Option for which you want to view premium information.
2. Select the premium associated with this plan or option in the Premium Name field.

   The system displays the following **read-only** premium information in the **General tabbed region**:

   - The premium *Type*
   - The premium *Payer*
   - The *Supplier* of the coverage
   - The *Calculation method* used to derive the premium.

   The system displays premium calculation results in the **Monthly Activity tabbed region**. The following information is **read-only**:

   - Premium unit of measure
   - the Premium Manually Adjusted field appears checked if you manually adjusted the premium

3. Enter the new premium in the Value field to manually adjust the result of the premium calculation.
   - If necessary, change the month or year for which you are manually adjusting the premium.
4. Enter the Number of Participants included in this premium.
5. Enter or updates the Costing segment against which to apply the premium for this plan or option in plan.
6. Save your work.

Viewing and Adjusting Monthly Premiums for a Participant

You use the Monthly Participant Premium window to view the plans and options in which a participant is enrolled that have an associated premium. Use this form if you need to manually adjust a participant's premium or if you need to enter or update the costing segment against which the participant's premium is applied.

To view or adjust a monthly premium for a participant:

1. Query the Person for whom you want to view premium information.

2. Select the premium associated with this plan or option in the Premium Name field.

   The system displays the following **read-only** premium information in the **General tabbed region**:

   - The *Plan* or *Option* associated with the premium
   - The premium *Type*
   - The premium *Payer*
   - The *Calculation method* used to derive the premium
   - The *Supplier* of the coverage
   - The *Standard Value* and *Unit of Measure* of the premium

   The system displays premium calculation results for the selected person in the **Monthly Activity tabbed region**. The following information is **read-only**:

   - Premium unit of measure
   - Total credits
   - Net premium (the premium paid minus the total credits applied to the premium)
   - the Allocated Value field appears checked if this is an allocated premium
   - the Premium Manually Adjusted field appears checked if you manually adjusted the premium
   - the Credits Manually Adjusted field appears checked if you manually adjusted the credits applied to this premium

3. Enter the new premium in the Value field to manually adjust the result of the premium calculation.

   - If necessary, change the month or year for which you are manually adjusting the premium.

4. Enter or update the Costing segment against which to apply the premium for this person.

5. Save your work.

Defining Person Benefit Balances

You define a person benefit balance using the Person Benefits Balances window by associating a person with a benefit balance you have defined.

To define a person benefit balance:

1. Select a Person for whom you are defining a benefit balance.
2. Select a Benefit Balance that you defined in the Benefit Balances window.
3. Enter a Value for the balance.
4. Save your work.

Recording a Reimbursement Request (Advanced Benefits)

You use the Reimbursement Requests window to date-effectively record a request for reimbursement when the participant incurs a cost that is covered by a plan for which you have defined reimbursable goods and services, such as a spending account plan.

To record a reimbursement request:

1. Query the name of the person who is submitting the reimbursement request.
2. In the From and To fields, record the date range over which the cost was incurred. The Expense Incurred Date defaults to the effective date.

   Note: The application saves future-dated reimbursement requests with a status of Pending and does not create an element entry.

3. Select the Plan against which the submitter is making the reimbursement request.

   Request Details Tab

4. Choose the Request Details tab.
5. In the For field, select the name of the person receiving the reimbursement.

   This person can be the primary participant or a person of a valid relationship type to the primary participant as defined for the reimbursement plan.

6. Select the Status of the reimbursement request.
7. Enter the request Amount and select the Currency type of the expense.

8. Enter the name of the good or service Provider and the Provider's Tax ID.

9. Check the Adjustment field if this reimbursement request is an adjustment to an existing request.

10. Optionally, enter an Approved Amount.

11. Save your work.

    When you save the request, the application automatically:

    - Assigns the request a Request Number
    - Records the effective date as the Submitted Date of the request
    - Assigns the request a status of Goods and Services Required
    - Indicates the Annual Coverage Elected for the current and previous years as well as the previous year's Claims Paid (for spending account plans)
    - In the Total Claims Submitted field, calculates and displays the total amount of the requests this year for this person for this plan

    Goods or Services Tab

    > **Note:** As a prerequisite, you must define goods and services during your plan design in order to process a reimbursement request.

12. Choose the Goods or Services tab.

13. Select the Good or Service provided.

    The Certification Required field appears checked if you indicated this certification was required during your implementation.

14. Choose the Certification button to open the Reimbursement Certifications window.

    - Record the Received Date or Denied Date of the certification.

15. Save your work.

Changing the Status of a Request

You can change the status of a reimbursement request.

To change the status of a request:

1. Choose the Status Tracking tab.

   The application populates the Status field with the request status you selected in

Step 6 above.

In the Request block:

2. Select a Reason for this request status.

   You can add to the list of Status Reason types by using the Lookup Type BEN_STAT_RSN in the Application Utilities Lookups window.

3. Check the Overridden field if you override the status of this request for some reason.

   Note: This field is reserved for future use.

4. Select a Reason for the request override.

   Note: This field is reserved for future use.

5. Select the Prior Status of the request before you selected the overriding request status.

   Note: This field is reserved for future use.

In the Approved for Payment block:

6. Select the status of the approved payment in the Current field.

   You can add to the list of Approved Payment Status types by using the Lookup Type BEN_APRVD_PYMT_STAT in the Application Utilities Lookups window.

7. Select an approved payment status Reason.

   You can add to the list of Approved Payment Status Reasons by using the Lookup Type BEN_APRVD_PYMT_RSN in the Application Utilities Lookups window.

8. Check the Overridden field if you override the status of this approved payment for some reason.

   Note: This field is reserved for future use.

9. Select a Reason for this approved payment override.

   Note: This field is reserved for future use.

10. Select the Prior Status of the approved payment request before you selected the

overriding status.

Note: This field is reserved for future use.

11. Save your work.

Entering a Reimbursement Payment

When you save an approved request, the application writes the approved amount to the Reimbursement Payment window and updates the standard distribution rate for the reimbursement. If you link an element to the distribution rate, the process updates the element entry.

You can change the approved amount, provided that the new amount is not for a higher value and that your payroll system has not processed the payment.

To enter a reimbursement payment:

1. Choose the Payment button.
2. Modify the Approved Payment amount.
3. Select a payment status and a status reason.
4. Check the Adjustment check box if you are adjusting the approved amount.
5. Save your work.

Running the Process Forfeitures Concurrent Request (Advanced Benefits)

Run the Process Forfeitures concurrent request to calculate and record the total forfeited amount for each participant in a reimbursement plan at the end of a plan year.

Note: As a prerequisite, update the balances to make sure that contribution and distribution totals are current and accurate.

See: Setting Up Reimbursement Plans for Forfeitures (Advanced Benefits), page 1-76

You run processes from the Submit Requests window.

To run the Process Forfeitures concurrent request:

1. Select Process Forfeitures in the Name field.
2. Enter the Parameters field to open the Parameters window.
3. Enter the Effective Date of the process.

4. In the Commit field, select whether you want to commit or rollback the results of the process.

5. Select the reimbursement plan for which you are processing forfeitures in the Plan Name field.

6. Choose the OK button.

7. Complete the batch process request and choose Submit.

8. Run the Process Forfeitures Audit Log process or the Process Forfeitures Summary Report for information about errors and process totals.

9. To view forfeiture results for a participant, open the View Enrollment Results window. Query a person, then choose the Rates button.

10. To view total forfeitures for the plan, open the Forfeited Values window. Query a plan. Select the Forfeitures tab, then choose the Forfeiture Values button.

Glossary

360-Degree Appraisal

Part of the SSHR Appraisal function and also known as a Group Appraisal. This is an employee appraisal undertaken by managers with participation by reviewers.

Absence

A period of time in which an employee performs no work for the assigned organization.

Absence Case

Two or more absences for the same person that you associate manually because they share a common factor, such as the same underlying cause.

Absence Type

Category of absence, such as medical leave or vacation leave, that you define for use in absence windows.

Accrual

The recognized amount of leave credited to an employee which is accumulated for a particular period.

Accrual Band

A range of values that determines how much paid time off an employee accrues. The values may be years of service, grades, hours worked, or any other factor.

Accrual Period

The unit of time, within an accrual term, in which PTO is accrued. In many plans, the same amount of time is accrued in each accrual period, such as two days per month. In other plans, the amount accrued varies from period to period, or the entitlement for the full accrual term is given as an up front amount at the beginning of the accrual term.

Accrual Plan

See: *PTO Accrual Plan*, page Glossary-32

Accrual Term

The period, such as one year, for which accruals are calculated. In most accrual plans, unused PTO accruals must be carried over or lost at the end of the accrual term. Other plans have a rolling accrual term which is of a certain duration but has no fixed start and end dates.

Action

In AME, an Action is the *Then* part of an Approval Rule that specifies how the application must progress a transaction's approval process in a particular way depending on the conditions met.

See: Approval Rule., page Glossary-5

Action Type

In AME, an action type is the generic container for specific actions. It enables you to specify the action to take if a transaction meets the condition of an approval rule. The action type, thus, generates the appropriate approvers for a transaction. As an AME administrator you can make particular action types available for specified transaction types. See: Transaction Types., page Glossary-41

Active Employee

DBI for HRMS counts an employee, page Glossary-17 as active if they have a current period of service, page Glossary-13 at the effective date, page Glossary-16

If an employee is suspended, DBI for HRMS still counts them as active.

DBI for HRMS also uses the term Incumbent to refer to an active employee.

Active Contingent Worker

DBI for HRMS counts a contingent worker, page Glossary-11 as active if they have a current period of placement , page Glossary-13 at the effective date, page Glossary-16.

If a contingent worker is suspended, DBI for HRMS still counts them as active. DBI for HRMS also uses the term Incumbent to refer to an active contingent worker.

Activity Rate

The monetary amount or percentage associated with an activity, such as $12.35 per pay period as an employee payroll contribution for medical coverage. Activity rates can apply to participation, eligibility, coverages, contributions, and distributions.

Actual Premium

The per-participant premium an insurance carrier charges the plan sponsor for a given benefit.

Administrative Enrollment

A type of scheduled enrollment caused by a change in plan terms or conditions and resulting in a re-enrollment.

AdvancePay

A process that recalculates the amount to pay an employee in the current period, to make an authorized early payment of amounts that would normally be paid in future payroll periods.

Agency

An external organization that assists an enterprise in their recruitment process. Agencies act on behalf of the candidates to help them search and apply for jobs. They provide candidates to the fill up job openings in an enterprise or sometimes handle the complete placement process for a vacancy.

Agency Candidate

An agency candidate is a person whose profile is created in iRecruitment by a recruiting agency. This profile includes personal and professional information.

Agency User

An external person who belongs to a recruiting agency and accesses iRecruitment to conduct recruiting activities such as creating candidates and applying on behalf of the candidates.

Alert

An email notification that you can set up and define to send a recipient or group of recipients a reminder or warning to perform a certain task or simply a notification to inform the recipient of any important information.

Align

To define a relationship between objectives. Workers can align their own objectives with objectives that other workers have shared with them. Aligned objectives are also known as *supporting objectives*.

AME

Oracle Approvals Management Engine. A highly extensible approvals rules engine that enables organizations implementing Oracle Applications to simply and effectively define business rules that determine who must approve a transaction originating within an application. You can devise simple or complex rules, as your organization requires, which then form part of your overall business flow. A central repository holds all the rules to facilitate management and sharing between business processes.

API

Application Programmatic Interfaces, used to upload data to the Oracle Applications database. APIs handle error checking and ensure that invalid data is not uploaded to the database.

Applicant

An applicant is a person who submits an application for employment to an organization.

Applicability

In HRMS budgeting, a term describing whether a budget reallocation rule pertains to donors or receivers.

Applicant/Candidate Matching Criteria

Matching functionality in the iRecruitment system that systematically identifies which candidates and applicants possess the skills, knowledge and abilities to be considered for a specific vacancy. The following columns are used for matching:

- Skills
- FT/PT
- Contractor/Employee
- Work at Home
- Job Category
- Distance to Location
- Key Words
- Salary

Apply for a Job

An SSHR function that enables an employee to, apply, search and prepare applications for an internally advertised vacancy.

Appraisal

An appraisal is a process where an employee's work performance is rated and future objectives set.

See also: *Assessment*, page Glossary-5.

Appraisee

The person who is the subject of an appraisal.

Appraiser

A person, usually a manager, who appraises an employee.

Appraising Manager

The person who initiates and performs an Employee-Manager or 360 Degree Appraisal. An appraising manager can create appraisal objectives.

Approval Rule

In AME, a business rule that determines a transaction's approval process. You construct rules using *conditions* and *actions*. For example, you can write a business rule with the conditions that if the total cost of a transaction is less than 1000 USD, and the transaction is for travel expenses, then the action must be to obtain approval from the immediate supervisor of the person triggering the transaction.

See also Conditions, page Glossary-11, Actions, page Glossary-2.

Approver Groups

In AME, an approver group is a collection of approvers you define, which you can include as part of actions when you set up your approval rules.

Arrestment

Scottish court order made out for unpaid debts or maintenance payments.

See also: *Court Order* , page Glossary-12

Assessment

An information gathering exercise, from one or many sources, to evaluate a person's ability to do a job.

See also: *Appraisal*, page Glossary-4.

Assignment

A worker's assignment identifies their role within a business group. The assignment is made up of a number of assignment components. Of these, organization is mandatory, and payroll is required (for employees only) for payment purposes.

Assignment Number

A number that uniquely identifies a worker's assignment. A worker with multiple assignments has multiple assignment numbers.

Assignment Rate

A monetary value paid to a contingent worker for a specified period of time. For example, an assignment rate could be an hourly overtime rate of $10.50.

Assignment Set

A grouping of employees and applicants that you define for running QuickPaint reports and processing payrolls.

See also: *QuickPaint Report*, page Glossary-33

Assignment Status

For workers, used to track their permanent or temporary departures from your enterprise and, for employees only, to control the remuneration they receive. For applicants, used to track the progress of their applications.

Attribute

In AME, attributes are the business facts of a transaction, such as the total amount of a transaction, percentage of a discount, an item's category, or a person's salary and so on. These business variables form part of the conditions of an approval rule, and determine how the transaction must progress for approvals.

Authoria

A provider of health insurance and compensation information, that provides additional information about benefits choices.

BACS

Banks Automated Clearing System. This is the UK system for making direct deposit payments to employees.

Balance Adjustment

A correction you make to a balance. You can adjust user balances and assignment level predefined balances only.

Balance Dimension

The period for which a balance sums its balance feeds, or the set of assignments/transactions for which it sums them. There are five time dimensions: Run, Period, Quarter, Year and User. You can choose any reset point for user balances.

Balance Feeds

These are the input values of matching units of measure of any elements defined to feed the balance.

Balances

Positive or negative accumulations of values over periods of time normally generated by payroll runs. A balance can sum pay values, time periods or numbers.

See also: *Predefined Components* , page Glossary-31

Bargaining Unit

A bargaining unit is a legally organized group of people which have the right to negotiate on all aspects of terms and conditions with employers or employer federations. A bargaining unit is generally a trade union or a branch of a trade union.

Base Summary

A database table that holds the lowest level of summary. Summary tables are populated and maintained by user-written concurrent programs.

Beneficiary

A person or organization designated to receive the benefits from a benefit plan upon the death of the insured.

Benefit

Any part of an employee's remuneration package that is not pay. Vacation time, employer-paid medical insurance and stock options are all examples of benefits.

See also: *Elements*, page Glossary-16

Block

The largest subordinate unit of a window, containing information for a specific business function or entity. Every window consists of at least one block. Blocks contain fields and, optionally, regions. They are delineated by a bevelled edge. You must save your entries in one block before navigating to the next.

See also: *Region*, page Glossary-34, *Field*, page Glossary-18

Budget Measurement Type (BMT)

A subset of Workforce Measurement Type. It consists of a number of different units used to measure the workforce. The most common units are headcount and full time equivalent.

Budget Value

In Oracle Human Resources you can enter staffing budget values and actual values for each assignment to measure variances between actual and planned staffing levels in an organization or hierarchy.

Business Group

The business group represents a country in which your enterprise operates. It enables

you to group and manage data in accordance with the rules and reporting requirements of each country, and to control access to data.

Business Group Currency

The currency in which Oracle Payroll performs all payroll calculations for your Business Group. If you pay employees in different currencies to this, Oracle Payroll calculates the amounts based on exchange rates defined in the system.

Business Number (BN)

In Canada, this is the employer's account number with Revenue Canada. Consisting of 15 digits, the first 9 identify the employer, the next 2 identify the type of tax account involved (payroll vs. corporate tax), and the last 4 identify the particular account for that tax.

Business Rule

See Configurable Business Rules, page Glossary-11

Cafeteria Benefits Plan

See: *Flexible Benefits Program*, page Glossary-18

Calendar Exceptions

If you are using the Statutory Absence Payments (UK) feature, you define calendar exceptions for an SSP qualifying pattern, to override the pattern on given days. Each calendar exception is another pattern which overrides the usual pattern.

Calendars

In Oracle Human Resources you define calendars that determine the start and end dates for budgetary years, quarters and periods. For each calendar you select a basic period type. If you are using the Statutory Absence Payments (UK) feature, you define calendars to determine the start date and time for SSP qualifying patterns.

Canada/Quebec Pension Plan (CPP/QPP) Contributions

Contributions paid by employers and employees to each of these plans provide income benefits upon retirement.

Candidate

(iRecruitment) A candidate is a person who has either directly provided their personal and professional information to a company's job site or provided their resume and details to a manager or recruiter for entering in the iRecruitment system.

Candidate Offers

An SSHR function used by a line manager to offer a job to a candidate. This function is supplied with its own responsibility.

Career Path

This shows a possible progression from one job or position from any number of other jobs or positions within the Business Group. A career path must be based on either job progression or position progression; you cannot mix the two.

Carry Over

The amount of unused paid time off entitlement an employee brings forward from one accrual term to the next. It may be subject to an expiry date i.e. a date by which it must be used or lost.

See also: *Residual*, page Glossary-35

Cascade

A process managers at each level in a hierarchy use to allocate their own objectives to workers who report directly to them. This technique enables the allocation of enterprise objectives in some form to all workers.

Cash Analysis

A specification of the different currency denominations required for paying your employees in cash. Union contracts may require you to follow certain cash analysis rules.

Ceiling

The maximum amount of unused paid time off an employee can have in an accrual plan. When an employee reaches this maximum, he or she must use some accrued time before any more time will accrue.

Certification

Documentation required to enroll or change elections in a benefits plan as the result of a life event, to waive participation in a plan, to designate dependents for coverage, or to receive reimbursement for goods or services under an FSA.

Chief HR Officer

In DBI for HRMS the Chief HR Officer is the chief executive of the enterprise who can view the HR data at an enterprise-level.

Child/Family Support Payments

In Canada, these are payments withheld from an employee's compensation to satisfy a child or family support order from a Provincial Court. The employer is responsible for withholding and remitting the payments to the court named in the order.

Collective Agreement

A collective agreement is a form of contract between an employer or employer

representative, for example, an employer federation, and a bargaining unit for example, a union or a union branch.

Collective Agreement Grade

Combination of information that allows you to determine how an employee is ranked or graded in a collective agreement.

Communications

Benefits plan information that is presented in some form to participants. Examples include a pre-enrollment package, an enrollment confirmation statement, or a notice of default enrollment.

Compensation

The pay you give to employees, including wages or salary, and bonuses.

See also: *Elements*, page Glossary-16

Compensation Object

For Standard and Advanced Benefits, compensation objects define, categorize, and help to manage the benefit plans that are offered to eligible participants. Compensation objects include programs, plan types, plans, options, and combinations of these entities.

Competency

Any measurable behavior required by an organization, job or position that a person may demonstrate in the work context. A competency can be a piece of knowledge, a skill, an attitude, or an attribute.

See also: *Unit Standard Competency*, page Glossary-41

Competency Assessment Template

The entity that configures the Competencies section of an appraisal.

See also: *Objective Assessment Template*, page Glossary-26

Competency Evaluation

A method used to measure an employees ability to do a defined job.

Competency Profile

Where you record applicant and employee accomplishments, for example, proficiency in a competency.

Competency Requirements

Competencies required by an organization, job or position.

See also: *Competency*, page Glossary-10, *Core Competencies*, page Glossary-12

Competency Type

A group of related competencies.

Condition

In AME, a Condition is the *If* part of an Approval Rule that specifies the conditions a transaction must meet to trigger an approval action. A condition consists of an attribute, which is a business variable, and a set of attribute values that you can define. When a transaction meets the specified attribute values, then the application triggers the appropriate action.

See: Approval Rule., page Glossary-5

Configurable Business Rule

In HRMS position control and budgeting, predefined routines (also called process rules) that run when you apply an online transaction, and validate proposed changes to positions, budgets, or assignments. You set their default status level (typically Warning) to Warning, Ignore, or Error.

Configurable Forms

Forms that your system administrator can modify for ease of use or security purposes by means of Custom Form restrictions. The Form Customization window lists the forms and their methods of configuration.

Consideration

(iRecruitment) Consideration means that a decision is registered about a person in relation to a vacancy so that the person can be contacted.

Consolidation Set

A grouping of payroll runs within the same time period for which you can schedule reporting, costing, and post-run processing.

Contact

A person who has a relationship to an employee that you want to record. Contacts can be dependents, relatives, partners or persons to contact in an emergency.

Content

When you create a spreadsheet or word processing document using Web ADI, the content identifies the data in the document. Content is usually downloaded from the Oracle application database.

Contingent Worker

A worker who does not have a direct employment relationship with an enterprise and is typically a self-employed individual or an agency-supplied worker. The contingent

worker is not paid via Oracle Payroll.

Contract

A contract of employment is an agreement between an employer and employee or potential employee that defines the fundamental legal relationship between an employing organization and a person who offers his or her services for hire. The employment contract defines the terms and conditions to which both parties agree and those that are covered by local laws.

Contribution

An employer's or employee's monetary or other contribution to a benefits plan.

Core Competencies

Also known as *Leadership Competencies* or *Management Competencies*. The competencies required by every person to enable the enterprise to meet its goals.

See also: *Competency*, page Glossary-10

Costable Type

A feature that determines the processing an element receives for accounting and costing purposes. There are four costable types in Oracle HRMS: costed, distributed costing, fixed costing, and not costed.

Costing

Recording the costs of an assignment for accounting or reporting purposes. Using Oracle Payroll, you can calculate and transfer costing information to your general ledger and into systems for project management or labor distribution.

Court Order

A ruling from a court that requires an employer to make deductions from an employee's salary for maintenance payments or debts, and to pay the sums deducted to a court or local authority.

See also: *Arrestment*, page Glossary-5

Credit

A part of the Qualifications Framework. The value a national qualifications authority assigns to a unit standard competence or a qualification. For example, one credit may represent 10 hours of study, a unit standard competence may equate to 5 credits, and a qualification may equate to 30 credits.

Criteria Salary Rate

Variable rate of pay for a grade, or grade step. Used by Grade/Step Progression.

Current Period of Service

An employee's period of service is current if their most recent hire date is on or before the effective date, and either the employee does not have a termination date for their latest employment, or their termination date is later than the effective date.

The table below provides an example using an effective date of 12 October 2004:

Effective Date	Hire Date	Termination Date	Current Period of Service?
12 Oct 2004	23 Jan 1994	16 Aug 2003	No
12 Oct 2004	14 Oct 2004	ANY	No
12 Oct 2004	14 Mar 2000	NONE	Yes
12 Oct 2004	11 Sep 2001	15 Oct 2004	Yes

Note: In Oracle HRMS an employee cannot transfer from one business group to another. To move from one business group to another, the business group they are leaving must terminate the employee, and the business group they are joining must re-hire the employee. Therefore the definition of period of service, above, does not take account of any service prior to the most recent business group transfer.

Current Period of Placement

A contingent worker's period of placement, page Glossary-30 is current if their most recent placement start date is on or before the effective date, and either the contingent worker does not have a placement end date for their latest placement or their placement end date is later than the effective date.

Effective Date	Place Date	End Placement Date	Current Period of Placement?
12 Oct 2004	23 Jan 1994	16 Aug 2003	No
12 Oct 2004	14 Oct 2004	ANY	No
12 Oct 2004	14 Mar 2000	NONE	Yes

Effective Date	Place Date	End Placement Date	Current Period of Placement?
12 Oct 2004	11 Sep 2001	15 Oct 2004	Yes

Database Item

An item of information in Oracle HRMS that has special programming attached, enabling Oracle FastFormula to locate and retrieve it for use in formulas.

Date Earned

The date the payroll run uses to determine which element entries to process. In North America (and typically elsewhere too) it is the last day of the payroll period being processed.

Date Paid

The effective date of a payroll run. Date paid dictates which tax rules apply and which tax period or tax year deductions are reported.

Date To and Date From

These fields are used in windows not subject to DateTrack. The period you enter in these fields remains fixed until you change the values in either field.

See also: *DateTrack*, page Glossary-14, *Effective Date*, page Glossary-16

DateTrack

When you change your effective date (either to past or future), DateTrack enables you to enter information that takes effect on your new effective date, and to review information as of the new date.

See also: *Effective Date*, page Glossary-16

Default Postings

(iRecruitment) Default text stored against business groups, organizations, jobs, and/or positions. The default postings are used to create job postings for a vacancy.

Department

In DBI for HRMS, the term Department has the same meaning as Organization.

Dependent

In a benefit plan, a person with a proven relationship to the primary participant whom the participant designates to receive coverage based on the terms of the plan.

Deployment

The temporary or permanent employment of an employee in a business group.

See also: *Secondment*, page Glossary-37

Deployment Factors

See: *Work Choices*, page Glossary-43

Deployment Proposal

The entity that controls the permanent transfer or temporary secondment of an employee from a source business group to a destination business group. The HR Professional in the destination business group creates the deployment proposal using the Global Deployments function.

Derived Factor

A factor (such as age, percent of fulltime employment, length of service, compensation level, or the number of hours worked per period) that is used in calculations to determine Participation Eligibility or Activity Rates for one or more benefits.

Descriptive Flexfield

A field that your organization can configure to capture additional information required by your business but not otherwise tracked by Oracle Applications.

See also: *Key Flexfield* , page Glossary-22

Developer Descriptive Flexfield

A flexfield defined by your localization team to meet the specific legislative and reporting needs of your country.

See also: *Extra Information Types*, page Glossary-18

Direct Deposit

The electronic transfer of an employee's net pay directly into the account(s) designated by the employee.

Discoverer Workbook

A grouping of worksheets. Each worksheet is one report.

Discoverer Worksheet

A single report within a workbook. A report displays the values of predefined criteria for analysis.

Distribution

Monetary payments made from, or hours off from work as allowed by, a compensation or benefits plan.

Download

The process of transferring data from the Oracle HRMS application to your desktop (the original data remains in the application database).

Effective Date

The date for which you are entering and viewing information. You set your effective date in the Alter Effective Date window.

See also: *DateTrack*, page Glossary-14

EIT

See: *Extra Information Type*, page Glossary-18

Electability

The process which determines whether a potential benefits participant, who has satisfied the eligibility rules governing a program, plan, or option in a plan, is able to elect benefits. Participants who are *eligible* for benefits do not always have *electable* benefit choices based on the rules established in a benefit plan design.

Element Classifications

These control the order in which elements are processed and the balances they feed. Primary element classifications and some secondary classifications are predefined by Oracle Payroll. Other secondary classifications can be created by users.

Element Entry

The record controlling an employee's receipt of an element, including the period of time for which the employee receives the element and its value.

See also: *Recurring Elements*, page Glossary-34, *Nonrecurring Elements*, page Glossary-26

Element Link

The association of an element to one or more components of an employee assignment. The link establishes employee eligibility for that element. Employees whose assignment components match the components of the link are eligible for the element.

See also: *Standard Link*, page Glossary-38

Elements

Components in the calculation of employee pay. Each element represents a compensation or benefit type, such as salary, wages, stock purchase plans, and pension contributions.

Element Set

A group of elements that you define to process in a payroll run, or to control access to

compensation information from a configured form, or for distributing costs.

Eligibility

The process by which a potential benefits participant satisfies the rules governing whether a person can ever enroll in a program, plan, or option in a plan. A participant who is *eligible* for benefits must also satisfy *electability* requirements.

Employee

A worker who has a direct employment relationship with the employer. Employees are typically paid compensation and benefits via the employer's payroll application.

Employees have a system person type of Employee and one or more assignments with an assignment type of Employee.

Employee Histories

An SSHR function for an employee to view their Learning History, Job Application History, Employment History, Absence History, or Salary History. A manager can also use this function to view information on their direct reports.

Employment Category

A component of the employee assignment. Four categories are defined: Full Time - Regular, Full Time - Temporary, Part Time - Regular, and Part Time - Temporary.

Employment Equity Occupational Groups (EEOG)

In Canada, the Employment Equity Occupational Groups (EEOG) consist of 14 classifications of work used in the Employment Equity Report. The EEOGs were derived from the National Occupational Classification system.

Employment Insurance (EI)

Benefit plan run by the federal government to which the majority of Canadian employers and employees must contribute.

End Placement Date

DBI for HRMS uses this term to specifically refer to the contingent worker's most recent placement end date prior to the effective date.

Employment Insurance Rate

In Canada, this is the rate at which the employer contributes to the EI fund. The rate is expressed as a percentage of the employee's contribution. If the employer maintains an approved wage loss replacement program, they can reduce their share of EI premiums by obtaining a reduced contribution rate. Employers would remit payroll deductions under a different employer account number for employees covered by the plan.

Enrollment Action Type

Any action required to complete enrollment or de-enrollment in a benefit.

Entitlement

In Australia, this is all unused leave from the previous year that remains to the credit of the employee.

ESS

Employee Self Service. A predefined SSHR responsibility.

Event

An activity such as a training day, review, or meeting, for employees or applicants. Known as *class* in OLM.

Ex-Applicant

Someone who has previously applied for a vacancy or multiple vacancies, but all applications have ended, either because the applicant has withdrawn interest or they have been rejected. Ex-Applicants can still be registered users.

Expected Week of Childbirth (EWC)

In the UK, this is the week in which an employee's baby is due. The Sunday of the expected week of childbirth is used in the calculations for Statutory Maternity Pay (SMP).

Extra Information Type (EIT)

A type of developer descriptive flexfield that enables you to create an unlimited number of information types for six key areas in Oracle HRMS. Localization teams may also predefine some EITs to meet the specific legislative requirements of your country.

See also: *Developer Descriptive Flexfield*, page Glossary-15

Field

A view or entry area in a window where you enter, view, update, or delete information.

See also: *Block*, page Glossary-7, *Region*, page Glossary-34

Flex Credit

A unit of "purchasing power" in a flexible benefits program. An employee uses flex credits, typically expressed in monetary terms, to "purchase" benefits plans and/or levels of coverage within these plans.

Flexible Benefits Program

A benefits program that offers employees choices among benefits plans and/or levels of

coverage. Typically, employees are given a certain amount of flex credits or moneys with which to "purchase" these benefits plans and/or coverage levels.

Flexible Spending Account

(FSA) Under US Internal Revenue Code Section 125, employees can set aside money on a pretax basis to pay for eligible unreimbursed health and dependent care expenses. Annual monetary limits and use-it-or-lose it provisions exist. Accounts are subject to annual maximums and forfeiture rules.

Form

A predefined grouping of functions, called from a menu and displayed, if necessary, on several windows. Forms have blocks, regions and fields as their components.

See also: *Block*, page Glossary-7, *Region*, page Glossary-34, *Field*, page Glossary-18

Format Mask

A definition of a person-name format. The format mask comprises standard name components, such as title, first name, and last name, in an order appropriate to its purpose and legislation.

Format Type

A format-mask classification that identifies the mask's purpose. Oracle HRMS defines the Full Name, Display Name, List Name, and Order Name format types. You can also define your own format types for use in custom code.

Full Time Equivalent (FTE)

A Workforce Measurement Type (WMT) that measures full time equivalent. Although the actual value and calculation may vary, this value is taken from the Assignment Budget Value (ABV) in Oracle HRMS. If the Assignment Budget Value in Oracle HRMS is not set up then a FastFormula is used to determine the value to be calculated.

Global Value

A value you define for any formula to use. Global values can be dates, numbers or text.

Goods or Service Type

A list of goods or services a benefit plan sponsor has approved for reimbursement.

Grade

A component of an employee's assignment that defines their level and can be used to control the value of their salary and other compensation elements.

Grade Comparatio

A comparison of the amount of compensation an employee receives with the mid-point

of the valid values defined for his or her grade.

Grade Ladder

The key component of Grade/Step Progression. You use a grade ladder to categorize grades, to determine the rules for how an employee progresses from one grade (or step) to the next, and to record the salary rates associated with each grade or step on the ladder.

Grade Rate

A value or range of values defined as valid for a given grade. Used for validating employee compensation entries.

Grade Scale

A sequence of steps valid for a grade, where each step corresponds to one point on a pay scale. You can place each employee on a point of their grade scale and automatically increment all placements each year, or as required.

See also: *Pay Scale*, page Glossary-28

Grade Step

An increment on a grade scale. Each grade step corresponds to one point on a pay scale.

See also: *Grade Scale*, page Glossary-20

Grandfathered

A term used in Benefits Administration. A person's benefits are said to be grandfathered when a plan changes but they retain the benefits accrued.

Group

A component that you define, using the People Group key flexfield, to assign employees to special groups such as pension plans or unions. You can use groups to determine employees' eligibility for certain elements, and to regulate access to payrolls.

Group Certificate

In Australia, this is a statement from a legal employer showing employment income of an employee for the financial year..

Headcount(HEAD)

A Workforce Measurement Type (WMT) that measures headcount. Although the actual value and calculation may vary, this value is taken from the Assignment Budget Value (ABV) in Oracle HRMS. If the Assignment Budget Value in Oracle HRMS is not set up then a FastFormula is used to determine the value to be calculated.

HR Staff

In DBI for HRMS the HR Staff are people who work in the Human Resources role. Chief HR Officers can track the ratio of HR professionals to the number of workers in their enterprise.

DBI for HRMS uses the HRI_MAP_JOB_JOB_ROLE formula to categorize workers into HR staff and non-HR staff.

Headcount Activity

DBI for HRMS uses this term to mean all the gains and losses occurring in a manager's hierarchy during a reporting period.

Hierarchy

An organization or position structure showing reporting lines or other relationships. You can use hierarchies for reporting and for controlling access to Oracle HRMS information.

High Availability

iRecruitment functionality that enables enterprises to switch between two instances to continuously support the candidate job site.

Hire Date

In DBI for HRMS Hire Date is the employee's most recent hire date.

Imputed Income

Certain forms of indirect compensation that US Internal Revenue Service Section 79 defines as fringe benefits and taxes the recipient accordingly. Examples include employer payment of group term life insurance premiums over a certain monetary amount, personal use of a company car, and other non-cash awards.

Incumbent

See also: *Active Employee*, page Glossary-2

Info Online

A generic framework to integrate Oracle applications with partner applications, enabling users to access information from third-party providers, Metalink and Learning Management.

Initiator

In SSHR a person who starts a 360 Degree appraisal (Employee or Self) on an individual. An initiator and the appraisee are the only people who can see all appraisal information.

Input Values

Values you define to hold information about elements. In Oracle Payroll, input values are processed by formulas to calculate the element's run result. You can define up to fifteen input values for an element.

Instructions

An SSHR user assistance component displayed on a web page to describe page functionality.

Integrating Application

In AME, an application that uses Oracle Approvals Management Engine to manage the approval processes of its transactions.

See: Oracle Approvals Management Engine (AME), page Glossary-3

Integrator

Defines all the information that you need to download or upload from a particular window or database view using Web ADI.

Interface

A Web ADI term for the item that specifies the columns to be transferred from the Oracle applications database to your desktop or vice versa.

Involuntary

Used in turnover to describe employees who have ceased employment with the enterprise not of their own accord, for example, through redundancy.

Job

A job is a generic role within a business group, which is independent of any single organization. For example, the jobs "Manager" and "Consultant" can occur in many organizations.

Job Posting

An advertisement for a specific vacancy. This is the public side of the vacancy for which a candidate would apply.

Key Flexfield

A flexible data field made up of segments. Each segment has a name you define and a set of valid values you specify. Used as the key to uniquely identify an entity, such as jobs, positions, grades, cost codes, and employee groups.

See also: *Descriptive Flexfield*, page Glossary-15

Key Performance Indicator (KPI)

Target values that you set for the performance of your enterprise. This value comes from the corresponding KPI Portlet/Report. You can configure the Performance Management Framework to send a notification when actual performance falls short of, or exceeds, the target value. For example, you may configure the Performance Management Framework to send you a notification when workforce variance is greater than 10 percent, or when training success is below 50 percent.

Key Performance Indicator (KPI) Portlet/Report

Displays the executive summary of key measures such as total headcount and total salary.

Layout

Indicates the columns to be displayed in a spreadsheet or Word document created using Web ADI.

Learning Management

Oracle's enterprise learning management system that administers online and offline educational content.

Leave Loading

In Australia, an additional percentage amount of the annual leave paid that is paid to the employee.

Leaver's Statement

In the UK, this Records details of Statutory Sick Pay (SSP) paid during a previous employment (issued as form SSP1L) which is used to calculate a new employee's entitlement to SSP. If a new employee falls sick, and the last date that SSP was paid for under the previous employment is less than eight calendar weeks before the first day of the PIW for the current sickness, the maximum liability for SSP is reduced by the number of weeks of SSP shown on the statement.

Legal Employer

A business in Australia that employs people and has registered with the Australian Tax Office as a Group Employer.

Legal Entity

A legal entity represents the designated legal employer for all employment-related activities. The legal authorities in a country recognize this organization as a separate employer.

Life Event

A significant change in a person's life that results in a change in eligibility or ineligibility for a benefit.

Life Event Collision

A situation in which the impacts from multiple life events on participation eligibility, enrollability, level of coverage or activity rates conflict with each other.

Life Event Enrollment

A benefits plan enrollment that is prompted by a life event occurring at any time during the plan year.

Linked PIWs

In the UK, these are linked periods of incapacity for work that are treated as one to calculate an employee's entitlement to Statutory Sick Pay (SSP). A period of incapacity for work (PIW) links to an earlier PIW if it is separated by less than the linking interval. A linked PIW can be up to three years long.

Linking Interval

In the UK, this is the number of days that separate two periods of incapacity for work. If a period of incapacity for work (PIW) is separated from a previous PIW by less than the linking interval, they are treated as one PIW according to the legislation for entitlement to Statutory Sick Pay (SSP). An employee can only receive SSP for the maximum number of weeks defined in the legislation for one PIW.

LMSS

Line Manager Self Service. A predefined SSHR responsibility.

Long Service Leave

Leave with pay granted to employees of a particular employer after a prescribed period of service or employment with that employer.

Lookup Types

Categories of information, such as nationality, address type and tax type, that have a limited list of valid values. You can define your own Lookup Types, and you can add values to some predefined Lookup Types.

Lower Earnings Limit (LEL)

In the UK, this is the minimum average weekly amount an employee must earn to pay National Insurance contributions. Employees who do not earn enough to pay National Insurance cannot receive Statutory Sick Pay (SSP) or Statutory Maternity Pay (SMP).

Manager

(iRecruitment) A manager accesses the iRecruitment system to document their hiring needs and conduct their recruiting activities online. Specifically, these activities include vacancy definition, searching for candidates, and processing applicants through the vacancy process.

DBI for HRMS counts a person as a manager if they supervise assignments (directly or through subordinates) for which the total headcount value is greater than zero at the effective date.

Manager-Employee Appraisal

Part of the SSHR Appraisal function. A manager appraisal of an employee. However, an appraising manager does not have to be a manager.

Mapping

If you are bringing in data from a text file to Oracle HRMS using a spreadsheet created in Web ADI, you need to map the columns in the text file to the application's tables and columns.

Maternity Pay Period

In the UK, this is the period for which Statutory Maternity Pay (SMP) is paid. It may start at any time from the start of the 11th week before the expected week of confinement and can continue for up to 18 weeks. The start date is usually agreed with the employee, but can start at any time up to the birth. An employee is not eligible to SMP for any week in which she works or for any other reason for ineligibility, defined by the legislation for SMP.

Medicare Levy

An amount payable by most taxpayers in Australia to cover some of the cost of the public health system.

Menus

You set up your own navigation menus, to suit the needs of different users.

My Account

(iRecruitment) My Account is the total of either a candidate or applicant's personal and vacancy-specific information including the information needed to manage their progress through the recruitment process.

NACHA

National Automated Clearing House Association. This is the US system for making direct deposit payments to employees.

National Identifier

This is the alphanumeric code that is used to uniquely identify a person within their country. It is often used for taxation purposes. For example, in the US it is the Social Security Number, in Italy it is the Fiscal Code, and in New Zealand it is the IRD Number.

National Occupational Classification (NOC) code

In Canada, the National Occupational Classification (NOC) System was developed to best reflect the type of work performed by employees. Occupations are grouped in terms of particular tasks, duties and responsibilities. The use of this standardized system ensures consistency of data from year to year within the same company as well as between companies. These codes are used in the Employment Equity Report.

Net Accrual Calculation

The rule that defines which element entries add to or subtract from a plan's accrual amount to give net entitlement.

Net Entitlement

The amount of unused paid time off an employee has available in an accrual plan at any given point in time.

Nonrecurring Elements

Elements that process for one payroll period only unless you make a new entry for an employee.

See also: *Recurring Elements*, page Glossary-34

North American Industrial Classification (NAIC) code

The North American Industrial Classification system (NAICs) was developed jointly by the US, Canada and Mexico to provide comparability in statistics regarding business activity across North America. The NAIC replaces the US Standard Industrial Classification (SIC) system, and is used in the Employment Equity Report.

Not in Program Plan

A benefit plan that you define outside of a program.

Objective Assessment Template

The entity that configures the Objectives section of the appraisal.

See also: **Competency Assessment Template**, page Glossary-10

Objectives Library

A collection of reusable objectives. HR Professionals can either create individual objectives in the Objectives Library or import them from an external source.

Off-Boarding

Descriptive term covering all HR processes and procedures involved in removing a worker from your organization, including termination, relocation, and long-term sickness.

OLM

Oracle Learning Management.

On-Boarding

Descriptive term covering all HR processes and procedures involved in hiring and integrating a worker in your organization, including recruitment, hiring, and orientation.

Online Analytical Processing (OLAP)

Analysis of data that reveals business trends and statistics that are not immediately visible in operational data.

Online Transactional Processing (OLTP)

The storage of data from day-to-day business transactions into the database that contains operational data.

Open Enrollment

A type of scheduled enrollment in which participants can enroll in or alter elections in one or more benefits plans.

Oracle FastFormula

Formulas are generic expressions of calculations or comparisons you want to repeat with different input values. With Oracle FastFormula you can write formulas using English words and basic mathematical functions. The output of FastFormulas is fed back into reports.

Organization

A required component of employee assignments. You can define as many organizations as you want within your Business Group. Organizations can be internal, such as departments, or external, such as recruitment agencies. You can structure your organizations into organizational hierarchies for reporting purposes and for system access control.

Organization Manager Hierarchy

An HRMS structure that contains supervisors and subordinates on a reporting chain who also own organizations. HRMS uses this hierarchy to filter the information you display in report modules, such as the Daily Business Intelligence Workforce Budget

Management dashboard, to include only managers who own organizations.

OSSWA

Oracle Self Service Web Applications.

Outcome

For a unit standard competence, a behavior or performance standard associated with one or more assessment criteria. A worker achieves a unit standard competence when they achieve all outcomes for that competence.

Overrides

You can enter overrides for an element's pay or input values for a single payroll period. This is useful, for example, when you want to correct errors in data entry for a nonrecurring element before a payroll run.

Parameter Portlet

A portlet in which you select a number of parameters that may affect all your portlets on your page. These may include an effective date, the reporting period, the comparison type, the reporting manager, and the output currency for your reports. The parameter portlet is usually available at the top of the portal page.

Pattern

A pattern comprises a sequence of time units that are repeated at a specified frequency. The Statutory Absence Payments (UK) feature, uses SSP qualifying patterns to determine employees entitlement to Statutory Sick Pay (SSP).

Pattern Time Units

A sequence of time units specifies a repeating pattern. Each time unit specifies a time period of hours, days or weeks.

Pay Scale

A set of progression points that can be related to one or more rates of pay. Employee's are placed on a particular point on the scale according to their grade and, usually, work experience.

See also: *Grade Scale*, page Glossary-20

Pay Value

An amount you enter for an element that becomes its run item without formula calculations.

See also: *Input Values*, page Glossary-21

Payment Type

There are three standard payment types for paying employees: check, cash and direct deposit. You can define your own payment methods corresponding to these types.

Payroll

A group of employees that Oracle Payroll processes together with the same processing frequency, for example, weekly, monthly or bimonthly. Within a Business Group, you can set up as many payrolls as you need.

Payroll Reversal

A payroll reversal occurs when you reverse a payroll run for a single employee, in effect cancelling the run for this employee.

Payroll Rollback

You can schedule a payroll rollback when you want to reverse an entire payroll run, cancelling out all information processed in that run. To preserve data integrity, you can roll back only one payroll at a time, starting with the one most recently run.

Payroll Run

The process that performs all the payroll calculations. You can set payrolls to run at any interval you want.

People List

An SSHR line manager utility used to locate an employee.

Performance Management Framework (PMF)

A business intelligence tool used to alert users to exceptional circumstances, as defined by KPIs. When a particular factor measured by HRMSi goes beyond a threshold chosen by the user, the system sends the user a workflow notification.

Performance Management Plan

The entity that defines the performance-management process for a specified period. A component of the Workforce Performance Management function.

Performance Management Viewer (PMV)

A reporting tool that displays the report that corresponds to one or more PMF targets.

Period of Incapacity for Work (PIW)

In the UK, this is a period of sickness that lasts four or more days in a row, and is the minimum amount of sickness for which Statutory Sick Pay can be paid. If a PIW is separated by less then the linking interval, a linked PIW is formed and the two PIWs are treated as one.

Period of Placement

The period of time a contingent worker spends working for an enterprise. A contingent worker can have only one period of placement at a time; however, a contingent worker can have multiple assignments during a single period of placement.

Period Type

A time division in a budgetary calendar, such as week, month, or quarter.

Personal Public Service Number (PPS)

The Irish equivalent to National Insurance number in the UK, or the Social Security number in the US.

Personal Tax Credits Return (TD1)

A Revenue Canada form which each employee must complete. Used by the employee to reduce his or her taxable income at source by claiming eligible credits and also provides payroll with such important information as current address, birth date, and SIN. These credits determine the amount to withhold from the employee's wages for federal/provincial taxes.

Person Search

An SSHR function which enables a manager to search for a person. There are two types of search, Simple and Advanced.

Person Type

There are eight system person types in Oracle HRMS. Seven of these are combinations of employees, ex-employees, applicants, and ex-applicants. The eighth category is 'External'. You can create your own user person types based on the eight system types.

Personal Scorecard

A collection of objectives for a single worker arising from a single Performance Management Plan.

Personnel Actions

Personnel actions is a public sector term describing business processes that define and document the status and conditions of employment. Examples include hiring, training, placement, discipline, promotion, transfer, compensation, or termination. Oracle HRMS uses the term *self-service actions* synonymously with this public sector term. Oracle Self Service Human Resources (SSHR) provides a configurable set of tools and web flows for initiating, updating, and approving self-service actions.

Plan Design

The functional area that allows you to set up your benefits programs and plans. This

process involves defining the rules which govern eligibility, available options, pricing, plan years, third party administrators, tax impacts, plan assets, distribution options, required reporting, and communications.

Plan Sponsor

The legal entity or business responsible for funding and administering a benefits plan. Generally synonymous with employer.

Placement Start Date

In DBI for HRMS Placement Date is the contingent worker's most recent start date prior to the effective date.

Position

A specific role within the Business Group derived from an organization and a job. For example, you may have a position of Shipping Clerk associated with the organization Shipping and the job Clerk.

Predefined Components

Some elements and balances, all primary element classifications and some secondary classifications are defined by Oracle Payroll to meet legislative requirements, and are supplied to users with the product. You cannot delete these predefined components.

Process Rule

See Configurable Business Rules, page Glossary-11

Professional Information

An SSHR function which allows an employee to maintain their own professional details or a line manager to maintain their direct reports professional details.

Proficiency

A worker's perceived level of expertise in a competency, in the opinion of an assessor, over a given period. For example, a worker may demonstrate the communication competency at Novice or Expert level.

Progression Point

A pay scale is calibrated in progression points, which form a sequence for the progression of employees up the pay scale.

See also: *Pay Scale*, page Glossary-28

Prospect Pool

(iRecruitment) The prospect pool contains all registered users who have given permission for their information to be published.

Provincial/Territorial Employment Standards Acts

In Canada, these are laws covering minimum wages, hours of work, overtime, child labour, maternity, vacation, public/general holidays, parental and adoption leave, etc., for employees regulated by provincial/territorial legislation.

Provincial Health Number

In Canada, this is the account number of the provincially administered health care plan that the employer would use to make remittances. There would be a unique number for each of the provincially controlled plans i.e. EHT, Quebec HSF, etc.

PTO Accrual Plan

A benefit in which employees enroll to entitle them to accrue and take paid time off (PTO). The purpose of absences allowed under the plan, who can enroll, how much time accrues, when the time must be used, and other rules are defined for the plan.

QPP

(See Canada/Quebec Pension Plan)

QA Organization

Quality Assurance Organization. Providers of training that leads to Qualifications Framework qualifications register with a QA Organization. The QA Organization is responsible for monitoring training standards.

Qualification Type

An identified qualification method of achieving proficiency in a competence, such as an award, educational qualification, a license or a test.

See also: *Competence*, page Glossary-10

Qualifications Framework

A national structure for the registration and definition of formal qualifications. It identifies the unit standard competencies that lead to a particular qualification, the awarding body, and the field of learning to which the qualification belongs, for example.

Qualifying Days

In the UK, these are days on which Statutory Sick Pay (SSP) can be paid, and the only days that count as waiting days. Qualifying days are normally work days, but other days may be agreed.

Qualifying Pattern

See: *SSP Qualifying Pattern*, page Glossary-38

Qualifying Week

In the UK, this is the week during pregnancy that is used as the basis for the qualifying rules for Statutory Maternity Pay (SMP). The date of the qualifying week is fifteen weeks before the expected week of confinement and an employee must have been continuously employed for at least 26 weeks continuing into the qualifying week to be entitled to SMP.

Quebec Business Number

In Canada, this is the employer's account number with the Ministere du Revenu du Quebec, also known as the Quebec Identification number. It consists of 15 digits, the first 9 identify the employer, the next 2 identify the type of tax account involved (payroll vs. corporate tax), and the last 4 identify the particular account for that tax.

Questionnaire

An SSHR function which records the results of an appraisal.

QuickPaint Report

A method of reporting on employee and applicant assignment information. You can select items of information, paint them on a report layout, add explanatory text, and save the report definition to run whenever you want.

See also: *Assignment Set*, page Glossary-6

QuickPay

QuickPay allows you to run payroll processing for one employee in a few minutes' time. It is useful for calculating pay while someone waits, or for testing payroll formulas.

Ranking

(iRecruitment) A manually entered value to indicate the quality of the applicant against other applicants for a specific vacancy.

Rates

A set of values for employee grades or progression points. For example, you can define salary rates and overtime rates.

Rate By Criteria

A function that enables the calculation of pay from different rates for each role a worker performs in a time period.

Rating Scale

Used to describe an enterprise's competencies in a general way. You do not hold the proficiency level at the competence level.

Record of Employment (ROE)

A Human Resources Development Canada form that must be completed by an employer whenever an interruption of earnings occurs for any employee. This form is necessary to claim Employment Insurance benefits.

Recruitment Activity

An event or program to attract applications for employment. Newspaper advertisements, career fairs and recruitment evenings are all examples of recruitment activities. You can group several recruitment activities together within an overall activity.

Recurring Elements

Elements that process regularly at a predefined frequency. Recurring element entries exist from the time you create them until you delete them, or the employee ceases to be eligible for the element. Recurring elements can have standard links.

See also: *Nonrecurring Elements*, page Glossary-26, *Standard Link*, page Glossary-38

Referenced Rule

In HRMS budgeting, any predefined configurable business rule in the Assignment Modification, Position Modification, or Budget Preparation Categories you use as the basis for defining a new rule.

See Configurable Business Rules, page Glossary-11

Region

A collection of logically related fields in a window, set apart from other fields by a rectangular box or a horizontal line across the window.

See also: *Block*, page Glossary-7, *Field*, page Glossary-18

Registered Pension Plan (RPP)

This is a pension plan that has been registered with Revenue Canada. It is a plan where funds are set aside by an employer, an employee, or both to provide a pension to employees when they retire. Employee contributions are generally exempt from tax.

Registered Retirement Savings Plan (RRSP)

This is an individual retirement savings plan that has been registered with Revenue Canada. Usually, contributions to the RRSP, and any income earned within the RRSP, is exempt from tax.

Registered User

(iRecruitment) A person who has registered with the iRecruitment site by entering an e-mail address and password. A registered user does not necessarily have to apply for jobs.

Report Parameters

Inputs you make when submitting a report to control the sorting, formatting, selection, and summarizing of information in the report.

Report Set

A group of reports and concurrent processes that you specify to run together.

Requisition

The statement of a requirement for a vacancy or group of vacancies.

Request Groups

A list of reports and processes that can be submitted by holders of a particular responsibility.

See also: *Responsibility*, page Glossary-35

Residual

The amount of unused paid time off entitlement an employee loses at the end of an accrual term. Typically employees can carry over unused time, up to a maximum, but they lose any residual time that exceeds this limit.

See also: *Carry Over*, page Glossary-9

Responsibility

A level of authority in an application. Each responsibility lets you access a specific set of Oracle Applications forms, menus, reports, and data to fulfill your business role. Several users can share a responsibility, and a single user can have multiple responsibilities.

See also: *Security Profile*, page Glossary-37, *User Profile Options*, page Glossary-42, *Request Groups*, page Glossary-35, *Security Groups*, page Glossary-35

Resume

A document that describes the experience and qualifications of a candidate.

RetroPay

A process that recalculates the amount to pay an employee in the current period to account for retrospective changes that occurred in previous payroll periods.

Retry

Method of correcting a payroll run or other process *before* any post-run processing takes place. The original run results are deleted and the process is run again.

Revenue Canada

Department of the Government of Canada which, amongst other responsibilities,

administers, adjudicates, and receives remittances for all taxation in Canada including income tax, Employment Insurance premiums, Canada Pension Plan contributions, and the Goods and Services Tax (legislation is currently proposed to revise the name to the Canada Customs and Revenue Agency). In the province of Quebec the equivalent is the Ministere du Revenu du Quebec.

Reversal

Method of correcting payroll runs or QuickPay runs *after* post-run processing has taken place. The system replaces positive run result values with negative ones, and negative run result values with positive ones. Both old and new values remain on the database.

Reviewer (SSHR)

A person invited by an appraising manager to add review comments to an appraisal.

RIA

Research Institute of America (RIA), a provider of tax research, practice materials, and compliance tools for professionals, that provides U.S. users with tax information.

Rollback

Method of removing a payroll run or other process *before* any post-run processing takes place. All assignments and run results are deleted.

Rollup

An aggregate of data that includes subsidiary totals.

Run Item

The amount an element contributes to pay or to a balance resulting from its processing during the payroll run. The Run Item is also known as calculated pay.

Salary Basis

The period of time for which an employee's salary is quoted, such as hourly or annually. Defines a group of employees assigned to the same salary basis and receiving the same salary element.

Salary Rate

The rate of pay associated with a grade or step. Used by Grade/Step Progression.

Scheduled Enrollment

A benefits plan enrollment that takes place during a predefined enrollment period, such as an open enrollment. Scheduled enrollments can be administrative, open, or unrestricted.

Search by Date

An SSHR sub-function used to search for a Person by Hire date, Application date, Job posting date or search by a Training event date.

Secondment

The temporary transfer of an employee to a different business group.

Security Group

Security groupsenable HRMS users to partition data by Business Group. Only used for Security Groups Enabled security.

See also: *Responsibility*, page Glossary-35, *Security Profile*, page Glossary-37, *User Profile Options*, page Glossary-42

Security Groups Enabled

Formerly known as Cross Business Group Responsibility security. This security model uses security groups and enables you to link one responsibility to many Business Groups.

Security Profile

Security profiles control access to organizations, positions and employee and applicant records within the Business Group. System administrators use them in defining users' responsibilities.

See also: *Responsibility*, page Glossary-35

Self Appraisal

Part of the SSHR Appraisal function. This is an appraisal undertaken by an employee to rate their own performance and competencies.

Separation Categoary

See also: *termination category*, page Glossary-40

Site Visitor

(iRecruitment) A person who navigates to the iRecruitment web site and may view job postings. This person has not yet registered or logged in to the iRecruitment system. This individual may search for postings on the web site and also has the ability to log in or register with the iRecruitment site.

SMP

See: *Statutory Maternity Pay*, page Glossary-39

Social Insurance Number (SIN)

A unique number provided by Human Resources Development Canada (HRDC) to each person commencing employment in Canada. The number consists of 9 digits in the

following format (###-###-###).

Source Deductions Return (TP 1015.3)

A Ministere du Revenu du Quebec form which each employee must complete. This form is used by the employee to reduce his or her taxable income at source by claiming eligible credits and also provides payroll with such important information as current address, birth date, and SIN. These credits determine the amount of provincial tax to withhold from the employee's wages.

Special Information Types

Categories of personal information, such as skills, that you define in the Personal Analysis key flexfield.

Special Run

The first run of a recurring element in a payroll period is its normal run. Subsequent runs in the same period are called special runs. When you define recurring elements you specify Yes or No for special run processing.

SSHR

Oracle Self-Service Human Resources. An HR management system using an intranet and web browser to deliver functionality to employees and their managers.

SSP

See: *Statutory Sick Pay*, page Glossary-39

SSP Qualifying Pattern

In the UK, an SSP qualifying pattern is a series of qualifying days that may be repeated weekly, monthly or some other frequency. Each week in a pattern must include at least one qualifying day. Qualifying days are the only days for which Statutory Sick Pay (SSP) can be paid, and you define SSP qualifying patterns for all the employees in your organization so that their entitlement to SSP can be calculated.

Standard HRMS Security

The standard security model. Using this security model you must log on as a different user to see a different Business Group.

Standard Link

Recurring elements with standard links have their element entries automatically created for all employees whose assignment components match the link.

See also: *Element Link*, page Glossary-16, *Recurring Elements*, page Glossary-34

Statement of Commissions and Expenses for Source Deduction Purposes (TP 1015.R.13.1)

A Ministere du Revenu du Quebec form which allows an employee who is paid partly or entirely by commissions to pay a constant percentage of income tax based on his or her estimated commissions for the year, less allowable business expenses.

Statement of Earnings (SOE)

A summary of the calculated earnings and deductions for an assignment in a payroll period.

Statement of Remuneration and Expenses (TD1X)

In Canada, the Statement of Remuneration and Expenses allows an employee who is paid partly or entirely by commission to pay a constant percentage of income tax, based on his or her estimated income for the year, less business-related expenses.

Statutory Adoption Pay

In the UK, Statutory Adoption Pay (SAP) is payable to a person of either sex with whom a child is, or is expected to be, placed for adoption under UK law.

Statutory Maternity Pay

In the UK, you pay Statutory Maternity Pay (SMP) to female employees who take time off work to have a baby, providing they meet the statutory requirements set out in the legislation for SMP.

Statutory Sick Pay

In the UK, you pay Statutory Sick Pay (SSP) to employees who are off work for four or more days because they are sick, providing they meet the statutory requirements set out in the legislation for SSP.

Statutory Paternity Pay

In the UK, Statutory Paternity Pay Birth (SPPB) is payable to a person supporting the mother at the time of birth. In cases of adoption, the primary carer receives Statutory Adoption Pay, while the secondary carer receives Statutory Paternity Pay Adoption (SPPA).

Student Employee

A student who is following a work-study program. Student employees have HRMS person records (of system type Employee) so that you can include them in your payroll.

Succession Planning

An SSHR function which enables a manager to prepare a succession plan.

Suitability Matching

An SSHR function which enables a manager to compare and rank a persons competencies.

Superannuation Guarantee

An Australian system whereby employers are required to contribute a percentage of an eligible employee's earnings to a superannuation fund to provide for their retirement.

Supplier

An internal or external organization providing contingent workers for an organization. Typically suppliers are employment or recruitment agencies.

Supporting Objective

An objective aligned with another objective. Supporting objectives contribute to the achievement of the objectives they support.

Tabbed Regions

Parts of a window that appear in a stack so that only one is visible at any time. You click on the tab of the required region to bring it to the top of the stack.

Task Flows

A sequence of windows linked by buttons to take you through the steps required to complete a task, such as hiring a new recruit. System administrators can create task flows to meet the needs of groups of users.

Tax Point

The date from which tax becomes payable.

Template Letter

Form letter or skeleton letter that acts as the basis for creating mail merge letters. The template letter contains the standard text, and also contains field codes, which are replaced by data from the application during the mail merge process.

Terminating Employees

You terminate an employee when he or she leaves your organization. Information about the employee remains on the system but all current assignments are ended.

Termination Category

When employees leave an enterprise, the decision is either made by the employee or by the enterprise. When the decision is made by the employee the termination is Voluntary. When the decision is made by the enterprise, the termination is Involuntary.

DBI for HRMS uses a formula to determine which category each termination belongs to, based on the associated leaving reason.

HRMSi elsewhere refers to Termination Category as Separation Category.

Termination Date

DBI for HRMS uses this term to specifically refer to the employee's most recent termination date prior to the effective date.

Termination Rule

Specifies when entries of an element should close down for an employee who leaves your enterprise. You can define that entries end on the employee's actual termination date or remain open until a final processing date.

Tips

An SSHR user assistance component that provides information about a field.

Total Compensation Statement

A module to communicate compensations, rewards, and benefits to employees and contingent workers.

Transaction Type

In AME, an integrating application may divide its transactions into several categories, where each category requires a distinct set of approval rules. Each set of rules is a transaction type. Different transaction types can use the same attribute name to represent values that the application fetches from different places. This enables several transaction types to share approval rules, thus facilitating a uniform approval policy across multiple transaction types.

Transcentive

A third-party compensation management solutions provider, that provides additional information about benefits choices.

Unit Standard

A nationally registered document that describes a standard of performance. The standard is typically defined and maintained by industry representatives.

Unit Standard Competency

A competency that is defined in a Unit Standard and linked to a Qualifications Framework qualification.

Upload

The process of transferring the data from a spreadsheet on your desktop, created using

Web ADI, back to the Oracle HRMS application.

User Assistance Components

SSHR online help comprising tips and instructions.

User Balances

Users can create, update and delete their own balances, including dimensions and balance feeds.

See also: *Balances*, page Glossary-6

User Profile Options

Features that allow system administrators and users to tailor Oracle HRMS to their exact requirements.

See also: *Responsibility*, page Glossary-35, *Security Profile*, page Glossary-37

User-based Security

With this type of security, the application generates the security permissions for a current user when that user logs on to a system. The system uses the security profile (can be position, supervisor, or organization-based, for example) to generate security permissions for the current user, for example, based on the user's position. An alternative to user-based security is a security profile with defined security rules, for example, to specify that the top-level position for a position-based security profile is Position A, irrespective of the current user's position.

View

An example of an interface that you can use to download data from the Oracle HRMS application to a spreadsheet using Web ADI.

Viewer (SSHR)

A person with view only access to an appraisal. An appraising manager or an employee in a 360 Degree Self appraisal can appoint view only access to an appraisal.

Viewer (Web ADI)

A desktop application, such as a spreadsheet or word processing tool, that you use to view the data downloaded from Oracle HRMS via Web ADI.

Voluntary

Term used in turnover to describe employees who have ceased employment with the enterprise of their own accord, for example, by resigning.

Waiting Days

In the UK, statutory Sick Pay is not payable for the first three qualifying days in period of incapacity for work (PIW), which are called waiting days. They are not necessarily the same as the first three days of sickness, as waiting days can be carried forward from a previous PIW if the linking interval between the two PIWs is less than 56 days.

WCB Account Number

In Canada, this is the account number of the provincially administered Worker's Compensation Board that the employer would use to make remittances. There would be a unique number for each of the provincially controlled boards i.e. Workplace Safety & Insurance Board of Ontario, CSST, etc.

Work Choices

Also known as Work Preferences, Deployment Factors, or Work Factors. These can affect a person's capacity to be deployed within an enterprise, such willingness to travel or relocate. You can hold work choices at both job and position level, or at person level.

Worker

An employee, page Glossary-17 or a contingent worker, page Glossary-11

In DBI for HRMS workers are employees and contingent workers who report to the selected manager.

Worker's Compensation Board

In Canada, this is a provincially governed legislative body which provides benefits to employees upon injury, disability, or death while performing the duties of the employer. Worker's Compensation Board premiums are paid entirely by the employer.

Workflow

An Oracle application which uses charts to manage approval processes and in addition is used in SSHR to configure display values of sections within a web page and instructions.

Workforce Measurement Type (WMT)

Groups of different units combined to measure the workforce. The most common units are headcount and full time equivalent.

Workforce Measurement Value (WMV)

A WMT value, for example, headcount or FTE.

Workforce Performance Management

The Oracle HRMS functions that support enterprise-directed objective setting, management, and assessment.

Work Structures

The fundamental definitions of organizations, jobs, positions, grades, payrolls and other employee groups within your enterprise that provide the framework for defining the work assignments of your employees.

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